



North Central London  
Medicines Optimisation Network

## Shared Care Group Terms of Reference

## Document control

Date	Version	Amendments
6 March 18	1	New document
23 April 18	1.1	Added frequency
5 June 18	1.2	Responsibilities of the working group updated to include responding to MHRA alerts/updates
06 March 2019	1.3	CCG responsibility to involve the LMC in the development of documentation added to member responsibilities
22 March 2022	2.0	Updated Terms of Reference (shorter review date due to transition to ICS)
23 August 2023	3.0	Updated Terms of Reference (shorter review date due to ICB changes)

## Document management

Groups/Individuals who have overseen the development of this guidance:	NCL JFC, Senior Clinical Pharmacists
Groups which were consulted and have given approval:	Medicines Optimisation Committee
File name:	Shared Care Group Terms of Reference
Version number:	1.3
Available on:	NCL MON website
Disseminated to:	NCL Medicines Optimisation Committee members NCL Formulary Pharmacists
NCL Medicines Optimisation Board Approval date:	August 2023
Review date:	August 2024

## 1. Purpose

The NCL Shared Care Group is a formal Sub-Group of the North Central London Medicines Optimisation Board (NCL MOB), formerly known as NCL MOC. The Group ensures a robust process for decision-making of formal applications for the development of shared care and factsheet documents for medicines. The Group has responsibility for applying an agreed process for addition or removal from the NCL Red List. The Shared Care Group will also consider the Regional Medicines Optimisation Committee (RMOC) drug-specific shared care protocols for the appropriate method of implementation in NCL. Decisions related to the commissioning of services do not fall within the remit of the Group. The members are drawn from the MOB (including deputies) who represent Acute Trusts, Specialist Trusts, Community Health Trust, Mental Health Trusts, NCL ICB, and a lead PCN pharmacist, with regular attendance from NCL Integrating Pharmacy and Medicines Optimisation (IPMO) Programme Team.

## 2. Strategic Objectives

- Review and oversee the development of Shared Care Guidelines and Factsheets on behalf of NCL MOB in a timely manner following requests from the NCL JFC or Acute Trust DTCs or via completion of a proposal form for Shared Care or Fact Sheet document.
- Maintain the NCL Red List on behalf of NCL MOB in a timely manner following outputs from the NCL JFC or Acute Trust DTCs.

## 3. Chair and Vice-Chair Responsibilities

The Chair and Vice-Chair are responsible for the effective functioning of the Group.

The Chair and Vice-Chair are selected from within the Group's membership, and appointed for a period of two years. The Group will appoint up to two Vice-Chairs from within the membership to act as alternates in the Chair's absence. The roles and responsibilities described in Section 3.1 for a Chair apply to the Vice-Chair for meetings they are responsible for.

### 3.1 Chair responsibilities

The Chair has a number of roles that they must perform to allow the committee to achieve its objectives. These include:

- Work with the secretariat to ensure meeting agenda and papers are disseminated in a timely manner
- Ensure the meetings run to schedule
- Support members to identify constructive solutions to ensure documents can be developed
- Inform NCL MOB (through the minutes) about work completed and significant changes to the workplan
- Provide Chairs Action approval for any urgent Shared Care Guidelines/Factsheets or amendments to the Red List outside of routine meetings [formal approval to be documented at subsequent meeting]

## 4. Member Responsibilities

Each member will have a responsibility to:

- Act as the responsible person for Shared Care Guidelines, Factsheets and Red List requests from their respective organisation. Members will:
  - Act as the designated link between the NCL Shared Care Group and their organisation;
  - Identify appropriate local clinicians/specialist pharmacists to author new or to update documents;

- Act as the point of contact to support local clinicians with new document proposals, creation of new documents, routine document reviews and requests for NCL Red List amendments;
- Regularly update their designated workplan items on progress in the online NCL Shared Care Group workplan, and present the update during Group meetings.
- Identify and update Factsheets and Shared Care Guidelines in response to alerts/updates that require implementation before the next scheduled review of the document.
- Ensure the process (see the [NCL Shared Care and Factsheet Decision Process](#)) agreed in NCL is followed during development of a Shared Care Guidelines, Factsheets or modification of the NCL Red List.
- Proactively ensure additional relevant points are considered during development of Shared Care Guidelines and Factsheets.
- Review comments raised during the consultation process and identify solutions to problems.
- Provide constructive options to allow the authors and secretariat to resolve challenges arising during development of guidelines.
- Approve Shared Care Guidelines and Factsheets on behalf of NCL MOB.
- Approve modifications to the NCL Red-List on behalf of NCL MOB.
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## 5. Secretariat Responsibilities

Secretariat support is provided via the NCL JFC Support Pharmacist(s), who have a responsibility to:

- Collate documents and liaise with the Chair of the NCL Shared Care Group and members to set agendas.
- Arrange meetings to be held every two months
- Ensure the process (see the [NCL Shared Care and Factsheet Decision Process](#)) agreed in NCL is followed during development of a Shared Care Guidelines, Factsheets or modification of the NCL Red List
- Circulate and collate responses to NCL-wide consultation for all documents and specific NCL Red List proposals where further input is required from NCL stakeholders
- Conduct a review for new medicines being considered for the NCL Red List. Secretariat will:
  - Collate and record decisions on Red List status for new formulary decisions reached by NCL JFC;
  - Collate and review all NICE TAs to consider their Red List status (including completion of a Red List review form and consultation where relevant);
  - Feedback recommendations to the NCL Shared Care Group, including presentation of Red List review forms where relevant.
- Highlight documents which are due for review to the designated link 6 months prior to review date.
- Write the draft meeting minutes and share with NCL Shared Care Group members alongside the workplan and action tracker, ideally by two weeks post-meeting.
- Communicate meeting decisions (e.g., newly published documents or Red List updates) to NCL stakeholders, including Formulary Pharmacists.
- Report activities to the NCL MOB via shared minutes.
- To escalate concerns in the production or implementation of shared care to the Regional Medicines Optimisation Committee if required.

## 6. Membership

Members of the NCL Shared Care Group will have decision making authority and capability, sufficient to fulfil their responsibilities outlined in Section 4. Membership consists of:

- Chair

- NCL JFC, Senior Clinical Pharmacist [Secretariat]
- Provider Trust Pharmacist\* (1 representative from each NCL Acute, Specialist, Mental Health, and Community Trust)
- NCL ICB Head of Medicine Management\* (2 representatives from the five NCL boroughs)
- Lead PCN Pharmacist
- Medicines Optimisation GP Lead
- LMC GP Membership
- NCL ICB Contracts and Commissioning Pharmacist

\* Or nominated deputy with decision making authority and capability.

The details of current members of the Group and their representation is outlined in Appendix 1.

## 7. Meeting Frequency

2 hours every two months.

## 8. Quorum

- Chair
- 2 x NCL ICB borough representatives
- 1 x Acute Provider Trust representative
- 1 x Specialist/Mental Health Provider Trust representative
- Secretariat
- 1 x GP representative (title tbc)

## 9. Related documents

The Shared Care Group supports the agreed process for development/amendment of documents has been followed. This process can be found on the NCL Medicines Optimisation Network website.

[Shared Care Guidelines](https://www.ncl-mon.nhs.uk/wp-content/uploads/SC_FS_Decision_Process.pdf) [https://www.ncl-mon.nhs.uk/wp-content/uploads/SC\\_FS\\_Decision\\_Process.pdf](https://www.ncl-mon.nhs.uk/wp-content/uploads/SC_FS_Decision_Process.pdf)

### Appendix 1

Name	Representing	Role & Organisation
Lucy Reeves (Chair)	Mental Health	C&I, Chief Pharmacist
Andrew Barron	Acute Provider Trust	UCLH, Lead Pharmacist Formulary, Medicines Management & Clinical Trials
Iris Samuel	Acute Provider Trust	RFL, Lead Formulary Pharmacist
Muhammed Ismail	Acute Provider Trust	NMUH, Specialist Pharmacist
Sana Ahmed	Acute Provider Trust	WH, Formulary Pharmacist
Ashik Shah	Specialist Provider Trust	RNOH, Chief Pharmacist
Hong Thoong	Specialist Provider Trust	GOSH, Formulary Pharmacist
Dominic Sergian	Specialist Provider Trust	MEH, Senior Pharmacist
Katherine Delargy	Mental Health	BEH, Chief Pharmacist
David Rogalski	Mental Health	C&I, Senior Pharmacist
Jackie Box	Community Trusts	CNWL, Associate Chief Pharmacist
Amalin Dutt	Primary Care	NCL ICB, Head of Medicines Management (Islington)
Maninder Kaur Singh	Primary Care	NCL ICB, Head of Medicines Management (Barnet)

EY Cheung	Primary Care	NCL ICB, Deputy Head of Medicines Management (Camden)
Adenike Fakoya	Commissioning	NCL ICB, Contracts & Commissioning Pharmacist
Dominic Roberts	GP	NCL ICB, Medicines Safety Officer
Sophie Murray	PCN	Federated4Health (Haringey), Lead PCN Pharmacist
Poonam Varu (Secretariat)	NCL JFC/IPMO Programme Team	NCL IPMO Programme Team, Senior Pharmacist