Acute Services Prescribing Management Group (PMG:AS)

Terms of Reference

Objectives:

- To provide strategic advice and oversight of the NHS Greater Glasgow & Clyde (GGC) prescribing budget within Acute Sector services by planning, monitoring and reporting in liaison with Board Officers and budget holders. The primary PMG focus is on medicines cost effectiveness, with a secondary focus on affordability.
- To ensure consistent medicines management and governance across all directorates with a specific focus on cross sector and interface medicines utilisation.

Functions:

High expenditure medicines utilisation

- Scrutiny of processes within the clinical speciality in relation to:
    - Extant clinical guidelines to include starting and stopping rules
    - Data collection to monitor prescribing practice and clinical outcomes
    - Engagement with cost efficiency work-streams

  Speciality leads, including sector representation as appropriate, will be asked to attend meetings as part of a rolling programme to report on current/future prescribing of high expenditure medicines

- Review and comment on local and national (Rxinfo/HMUD) prescribing of high expenditure medicines with a view to identify variation and inform further practice

- Advice to the local management team of any recommended actions to improve the cost effective use of these medicines

- Clinical (Medicines) effectiveness: including commissioning and reporting on specific projects, pragmatic evaluation / outcome analysis

Financial overview

- Oversight of financial performance of Acute Division medicines budget including expenditure review, variance analysis, trend analysis, attainment of savings plans, forward planning.

- Approval and oversight of new medicines savings initiatives and progress linking to Acute Prescribing Sustainability & Value group

Medicines planning and horizon scanning

- Approval and oversight of annual horizon scanning programme and budget predictions in conjunction with SMG and Head of Finance

- In year review of horizon scanning estimates and highlighting significant variance

Formulary management and interface

Awareness of significant variations in practice:

- Variations to formulary identified from non-formulary requests/IPTR/ PACS forms
- Interface and shared care issues escalated from the Medicines Cost Effectiveness Group (MCEG)
- Escalation of non-oncology medicines where the ADTC is unable to make a formulary decision due to service or resource implications

Reporting:

Regular submission of minutes to the Acute Strategic Management Group (SMG). When necessary PMG:AS will refer any issues of note regarding medicines cost and affordability to the Acute SMG.

Membership:

Chair (Chief of Medicine or Service CD)	Nominated by Lead Director Acute Medical Services or Deputy AMD Acute
Deputy Director of Pharmacy: Acute Services (Vice-chair)	On behalf of Acute services pharmacy
General Managers/ Clinical Service Managers	Nominated by Acute Directors
3 x Clinical Director or lead clinicians	Nominated by chiefs of medicine
Lead Nurse	Nominated by Head of Nursing
Finance Manager	Nominated by Head of Finance Acute Division
Lead Clinical Pharmacist	Nominated by Lead Pharmacist Patient Services
Lead Pharmacist/ Senior Pharmacist Medicine Planning	Nominated by Lead Pharmacist Medicines Support Service
Representative of Medicines Cost Efficiency Group (MCEG)	Nominated by Deputy Directors of Pharmacy: Acute Services & Primary Care
Representative of PMG Primary Care	Nominated by Deputy Director of Pharmacy: Primary Care
Lead Pharmacist Medicines Effectiveness	Nominated by Lead Pharmacist Medicines Support Service
National Procurement Lead	Nominated by Associate Director Public Services Delivery Scotland
Secretarial support	Pharmacy Services

The Chair will serve a 3 year term of office. This will be renewable for a further 3 years.

Frequency of meetings:

Meetings will take place every quarter.

Quorum:

A quorum of the Committee will be one third of its membership and should always include either the Chair or a Vice Chair.