Greater Manchester Medicines Management Group (GMMMG)

Medicines Safety Workstream group

Terms of Reference

Issue date: January 2023
Version number: Version 2

REVISION DATE	ACTIONED BY	SUMMARY OF CHANGES	VERSION	APPROVAL
May 2022	Karen Williams	First Draft	Draft 1	
Dec 22	RDTC	Revised to reflect current ICB governance arrangements	Draft 2	GMMMG: Dec 2022 CEGC: Jan 2023

1 Vision

'Work collaboratively as a pharmacy system to reduce medication related harm in the NHS, focusing on high risk drugs, situations and vulnerable patients. This ICS programme will contribute to the WHO Challenge target to reduce severe avoidable medication-related harm globally by 50% over five years.

2 Aims and objectives

- To identify safety and medicines optimisation priorities for the GM ICS

- To drive and oversee system approach to delivery of the priorities

Initial priorities identified for 2022/23:

1. Leading the Sodium Valproate safety plan and assurance across GM
2. Oversee sector implementation priorities identified from the national overprescribing review , capitalising on a system approach as necessary

    - NHS Discharge Medicines Service
    - The Quality and Outcomes Framework (QOF) Quality Improvement modules for 2022/23; Prescription Drug Dependency
    - Safe and effective anticoagulation in general practice
    - Increase in the use of social prescribing as a non-pharmacological intervention in primary care

3 Accountability

The Medicines Safety workstream group will be accountable to the GMMMG Medicines Optimisation Committee (MOC).

The workstream group may choose to establish/adopt permanent or temporary sub-committees and short life working groups to manage identified work streams or specific programmes of work. Members of sub-committees and short life working groups need not be members of MOC but the group will be accountable to MOC. Each committee and short life working group will operate under these terms of reference. The sub-committees and short life working groups will report progress to the Medicines Safety workstream group.

4 Delegated Authority

The GM ICB has not delegated any authority to GMMMG or its subgroups (December 2022). All recommendations require ratification by the Clinical Effectiveness and Governance Committee via GMMMG MOC. The group will, however, provide the sector and subject matter expertise to drive improvement across the GM ICS for high quality medicines use.

5 Membership

The Medicines Safety workstream membership is drawn from across the Greater Manchester Health Economy and is structured so as to provide a balanced group representative of the whole economy and its population. Nominees will be sought and

approved by the Chair to ensure maximum health economy representation and as far as possible a cross-sector mix of pharmacists, clinicians and patients representatives. All positions will be reviewed on three year tenure.

Roles and behaviours expected of the membership is available in the accompanying Member Roles and behaviours guide.

Chair and Vice Chair
The Chair will be a registered clinical and care professional appointed through a stakeholder nominations process and has particular responsibility for providing effective leadership and ensuring effective meeting discussion and accurate onward communication.

Membership will nominate a Vice Chair who will be responsible for chairing the committee meetings and providing leadership if the Chair is unavoidably absent or is not able to chair the meeting due to conflict of interest for specific items on the agenda.

Chair: Claire Vaughan – ICB Locality MO Lead/Director of Quality
Vice Chair: Aleksandra Houghton - Senior Medicines Optimisation Adviser- Patient Safety and Governance , Medication Safety Officer

The Medicines Safety workstream group will aim to have a fair distribution of seats and attempt to ensure a GM wide representation including:

- Pharmacy – all sectors
- Primary care clinicians
- Secondary care clinicians as per therapeutic area
- Patient representative
- Medicines Safety Officer
- AMR Regional Pharmacist

Where possible membership of the GMMMG Medicines Board, MO Committee and its subgroups should not overlap significantly in order to ensure effective system engagement, a fair decision making and appeals process however it is recognised that this may not always be possible.

In Attendance (no voting rights)
Non-voting members may be invited on a regular or ad hoc basis from the following groups or any other groups as required.

- Subject matter experts, mostly with clinical or academic background, may be invited to meetings or sessions of meetings on an ad-hoc basis as required by subgroup topics. The group will also link with the wider clinical and care professional leadership forums at GM and locality, Health Innovation Manchester and Strategic Clinical Networks as required.

Representatives from the GM Joint Commissioning Team (JCT) will be present to provide

support to the group. They will be non-voting members.

Deputy Arrangements

When not able to attend, members should send a deputy of equivalent standing to participate and vote on their behalf.

Role of the secretariat/support function

The GM JCT will coordinate the agenda, minutes and actions with the chair and ensure that governance processes are adhered to. The Secretariat is responsible for ensuring that the committee does not exceed its terms of reference.

Communications between the committee and stakeholders in relation to outputs will generally be through either the Chair or GM Joint Commissioning Team (JCT), except where it has been agreed that an individual member should act on the committee's behalf.

6 Confidentiality

All members and attendees agree to keep detailed discussions confidential to allow free and full debate to inform unencumbered decision making. Discretion should be used when discussing meetings with non-attendees and papers should not be shared without agreement of the chair or professional secretary, to ensure confidentiality is maintained.

7 Declaration of interests

Members of the committee must declare their relevant personal and non-personal interests in line with NHSE guidance (Managing Conflicts of Interest in the NHS). Members are asked to inform the Secretariat and Chair prior to each meeting of any change in their relevant interests. The minutes of each meeting will record declarations of interest, and whether members took part in the discussion and decision making. An annual register of interests will be published on the GMMMG website. (This is in addition to any registers published by organisations)

The Chair or Vice Chair should not have a personal interest in any agenda item under discussion. If the chair or vice chair have an interest in a matter under discussion, they will absent themselves from discussions and nominate another chair for that agenda item.

8 Quorum arrangements

The quorum is reached when at least two thirds of voting members are present. An appropriate spread of members' interests is also required for the quorum to be valid. It is advisable that, at least one primary care and secondary care member, one registered clinical or care professional from secondary care and one from primary care, and a sufficient presence of members with an appropriate clinical knowledge need to be present.

A meeting that starts with a quorum present shall not be deemed to have a continuing quorum in the event of the departure of voting members, therefore making it less than two thirds quorate. In the event of a challenge, the remaining members may choose to adjourn the meeting or to continue the meeting and ratify the decisions in the next meeting or

virtually e.g. by email. The final judgement on whether the meeting is quorate will reside with the Chair.

9 Voting arrangements

Members should normally aim to arrive at decisions by a consensus. Where consensus cannot be reached, a majority vote - defined as a 75% majority of represented (quorate) members. Abstentions are not considered when determining the majority.

10 Frequency of meetings

In order to maximise attendance, the Medicines Safety workstream group will meet either monthly or bi-monthly, however the Chair has the right to convene extraordinary meetings when considered necessary, to remain flexible to clinical and service requirements, and take chairs action in exceptional circumstances. Any extraordinary meetings will have two weeks' notice. It may also be necessary under certain circumstances to seek member's approval for items via email, this will also be at the chair's discretion. A record will be kept of members' attendance at each meeting via the minutes.

11 Pharmaceutical Industry

The Medicines Safety workstream group will not accept requests from the pharmaceutical industry to attend meetings. Ways in which the group will engage with the Industry are defined within the GMMMG pharmaceutical engagement policy.