

Clinical Policy Advisory Group (CPAG)

CPAG DECISION MAKING DURING THE COVID PANDEMIC

CPAG DECISION MAKING DURING THE COVID-19 PANDEMIC – UPDATED MAY 2022

Following a recent review, and in light of the successful COVID-19 vaccination programme, it has been agreed that CPAG meetings, commencing 16th June 2022, will be held on a bi-monthly basis via MS Teams. These will be for items that require an in-depth discussion. For those monthly meetings which fall in-between we will continue to circulate routine papers for virtual agreement. This arrangement will continue to be monitored in accordance with the CCGs Business Continuity levels and the COVID-19 pandemic.

CLINICAL & GOVERNANCE POLICIES UPDATED PROCEDURES OF LIMITED CLINICAL VALUE POLICIES

Research evidence shows that some interventions are not clinically effective or only effective when they are performed in specific circumstances. The purpose of the Procedures of Limited Clinical Value (PLCV) policy is to clarify the commissioning intentions of the Clinical Commissioning Group (CCG). The CCG will only fund treatment for clinically effective interventions that are then delivered to the appropriate cohort of patients.

Clinical Policy	Key Changes
Grommets in Otitis Media with Effusion Policy (Adults and Children)	<p>Derby and Derbyshire CCG, in line with its principles for procedures of limited clinical value has deemed that Grommets in Otitis Media with Effusion should not routinely be commissioned unless the criteria within the policy are met.</p> <p>There has been no new significant robust evidence or new national guidance that has been published since the policy was last reviewed in November 2019 that requires a change reflecting in the policy's criteria or commissioning stance.</p> <p>Otitis media with effusion (OME) is a condition characterized by a collection of fluid within the middle ear space without signs of acute inflammation. OME can be associated with significant hearing loss, especially if it is bilateral and lasts for longer than one month. Often, when the hearing loss is affecting both ears it can cause language, educational and behavioural problems.</p> <p>The exact cause of OME is uncertain, but over 50% of cases are thought to follow an episode of acute otitis media (AOM), especially in children under 3 years of age. Persistent OME can occur because of the following:</p> <ul style="list-style-type: none"> • Impaired eustachian tube function causing poor aeration of the middle ear. • Low-grade viral or bacterial infection. • Persistent local inflammatory reaction. • Adenoidal infection or hypertrophy <p>Grommets require a surgical procedure to insert tiny tubes (grommets) into the eardrum as a treatment for fluid build-up (glue ear).</p>
Surrogacy Involving Assisted Conception Policy	<p>Derby and Derbyshire CCG, in line with its principles for procedures of limited clinical value has deemed the assisted conception treatments involving surrogates for any patient group should not routinely be commissioned. Support and funding will not be provided for any associated treatments related to those in surrogacy arrangements.</p> <p>These commissioning intentions will be reviewed periodically. This is to ensure affordability against other services commissioned by the CCG.</p> <p>This policy has been prepared by East Midlands Affiliated Commissioning Committee (EMACC) which was established as a joint committee of nineteen participating CCGs in the East Midlands to enable CCGs to work collaboratively on the development and maintenance of Commissioning Policies. The commissioning of the creation, storage and implantation of eggs/embryos falls outside the remit of this policy.</p> <p>There has been no new significant robust evidence or new national guidance that has been published since the policy was last reviewed in June 2019 that requires a change reflecting in the policy's criteria or commissioning stance.</p> <p>Surrogacy is defined as the process by which a woman bears a child for another individual/couple and once delivered, the child is surrendered to the requesting individual/couple. There are two types of surrogacy: partial/traditional surrogacy and full/ gestational surrogacy.</p> <p>Surrogacy may be appropriate where a medical condition makes it impossible or dangerous to get pregnant and to give birth, for example, the absence or malformation of the womb, recurrent loss of pregnancy and repeated in vitro fertilisation failure. Surrogacy can also be a fertility option for male couples.</p>
NICE Interventional Procedures Guidance (IPG), Medical Technologies Guidance (MTG), Diagnostics Guidance (DG) and MedTech Innovation Briefing (MIB) Policy	<p>Derby and Derbyshire CCG has deemed the use of any procedure or technology assessed by NICE under their IPG, MTG, DTG and MIB programmes should not normally be funded unless:</p> <ol style="list-style-type: none"> 1. The NICE IPG states 'use with standard arrangements for clinical governance, consent and audit * ' OR, the NICE MTG states 'the case for adoption within the NHS as described is supported by the evidence' OR, the NICE DTG makes a recommendation as an option for use OR, the NICE MIB has evaluated the innovation <p>AND</p> <ol style="list-style-type: none"> 2. The provider has submitted a robust, evidenced based business case to the commissioner and this has been subsequently approved <p>These commissioning intentions will be reviewed periodically. This is to ensure affordability against other</p>

services commissioned by the CCG.

** As of the 12th December 2019, the CCG will not challenge any standard/normal IPG's that are already being carried out at our providers prior to this date*

The following amendments have been made to the policy:

- An exception has been agreed to the requirement of a business case to provide further clarification :
Exemption - For procedures that have previously been assessed under the NICE IPG programme that have since been accepted as established practice with good governance of introduction and safe operating practice.
 (CPAG acknowledge that when procedures become established clinical practice the providers internal governance will provide the operating model and the assurance for adoption. This includes any increase in activity / cost has been accounted for in the horizon scanning, planning considerations and prioritisation process and subsequently agreed with the commissioner).
- Details of how information can be shared with NICE included within the policy

The following wording has been added under section 3 – Introduction:

- The CCG retains the ability to review and approve the introduction of devices and procedures introduced under this NICE output (Clinical Guidelines).
- FAQ have been added as an Appendix to the Policy

The National Institute for Health and Care Excellence (NICE) produces several types of guidance documents including:

- Cancer service guidance
- Clinical guidelines
- Diagnostics guidance
- Interventional procedures guidance
- Medical technologies guidance
- Public health guidance
- Technology appraisals guidance
- Quality standards

Of these, only technology appraisals guidance (TAs) are legally binding; other guidance, including interventional procedures guidance (IPGs), medical technologies guidance (MTGs) and diagnostics guidance (DGs) is statutory guidance which is intended to assist the NHS in the exercise of its statutory duties.

MIBs are not NICE guidance. They differ in format, contain no judgement on the value of the technology and do not constitute a guidance recommendation.

NHS bodies are entitled to take decisions which do not follow guidance (other than TAs) if they have a good reason to do so. The availability of resources and competing priorities can be a valid reason.

The purpose of the policy is to ensure that Derby and Derbyshire CCG (DDCCG) have a consistent approach in considering and implementing IPGs, MTGs, DGs and MIBs.

NICE have been producing IPGs since 2003 and have, more recently started publishing MTGs (since 2010), DGs (since 2011) and MIBs (since 2014).

MISCELLANEOUS INFORMATION

Statement	Summary
EMACC Update - Gamete Storage Policy	Although the East Midlands Affiliated Commissioning Committee (EMACC) will cease to exist as of 1st July 2022, it has been confirmed that the intention is to complete a final version of the Gamete Storage policy. EMACC previously conducted a Public Consultation on the draft policy, however Covid and a lack of Public Health support this work was placed on hold. The aim is to present the final version of the policy at the July meeting of CPAG.

NICE INTERVENTIONAL PROCEDURES GUIDANCE, DIAGNOSTIC PROCEDURES, MEDICAL TECHNOLOGIES GUIDANCE AND MEDTECH INNOVATION BRIEFINGS (IPGS, DTG, MTGS, MIBS)

The DDCCG does not commission and will not fund any procedure or technology assessed by NICE under their IPG, MTG, DTG and MIB programmes unless:

- the provider has submitted a robust, evidenced based business case to the commissioner and this has been subsequently approved AND
- the NICE IPG states 'use with standard arrangements for clinical governance, consent and audit'
- OR the NICE MTG states 'the case for adoption within the NHS as described is supported by the evidence'
- OR the NICE DTG makes a recommendation as an option for use
- OR the NICE MIB has evaluated the innovation.

The following NICE programme outputs were noted by the group for the month of April 2022:

IPG/MTG/DTG/MIB	Description	Outcome
IPG722	Intramedullary distraction for upper limb lengthening	Special arrangements – DDCCG do not commission
IPG723	Liposuction for chronic lymphoedema	Standard arrangements – requires the provider to submit a robust, evidence-based business case to the commissioner

Our CCG continues to monitor and implement IPGs with our main providers.