

Reference: FOI.ICB-2425/088

Subject: Wound Care Formulary/Medicines Optimisation Leads/Tissue Viability Nurse Lead

*I can confirm that the ICB **does hold some of the information requested**; please see responses below:*

QUESTION	RESPONSE
1. Who will be the Clinical Lead involved in wound care for the Integrated Care Board (ICB) in 2024	There is no specific clinical lead for wound care within BNSSG ICB. Senior Specialist Tissue Viability Nurses (TVNs) within our hospital trusts and community provider are the clinical leads for wound care within BNSSG. The Medicine Optimisation team at the ICB take a lead on this programme of work.
2. Who makes up the wound care formulary panel?	Representatives from: BNSSG ICB Medicines Optimisation team Bristol & Weston NHS Purchasing Consortium Sirona care & health UHBW (University Hospitals Bristol and Weston NHS Foundation Trust), and NBT (North Bristol NHS Trust).
3. Wound Care Formulary key lead names and contact details in order to liaise regarding new product discussions.	The Wound Care formulary group will take a lead on these discussions, a group made up of TVNs and overseen by the BNSSG ICB Medicine Optimisation team: bnssg.formulary@nhs.net bnssg.medicines-optimisation@nhs.net

	All new formulary requests/queries should be sent to Bristol & Weston NHS Purchasing Consortium: procurement@nbt.nhs.uk https://www.nbt.nhs.uk/bristol-weston-nhs-purchasing-consortium
4. Who will be the Head of Medicines Optimisation/Management for the ICB in 2024	Chief Pharmacist, Chief Medical Office Directorate. Any enquiries should be sent to the team: bnssg.medicines-optimisation@nhs.net
5. Medicines Management key lead names and contact details in order to liaise regarding new product discussions.	See response to question 3.
6. What are the ICB's aims with reference to the procurement and provisions of wound care products and commissioning of wound care services.	Our overall ambition is to: <ul style="list-style-type: none"> • improve patient outcomes and experience; • improve quality of patient care and healing rates across the system; • Maintain a financially sustainable wound care formulary; • Reduce wastage and the carbon footprint.
7. What is the current date for formulary review and how will this look (ICS wide, wide selection with local selection, local formularies?	Formulary review is continually ongoing, The Wound Care formulary applies across both primary and secondary care in BNSSG.
8. How will provisions and procurement of wound care products take place under the ICB – via FP10, NHSSC or another route? Please specify which alternative.	In primary care, the majority of wound care products are ordered using the Formeo ordering platform, with items then coming from NHS Supply Chain. In primary care there is some FP10 prescribing of dressings for a variety of reasons.
9. Those previous CCGs and Trust who merged with the ICB may have different wound care formularies – which	There is one joint Wound Care Formulary across BNSSG which applies to both primary and secondary care:

one will be used? Will there be an amalgamation of the formularies or will a new one be created	https://remedy.bnssg.icb.nhs.uk/formulary-adult/wound-care-formeo/wound-care-formeo/
10. How does an organisation apply to have their products considered for inclusions on the wound care formulary?	<p>Contact Bristol & Weston NHS Purchasing Consortium: procurement@nbt.nhs.uk</p> <p>Alternatively, a member of the wound care specialist formulary group will bring the request to the group to be considered.</p>
11. Where does wound care sit within their priorities? – what are their strategic priorities for 2024-25	<p>This is part of a wider picture;</p> <ul style="list-style-type: none"> - From a financial perspective it forms part of the strategic priorities ensuring cost effective prescribing - Reducing waste - Ensuring quality of care - Maintaining good Infection, prevention and management
12. Key Tissue Viability Nurse Lead name and contact details	There is not a key Tissue Viability Nurse lead for BNSSG. Each organisation has their own team of tissue viability nurses that input into decisions from UHBW, NBT and Sirona

The information provided in this response is accurate as of 21 June 2024 and has been approved for release by Dr Joanne Medhurst, Chief Medical Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.