**AREA PRESCRIBING COMMITTEE – [NAME OF APC]**

**Decision Making Support Tool**

The following document supports the committee to consider formulary applications against defined criteria.

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| Formulary application reference: | | APC**[use APC acronym]**/ | |
| Drug name and formulations: | |  | |
| **Criteria** | ***Example*** | | **Committee Consensus** |
| Patient Safety | *Potential for abuse, toxicity, significant drug interactions* | |  |
| Clinical effectiveness | *Established licensed product* | |  |
| Strength of evidence |  | |  |
| Patient factors | *Published patient factors* | |  |
| Cost effectiveness or resource impact | *£* | |  |
| Place of therapy relative to available treatments | *1/2nd tier* | |  |
| National guidance and priorities | *NICE, MTRAC* | |  |
| Local health priorities | *CCG views* | |  |
| Equity of access | *Equality assessment* | |  |
| Stakeholder views | *Define wider groups to be engaged* | |  |
| Implementation requirements | *Requires,* ***[Type of shared care document]*** | |  |
| Prescribing data | *Requires 12 months primary or secondary care data* | |  |

**Decision Summary**

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| --- | --- |
| Resubmission is recommended to complete the information to enable a decision: |  |
| Not approved and rationale: |  |
| Formulary status (RAG) and rationale |  |
| Implementation requirements: |  |
| Implementation monitoring e.g. prescribing data: |  |