

NHS ENGLAND (SOUTH WEST) MEETINGS OF THE CONTROLLED DRUGS LOCAL INTELLIGENCE NETWORK

TERMS OF REFERENCE

1. INTERPRETATION

In these terms of reference:

'Controlled drug' is as defined by [section 2](#) of the Misuse of Drugs Act 1971.

'Controlled Drugs Accountable Officer', 'designated body', 'local Intelligence network', 'relevant person', and 'responsible body' are as defined in the [Controlled Drugs \(Supervision of Management and Use\) Regulations 2013](#) ('the 2013 Regulations').

Individual Controlled Drugs Accountable Officers are those named in the Care Quality Commission's register ([published online](#)).

2. CONSTITUTION

The Health Act 2006 ('the Health Act') outlines responsibilities for human healthcare organisations in relation to the safe, appropriate, and effective management and use of controlled drugs.

A legal duty of collaboration between specific organisations (responsible bodies) is also outlined in the Health Act, which is described in detail in the 2013 Regulations. 'Local intelligence networks' are formed from these organisations and there is a legal duty for members to share information and intelligence relating to concerns in connection with the management and use of controlled drugs.

The local intelligence network ('the network') in the South West of England has been determined by NHS England and covers the following geographical footprint:

- Bath and North-East Somerset, Swindon, and Wiltshire
- Bristol, North Somerset, and South Gloucestershire
- Cornwall and the Isles of Scilly
- Devon
- Dorset
- Gloucestershire
- Somerset

The network will be led by the regional Controlled Drugs Accountable Officer for NHS England (South West) and their team, who act a hub for information and intelligence relating to the management and use of controlled drugs in the South West of England.

3. MEMBERSHIP

The network will engage all responsible bodies in the South West of England. In addition, invitations will be extended to other organisations that are not responsible bodies when deemed appropriate by the lead Controlled Drug Accountable Officer.

4. PURPOSE

As described in the 2013 Regulations, the network's core purpose is to facilitate the co-operation of responsible bodies who are members in connection with:

- The identification of cases in which action may need to be taken in respect of matters arising in relation to the management or use of controlled drugs by relevant persons,
- The consideration of issues relating to the taking of action in respect of such matters, and
- The taking of action in respect of such matters.

The network will also aim to support members to fulfil their responsibilities by mutual support, and through informal education and training in which best practice and learning is shared.

5. FREQUENCY OF MEETINGS

The network itself is always in operation via any appropriate communication method and meets formally twice a year – in the Spring (March), and in the Autumn (September and October).

For formal meetings, the network meets in six sub-groups to reflect appropriate geographical footprints (as outlined in section two), but members are welcome to join any meeting.

6. CHAIRING OF MEETINGS, AND QUORUM

Meetings are chaired by the lead Controlled Drugs Accountable Officer or their deputy. Meetings will proceed if both NHS England and at least one other responsible body are represented.

The network is an advisory group and does not make any decisions on behalf of NHS England, or on behalf of any other designated body or officer. Whilst the networking may provide assurance that duties are being fulfilled, accountability lies with the officers and not with the network.

7. FORMAT OF MEETINGS

Each series of meetings is preceded by an educational online webinar (which is typically 120 to 150 minutes in duration). The meetings themselves are either held face to face at physical venues (typically 180 minutes), or by online videoconference (either 105 or 120 minutes according to group size).

All meetings are divided into two parts – part A and part B.

- Part A is for learning and information sharing and all members (including observers by invitation) are welcome to attend.
- Part B is for confidential intelligence sharing and only responsible bodies are in attendance.

Physical meetings have a refreshment break in part A for informal networking, whereas online meetings have a short 'comfort' break between parts A and B.

8. ATTENDANCE AT MEETINGS

Accountable officers of designated bodies, and representatives from each other responsible body should aim to attend every meeting as a rule - and if they cannot attend, send a deputy by exception.

9. ADMINISTRATIVE MATTERS - MEETINGS

The contact details of all network members are compiled and maintained by NHS England, and where possible drawn from the Care Quality Commission's Controlled Drugs Accountable Officer register that is published online.

Agendas for formal meetings are compiled by NHS England and shared at least one week before a meeting.

The notes for Part A of a formal meeting, and the minutes for Part B of a formal meeting are compiled by NHS England and should be shared with members within four weeks of the meeting. The minutes from Part B of a formal meeting are only shared with responsible bodies on request. Meetings are recorded to improve the accuracy of the notes and minutes, and the recording is not shared.

10. CONFIDENTIALITY AND INFORMATION GOVERNANCE

The 2013 Regulations require responsible bodies to exchange information about the management or use of controlled drugs by relevant persons. There is therefore a clear legal basis for this information to be shared in accordance with the Data Protection Act 2018, and for relevant persons to be identified. This information is highly sensitive, and so relevant persons are only named in part B of a formal meeting of the network, when membership is limited to responsible bodies. Outside of formal meetings, such information is only exchanged by secure e-mail marked as confidential, and in accordance with the Caldicott principles.

The minutes of the Part B section of formal local intelligence network meetings, or of e-mails identifying individuals about whom there are concerns are not ordinarily disclosed when requested under the terms of the Freedom of Information Act 2000 in accordance with the exemption in section 31.

If concerns about persons that are not relevant persons as defined in the 2013 Regulations are shared within the network, the legal basis for sharing is not the 2013 Regulations. Such sharing should only take place in exceptional circumstances when it is covered by the provisions of the Data Protection Act 2018, and in accordance with the Caldicott principles.

11. GOVERNANCE

Activity in the local intelligence network is summarised in quarterly reports for the regional Quality Committee at NHS England (South West) by the lead Controlled Drugs Accountable Officer. Other reports are submitted to the NHS England national Controlled Drugs Accountable Officer's lead on request.

12. REVIEW OF TERMS OF REFERENCE

These terms of reference were reviewed and edited by the Controlled Drugs team and approved by the lead Controlled Drugs Accountable Officer on 20 March 2023. They will be reviewed on or before 31 December 2024.

13. VERSION CONTROL

The changes to the previous version of these terms of reference were limited to minor amendments to formatting, to meeting timings, improved clarity, and to reflect that a single meeting is now held for the whole county of Devon, rather than in two sub-divisions. The previous version is available on request.