Terms of Reference

Purpose

- To facilitate a consistent and effective approach to the managed entry of cancer medicines.
- To promote and monitor the equitable provision of safe, clinical and cost effective cancer medicines.

Objectives

- To develop and maintain a regional process for the managed entry of new cancer medicines that have been approved or recommended through national guidance.
- To promote consistency in the application of and equitable patient access to current evidence-based best practice and existing cancer medicines.
- To provide advice to Health Boards and Area Drug and Therapeutics Committees (ADTC) on the managed entry of new cancer medicines including the:
  - impact of any proposed changes to prescribing practice as a consequence of new or modified MCN guidelines.
  - impact and application of cancer medicines subject to SMC and other national guidance in the West of Scotland.
  - appropriate use of unlicensed and ‘off label’ cancer medicines
- To promote the optimal use of cancer medicines, including location of treatment, across the West of Scotland.
- To monitor implementation of guidelines and patterns of medicine usage.
- To identify areas appropriate for audit and clinical effectiveness projects.

Membership

Regional Cancer Care Pharmacist
Horizon Scanning Pharmacist
Representative from each NHS Board
Clinical Director, Specialist Oncology Services, NHS GGC
SCRN Lead Clinician for WoS
Regional Cancer Manager
Clinician representatives from site specific teams / disease specific MCNs
Pathology representative
Nurse representative
Management representative
Patient / user representative
Accountability

To the Regional Cancer Advisory Group

Relationships

*West of Scotland:*  
NHS Board Area Drug and Therapeutics Committees  
NHS Board cancer advisory groups  
Disease specific MCNs  
Pharmacy Cancer Network  
SCRN (West of Scotland)  
Cancer Nursing Forum  
Pathology network

*National:*  
SCAN  
NOSCAN  
SMC  
HIS / NICE

Members Responsibilities

Each member will be responsible for ensuring s/he reflects the views of their NHS Board or group at meetings.  
Each member will be responsible for timely communication between their NHS Board or group and this group.  
Members are required to declare personal interests in relation to medicines including involvement in clinical trials.  
Members with interests in a specific medicine or its manufacturer are required to publicly state this and may need to exclude themselves from the decision making process for that product.

Meetings and Reporting Arrangements

Meetings should take place at least quarterly with a system for e-mail communication where responses and decisions are needed within a shorter timescale.  
Additional meetings may be convened to consider urgent issues  
Records will be kept of action points, decisions and advice of the group.  
A minimum of 30% attendance is required for the group to be quorate.  
The group may form short life working groups to address specific issues.  
The group should report to the RCAG through the Chair of the sub-group.  
Submissions to the group will be removed from the agenda if the proposer or their representative is not in attendance at the relevant meeting.

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<th>Regional Cancer Advisory Group</th>
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