

Clinical Policy Advisory Group (CPAG)

CPAG DECISION MAKING DURING THE COVID PANDEMIC

CPAG DECISION MAKING DURING THE COVID PANDEMIC – UPDATED JANUARY 2021

Due to the CCG moving to Business Continuity level 4, to support the Covid-19 vaccination roll out and the resulting reduction in capacity, it was agreed at the CPAG meeting held on the 21st January 2021 that future meetings would be stepped down. Any decisions that do require CPAG approval will be circulated to all members and will have a two day working turnaround for any comments. The TOR have been updated to reflect the reduced function and activity of CPAG

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.

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.

No updates this month.

CLINICAL POLICIES UPDATED: SUMMARY OF POLICIES

Clinical Policy	Key Changes
Breast Implant Removal Policy	<p>Breast implant removal is the surgical procedure to remove the breast implant without replacing or exchanging the implant with a new implant. Removal may give the breast a deflated appearance. The policy has been updated as follows:</p> <ul style="list-style-type: none"> Aligned to NHSE Breast Implant Removal Policy Caveat added to state that the first obligation is to return to the private provider Statement added that Breast Implant Removal is considered to be a low priority <p>http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical-Policies/Clinical_Policies/Cosmetic/cosmetic/breast_prosthesis_removal.pdf</p>
Abdominoplasty Policy	<p>An abdominoplasty (tummy tuck) is cosmetic surgery to improve the appearance of your abdomen (stomach). It may involve removing excess skin and fat and tightening the abdominal muscles. The policy has been updated as follows:</p> <ul style="list-style-type: none"> Criteria changed from 'If this weight range is unachievable, the patient must have lost a minimum of 50% of their excess weight' and aligned to BAPRAS criteria to 'if this weight range is unachievable and the patient must have lost a minimum of 75% of their excess weight. Addition of the statement 'The aim of surgery is to improve patient function relating to a diagnosed pathology which has been clinically defined as resulting from a tissue state which can be addressed through Plastic Surgery procedures'. <p>http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical-Policies/Clinical_Policies/Cosmetic/cosmetic/abdominoplasty_policy.pdf</p>

CPAG WEBSITE DEVELOPMENT & ELECTRONIC REFERRAL SERVICE TEMPLATES

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 month of January

IPG/MTG/DTG/MIB	Description	Outcome
MTG55 This guidance replaces MIB197	Leukomed Sorbact for preventing surgical site infection	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB247	<u>Faecal microbiota transplant for recurrent or refractory Clostridioides difficile infection</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB248	<u>DOAC Dipstick for detecting direct oral anticoagulants</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB249	<u>CytoSorb for reducing risk of bleeding during cardiac surgery</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB250	<u>URO17 for detecting bladder cancer</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB251	<u>moorLDLS-BI for burn depth assessment</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB252	<u>The STAK tool for preventing and treating knee stiffness</u>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB253	<u>PROPEL sinus implants for maintaining sinus patency after surgery</u>	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.