

Decision Support Summary

Cheshire and Merseyside Area Prescribing Group

Name and type of submission: Click or tap here to add the name and type of submission.

Date assessment tool complete: Click or tap here to the date this tool was completed.

Completed by: Click or tap here to enter your name.

Subgroup consensus

Formal application submitted and approved	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Formulary status (RAG) agreed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Implementation requirements agreed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Implementation monitoring agreed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Expected outcomes and benefits identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Impact summary

Implementation has been considered	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Financial impact has been assessed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Impact on other parts of the system is understood	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Impact on existing workload, existing pathways, or expertise considered	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Workforce capacity has been considered	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable

APG approval date: 04 Aug 2023

Review date: Aug 2027 (or earlier if there significant new information relating to this summary)

Area Prescribing Group administration provided by [Midlands and Lancashire Commissioning Support Unit](#)

Decision support summary

Version: 3.0

Governance requirements or prescribing restrictions identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
ICB ability to meet its statutory requirements is accounted for	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Appropriateness

Strategic fit with ICB and local priorities is confirmed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Safety concerns been addressed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Patient factors have been identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Place in therapy identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Wider stakeholder view is the same as the subgroup	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Delivery of a net zero NHS is supported	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments: (include place in therapy)			

Effectiveness

Evidence for clinical effectiveness is robust	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Evidence for cost-effectiveness robust	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
The submission supported with NICE or some other national or local commissioning policy	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Ethics

Improved health, wellbeing, independence, and outcomes have been identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Health inequalities are unaffected or have been addressed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Protected groups are unaffected or have been supported	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable

Access for the whole of Cheshire and Merseyside is equitable	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Affordability

Financial savings have been identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Additional costs have been considered	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
A requirement for funding has been identified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Area Prescribing Group decision

This submission is supported for ICB approval	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
The proposed RAG designation is supported	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Comments:			

Signatories

→

Name of APG chair

→

Date and signature