

DERBY AND DERBYSHIRE CLINICAL POLICY ADVISORY GROUP POLICY SPECIFICATION 2021-2022 version 1.2

Intentions of the policy specification

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 taken to 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 policies can then be included as part of the contract policy requirements for the following contract year.

- Derby and Derbyshire CCG (DDCCG) have a portfolio of clinical policies for clinical procedures. The most current, ratified policies can be found on the Derbyshire Medicines Management website: <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home>.
- These are the commissioning requirements of DDCCG and should be followed by all providers.

Clinical Policies

DDCCG clinical policies include Procedures of Limited Clinical Value (PLCV) policies, Cosmetic Policies, the National Institute for Health and Care Excellence (NICE) Interventional Procedures Guidance (IPG) Policy and Governance Policies. Procedures and services commissioned by NHS England are not included into this policy specification.

PLCV 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 PLCV policies is to clarify the CCG's intentions to only fund treatment for clinically effective interventions when delivered to the appropriate cohort of patients.
- Only patients meeting the policy's eligibility criteria should be referred for the procedure/service. If a patient has not had a full diagnosis (relating to PLCV policy areas only), the referring GP is able to refer for an opinion by using the PLCV Opinion Proforma.
- Where prior approval is stated to be required, this is implemented through a prior approval system operationalised through the E-referral System (E-rS) in primary care and the web-based Blueteq system within secondary care.
- A monthly challenge process is in place for PLCV which raises queries on any procedures which appear they may have been carried out in contravention of the PLCV policies.

Prior approval Schemes¹

- The NHS National Standard Contract sets out the terms of applicability of any CCG's schemes for prior approval or for the restriction of procedures of limited clinical value.
- A Prior Approval Scheme will typically set out DDCCG's policy for access to a certain service or treatment – a high-cost drug, for instance, or a treatment of perceived low clinical value. By setting out the clinical criteria or access thresholds in advance, the commissioner enables the provider to offer treatment to patients without needing to seek specific approval from the DDCCG on an individual patient basis. In determining potential Prior Approval Schemes, DDCCG will wish to review the evidence base and consider the need for appropriate consultation.
- DDCCG will notify the provider of any Prior Approval Schemes before the start of the contract year. Schemes can be amended and new Schemes introduced in-year with one month's notice and new schemes are then applicable to all patients referred after the effective date. The CCG will endeavour to keep in-year changes to a minimum to reduce the administrative burden on providers in implementing scheme changes.
- All providers are required to register and comply with the data collection required for PLCV procedures (Blueteq)
- Blueteq™ reporting is in place to ensure that the treatment protocol is in line with the published policy statement.
- Additional information can be found here: <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home>
- From one month of the date specified above, DDCCG will only reimburse these treatments for patients that have been confirmed as meeting the eligibility criteria via the formal Prior Approval Scheme i.e. Blueteq Treatment will only be funded where the minimum dataset is fully and accurately populated prior to treatment.

Cosmetic Policies

- The collection of DDCCG cosmetic policies cover both primary and secondary care healthcare professionals when advising and referring patients, and by providers when considering the treatment options for patients.
- These policies have been developed around the evidence-base provided by the British Association of Plastic, Reconstructive and Aesthetic Surgeons (BAPRAS)
- Providers are expected to follow and comply with requests from the Nurse led Cosmetic Assurance Service (CAS).

NICE Interventional Procedure Guidance (IPG), NICE Medical Technologies Guidance, Diagnostics Guidance and MedTech Innovation Bulletin Policy

- DDCCG has no statutory duty to fund the use of the procedures or technologies assessed under the National Institute for Health and Clinical Excellence (NICE).
- DDCCG will not fund a NICE IPG unless the IPG states 'use with standard arrangements for clinical governance, consent and audit' **AND** the requesting provider has submitted a robust, evidenced based business case to the DDCCG and this has been subsequently approved.
- Policy and Commissioning Statements can be found on the DDCCG Clinical Policies website: <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home/clinical-policies/ipg>

Additional Clarification for Standard/Normal Arrangements:

- From, 12th December 2019 any new standard IPGs/normal arrangements will require a business case to be submitted to DDCCG Clinical Policies Advisories Group for agreement – Template is available at - <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home/clinical-policies/ipg>

¹ NHS Standard Contract 2020/21section 13.3, 42.5, 42.8- 42.13

- For the remaining NICE IPG categories; ‘Special arrangements’, ‘Procedures which are recommended only to be carried out in the context of formal research studies approved by a research ethics committee’ and ‘Procedures which should not be used in the NHS’, **DDCCG does not commission these and will not fund them under any circumstances**. If a provider does carries out activity at its own risk, DDCCG requires a description of their internal governance process for approving procedures for assurance.

NICE suggest the following governance arrangements:

NICE IPG category	Suggested Governance Arrangement
Special arrangements	This recommendation means there are uncertainties about the procedure is safe and effective. We also recommend special arrangements if there are known risks of serious harm that need to be carefully explained to the patient before they make a decision. It emphasises the need for informed consent, both from the patient (or carer) and from senior medical staff, such as the clinical governance lead in their trust. Clinicians using the procedure should also collect data, for example by audit or research.
Research only	This means that the procedure should only be carried out in the context of formal research studies, as approved by a research ethics committee. We make this recommendation if the procedure is still considered to be experimental or because there are uncertainties that need to be resolved.
Do not use	We make this recommendation if the evidence suggests that the procedure doesn’t work well, or if there are unacceptable safety risks

MedTech Funding Mandate policy 2021/22

The technologies that will be supported by the policy in 2021/22 are:

1. placental growth factor based testing – a blood test to rule out pre-eclampsia in pregnant women
2. SecurAcath – for securing percutaneous catheters
3. HeartFlow – creates a 3D model of a patient’s coronary arteries and assesses the extent and location of blockages
4. gammaCore – a handheld device which alleviates the symptoms of severe cluster headaches

Governance Policies

- The DDCCG Consultant to Consultant Referral Policy is in place to outline the situations when consultant to consultant referral without patient choice may be appropriate and when patients should be referred back to their own GP.
- Derby and Derbyshire Healthcare Professionals should adhere to the procedures that are not commissioned or commissioned with restrictions by DDCCG. DDCCG requests Healthcare Professionals working within the CCG’s boundaries to respect the intentions of the commissioner as expressed in the policies described above.
- The DDCCG Defining the Boundaries between NHS and Private Healthcare Policy is in place to outline criteria for NHS continuation of funding for treatment that has been commenced privately, The requirements set out in this policy specification apply to private providers of healthcare where patients treated privately transfer into the NHS. Patients moving into the NHS setting will be treated the same way as any other NHS patient

Clinical Policy Review Process

- DDCCG clinical policies are reviewed every 3 years or earlier where there is new significant evidence that warrants the need for a clinical review or if the procedure/service commissioned is unsafe.
- The clinical review of a policy is a two-step process, which involves the review of literature and the engagement of stakeholders. Stakeholder feedback and the literature review are then presented to the clinically-led CPAG.
- CPAG is a strategic, local decision-making committee, with responsibility for promoting appropriate, safe, rational and cost-effective clinical policies to be used across Derby & Derbyshire. CPAG is accountable to the Clinical and Lay Commissioning Committee (CLCC) of DDCCG with representation from governing body members. CPAG meetings occur monthly and membership is listed within CPAG's Terms of Reference, which can be found on the DDCCG Clinical Policies Website:
http://www.derbyshiremedicinesmanagement.nhs.uk/assets/clinical-policies/clinical_policies_advisory_group/cpag_tor/CPAG_Terms_of_Reference.pdf

Stakeholder Engagement

- Clinicians are welcomed to be part of the clinical policy review process representing provider Medical Directors and providing individual expertise in their field.

Individual Funding Request (IFR)

- IFR is a process that is in place for considering funding for individuals who seek NHS commissioned services outside of the established commissioning policies
- The two main types of funding requests are for treatments for medical conditions where the CCG has no established commissioning policy or for medical conditions where the CCG does have a commissioning policy for but the requested treatment is not in the CCG policy or does not meet the criteria set out in the policy
- NHS clinicians should complete an IFR form if they consider the patient concerned to be significantly different clinically to the group of patients with the condition in question
AND
They are likely to gain significantly more clinical benefit than others in the group of patients with the condition in question
- The complete IFR Policy and ToR can be on the DDCCG Clinical Policies website: <http://www.derbyshiremedicinesmanagement.nhs.uk/clinical-policies-home/goverance-policies>.