# Medicines Management

# Terms of Reference (TOR)

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| 1.2 | Noreen Begum (Clinical practitioner Lead) | 28/06/2022 |
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| 28/04/2025 | Rhys Hancock (Director of Nursing, AHPs and Governance) | 28/04/2026 |

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## Purpose

The Integrated Urgent Care Medicines Management Group work to define the minimum safe and standardised methods by Clinicians and Operational teams working in SevernSide in prescribing, administering, dispensing, ordering, and storage of medicines in accordance with the best practice and legal requirements.

BrisDoc seeks to secure an effective and economical system that ensures medicines are managed and handled in a safe and secure manner. Doing so will support BrisDoc achieve all its core objectives for providing high quality patient, workforce and resource care in accordance with its 4way business model.

## Responsibilities

The Medicines Management Group will hold responsibility and perform seven key functions:

### 1. Leadership

* Provide leadership within a framework of prudent and effective controls which enable risk to be assessed and managed
* Provide clear communication on the relevant outcomes of Medicines Management to senior management and all staff
* Ensure and monitor compliance with business plans, service objectives, policies and procedures

### 2. Culture

* Ensure the culture and values are widely communicated and that the behaviour of the group is entirely consistent with those values

### 3. Strategy

* Contribute to the development of BrisDoc’s strategic aims
* Monitor the usage of medicines, costs and unaccountable medications
* Work together to ensure any changes are communicated to the wider teams
* Ensure that national policies and legislative requirements are effectively addressed and implemented

### 4. Governance

* Ensure that the highest standards of corporate governance (including Clinical, Financial, Workforce, Risk Management, Statutory) and personal integrity are maintained in the conduct of delivery of the Services
* Ensure compliance to the Medicines Management Policy are adhered to
* Ensure that the Service functions effectively, efficiently and economically

### 5. Quality

* Meet and apply the standards and principles of clinical governance set out by the Department of Health, NHS England, the Care Quality Commission (CQC) and other relevant bodies
* Ensure services achieve all the standards required by CQC covering five key themes; Safe; Effective; Caring; Responsive; and Well-led
* Develop and monitor a dashboard to provide visibility of compliance, usage, cost and learning events are reviewed as a group monthly
* To embrace and deliver a continuous improvement approach, e.g., as a result of need, incident or innovation.

### 6. Risk Management

* Identify and record all risks, ensuring they are effectively recorded and managed, ensuring Board oversight

### 7. Communication

* Ensure an effective communication channel exists between the Medicines Management Group, Service Leadership and staff

## Co-owners Council Engagement

The Medicines Management Group will maintain a clear channel of communication with the co-owners’ council, so that both parties are able to share information and consult one another as appropriate. This will ensure that the co-owners’ council remains part of this group’s consciousness when making key decisions.

## Membership

The membership of the Board will be comprised of;

* IUC Workforce Lead
* Clinical Lead Practitioner (Chair)
* Head of Nursing
* Facilities Manager
* IUC Team Manager (as second IUC operational member)
* Patient Safety Coordinator
* Facilities Coordinator
* Facilities Support

In addition, members will be co-opted into the group if particular issues or projects arise that require expertise from individuals other than substantive members. This includes a representative of the co-owners’ council if required or is requested by the council.

## Frequency

The Medicines Management Group will meet on a monthly basis. Additional exceptional meetings can be called by the chair as required.

## Quoracy

A minimum of four members, with at least one Clinician to be present for a decision to be made.

## Reporting and Accountability

The Medicines Management Group is accountable to the Quality Board. The Chair will escalate any concerns or risks to the Quality Board and provide an update on the activity and outputs of the group as required.

## Review

The TOR for the Medicines Management Group will be reviewed annually.

### Version Control

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| --- | --- | --- | --- |
| **Version** | **Date** | **Author** | **Changes Overview** |
| V1.0 | 28/06/2022 | Julie Marshall (IUC Workforce Lead) | Initial TOR |
| V1.1 | 24/01/2024 | Sarah Pearce (BrisDoc Governance Manager) | Reporting board changed from IUCLOB to Quality Board |
| V1.2 | 28/04/2025 | Noreen Begum | Changes made to chair from IUC lead to clinical practitioner lead. |

## Agenda Template

|  |  |  |
| --- | --- | --- |
| **Number** | **Item** | **Presenter** |
| 1 | Introductions & Apologies | Chair |
| 2 | Dashboard Review | Chair |
| 3 | Medication costing against budget | Facilities Manager |
| 4 | Safety alerts | Facilities Manager |
| 5 | Learning event review | Chair |
| 6 | Previous Minutes and Action log | Chair |
| 7 | Items for Discussion | Chair |
| 8 | AOB | Chair |
| 9 | Items for Escalation | Chair |