

Clinical Policy Advisory Group (CPAG)

PRIOR APPROVAL UPDATED

Prior Approval (PA) is an assurance mechanism used by Derby and Derbyshire CCG (DDCCG) to ensure the requirements within the Procedures of Limited Clinical Value (PLCV) policy are met. Through CPAG, DDCCG has collaborated with stakeholders to remove any unnecessary administration burden.

As a result the following procedures no longer require prior approval:

- Gastroscopy for Dyspepsia
- Vaginal Pessaries
- Spinal Cord Stimulation for Chronic Neuropathic pain

A useful summary can be found at <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.

Derby and Derbyshire CCG	Key Changes
Arthroscopic Knee washout for patients with Osteoarthritis	Arthroscopic washout of the knee is an operation where an arthroscope (camera) is inserted in to the knee along with fluid. Occasionally loose debris drain out with the fluid or debridement (surgical removal of damaged cartilage) is performed but the procedure does not improve symptoms or function of the knee joint. <ul style="list-style-type: none"> • Policy has been updated to include Meniscal Tears.
In Vitro Fertilisation (IVF)	IVF can be a legitimate medical intervention as part of NHS provision where a couple has a medical reason for being unable to conceive a child. Couples including same sex couples, or single women who, are able to demonstrate this and fulfil the following criteria will be eligible for tertiary infertility treatments under this agreement. <ul style="list-style-type: none"> • Policy has been updated with the removal of social objections to IVF as a route for IUI as part of the assessment and treatment of an underlying fertility problem. • Statement has been added regarding surgical sperm retrieval which is provided by NHSE.
Intrauterine Insemination (IUI)	The IUI Policy is to aid couples who are unable to have regular intercourse demonstrate infertility. <ul style="list-style-type: none"> • Minor policy update – “female same sex couples changed to “people in same sex relationships where one partner has an intact uterus” • “Same sex couples who have been unsuccessful in conceiving after 6 cycles of self-funded IUI within the last 12 months” changed to “same sex couples who have been unsuccessful in conceiving after 6 cycles of self-funded IUI with the last cycle being completed within the past 12 months”.

CLINICAL POLICIES UPDATED SUMMARY OF POLICIES

The following clinical policies were updated:

Clinical Policy	Key Changes
Epidurals for Acute and Severe Sciatica (Lumbar Radiculopathy)	Sciatica is the term used for symptoms of pain, tingling, and numbness that arise from nerve root compression or irritation in the lumbosacral spine. Nerve root compression is most often caused by a herniated intervertebral disc (90% of cases) but can also be caused by spondylolisthesis or spinal stenosis. The symptoms of sciatica extend below the knee from the buttocks, across the back of the thigh, to the outer calf, and can extend further to the foot and toes. <ul style="list-style-type: none"> • This is a new policy based on pre-existing commissioning statement that has been taken from the Injections for Non-specific Low Back Pain without Sciatica including Spinal Fusion for Low Back Pain Policy.
Injections for Non-specific Low Back Pain without sciatica including Spinal Fusion for Low Back Pain Policy	NICE recommends that spinal injections should not be offered for non-specific low back pain. Alternative options like pain management and physiotherapy have been shown to be effective. <ul style="list-style-type: none"> • Policy has been updated to reflect removal of Radiofrequency Denervation and Epidural related information. • Clarification that injections for sacroiliac joint dysfunction are an exception to the policy.

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

GOVERNANCE ARRANGEMENTS, POLICIES AND COMMISSIONING STATEMENTS UPDATED SUMMARY

Policy	Key Changes
Individual Funding Request (IFR) Policy	<p>The CCG is required to have a process for considering funding for individuals who seek NHS commissioned services outside established commissioning policies.</p> <ul style="list-style-type: none"> • Incomplete forms to be returned and new requests need to be submitted when form has been completed • Provider has 10 days to respond to additional information. Timelines for the process will restart when information received. • If additional information is not received within 30 working days reminder sent stating case will be closed and a new IFR will need to be submitted. • All IFR cases where no response has been received in 3 months will automatically be closed.

Clinical Policy Specification 2020-2021

The policy specification is part of the healthcare services contract that commissioners (CCGs) have with provider organisations. This document outlines the role and responsibilities of our providers in ensuring a transparent and collaborative approach to the safe and effective commissioning of procedures, seamless care of patients between NHS organisations and ensuring high quality treatment. The document is updated annually for changes in process and best practice and approved by the Clinical Policy Advisory Group (CPAG), with representation from both commissioner and provider organisations across Derbyshire, to ensure that its requirements are both fair and reasonable. Once agreed by CPAG and ratified by the Clinical and Lay Commissioning Committee the specification can then be included as part of the contract policy requirements for the following contract year.

[A link to the specification can be found here](#)

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
IPG666	Reducing the risk of transmission of Creutzfeldt–Jakob disease (CJD) from surgical instruments used for interventional procedures on high-risk tissues	Informs best practice
IPG667 - Research	Fetoscopic prenatal repair for open neural tube defects in the fetus	Not commissioned
IPG668 – Special arrangement	Open prenatal repair for open neural tube defects in the fetus	Not commissioned
MTG27 (updated from Sept 2015)	Virtual Touch Quantification to diagnose and monitor liver fibrosis in chronic hepatitis B and C	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB199	Optowire for measuring fractional flow reserve	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB200	PIUR tUS for abdominal aortic aneurysm surveillance and endovascular aneurysm repair endoleak detection	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB201	eXroid for internal haemorrhoids	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB202	LQD Spray for treating acute and chronic wounds	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB203	PulmoVista 500 for monitoring ventilation in critical care	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.

There were no new NHS England ITP and ITT outputs considered by the group in February.