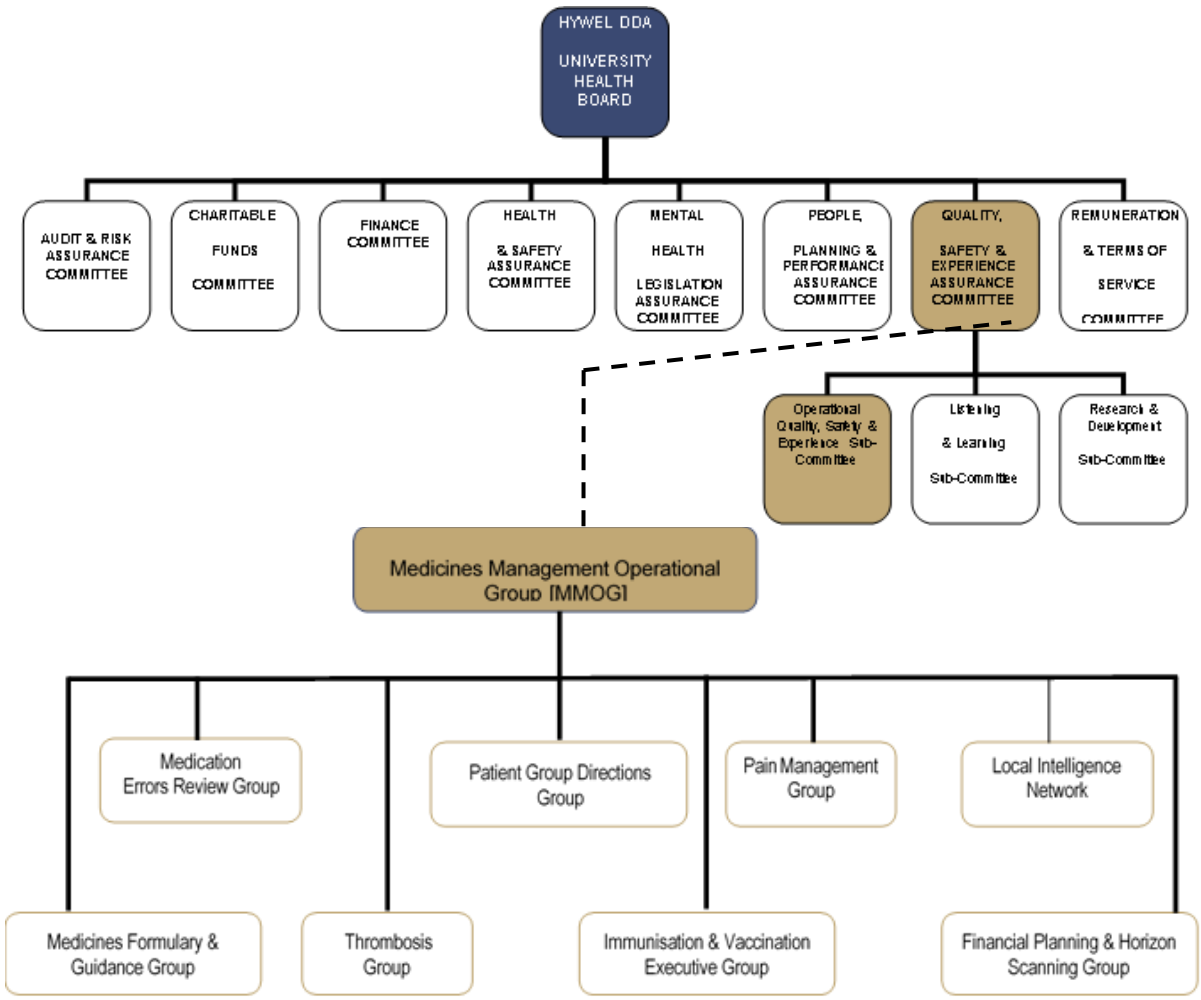
GRŴP GWEITHREDOL RHEOLI MEDDYGINIAETHAU
MEDICINES MANAGEMENT OPERATIONAL GROUP

TERMS OF REFERENCE



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V1.0	Medicines Management Group	14.08.2017	Approved
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V3.0	Medicines Management Sub-Committee	19.09.2018	Approved
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V5.0	Medicines Management Operational Group	26.01.2021	Approved

1. Constitution

1.1 The Medicines Management Operational Group [MMOG] is now reporting twice a year to the Quality, Safety & Experience Assurance Committee from January 2021 following the Health Board Governance Review. Previously, this was a Group of the Effective Clinical Practice Sub-Committee, constituted from 1st June 2015 and then a Sub-Committee of the Quality, Safety & Experience Assurance Committee from April 2018.

2. Membership

2.1 The membership of MMOG shall comprise:

Title
Chair - Consultant
Clinical Director of Pharmacy and Medicines Management - Vice Chair
Assistant Director of Nursing
Assistant Director of Therapies & Health Science
Director of Primary Care
Acute Services Lead for Pharmacy
Senior Pharmacist Manager Primary Care and Community Pharmacy
Head of Financial Planning (Medicines Management)
Acute Care Medical representative (2)
Lead Nurse for Planned and Unscheduled Care
Lead Site Nurse (representation on rotation)
Senior Nurse Medicines Management
Primary Care Medical Representative (2)
Medicines Safety Officer
Antimicrobial Stewardship Representative
Clinical Development Pharmacist
Site Lead Pharmacist (1)
Independent Member
Core Sub-Group Representatives (Patient Group Directions, Local Intelligence Network, Thrombosis , Medicines Formulary & Guidance, Medicines Event Review Group, Acute Pain Management, Vaccinations & Immunisations, Financial Planning & Horizon Scanning)*
*May also be core member

2.2 The membership of MMOG will be reviewed on an annual basis.

3. Quorum and Attendance

3.1 A quorum shall consist of a third of the membership and must include as a minimum the Chair or Vice Chair, a medical representative and a pharmacy representative.

3.2 An Independent Member can attend the meeting in a scrutiny capacity. The scrutiny role of Independent Members in relation to Sub-Committees is to ensure Sub-Committees' effectiveness in terms of processes and outcomes, work is organised and undertaken in accordance with their terms of reference, that they have clarity about the limits of their

delegated powers and responsibilities and that they understand fully their relationship with and reporting responsibilities to their parent Committee

3.3 Any senior officer of the University Health Board or partner organisation may, where appropriate, be invited to attend, for either all or part of a meeting, to assist with discussions on a particular matter.

3.4 The Group may also co-opt additional independent external 'experts' from outside the organisation to provide specialist skills.

3.5 Should any officer member be unavailable to attend, they may nominate a deputy, with full voting rights, to attend in their place subject to the agreement of the Chair.

3.6 The Chair of the Medicines Management Operational Group shall have reasonable access to Executive Directors and other relevant senior staff.

3.7 The Group may ask any or all of those who normally attend but who are not Members to withdraw to facilitate open and frank discussion of particular matters.

4. Purpose

4.1 The purposes of the Medicines Management Operational Group are:

- to provide assurance to the Quality, Safety & Experience Assurance Committee that robust arrangements are in place for the delivery of safe, effective, evidence-based medicines management across the Health Board and
- to develop the strategy for medicines management focused on improving clinical outcomes, patient experience and reducing unwarranted clinical variation.

5. Operational Responsibilities

5.1 The principal duties of the Medicines Management Operational Group are to:

- Monitor variation in prescribing practice through national prescribing indicators and similar benchmarking tools, and to develop plans to address any variations identified.
- Oversee actions related to any Patient Safety Alerts/Patient Safety Notices that relate to Medicines Management.
- Provide assurance to QSEAC that the risks related to Medicines Management are being managed effectively by monitoring the risks, considering proposed mitigations and alerting QSEAC when necessary.
- Oversee the development of policies and guidance and to advise on the safe, rational, effective and prudent use of medicines, and to inform and endorse the Health Board's Strategy on Medicines Management.
- Assure itself that written control documentation, which falls within the remit of the Group, has been adopted, developed or reviewed in line with HDdUHB Policy 190 – Written Control Documentation prior to approving it, and to provide evidence of that assurance to the Clinical Written Control Documentation Group when recommending a procedure or guideline for uploading or a policy for final approval by the Clinical Written Control Documentation Group.

Whilst the MMOG recognises that it is not a commissioning forum, it will offer advice to the University Health Board on all prescribing and commissioning issues. The MMOG will be informed by, but not limited to, the following local and national policies/guidance:

- All Wales Medicines Strategy Group
- NICE Guidance
- Prudent Healthcare

5.2 Contributory Sub-Groups

In order for the Medicines Management Operational Group to undertake its duties effectively it will receive reports from the Chair of the following Sub-Groups and, as appropriate, escalate issues that impact upon clinical patient outcomes, or provide assurance of best practice to the Quality, Safety & Experience Assurance Committee:

- Medicines Formulary & Guidance Review
- Patient Group Directions
- Thrombosis
- Pain Management
- Medicines Event Review
- Local Intelligence Network
- Financial Planning and Horizon Scanning
- Vaccinations & Immunisation

5.2.1 Medicines Formulary & Guidance Review Group

The Medicines Formulary & Guidance Review Group provides recommendations to MMOG on the adoption of guidance on all prescribing and medicines management issues, including those relating to NICE Technology Appraisals and AWMSG recommendations and on the management of the HDdUHB Formulary and applications for new medicines.

5.2.2 Patient Group Directions Group

With the support of the Patient Group Directions Group, the MMOG is to provide Quality, Safety & Experience Assurance Committee with assurance that governance arrangements are operating effectively with regard to the development, approval and audit of Patient Group Directions across the Health Board.

5.2.3 Thrombosis Group

To advise on the implementation of best practice in relation to the prevention and treatment of thrombosis as set out in its Terms of Reference, and to provide assurance through the MMOG to the Quality, Safety & Experience Assurance Committee, and to be responsible for the Health Board's Thrombosis Policy and Prescribing Information.

5.2.4 Pain Management Group

Through the Pain Management Group, MMOG is to advise on the implementation of evidence based practice in relation to Pain Management (mainly acute) as set out in its Terms of Reference, and provide assurance to the Quality, Safety & Experience Assurance Committee that pain is managed in accordance with legislation and best-practice guidance.

5.2.5 Medicines Event Review Group

Through the Medicines Event Review Group, MMOG is to monitor medicines management incidents, identify trends and risk-minimisation strategies, and communicate to the service both risks and preventative measure as set out in its Terms of Reference, and provide assurance to the Quality, Safety & Experience Assurance Committee that a robust risk-minimisation strategy

for medication incidents is in place. Respond to advice from national bodies and other guidance e.g. WG, NICE, MHRA, National Service Frameworks and National Patient Safety Agency (NPSA) that involve medicines.

5.2.6 Financial Planning & Horizon Scanning Group

Through the Financial Planning Group, MMOG is to provide information, monitor and provide analysis on medicines expenditure across the Health Board and future medicines under development which will have an impact on the Health Board in the future as set out in its Terms of Reference, and provide assurance to the Quality, Safety & Experience Assurance Committee, and to review the impact of high cost drugs through horizon planning and in relation to the clinical and financial impact of new medicines on a monthly basis.

5.2.7 Local Intelligence Network

Through the Local Intelligence Network, MMOG is to advise the Health Board (Primary & Secondary Care) and the Accountable Officer on the management, use and monitoring of Controlled Drugs used within the Health Board as set out in its Terms of Reference, and to provide the Quality, Safety & Experience Assurance Committee with appropriate assurances.

5.2.8 Vaccinations & Immunisation

Through the Vaccinations and Immunisation Group, MMOG is to advise the Health Board on the management, use and monitoring of vaccinations and immunisations Drugs used within the Health Board as set out in its Terms of Reference, and to provide the Quality, Safety & Experience Assurance Committee with appropriate assurances

5.3 Monitoring the Sub-Groups

The Medicines Management Operational Group is to monitor risks within the scope of the contributory groups, ensuring that all identified risks are appropriately captured, and that risks above agreed tolerance levels are being regularly reviewed and sufficiently mitigated, agreeing mitigating actions where necessary.

6. Arrangements for Meetings

6.1 The MMOG Secretary is to hold an agenda setting meeting with the Chair and the Head of Medicines Management at least 6 weeks before the meeting date.

6.2 The agenda will be based around the MMOG work plan, identified risks, matters arising from previous meetings, issues emerging throughout the year and requests from Group members. Following approval, the agenda and timetable for papers will be circulated to all MMOG Members.

6.3 All papers should have relevant sign off (i.e. for medicines applications the Service Lead, written control documents from the Chair of the group producing them, etc) before submission to the MMOG Secretary. All papers must be approved by the Chair of MMOG.

6.4 The agenda and papers will be distributed seven days in advance of the meeting.

6.5 The minutes and action log will be circulated to Members within ten days to check the accuracy.

6.6 Members must forward amendments to the MMOG Secretary within the next seven days. The MMOG Secretary will then forward the final version to the MMOG Chair for approval.

7. Frequency of Meetings

7.1 MMOG will meet bi-monthly and shall agree an annual schedule of meetings. Any additional meetings will be arranged as determined by the Chair of MMOG.

7.2 The Chair of MMOG, in discussion with the Secretary shall determine the time and the place of meetings of MMOG and the procedures of such meetings.

8. Accountability, Responsibility and Authority

8.1 MMOG will be accountable to the Quality, Safety & Experience Assurance Committee for its performance in exercising the functions set out in these terms of reference.

8.2 The MMOG shall embed the University Health Board's vision, corporate standards, priorities and requirements, e.g. equality and human rights, through the conduct of its business.

8.3 The requirements for the conduct of business as set out in the University Health Board's Standing Orders are equally applicable to the operation of MMOG

9. Reporting

9.1 The Medicines Management Operational Group, through its Chair and Members, shall work closely with the Board's other committees, including joint and sub-committees and groups to provide advice and assurance to the Quality, Safety & Experience Assurance Committee through the:

9.1.1 Joint planning and co-ordination of Board and Committee business
9.1.2 Sharing of information

9.2 In doing so, MMOG shall contribute to the integration of good governance across the organisation, ensuring that all sources are incorporated into the Board's overall risk and assurance framework.

9.3 MMOG may, subject to the approval of the Quality, Safety & Experience Assurance Committee, establish groups or task and finish groups to carry out on its behalf specific aspects of its business. MMOG will receive written update reports following each meeting which details the business undertaken on its behalf. The following groups have been established:

- Medicines Formulary & Guidance Review
- Patient Group Directions
- Thrombosis
- Pain Management
- Medicines Event Review
- Local Intelligence Network
- Financial Planning and Horizon Scanning
- Vaccinations & Immunisation

9.4 The Group Chair, supported by the Group Secretary, will:

9.4.1 Report formally, regularly and on a timely basis to the Quality, Safety & Experience Assurance Committee on the MMOG's activities. This includes the submission of a written update report (including detailed commentary on the management of the Group's Risk Register and associated mitigation plans) following each meeting, and the presentation of an annual report within 6 weeks of the end of the financial year;

9.4.2 Bring to the Quality, Safety & Experience Assurance Committee's specific attention any significant matter under consideration by the Group.

10. Secretarial Support

10.1 The Group Secretary shall be determined by the Chair of MMOG and the Clinical Director of Pharmacy and Medicines Management

11. Review Date

11.1 These terms of reference and operating arrangements shall be reviewed on at least an annual basis by the Group for approval by the Quality, Safety & Experience Assurance Committee.