North Central London Joint Formulary Committee (NCL JFC)  
Patient Partner Role Description

Title: Patient Partner for NCL JFC

Time commitment: Meetings are typically held during the afternoon for two hours every month (excluding December). In addition, a subgroup of the JFC, the Medicines Optimisation Network, is typically held for two hours during the daytime, three times per year (frequency under review).

Prior to committing to join the Committees, the Patient Partner is welcome to discuss the associated time commitment with the Joint Formulary Support Pharmacist.

Venue: Central London. The majority of meetings are held at Stephenson House, Hampstead Road, NW1 2PL

Expenses: Out-of-pocket expenses for travel only

Accountable to: Chair of the Joint Formulary Committee

Supported by: Joint Formulary Support Pharmacists

Tenure of Office: 1 Year (extension/renewal will be through mutual agreement with the Chair)

Start Date: As soon as possible

UCLPartners is an academic health science partnership with over 40 higher education and NHS members and a small core central team providing operational support and clinical academic leadership. Our overall purpose is to translate cutting-edge research and innovation into measurable health and wealth gain for patients and populations – in London, across the UK and globally.

Beyond serving our population of six million people, the healthcare solutions developed by our members can be applied across the UK and globally. We work with our partners to shift the mind-sets and behaviours of both patients and professionals, and to break down traditional cultural and institutional barriers.

UCLPartners values the role that patient and carer partners play in bringing a unique perspective to our Boards, and Groups. People who have experience of life-changing diseases or injury or disability find ways to adjust to what life throws at them. They look for creative solutions to challenges and identify opportunities for improvement. They are experts by experience. We believe these experiences, both good and bad, empower patients to be meaningfully engaged in discussions around quality, and service and system improvement.

Our core values ensure we are:
- Patient led
- Population focused
- Delivering at pace
- Working in partnership
North Central London Joint Formulary Committee

The North Central London Joint Formulary Committee (NCL JFC) is responsible for making recommendations about which medicines are approved for prescribing in NCL, which covers a population of 1.5 million people. The Committee is made up of senior health care professionals selected to represent the NHS hospitals and NHS Clinical Commissioning Groups (CCG) in NCL that they work for.

All medicines accepted onto the formulary are formally reviewed on the basis of safety, appropriateness, equity, evidence-base and cost-effectiveness. By making the decisions once for the whole of NCL, the JFC aims to achieve consistent and robust decision-making across the whole local area.

North Central London is made up of the following Clinical Commissioning Groups:
- Barnet CCG
- Camden CCG
- Enfield CCG
- Haringey CCG
- Islington CCG

The following hospitals and mental health Trusts are also part of North Central London:
- Barnet, Enfield & Haringey (Mental Health) NHS Trust
- Camden & Islington (Mental Health) NHS Foundation Trust
- Great Ormond Street Hospital for Children NHS Foundation Trust
- Moorfields Eye Hospital NHS Foundation Trust
- North Middlesex University Hospital NHS Trust
- Royal Free London NHS Foundation Trust (including Barnet & Chase Farm Hospitals)
- Royal National Orthopaedic Hospital NHS Trust
- University College London Hospitals NHS Foundation Trust
- Whittington Hospital NHS Trust

North Central London Medicines Optimisation Network

The Medicines Optimisation Network (MON) is a subgroup of the JFC, which aims to identify opportunities to improve medicine safety, patient care and experience through optimising medicines use across NCL. The MON is made up of senior pharmacists from NHS hospitals and NHS CCGs in NCL.

The objectives of the MON include working towards improving patient understanding of and adherence to medicines; reducing avoidable medicine waste; and ensuring decisions about medicines are aligned across all local health care organisations.
Specific Roles and Responsibilities for Patient Partners

The role of the Patient Partner is to ensure that the views of patients, carers and families are taken into consideration during relevant discussions and heard throughout UCLPartners as a wider organisation, whenever decisions that affect patient care are made. Patient Partners who serve on this committee are expected to contribute to this decision making process. Patient Partners are valued members of the committee and have the full support of the Chair, who will be happy to meet with any incumbent or potential Patient Partner as they may require to help inform them about the role and remit of the JFC.

Patient Partners will work to:

- Contribute to relevant meetings in a constructive manner, offering ideas and opinions which reflect the voice of patients, carers and their families
- Where appropriate and applicable, Patient Partners should seek views and feedback from other patient groups on the work of UCLPartners. Such groups include, but are not limited to, Healthwatch, Councils for Voluntary Services, local support groups and personal contacts
- Keep abreast of local and national news and developments with regards to healthcare policy and patient experience, and consider the impact of this on the activities of the committee
- Seek to attend training from UCLPartners when offered, if considered useful and applicable
- Work on projects which have been identified as an area of focus by the membership, and agreed by the Chair. This may sometimes require collaborative working with other committee members and at other times working autonomously
- Provide a commitment to the committee, attending as many meetings as they are able, and acting as a Partner of the committee when required
- Patient Partners should not agree to take on projects, which they feel are outside of their remit, beyond their skill or knowledge level, or would require a time commitment which they are unable to keep.

If applicants have any queries relating to their role and responsibilities, they should contact the Joint Formulary Committee Support Pharmacists (John Minshull, 020 3447 4340). Patient Partners may be asked to sign a confidentiality agreement.

Making an Application

Closing date: 8 January 2016

Please apply via a letter, including a statement up to 500 words, on why you are interested in this role and what you feel you will bring to the committees. Please send you application via email (john.minshull@uclh.nhs.uk) or to:

John Minshull
JFC Support Pharmacist
Pharmacy
University College Hospital
250 Euston Road
London NW1 2PG

We are planning to hold informal interviews with shortlisted applicants during week commencing 18 January 2016.
# Patient Partner Person Specification

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<tr>
<th>Experience</th>
<th>Be a current or previous user of services at either one or more of the trusts or a current user of GP services within North Central London.</th>
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| Skills and aptitude | Good communication and influencing skills  
Ability to present patient related views  
Ability to form and maintain working relationships in challenging circumstances  
Ability to distinguish between personal and patient views  
Good time management skills |
| Personal qualities | Assertiveness and confidence to raise issues in meetings  
Sensitivity  
Reliability  
Flexibility  
Resilience and tenacity  
Openness and transparency  
Ability to consider the majority view  
A commitment to connecting with local user groups, such as Healthwatch, where appropriate  
A commitment to the Nolan Principles of Public Life |
| Knowledge | Awareness of national health and social care issues  
Elements of specialist pathways as experienced by patients  
Appreciation of the complexity of working across organisational boundaries and joint working |
Commitment to UCLPartners Patient Partners

We believe that improvements in health and care need to be rooted in the needs and experiences of our population – patients, families, carers and the public. We believe that the best articulation of these clinical, behavioural and emotional needs and experiences comes from our population working in partnership with us.

We will involve and engage patients, carers and the public in everything we do, including, but not limited to:

- Governance
- Strategic development
- Substantive improvement planning and work
- Across all programmes and designations
- Events and event planning
- Clinical care

We will recognise the contributions patients, carers and the public make to our work, in terms of:

- Financial reimbursement
- Supporting skill development
- Recognition Awards
- Accountability and transparency around ‘you said, we did’
- Website case studies

We commit to:

- listen to our population
- involve and engage our population throughout our work and events, from start to end, in the planning and development, delivery, and evaluation
- work to find the best practical ways to involve and engage, whether in person or not, ensuring we involve and engage in finding out what works best
- ask about what matters
- ask how we could be better and work for continuous improvement
- always think about how we could do engagement and involvement better, learning from others and striving for better partnerships
- share our learning with our partners
- work in partnership to think about how we best measure and evaluate success in this area
- role model best practice at every opportunity