North East and North Cumbria

North East and North Cumbria Medicines Subcommittee

Medicines Guidelines Group

Terms of Reference July 2023 – Version 2.

1. Aims

The Medicines Guideline Group (MGG) is a subgroup of the North East and North Cumbria Medicines Management Committee (MMC).

The purpose of the group is to undertake the following tasks and make recommendations to the Medicines Optimisation Group (NTAG), for onward approval at the MMC:

- Coordinate and support the development and review of guidelines which have substantial impact on the use of medicines, prescribable devices and prescribable products across the NENC health economy.
- Ensure that guidelines developed contribute to the safe, high quality, fair, equitable, sustainable, cost effective and evidence-based use of resources and that by so doing help to minimise variation in outcomes.
- Advise on whether a new/updated guideline is required.
- Coordinate and support the development and review of shared care guidelines.

The role of the group is to advise, support and coordinate, rather than lead on, the development of guidelines, shared care guidelines or information leaflets.

The MGG may establish time-limited working groups as required.

2. Membership

The core membership of the MGG will include representatives from:

Role	Individual members	Deputy	Organisation
GP Clinical Lead	Rupert Smith		Tees clinical lead for prescribing
GP Clinical Lead	Helen Horton		North Cumbria GP
Strategic Clinical Networks representation	Robin Mitchell		NHS England – X24
Mental health trust representative	Richard Morris	Shane Wilkinson	Tees, Esk and Wear Valleys NHS Foundation Trust
Mental health trust representative	Teresa Barnes		CNTW
Acute trust rep (chair)	Matthew Grove		Northumbria Healthcare foundation Trust
Acute trust rep	Tracy Percival		South Tees Hospitals NHS Foundation Trust
Acute trust rep (vice chair)	Yincent Tse,	Grace Williamson	The Newcastle upon Tyne Hospitals NHS Foundation Trust
Acute trust rep	Fiona McKean		North Cumbria Integrated Care trust
Primary care MO pharmacists	Niamh OConnell,	Alda Hummelinck	NECS
Primary care MO pharmacists	Juliet Fletcher,	Shiv Maini,	NHS North E and North Cumbria ICB
Primary care MO pharmacist (prof sec)	Susan Turner		NECS

PCN representative	To be confirmed		
LMC	Debs White	Moazzam Chaudhary	
Provider Management representation	Kath Kirby		NECS
ICB Contracting representation	Kaye McEntee		NHS North East and North Cumbria ICB

Other members will be invited as appropriate. Examples include, but are not limited to, communications, Local Authority, Public Health.

Membership responsibilities

Members are expected to:

- liaise with colleagues from organisations in the sector they have been elected to represent and ensure appropriate consultation has taken place prior to referring guidance for approval.
- share the responsibility for leading on the development of guidelines
- ensure timely responses from clinicians within their organisations to requests for assistance in developing or reviewing guidelines.
- ensure that approved guidance is disseminated within, and readily available to health care professionals in the organisations they represent and that steps are in place to ensure implementation is supported and mandated.

3. Meetings

The Medicines Guideline group will normally meet at two monthly intervals, but additional meetings will be arranged if necessary.

To be quorate, the chair (or vice chair), the professional secretary (or nominated deputy) and at least 5 other members of the group should be present.
There should be a minimum of 2 acute trust represantives and 2 primary care represenatives as well as a reasonable geographical spread.

4. Reporting and Accountability

The MGG will report to the Medicines Optimisation Group (NTAG).

5. Objectives / Functions

- To coordinate and support the development and review of guidelines which have an impact on the use of medicines and prescribable products & devices across the NENC ICS. This will include:
    - shared care guidelines and associated information (e.g. patient information leaflets)
    - information leaflets on drugs included in the ‘GREEN PLUS’ formulary classification when deemed necessary
- To ensure that guidance developed :
    - does not duplicate credible national guidelines
    - adheres to NICE guidance
    - is based on best available evidence
    - adheres to the NENC Formulary

    - has a clearly defined need e.g. simplifies NICE into a practical document or has significant additional content to facilitate local implementation
    - is only developed once and there is agreement across commissioners, specialists and other affected stakeholders that the guideline is needed
    - acknowledges that local commissioning arrangements may exist and that implementation is not hindered where there is not yet a single agreed pathway for care in place across the ICS
    - is assessed by the group (or chair and professional secretary and/or group members by email consensus) as being necessary and adding value to the system
    - takes into account any potential inequities in the system
- To flag any commissioning implications that arise during the business of the group to the responsible commissioner.

Recommendations from the MGG should be, as far as possible, evidence based and arrived at by general consensus. If a vote is taken this should be on the basis of one member one vote with the chair having a casting vote if necessary.

Guidance will be given a 3 year review date as standard but shorter or longer dates can be given as necessary.

6. Review

The Terms of Reference will be formally reviewed every 12 months, or earlier if the need arises, and reflected in annually updated Terms of Reference.