



Area Drug and Therapeutics Committee

Constitution

1.0 Introduction

- 1.1 Area Drug and Therapeutics Committees (ADTCs) are key to ensuring that adequate systems and processes relating to medicines governance are in place in local NHS Boards. They are clinically led and clinically driven committees ensuring medicines issues are addressed across the health system.¹

2.0 Purpose and Functions

- 2.1 To provide **professional advice, clinical advice** and **leadership** to Lothian NHS Board, that supports safe, clinically effective, cost effective and patient centred **medicines governance**, in all care settings.

Examples of this include:

- *developing, maintaining and/or promoting policies and systems for safe and secure use of medicines (e.g. unlicensed and off-label medicines, recording and management of medicines)*
- *providing clear direction and delivery in relation to the NHS Lothian Joint Formulary following Scottish Medicines Consortium (SMC) advice, promoting safe and cost effective medicines use*
- *monitoring trends, analysis and dissemination of learning from medication incidents*
- *participating in the Yellow Card Scheme for reporting adverse drug reactions.*

- 2.2 To advise and support the **strategic direction** of all aspects of **medicines governance** and usage in all care settings ensuring inclusion within wider strategic planning carried out by Lothian NHS Board.

Examples of this include:

- *supporting Antimicrobial Stewardship through the work of the Scottish Antimicrobial Prescribing Group (SAPG) via the Antimicrobial Management Teams*
- *supporting the NHS Board in meeting its statutory responsibilities in relation to medicines and prescribing*
- *supporting Lothian NHS Board in the delivery of a comprehensive approach to national policy regarding medicines, linking with Regional and National groups (e.g. SMC) where appropriate*
- *Supporting the eHealth agenda and Scottish Patient Safety Programme and Significant Adverse Events*

2.3 To ensure **multi-stakeholder engagement** and joint working on all medicine related issues within **all care settings**, including social care settings.

Examples of this include:

- *Developing, in conjunction with Communication teams, internal and external communication strategies for the public, patients and health care professionals regarding medicines use in the Lothian NHS Board area*
- *Involving members of the public in the work of the ADTC*
- *Supporting the engagement of clinicians in initiatives to develop, implement and monitor systems to ensure seamless care for patients at the transition points of admission and discharge from hospital e.g. Quality Hub, Quality Improvement Teams*
- *Developing policies to support safe and effective use of medicines with social care partners.*
- *Through multi-stakeholder engagement ensuring that medicines are used safely in all community settings*
- *Working with the pharmaceutical industry in line with “A Common Understanding”.*
- *Contributing to learning and safe practice through liaison with undergraduate and postgraduate tutors in relation to local educational initiatives to improve medicine use*
- *Promoting safe practice through liaison with Research and Development and audit committees to improve medicine use*
- *Publishing all information in an accessible format*

2.4 To inform the **financial planning and governance** of Lothian NHS Board to ensure the effective use of resources, in relation to **medicines**.

Examples of this include:

- *Contributing to effective horizon scanning to ensure Lothian NHS Board has information on new medicines*
- *Advising on resource implications on the introduction of new medicines.*
- *Coordinating the qualitative review of medicines use, and providing clinical information on changing trends in medicines use.*

3.0 Reporting Arrangements

3.1 The ADTC is the key professional advisory group for medicine governance and will report into Lothian NHS Board via the Board's clinical governance structure.

3.2 The Director of Pharmacy is responsible for medicine governance; with a line management responsibility from Director of Pharmacy to Medical Director and Chief Executive Officer to Lothian NHS Board.

3.3 The ADTC will network with ADTC collaborative (ADTCc) and ADTCs in other NHS Boards to share good practice and develop consistent policies where appropriate.

4.0 Membership

- 4.1 The appointment of the Chair* is ratified by Lothian NHS Board.
- 4.2 The membership should predominantly include clinical practitioners with an interest in medicines use within Lothian NHS Board. Membership is open to local flexibility and is commensurate with the size and needs of the Lothian NHS Board, and includes as a core¹:
- Chair* (Consultant, General Practitioner, Lead Pharmacist or nonexecutive director)
 - Professional Secretary
 - Director of Pharmacy
 - Administrative support (from the Board Secretariat, Lothian NHS Board)
 - Hospital Consultants (from a range of clinical specialities)
 - General Practitioners
 - Pharmacists (representing both Hospital and Community)
 - Nurses
- 4.3 The ADTC may wish to engage with other stakeholders as required on specific work streams or to extend membership to include: Dentists, Social Care staff, Executive Medical Director, Executive Nurse Director, Managers, Allied Health Professionals, Finance and Academia/ Research, Clinical Governance Leads. This should include representation from other Health Boards.
- 4.4 Ad-hoc short life working groups may be formed to take forward specific pieces of work that are too large to be undertaken by any of the existing sub-groups.
- 4.5 There should be cross representation with other key related work streams such as Scottish Patient Safety Programme (SPSP).
- 4.6 The ADTC should demonstrate effective patient and public engagement.
- 4.7 The membership of the ADTC is as follows, and is in line with 4.2, above:
- Chairs of the following ADTC subgroups:
 - Formulary Committee
 - Medicines Policies Subcommittee
 - Prescribing subcommittees
 - Medicines Utilisation Review Group
 - Director of Pharmacy
 - Associate Directors of Pharmacy
 - Director of Finance or Associate Director of Finance
 - Member of the Lothian Area Medical Committee (LAMC), nominated by the LAMC
 - GPs (2), nominated by the Lothian Local Medical Committee (LMC)
 - Nursing representative, nominated by Lothian Area Nursing and Midwifery Advisory Committee (LANMAC)

- Community Pharmacist, nominated by the Lothian Area Pharmaceutical Committee (LAPC)
- Representative from Public Health Medicine (nominated by the Director of Public Health)
- Consultant in Pharmaceutical Public Health
- GP, Medicines Management Team
- Lead Pharmacist, Medicines Management Team
- Representative from Area Clinical Forum (ACF)
- Representative from Borders NHS Board ADTC
- Representative from Fife NHS Board ADTC
- NHS / University Clinical Pharmacologist (2)
- Representative from the Health and Social Care Partnerships (General Manager or Clinical Director)
- Patient/Public Representative

5.0 Committee Administration

- 5.1 Administrative support is provided by the Board Secretariat, Lothian NHS Board.
- 5.2 The appointment of the Chair is ratified by Lothian NHS Board. The Chair and Vice Chair are elected by a ballot of the members from amongst the Committee membership. The Chair and Vice Chair, who should be from different professions, can hold office for a period of 3 years. The Chair cannot also chair the Formulary Committee. Where appropriate, the elections will be staggered to ensure continuity. A second, but not third, sequential term of office is possible.
- 5.3 The committee is supported by a Professional Secretary, who is usually a senior pharmacist. The key activities of the professional secretary are to:
- Provide professional support and guidance to the ADTC and its subgroups
 - Work closely with the Chair, Vice Chair and Administrative Secretary
 - Advise on the content of agendas, accompanying papers, minutes and actions
 - Provide advisory support to ensure that ADTC information available on the NHS Lothian Intranet and Internet sites is accurate and up-to-date
- 5.4 A quorum will consist of the Chair or Vice Chair, together with one pharmacist, one hospital-based physician, one general practitioner, and one other member (a minimum of five members). A roll of attendance will be kept and members are expected to attend at least half of the meetings each year. Where appropriate, and with the agreement of the Chair, a deputy can stand in place of an absent member for a specific issue arising at an ADTC meeting. Wherever possible, members should inform the secretariat of their absence in advance of meetings to reduce the likelihood of a meeting being inquorate. A roll of attendance will be kept and will be reviewed on annual basis
- 5.5 Key decisions will be made, where possible, by consensus. Where this is not possible, the decision will be taken on the basis of a majority vote (the Chair holds a casting vote).

- 5.6 All decisions will be made at committee meeting. However, in exceptional circumstances the Chair may take action on behalf of the Committee to avoid delays. This action will be subsequently reported and ratified at the next available ADTC meeting.
- 5.7 The Committee will meet at two-monthly intervals, with the agenda and papers normally circulated two weeks in advance of the meeting. Urgent late papers may be circulated by email in advance of the meeting but tabled papers will be avoided except in extraordinary circumstances.
- 5.8 Declarations of Interest should be provided by members on an annual basis and held for the Chair of the Committee by Lothian NHS Board secretariat. It is the responsibility of members to declare direct or indirect competing interests at the beginning of each meeting, or whenever they arise during discussions.
- 5.9 An advisory work programme will be agreed each year, which is likely to be the major driver for the creation of working groups.
- 5.10 Minutes of the meetings, as well as the Work Programme and other relevant documents arising as a result of the work of the Committee will be circulated to the Healthcare Governance Committee, subgroups of the ADTC, and to Area Medical, Nursing and Pharmacy Committees.

6.0 Sub-committees

- 6.1 The subcommittees of ADTC comprise of Medicines Utilisation Review Group, Prescribing sub-committees, Formulary Committee and Medicines Policies sub-committee. See *Appendix 1* for the established subgroups of the NHS Lothian ADTC, which constitute the Lothian Medicines Governance Committee Structure.
- 6.2 The Antimicrobial Management Committee is the governance committee of the Antimicrobial Team (a nationally recognised subgroup of the ADTC).
- 6.3 Draft minutes from all the subcommittees will form part of ADTC papers at each meeting. Exceptions will be highlighted by relevant committee chair, excluding AMC who report directly to ADTC twice yearly.
- 6.4 ADTC may wish to develop further subgroups to take forward specific areas within the overall remit. Where these are convened they should have delegated authority to act on behalf of the ADTC, reporting and referring upwards as required.
- 6.5 The ADTC is responsible for appointing the membership of the Formulary Committee and making nominations to the Scottish Medicines Consortium.

7.0 Reference

1. **Refresh of Area Drugs and Therapeutics Committees (ADTC) Function and Role of ADTC / Revised Constitution.** Adapted from Appendix 2, NEW MEDICINES REVIEW. THE ROLE AND REMIT OF NHS BOARD, AREA DRUG AND THERAPEUTIC COMMITTEES AND INDIVIDUAL PATIENT TREATMENT REQUEST ARRANGEMENTS. Prof C P Swainson. APRIL 2013. New Medicines Reviews. The Scottish Government. 2013.
www.scotland.gov.uk/Resource/0042/00421354.pdf
2. Area Drug and Therapeutics Committee collaborative; Area Drug and Therapeutics Committee Terms of Reference 2019.

8.0 List of Appendices

Appendix 1 - NHS Lothian Medicines Governance Committee Structure

NHS Lothian Medicines Governance Committee Structure

