

AREA PRESCRIBING COMMITTEE – Birmingham, Sandwell, Solihull and environs

Decision Making Support Tool

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

Formulary application reference:		APCBSSE/0098
Drug name and formulations:		Paravit-CF®
Criteria	Example	Committee Consensus
Patient Safety	<i>Potential for abuse, toxicity, significant drug interactions</i>	No issues identified
Clinical effectiveness	<i>Established licensed product</i>	Correcting a known deficiency
Strength of evidence		Alternative way of delivering an established treatment
Patient factors	<i>Published patient factors</i>	Reduces pill burden
Cost effectiveness or resource impact	£	Cost effective compared to current described regime
Place of therapy relative to available treatments	<i>1/2nd tier</i>	1 st tier
National guidance and priorities	<i>NICE, MTRAC</i>	N/A
Local health priorities	<i>CCG views</i>	CCGs supportive
Equity of access	<i>Equality assessment</i>	N/A
Stakeholder views	<i>Define wider groups to be engaged</i>	N/A
Implementation requirements	<i>Requires, RICAD ESCA etc.</i>	None

Decision Summary

Resubmission is recommended to complete the information to enable a decision:	
Not approved and rationale:	
Formulary status (RAG) and rationale	Amber – specialist initiation or recommendation
Implementation requirements:	
Implementation monitoring:	