

Clinical Policy Advisory Group (CPAG)

CPAG DECISION MAKING DURING THE COVID PANDEMIC

CPAG DECISION MAKING DURING THE COVID PANDEMIC – Update July 2020

Due to the current Covid-19 pandemic an interim CPAG Terms of Reference (ToR) has been devised to ensure that there is continuity of CPAG meetings during these extraordinary times. The interim arrangements can be found on the Derby and Derbyshire CCG (DDCCG) Clinical Policies website: http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical-policies/CPAG/CPAG_TOR/interim_cpag_tor.pdf

PRIOR APPROVAL UPDATED

Prior Approval (PA) is an assurance mechanism used by DDCCG to ensure that the clinical criteria listed within the Procedures of Limited Clinical Value (PLCV) policies are met. Through CPAG, DDCCG has collaborated with stakeholders to remove any unnecessary administration burden. As a result the hip and knee revision procedure will no longer require prior approval.

A useful summary can be found on the DDCCG Clinical Policies website: <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home/clinical-policies/plcv>

CLINICAL 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 right patients.

Policy Name	Key Changes
Pinnaplasty	<p>Pinnaplasty is a cosmetic procedure that involves the surgical correction of prominent ears. Prominent ears are often inherited and occur due to the lack of usual cartilage folds of the ear.</p> <p>The Pinnaplasty Policy has been reviewed and reformatted to reflect the new organisation's policy template. The policy has been updated to include background information, rationale for recommendation, useful resources, consultation and version control. Patient's smoking status has also been removed from the policy.</p>
Tonsillectomy and Adenoidectomy	<p>Tonsillectomy is the surgical removal of tonsils, which is usually carried out when people experience recurrent severe episodes of tonsillitis.</p> <p>Adenoidectomy is the surgical removal of the adenoids, which is normally carried out in children with swollen or enlarged adenoids.</p> <p>The recently reviewed Tonsillectomy and Adenoidectomy Policy has been further updated to include indications for emergency hospital admission under the policy's new 'Exclusion Criteria' section.</p> <p>This exclusion criteria includes:</p> <ul style="list-style-type: none"> • Suspected malignancy • More than one episode of peri-tonsillar abscess (quinsy) • Acute upper airways obstruction

CLINICAL POLICIES UPDATED SUMMARY OF POLICIES

Clinical Policy	Key Changes
Consultant to Consultant Referral	<p>The Consultant to Consultant Referral Policy explains that:</p> <ul style="list-style-type: none"> • Consultant to consultant referral without patient choice is appropriate in certain situations listed within the policy. • Consultant referral back to the patient's GP is appropriate in certain situations listed within the policy <p>The Consultant to Consultant Referral Policy has been updated with the inclusion of the following statement under the policy's exclusion section:</p> <p>"Referrals for Procedures of Limited Clinical Value where policies should be adhered to".</p>

CPAG WEBSITE DEVELOPMENT & ELECTRONIC REFERRAL SERVICE TEMPLATES

The Clinical Policies Website went live from 1st April 2019 and will be regularly updated with new information/policies. <http://www.derbyshiremedicinesmanagement.nhs.uk/>

The Electronic Referral Service (ERS) PLCV referral form templates are being reviewed and updated to accurately reflect the current policies and are now available on the Clinical policies website. We actively encourage feedback which should be sent to the PLCV inbox at PLCV.priorapproval@nhs.net

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 months of April to June:

IPG/MTG/DTG/MIB	Description	Outcome
IPG673	Intravascular lithotripsy for calcified coronary arteries during percutaneous coronary intervention	Type of arrangement Special – Not commissioned
MTG49	Rezum for treating lower urinary tract symptoms secondary to benign prostatic hyperplasia	NICE state this guidance is applicable to Secondary care - acute Commissioner: CCG NICE state this will be cost neutral Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB211	Archimedes for biopsy of suspected lung cancer	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB212	MolecuLight i:X for wound imaging	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB216	FibroScan for assessing liver fibrosis and cirrhosis in primary care	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB218	Actim Pancreatitis for diagnosing acute pancreatitis	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval

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

NHS ENGLAND INNOVATION AND TECHNOLOGY PAYMENTS (ITP)

The DDCCG have no statutory duty to fund the additional costs associated with the implementation of NHS England's Innovation and Technology Payment innovations.