

Western Australian Drug Evaluation Panel

Terms of Reference

1. Name

The group shall be known as the Western Australian Drug Evaluation Panel, henceforth known as WADEP.

Note: WADEP plans to be renamed as the Western Australian Medicines Evaluation Panel (WAMEP) to align with terminology used in the National Medicines Policy.

2. Purpose

WADEP, with guidance and oversight from the Western Australian Therapeutics Advisory Group (WATAG), develops and maintains the Western Australian Statewide Medicines Formulary (SMF). WADEP considers the clinical efficacy, effectiveness, safety and cost-effectiveness of medications proposed for use in WA public hospitals and health services.

WADEP will support the purpose of the SMF:

“To deliver optimal patient outcomes, ensuring patients are prescribed safe, cost-effective and efficacious medicines in an equitable manner through a single list of approved medicines for initiation in the WA health system; evaluated, implemented and managed using a state-wide approach.”

3. Scope

WADEP will consider all medications which may be listed on the SMF. The scope of the SMF is detailed in the [Statewide Medicines Formulary Governance and Procedures](#) document.

Medicines outside the scope of the SMF fall within the remit of individual hospital and health service medicines governance bodies such as the Drugs and Therapeutics Committee (DTC) or equivalent.

4. Responsibilities

WADEP will:

- Develop and maintain the SMF for use within WA public hospitals and health service providers. This includes but is not limited to:
 - Evaluating SMF submissions;
 - Maintaining processes for new listings and review of current listings on the SMF;
 - Developing the Formulary One platform to optimise usability.
- Refer formulary submissions for medicines that are specialised in nature, have therapeutic or safety concerns, or require specialised input to expert advisors and/or WATAG Expert

Advisory Groups (EAGs) for advice. See [Western Australian Statewide Medicines Formulary Expert Advisory Groups Terms of Reference](#) for more information.

- Monitor and review the use of medicines in WA, including those that are approved on the SMF and those accessed via Individual Patient Approvals (IPA), to identify medications or therapeutic areas for WADEP review with regards to the SMF.
- Seek to ensure the quality use of medications, equity of access, affordability, safety and supply issues are taken into consideration throughout the review process.

5. Membership

5.1 Chair

The Chair will be appointed by the Executive Director, Patient Safety and Clinical Quality (PSCQ), Department of Health.

5.2 Deputy Chair

The Deputy Chair will be nominated and elected from the membership of WADEP by a majority of members and appointment endorsed by WATAG. If no WADEP member is nominated, an appointment may then be made by the Chair of WATAG.

5.3 Voting Members

WADEP shall consist of at least 15 voting members. Member composition should include, where possible:

- at least one **senior medical prescriber** (registrar or consultant) from each of the following
 - Fiona Stanley Hospital;
 - Royal Perth Hospital;
 - Sir Charles Gairdner Hospital;
 - the WA Country Health Service (WACHS);
 - Perth Children’s Hospital;
 - a general or specialist hospital(s) in the Perth metropolitan area
- at least one **junior medical officer** representative (any Health Service)
- at least one **senior pharmacist** from each of the following
 - Fiona Stanley Hospital;
 - Royal Perth Hospital;
 - Sir Charles Gairdner Hospital;
 - the WA Country Health Service (WACHS);
 - Perth Children’s Hospital;
 - a general or specialist hospital(s) in the Perth metropolitan area
- at least one **nurse practitioner** (any Health Service);
- at least one member from the Medicines and Technology Unit, Department of Health,
- at least one **medication safety** representative,
- at least one **public health practitioner** or **epidemiologist**,



- at least one **pharmacologist** or **pharmacology registrar**
- at least one **consumer advocate**.

Members may represent two positions on WADEP but are limited to a single vote at the discretion of the Chair. Members may be opted in for specific subspecialties at the discretion of the Chair. Although best efforts are made to ensure all positions are filled, there may be instances where specialist Panel positions may be vacant due to no suitable candidates.

5.4 Corresponding Members

The Chair, in consultation with members, may establish a network of corresponding members. Corresponding members are not required to attend meetings but may receive agendas and minutes of the Panel and may participate in discussions and raise agenda items as required.

Corresponding members may be representative of service areas which may require ad hoc involvement in Panel discussions and decisions. At a minimum WADEP shall have at least one corresponding member:

- Neonatology representative from either KEMH MTC or CAHS DTC, and
- A health economist.

5.5 General Proxy Members

If a current WADEP voting member anticipates they will be absent for **two or more consecutive meetings**, they must nominate a general proxy. A general proxy will have the right to vote autonomously on all issues and motions, including in and out of session items. The nominating Panel member retains the right to resume their WADEP voting role at any time and end the proxy membership, including if the substantive member resigns. General proxies must be voted in by WADEP members.

Substantive Panel members who have elected a general proxy and are absent for a period greater than 12 months, will be asked to relinquish their position. The general proxy member will be given the opportunity to take the substantive position after this time.

5.6 Limited Proxy Members

A limited proxy may be nominated by a Panel member to act on their behalf for **up to two consecutive meetings**. This may include reading the Panel member's comments or reviews of agenda items or voting on the Panel member's behalf in or out of session. The limited proxy holder must cast the member's vote and represent the member in any other way as stipulated by the nominating Panel member. Limited proxy members may be nominated by a member who is unable to attend a meeting and will be at the discretion of the Chair, but are not required to be approved by a WADEP vote.

5.7 Formulary Management Team

The Formulary Management Team (FMT) will be part of the PSCQ Directorate. Secretarial duties will be provided by the FMT. FMT will attend meetings in an ex officio capacity and may provide advice to the group but will not have voting rights.

5.8 Appointments

Members may be appointed in relation to their professional networks, expertise and knowledge and, where relevant, represent their area health service. Potential members may be identified by the Chair, WADEP members, WATAG or WATAG subcommittees, Expert Advisory Groups, Heads of Department, Health Networks or expression of interest sought by advertisement. Appointments must be elected by a majority of WADEP members.

The Chair and members will be appointed for a term not exceeding three years, at which point the position will be eligible for renomination and reappointment. The incumbent member will be afforded the opportunity to renominate before the position is opened to expressions of interest. The Chair and members may continue to serve on the Panel for consecutive three-year appointments.

6. Roles and responsibilities

6.1 Chair

The Chair is responsible for providing leadership, open communication to all stakeholders, and working with the secretariat to ensure WADEP's responsibilities are carried out optimally.

6.2 Deputy Chair

In the Chair's absence, the deputy Chair will fulfil all Chair responsibilities.

6.3 Acting Chair

If both the Chair and Deputy Chair are absent, an Acting Chair may be elected by members to enable work of the Panel to continue.

6.4 Voting Members

Members are to actively participate in all meetings and decision making, gather and share information and represent the SMF process and governance in practice.

Voting members are required to actively participate in all meetings.

6.5 Formulary Management Team

The FMT will be responsible for:

- facilitating decision making by WADEP, including gathering relevant information from various sources where required,
- liaising with the Chair in the preparation of meeting agenda and minutes

- undertaking and maintaining the business, communication, and administrative functions of the Panel, and
- communicating WADEP decisions according to the SMF Governance and Procedures document.

7. Accountability

WADEP is responsible for the ongoing development and maintenance of the SMF (see the Statewide Medicines Formulary Governance and Procedures document), an instrument that assists in delivering the quality use of medicine at a hospital site level.

The Western Australian Therapeutic Advisory Group (WATAG) is responsible for promoting, improving and maintaining medication governance and the quality use of medicines at a system level. WATAG is accountable to the Assistant Director General, Clinical Excellence Division via the Executive Director, Patient Safety and Clinical Quality Directorate. See [WATAG Terms of Reference](#) for more information.

Although WADEP is a subcommittee of WATAG, WADEP operates autonomously to make decisions on formulary listings. The two groups work collaboratively in order to achieve the goals of both groups and the SMF.

The SMF governance and accountability structure is illustrated in Figure 1.

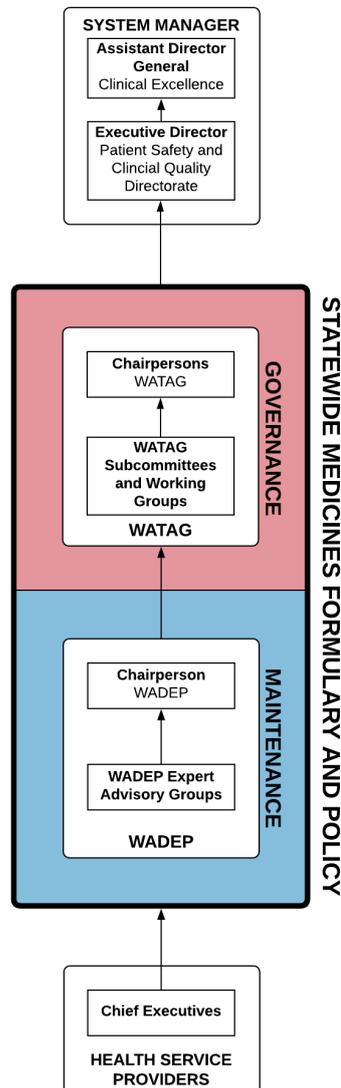


Figure 1. Accountability structure of the SMF

7.1 Annual Report

The FMT, in consultation with the Chair, shall provide an annual report on the activities of WADEP for inclusion in the WADEP Annual Report to the Assistant Director General Clinical Excellence Division. The annual report will also be accessible to all clinicians via the Formulary One landing page to showcase the work of WADEP, the Formulary Management Team and clinicians and DTC members who complete submissions.

8. Meetings

8.1 Frequency and location

Meetings may occur either face to face or by teleconference and will be held every six to seven (6 - 7) weeks or at the discretion of the Chair. The location of the meetings will be at the discretion of the Chair and determined in consultation with members. Meeting dates and times

will be set before the first meeting of each year. Members may be required to work on items out-of-session.

8.2 Quorum

Half the number of official voting members or greater is required to constitute a quorum.

8.3 Resolutions

Resolutions and recommendations from WADEP shall be passed by a majority of the members present. Resolutions at meetings where a quorum is not present will require confirmation at a later time at which a quorum is present.

8.3.1 Voting

The Chair shall have a deliberative vote and in case of an equality of votes, the Chair shall have a casting vote. Voting may be by secret ballot if requested by any member.

8.3.2 Out-of-session resolutions

The Chair may elect to determine WADEP's position by an out-of-session vote. A written proposal will be circulated to members with a time and date for responses to be returned. Members will be advised of the outcome promptly after a resolution.

8.4 Agenda and records

The FMT shall issue agendas and supporting material at least ten (10) days in advance of each meeting. Members may contribute to an agenda no less than two weeks prior to the meeting.

The FMT shall write the minutes of a WADEP meeting and the chair will review the first draft before circulating to the Panel for comment. The Panel will confirm and approve the minutes at the following meeting before circulating to DTCs, CPF and WATAG.

The FMT shall keep the minutes and all official records of WADEP.

9. Conflicts of interest

Each member of WADEP shall abide by the WA Health Code of Conduct and declare any potential conflicts of interest in matters of concern. Members shall:

- A. complete and sign an annual declaration of conflicts of interest,
- B. complete and sign a declaration of conflicts of interest before the commencement of each meeting on matters pertaining to the prepared agenda, and
- C. verbally alert the Chair of any other potential conflicts of interest that may arise during the course of a meeting or in writing for out-of-session matters.

The Chair, with support of voting members, will assess all declared perceived, potential or actual conflicts of interest (COI) and decide on the most appropriate action to take. Members who declare COI are required to propose if, and how, the conflict can be managed at the time of declaration. Members deemed to have a significant COI will not participate in discussions for the relevant agenda items and will be asked to step out of the meeting for the entirety of the

item discussion. Members deemed to have a minor COI may, at the Chair’s discretion, participate in discussions for the relevant agenda items but may not participate in decision making or voting. All conflicts will be recorded in the meeting minutes.

10. Confidentiality

Each member of WADEP shall be mindful of and respect the confidentiality and/or commercial sensitivity of any information discussed at WADEP meetings, or in out of session communications. Members shall:

- A. complete and sign an annual confidentiality statement
- B. complete and sign a confidentiality statement prior to each WADEP meeting
- C. verbally alert the Chair of any potential breaches of confidentiality that may arise during the course of a meeting or following a meeting, or in writing for out-of-session matters.

Members must make reasonable efforts to prevent the disclosure of any WADEP meeting content, discussions, or decisions to non-WADEP members until draft meeting minutes have been confirmed in writing by the Chair, and the FMT has communicated outcomes to all applicants. The FMT will inform members when this has occurred.

Member votes and opinions, and material marked “confidential” must not be discussed or circulated beyond the WADEP membership at any time unless approved by the Chair.

The Chair will alert WADEP members to all potential or actual breach of confidentiality that is reported. The Chair, in consultation with members, will decide on an appropriate action to take following a reported confidentiality breach.

11. Adoption and Amendment

The Terms of Reference will be endorsed at the first meeting of every second year and updated when necessary. Amendments shall be ratified by WATAG.

12. Version control

Version	Date	Author	Rationale
1.7	2023	Medicines and Technology Unit	Expansion of voting member position options and redefining ‘secretariat’ to ‘Formulary Medicines Team’
1.6	2022	Medicines and Technology Unit	Addition of voting member participation expectations, expansion of voting member position options.
1.5	03/12/2020	Medicines and Technology Unit	Addition of conflict of interest management process details, addition of confidentiality process details.
1.4	28/03/2019	Medicines and Technology Unit	Re-branding with WADEP logo, amendments to WADEP scope.

1.3	16/08/2018	Medicines and Technology Unit	Accountability framework updated.
1.2	12/10/2017	Medicines and Technology Unit	Expansion of voting member positions.
1.1	02/02/2017	Medicines and Technology Unit	Expansion of voting member positions.
1.0	11/02/2016	Medicines and Technology Unit	N/A