

Clinical Policy Advisory Group (CPAG)

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 Clinical Commissioning Group (CCG). The CCG will only fund treatment for clinically effective interventions that are then delivered to the right patients.

In line with the group's principle of adopting NHS Evidence Based Interventions policies, where they are felt to be more restrictive than the current Derby & Derbyshire policies, the following have been updated:

Derby and Derbyshire CCG Adoption of NHS EBI Policies	Key Changes
<p>Arthroscopic Knee Washout for Patients with Osteoarthritis</p> <p><i>Restrictive policy stating arthroscopic knee washout as a treatment method for patients with osteoarthritis should not be commissioned, unless mechanical locking occurs (in which case it may be considered).</i></p>	<ul style="list-style-type: none"> Amended to adopt NHS EBI wording

Matters Arising

The Local Medical Committee (LMC) has brought to our attention reports of providers refusing to accept GP referrals for a second opinion unless it is on a PLCV form. CPAG have discussed this issue and fully support the LMC's stance on this matter, which is:

'GPs are not specialists, we therefore reserve the right to refer by letter to secondary care for an opinion; the specialist having reviewed the patient can decide whether a procedure is necessary and PLCV criteria would apply at this point. A referral for an opinion should not go via prior approval as the request is for an opinion not a procedure'.

In response to this issue DDCCG have:

- Added a statement on the PLCV website re-enforcing the CCG's position on this matter
 - <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home/clinical-policies/plcv>
- Issued communication to the Derbyshire Trusts, highlighting the issue and re-enforcing DDCCG's stance on the matter.

CLINICAL POLICIES UPDATED SUMMARY OF POLICIES

The following clinical policies were updated:

Clinical Policy	Key Changes
<p>Gamete Storage</p> <p><i>Restrictive policy stating that gamete cryopreservation will be commissioned in individuals undergoing medical or surgical treatment who may be at risk of permanent infertility as a result of their treatment. Gamete cryopreservation will not be commissioned for social reasons, or if gametes are being frozen for use by individuals other than the patient receiving treatment.</i></p>	<ul style="list-style-type: none"> The website page has been updated with 'Policy is currently under review' No changes made to policy Awaiting the outcome of the regional consultation.
<p>Continuous Glucose Monitoring</p> <p><i>Restrictive policy stating that Continuous Glucose Monitoring to be not routinely commissioned unless specific criteria are met.</i></p>	<ul style="list-style-type: none"> Clarification on the intention of the CGM policy in relation to the restrictive criteria for children.
<p>Keloid Scar Reduction</p> <p><i>Restrictive policy stating that keloid scar treatment will be funded provided that the scar is functionally disabling or results in facial disfiguration.</i></p>	<ul style="list-style-type: none"> Types of trauma that lead to keloid scars have been removed from the 'Recommendation' section of the policy: <ul style="list-style-type: none"> Clarifying that any keloid scar, regardless of how they developed, can be treated provided that they meet the criteria listed within the policy Types of trauma that lead to keloid scars added to 'Background' section. Added examples of when a keloid scar would be considered as being 'functionally disabling' and supporting evidence base.

EAST MIDLANDS AFFILIATED COMMISSIONING COMMITTEE POLICY UPDATES

We are currently awaiting East Midlands Affiliated Commissioning Committees update on Gamete Storage/ Cryopreservation.

CPAG WEBSITE DEVELOPMENT

The Clinical Policies Website went live from 1st April 2019 and will be regularly updated with new information/policies.

<http://www.derbyshiremedicinesmanagement.nhs.uk/>

**GOVERNANCE POLICIES AND COMMISSIONING STATEMENTS UPDATED
SUMMARY OF POLICIES**

Policy/Commissioning Statement	Key Changes
NICE Interventional Procedures Guidance (IPG), Medical Technologies Guidance (MTG), Diagnostics Guidance (DG) AND MedTech Innovation Briefing (MIB) Policy	<ul style="list-style-type: none"> Current policy updated to include NICE advice on MIBs and to give clarity on the commissioning status of MIBs
Implementation of NICE Advice on MedTech Innovation Briefings (MIBs) Commissioning Statement. <i>NICE MIBs are designed to support NHS and social care commissioners and staff who are considering using new medical devices and other medical or diagnostic technologies.</i>	<ul style="list-style-type: none"> New commissioning statement confirming that DDCCG have no statutory duty to fund the use of procedures/technologies under the NICE MIBs programme. DDCCG will not consider procedures/technologies under the NICE MIBs programme unless a business case is submitted or if the MIB is funded by NHS England.
NHS England Innovation and Technology Payments (ITP) Commissioning Statement <i>ITP was launched as an open competition to attract entries for proven, cost effective, market ready innovations demonstrating potential to deliver significant patient outcomes and savings to the NHS.</i>	<ul style="list-style-type: none"> As above, DDCCG will not consider funding for any additional costs associated with innovations assessed by the following: <ul style="list-style-type: none"> NHS England Innovation and Technology Tariff Innovation and Technology Payment Evidence Generation Fund Unless a business case is submitted.

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

The DDCCG do 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 considered by the group:

IPG/MTG/DTG/MIB	Description	Outcome
IPG647 - Do not use	Therapeutic hypothermia for acute ischaemic stroke	Do not commission 'Do not use' IPGs
IPG648 - Research	Collagen paste for closing an anal fistula	Do not commission research IPGs
IPG649 - Standard	Percutaneous mitral valve leaflet repair for mitral regurgitation	Require a robust business case in order to be considered
IPG650 – Special arrangement	Percutaneous insertion of a cerebral protection device to prevent cerebral embolism during TAVI	Do not commission special arrangement IPGs
IPG651 – Special arrangement	Percutaneous mechanical thrombectomy for acute deep vein thrombosis of the leg	Do not commission special arrangements IPGs
IPG652 - Research	Bronchoscopic thermal vapour ablation for upper lobe emphysema	Do not commission research IPGs
IPG653 - Standard	Valve-in-valve TAVI for aortic bioprosthetic valve dysfunction	Require a robust business case in order to be considered
IPG654 – Special arrangement	Reinforcement of a permanent stoma with a synthetic or biological mesh to prevent a parastomal hernia	Do not commission special arrangement IPGs
IPG655 - Research	Cardiac contractility modulation device implantation for heart failure.	Do not commission research IPGs
MTG45	Endocuff vision for assisting visualisation during colonoscopy	Require a robust business case in order to be considered
MTG24 – updated from March 2015	The Sherlock 3CG Tip confirmation system for placement of peripherally inserted central catheters	Require a robust business case in order to be considered
MTG14– updated from July 2013	Ambu aScope4 Broncho for use in unexpected difficult airways	Require a robust business case in order to be considered

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 by the following:

- NHS England Innovation and Technology Tariff
- Innovation and Technology Payment
- Evidence Generation Fund

Unless the provider as submitted robust evidence based business case to the commissioner and this has been subsequently approved.

NHS England ITP and ITT outputs were considered by the group in June.