

Medicines Management Operational Board (MMOB):

TERMS OF REFERENCE – July 2020

DEFINITION OF MEDICINES MANAGEMENT: Medicines management encompasses the entire way that medicines are selected, procured, delivered, prescribed, administered and reviewed to optimise the contribution that medicines make to producing informed and desired outcomes of patient care (Audit Commission).

Medicines Management Operational Board is responsible for ensuring operational plans and policies are in place enabling SBU HB to deliver clinically and cost effective drug treatment and its strategic medicines management aims. It will ensure compliance in relation to use of medicines all Health & Care (H&C) standards with a particular focus on:

- Health & Care standard 2.6: People receive medication for the correct reason, the right medication at the right dose and at the right time.
- H&C standard 3.1: Safe and clinically effective care; Care, treatment and decision making should reflect best practice based on evidence to ensure that people receive the right care and support to meet their individual needs.
- H&C standard 3.3: Quality improvement, research and Innovation; Services engage in activities to continuously improve by developing and implementing innovative ways of delivering care. This includes supporting research and ensuring that it enhances the efficiency and effectiveness of services.

A separate Strategic Medicines Management Board will provide a strategic overview for all aspects of prescribing & medicines management.

Core Function of the Operational Board:

- To operationally assist in the delivery of the strategic aims of the SBU HB.

Jurisdiction:

- Responsible for final policies and formulary decisions in relations to with a financial impact in below £200,000 pa for SBU HB.
- Financial decisions arising through use of medicines recommended by All Wales Medicines Strategy Group and National Institute for Health and Care Excellence that do not meet high cost drug criteria.

Roles and Responsibilities:

- Operationally responsible for all aspects of the prescribing and medicines management. H&C Standard 2.6, 3.3, 5.1
- Responsible for approval of NICE and AWMSG recommendation implementation plans for drugs with an impact below £200,000 pa to the Health Board. Those with significant associated infrastructure cost requirements will be referred to the SB UHB NICE/AWMSG High Cost Drugs Group. H&C Standard 2.1, 3.1, 3.3, 5.1

- Develop and maintain policies, guidance and procedures to support the safe, cost-effective use of medicines. H&C Standard 2.1, 2.6, 3.1, 3.3
- Receive from and ratify recommendations of the following sub-groups: Antimicrobial Advisory Group, Mental Health Prescribing Advisory Group, Primary Care Prescribing Advisory Group, Formulary Group, Medicines Safety Group, Non-medical Prescribing Group, Medicines Policies and PGD Group, Thrombosis and Anticoagulation Committee.

FREQUENCY: Meetings shall be held every 2 months or as necessary to discharge its functions.

INDEMNITY: ABMU HB will be liable for and indemnify members against any liability, loss, cost, expense, claim or proceedings under statute or at common law arising out of the member's performance of his or her functions as a member of the SBU HB MMB.

ACCOUNTABILITY: Medicines Management Strategic Board.

COMMUNICATION: The distribution of minutes shall be as follows: Members of the Group; Unit Medical, Nursing and Service Directors; Pharmacy site managers and Primary Care medicines managers; Chairs of sub-groups; Clinical Directors-responsible for ensuring relevant information is communicated to staff within their areas.

Communication with members shall be via e-mail where possible. Where a response is required there is an expectation of initial reply within 14 days.

The Board will receive 6 monthly reports from each sub-group; provide a six monthly report to Medicines Management Strategic Board.

Agenda items will be requested from all members and Delivery Unit Medical, Nursing and Service Directors, 3 weeks prior to scheduled meetings.

CHAIR & VICE-CHAIR:

Consultant Chair, with Clinical Director for Medicines Management as deputy.

MEMBERSHIP:

- Consultant Chair.
- Consultant representative from each acute hospital site.
- Clinical Director for Integrated pharmacy & Medicines Management (deputy chair)
- Head of Acute Services for Integrated pharmacy.
- Clinical Effectiveness pharmacist.
- 3 GPs (or nominated deputy).
- LMC GP (or nominated deputy).
- Primary Care Medicines Manager (or nominated deputy). X1
- Director of Nursing and Patient Experience (or nominated deputy)
- Non-medical Prescriber representative.
- Junior Doctor Representative from acute care.
- Mental Health and Learning Disabilities representative.
- Other members: Co-opted as required to support agreed work programme.

QUORUM & GOVERNANCE:

Six members including Chair or vice-chair (or nominated deputy); a GP; a consultant, clinical effectiveness pharmacist and a nurse representative.

Decisions will be made through consensus.

SECRETARIAT & AMINISTRATIVE SUPPORT: Professional pharmacy secretariat and administrative support will be provided by Pharmacy & Medicines Management.

FINANCIAL OR PERSONAL INTERESTS: Members should declare, in advance, financial, commercial or personal interests, whether pecuniary or otherwise, in any related matter that is the subject of consideration.

REFERENCE: Health and Care Standards. Welsh Government. April 2015.