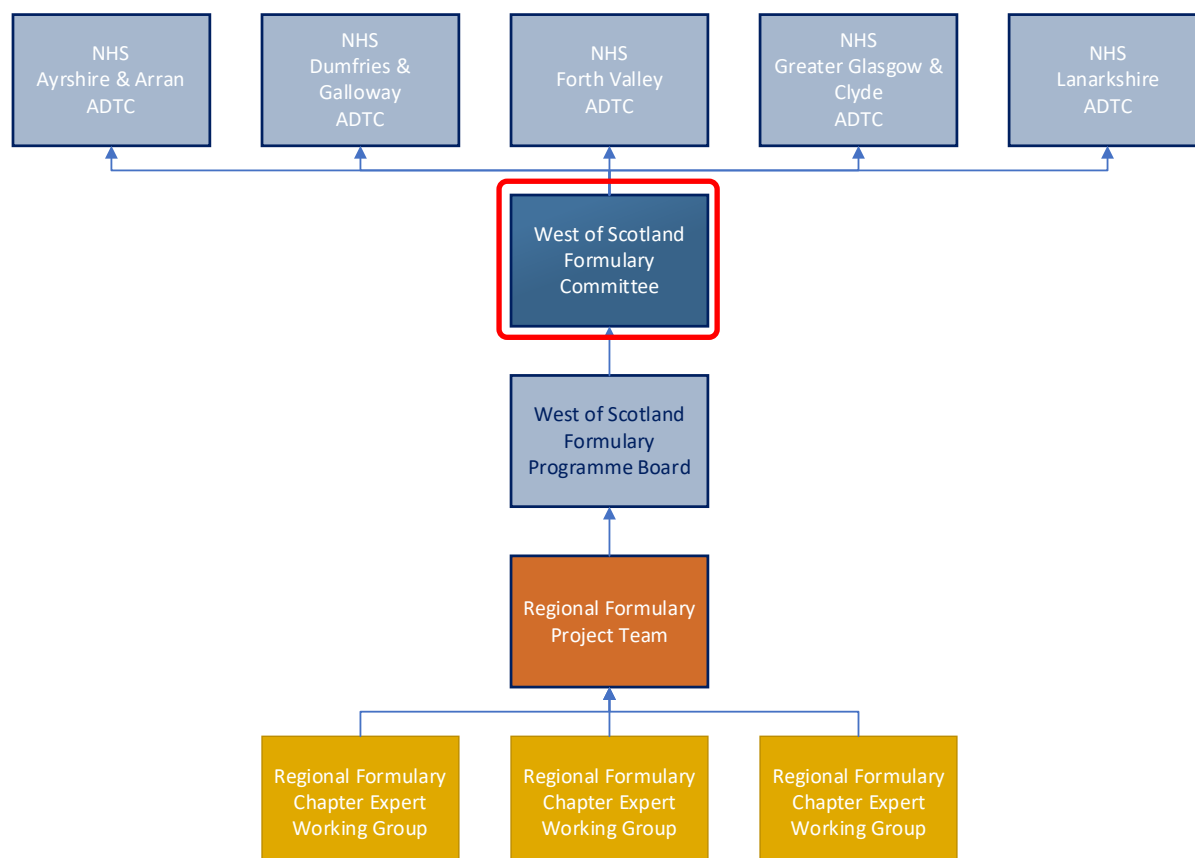


West of Scotland Formulary Formulary Committee – Terms of Reference

1. Governance Chart



Group	Summary of Role
Area Drug and Therapeutics Committees (ADTCs)	Oversees formulary processes and decision making. Provides the connection between the regional formulary and individual Health Board's medicines management governance.
West of Scotland Formulary Committee	Approves new and amended formulary content, ensuring due process has been followed and all Health Boards have been represented.
West of Scotland Formulary Programme Board	Responsible for overseeing the successful development, implementation and ongoing maintenance of the West of Scotland Formulary.
Regional Formulary Project Team	The core central resource that coordinates the development of all deliverables, including each therapeutic chapter of the formulary.
Chapter Expert Working Groups (CEWGs)	Provides the knowledge and subject matter expertise that informs the content within each therapeutic chapter of the formulary. The number of CEWGs required will be driven by the specific requirements of each chapter as it is reviewed.

2. Remit

- Provides leadership, professional and clinical advice, to ensure the successful development and delivery of the West of Scotland Formulary.
- Works for the shared benefit of the West of Scotland Health Boards within powers agreed by the five Area Drug and Therapeutics Committees (ADTCs).
- Maintains effective application processes that positively support Health Board colleagues who wish to propose changes to the formulary.
- Has overall decision-making responsibility to approve changes to formulary content, including the addition or deletion of recommended medicines.
- Makes decisions on the regional formulary status of medicines following receipt of advice from the Scottish Medicines Consortium (SMC).
- Reviews National Cancer Medicines Advisory Group (NCMAG) advice, linking in to established regional and national governance and processes to agree how this will be reflected within the formulary.
- Provides regular updates to the West of Scotland Health Board ADTCs on decisions made. This includes details of any identified financial or service implications related to implementing formulary recommendations.
- Reviews feedback on formulary decisions received from the ADTCs, working constructively to resolve any matters raised.
- Ensures that any new or amended formulary content has been collaboratively developed following due process, with appropriate clinical input and representation from all Health Boards in the region.
- Monitors the work of the Programme Board to ensure the successful delivery of the regional formulary.
- Reviews risks and issues that are escalated from the Programme Board, providing guidance on the preferred resolution approach.
- Makes decisions on any disagreements around medicine choice or other formulary content that cannot be resolved by the Programme Board.
- Ensures there is an ongoing programme of regular reviews and updates to all chapters of the formulary.
- Provides effective systems that allow healthcare professionals to appeal formulary decisions.
- Ensures systems are in place to promote the formulary and disseminate related information and advice to healthcare professionals in the region.

3. Membership

3.1 Structure of Group

Initial membership of this committee will be drawn from all Health Boards in the region and represent the following groups:

- Hospital Physicians
- GPs
- Formulary Pharmacists or equivalent
- Senior Pharmacists – primary care
- Senior Pharmacists – secondary care
- Nursing
- Non-medical prescribers

The committee will have a professional secretary. The Chair of the Programme Board will also be a member of the Formulary Committee.

If there is a single Chair, rather than shared Co-Chairs, a Vice-Chair will be required. The appointment of the Chair and Vice-Chair will come from two separate Health Boards and from different professions.

3.2 Appointment & Term

- Members will be invited to join the Formulary Committee because of their known expertise, enthusiasm and knowledge of the clinical and cost-effective use of medicines.
- The period of membership will be 3 years, which can be extended by agreement between the individual and the Chair and Vice-Chair.

3.3 Representation and Decision Making

- Members of the Formulary Committee must ensure they are representative of their profession/sector and respective Health Board. They should bring forward the views and opinions of that group and be prepared to disseminate information/decisions to colleagues as appropriate. This feedback must be two-way to allow clear and transparent discussions and decision making to take place.
- All members must have appropriate delegated responsibility from their Health Board for decision making.
- Members of the Formulary Committee, within the remit of their job role, must ensure that those involved with local implementation of the formulary are aware of any changes that are made.

3.4 Attendance

- All members can nominate an appropriate deputy if they are unable to attend a meeting. Members who are unable to attend a meeting are encouraged to provide input in advance based on the papers that have been shared pre-meeting.
- A register of attendance will be kept and members who do not attend at least half of the meetings each year may be asked to leave the group.

- All West of Scotland Health Board ADTC members shall have the right to attend Formulary Committee meetings and have access to the papers from each meeting.
- Health Board colleagues who submit applications to amend the formulary will be given the opportunity to attend the meeting where their application is being discussed. This provides the applicants with the opportunity to answer any questions the committee may have on the application.

4. Decision Making

- Decision making will be by consensus, where possible. If this is not possible, the decision will be taken based on a majority vote. The Chair holds a casting vote.
- If one Health Board has a differing view to the majority decision – the Chair/Vice-Chair will take this forward to resolve. There may be occasions where recommendations from tertiary services need to be considered.

5. ADTC Feedback on Formulary Decisions

- ADTCs may provide feedback to the Formulary Committee on any formulary decision they have taken.
- The Chair (or Co-Chairs) of the Formulary Committee will specifically make ADTCs aware of any formulary decisions they feel may be contentious. The Chair (or Co-Chairs) may request a delay to such a decision being reflected in the formulary while it is considered by ADTCs.
- The review of ADTC feedback is a standing agenda item for all Formulary Committee meetings.
- The committee will work to try to resolve matters raised by ADTCs within one committee cycle.
- If the committee are unable to resolve a matter raised by an ADTC, the Formulary Committee Chair will meet with the Chair of that ADTC to discuss the matter.
- If the matter can still not be resolved, then it will be raised with all five West of Scotland ADTCs to seek their input.
- A final decision will be reached based on the position of the majority of the ADTCs and this will be reflected within the formulary.

6. Meetings

6.1 Frequency

The Formulary Committee will meet every two months once established.

6.2 Agenda and Papers

The agenda and papers will be circulated at least 5 working days in advance of the meeting
Standing agenda items are:

- Minutes of previous meeting
- Outstanding actions
- Minutes of the last Programme Board meeting
- Feedback from ADTCs
- Progress updates
- Risk and Issue updates
- Formulary chapter amendments
- Formulary amendment requests
- Review of SMC medicines advice
- Review of NCMAG advice

6.3 Quorum

Representation is required from all five Health Boards in the West of Scotland. There also needs to be a minimum of 50% attendance from the membership, to include primary care and acute medical and pharmacy representatives.

6.4 Administration

Administrative support will initially be provided by the Project Team, until such time as centralised business-as-usual resource arrangements are in place.

6.5 Minutes

- Formal minutes will be kept of each meeting and submitted for approval at the next Formulary Committee meeting.
- Minutes will also be tabled at West of Scotland Health Board ADTC meetings.
- Once approved, the final minutes of each meeting will be published publicly on the Formulary website.

6.6 Declarations of Interest

All members are expected to make an annual declaration of competing interests, direct or indirect, that they have in relation to the work of the Formulary Committee. These will be strictly confidential and held securely by the secretariat. Members are also required to declare any competing interests to the committee when commenting on relevant items of business at the beginning of each meeting.

7. Reporting

The structure and reporting arrangements are detailed in the governance chart. The Formulary Committee is a subcommittee of the West of Scotland Health Board ADTCs and will be guided and advised by their recommendations. The Programme Board is a subcommittee of the Formulary Committee.

8. Updates to Terms of Reference

These Terms of Reference will be reviewed at least once per year, with any changes to be approved by the West of Scotland Health Board ADTCs. It is expected that a full review will be required when the initial development of the regional formulary is complete, to reflect any new business-as-usual arrangements that are introduced.