

Meeting	North East London Formulary & Pat	hways Group (FPG)	
Document	Draft Terms of Reference		
Authors	<ul> <li>Tase Oputu, Lead Pharmacist Medicines Commissioning &amp; Pathways, Barts Health NHS Trust</li> <li>Dr Belinda Krishek, Director of Medicines Optimisation, NHS NEL</li> </ul>		
Version	v0.7		
Background	The management of entry of new medicines and medicines related pathways across North East London (NEL) was previously governed by the committees listed below;		
	Organisation(s)	Committee	
	Barking, Havering, Redbridge University Trust (BHRUT)	BHR Area Prescribing Committee	
	Barking and Dagenham, Havering & Redbridge Integrated Care Partnership (BHR)		
	North East London NHS Foundation Trust (NELFT)		
	Barking, Havering, Redbridge	BHRUT Medicines Optimisation	
	University Trust (BHRUT)	Group	
	Barts Health NHS Trust	Barts Health Drug & Therapeutics Committee	
	City & Hackney Integrated Care	City & Hackney Place Based	
	Partnership (C&H) Homerton Healthcare NHS	Partnership, Homerton Healthcare Joint Prescribing Group	
	Foundation Trust (HH)		
	East London NHS Foundation Trust (ELFT)	Medicines Committee	
	North East London NHS Foundation Trust (NELFT)	Drug & Therapeutics Group	
	Tower Hamlets, Newham, Waltham Forest Integrated Care Partnership (TNW)	TNW Medicines Optimisation Board	
	Formularies in use across NEL as of 15	<sup>st</sup> July 2022	
	Formulary Barts Health Formulary		
	Barking, Havering,		
	Redbridge University Trust		
	Formulary		
	ELFT Psychiatric Medicines		
	formulary NELFT Psychotropic Drugs		
	Formulary		
	NELFT Dressings formulary		
	Homerton Healthcare		

	The formation of the North East London Integrated Care System (ICS) and component parts from 1 <sup>st</sup> July 2022 means that the existing decision-making primary care medicines management groups that serve across NEL will be disbanded. There is an opportunity to create a single joint forum for the assessment and approval of new medicines and medicines related pathways which will decrease duplication, improve equity of access, improve health outcomes and help decrease health inequalities for patients across NEL. This could also include the business currently being operated at each Trust Drug & Therapeutics Committee (or equivalent).
Purpose	<ul> <li>The FPG is a sub group of the North East London Integrated Medicines Optimisation and Prescribing Committee (IMOC).</li> <li>The areas of responsibility are <ul> <li>To provide a collective clinical leadership group to ensure co-operation and consistency of approach to medicines optimisation across NEL.</li> <li>To enable local clinicians to work together across the ICS to ensure that patients have safe and consistent access to medicines in the context of care pathways which cross multiple providers.</li> <li>To advise on implementation of best practice around medicines, including NICE guidelines and technology appraisals, and advice from Regional Medicines Optimisation Committees (RMOC) to encourage rapid and consistent implementation.</li> </ul> </li> <li>The FPG will be the forum for discussion and decisions on the following: <ul> <li>entry of new medicines</li> <li>new indications for medicines</li> <li>medicines related pathways</li> <li>shared care and transfer of care guidelines</li> </ul> </li> <li>Alongside routine business regarding entry of medicines, the group will develop a work plan with specific objectives which will be reviewed regularly and formally on a 12-month basis.</li> <li>The FPG may, as agreed with IMOC, convene specific (short life) working groups to take forward detailed work on appropriate topics as they arise. The groups should consist of nominated representatives from the relevant organisations and feedback progress against the set deadlines to the FPG.</li> </ul>
Accountability	Reports to the NEL Integrated Medicines Optimisation and Prescribing Committee. Monthly highlight report

Governence		
Governance	NEL Integrated Care Board         Clinical Advisory Group         NEL Integrated Medicines Optimisation and Prescribing Committee         NEL Formulary & Pathways Group         NEL Antimicrobial resistance strategy group         NEL Medicines Quality & Safety Group	
Scope	<ul> <li>The introduction or, review and update or development of <ul> <li>entry of new medicines</li> <li>new indications for medicines</li> <li>medicines related pathways</li> <li>shared care/ transfer of care guidelines</li> <li>medical devices where related to medicines</li> <li>dressings, stoma care, incontinence formularies</li> <li>Hospital Only List medicines</li> <li>cancer drugs with an impact across the health economy</li> <li>NICE guidelines &amp; Technology Appraisals</li> <li>Clinical Trials –where the medicine has possible present or future impact across the health economy</li> </ul> </li> <li>The group will take into account recommendations from other national bodies eg Regional Medicines Optimisation Committees (RMOC), Medicines Healthcare products Regulatory Agency (MHRA), Accelerated Access Collaborative, NHSEI</li> <li>The group will review outputs from the London Formulary and Medicines Group and advise IMOC on adoption of any recommendations.</li> </ul>	
Financial impact consideration	Individual Trusts are expected to approve financial expenditure at the point of decision making via their own internal procedures. For the ICB submissions where the medicines and activity cost impact is likely to be above a threshold of >£25,000 per 100,000 population for NEL health economy (circa £500k) to be discussed at ICB Finance prior to submission to FPG.	
Urgent clinical decisions	Any item considered to be of urgent clinical need will be considered by individual Trusts via their internal processes until such a time it can be presented for full discussion and recommendation. Where a Trust makes a decision to initiate a medicine for a patient or group of patients, outside of the approval process this will be at the clinical and financial risk of the Trust	

Membership	The FPG is a multidisciplinary working group that is supported at a senior strategic level by the NEL IMOC.			
	Resources and leadership required across partner organisations will be reviewed on a regular basis with the NEL IMOC retaining oversight.			
	The group will be supported by Formulary Pharmacists (or equivalent) in member acute and mental health trusts and NHS North East London Pharmacy and Medicines Optimisation team.			
	Nominated representatives are responsible for ensuring two-way reporting, implementation and feedback to the FPG via relevant committees in member organisations.			
	Organisation	Title/Post		
	NHS NEL	Medicines Optimisation     Lead Pharmacist for Clinical     & Governance (job title tbc)		
	Barts Health NHS Trust	<ul> <li>Senior medical lead</li> <li>Formulary &amp; Pathways Lead Pharmacist</li> <li>Lead Medicines Commissioning &amp; Pathways Pharmacist</li> </ul>		
	Barking Havering Redbridge University Trust	<ul> <li>Senior medical lead</li> <li>Formulary &amp; Pathways Lead Pharmacist</li> </ul>		
	Homerton Healthcare NHS Foundation Trust	<ul> <li>Senior medical lead</li> <li>Formulary &amp; Pathways Lead Pharmacist</li> </ul>		
	North East London Foundation Trust	Senior medical lead/ Lead     Pharmacist		
	East London Foundation Trust	Senior medical lead/Lead     Pharmacist		
	NHS NEL Place Based Partnerships/ICB	<ul> <li>3 GP Prescribing Leads</li> <li>1 Lead Pharmacist</li> <li>1 Formulary Pharmacist</li> </ul>		
	Community Pharmacy	1 senior representative		
	Lay representation	2 representatives		
	Non medical prescribing representative	1 representative		
	Senior nurse representative	1 representative		
	To note: Members who are subject matter experts may be co-opted for specific agenda items according to the agenda.			
Chair		ead & GP Prescribing Lead – with nominated sence or conflict of interest for a specific item		

Quorum for decision- making	<ul> <li>Chair/Deputy</li> <li>2 Trust senior medical leads</li> <li>2 Trust Formulary /Lead Pharmacists from separate Trusts -at least 1 from acute provider</li> <li>1 NHS NEL Place Based Partnerships/ICB Lead Pharmacist</li> <li>1 NHS NEL Place Based Partnership/ICB Formulary Pharmacist</li> <li>1 GP Prescribing Lead</li> <li>1 Lay representative</li> </ul>
Running of the meeting	If the meeting is inquorate –Chair's action may be taken Meeting Frequency -Monthly –no meetings in August and December (agenda and attendance permitting)
	Triage/Pre meeting -2 weeks before
	Deadline for papers -6 weeks before meeting
	Publication of outcomes -within 10 working days
Secretariat	Administration resource and co-ordination will be provided via the ICB Pharmacy and Medicines Optimisation team with support from Trust Formulary teams. Clinical and pharmaceutical input will be primarily provided by pharmacy teams in member acute and mental health trusts and ICB Pharmacy and Medicines Optimisation team
Decision	Delegated decision making against agreed criteria from IMOC. Anything outside of this
making	will be ratified by IMOC Decisions will be reached by consensus in the group based on the available evidence and expert advice.
	Appropriate decision-making framework will be employed
Documentation	Adaptation of Barts Health/BHRUT/Homerton formulary application forms to reflect interests of all partner organisations Declaration of interest forms Chair's action form Triage process Decision framework Final RAG definitions for responsibility of prescribing Highlight report to IMOC
Publications	Individual trusts to update their own formulary pages –a NEL wide process will be considered as part of the workplan
Prescribing Support	Updating of ScriptSwitch/Optimise Rx to be continued by the ICB
Monitoring of outcomes	To be specified as part of the approval criteria, and included in reports to IMOC