

## CLINICAL POLICY ADVISORY GROUP (CPAG)

### <u>Clinical Policies Appeal Process & Statement on the</u> <u>requirements to trigger a policy update outside of the</u> <u>planned review period</u>

The Clinical Policy Advisory Group (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.

The Committee is accountable to the Strategic Commissioning & Integration Committee of Derby and Derbyshire ICB ("the ICB") with representation from governing body members. There is an expectation that recommendations made by CPAG will usually be implemented.

An appeal of a decision by CPAG can be made at the request of a NHS clinician if either:

1. Due process was not followed and/or

2. Not all relevant significant evidence was considered at the time of the decision.

All appeals should be made to the CPAG Chair in the first instance. Appeals should be sent to <u>ddicb.ifrfundingrequest@nhs.net</u> and marked for the attention of the Chair of CPAG.

The Chair of CPAG and a clinical member of the group will decide if:

- The appeal is inappropriate and respond back to the clinician with an explanation requiring no further action,
- Significant evidence was not considered at the time of review and requires a full review at the next appropriate CPAG meeting.

If the clinician, supported by the Provider's Medical Director, remains dissatisfied with the outcome of an appeal then the matter will be sent onto the Derby and Derbyshire ICB's Chief Medical Officer. The Chief Medical Officer and CPAG Chair will undertake an assessment of the appeal. The Chief Medical Officer will then formally respond to the requesting clinician and the Provider's Medical Director.

A successful appeal will result in a resubmission to reassess CPAGs decision at the next opportune meeting.

Substantial new evidence defined but not exclusive to Cochrane reviews or National guidance as examples. The emergence of new evidence since the review does not constitute an appeal. This would be defined as a resubmission/update and will inform the work plan of CPAG.

# Statement on the requirements to trigger a policy update outside of the planned review period

Derby and Derbyshire ICB has deemed that policy updates outside of planned review period should not routinely be required.

#### Exception

Substantial new evidence defined but not exclusive to Cochrane reviews or National guidance as examples

The ICB's intentions will be reviewed periodically. This statement is to ensure appropriate resourcing against other priorities commissioned by the ICB.

#### **Evidence-Based Practice: Submission Guidance**

- Prioritise high-level secondary sources—such as systematic reviews and clinical guidelines—at the top of the evidence hierarchy
- Assess the reliability, relevance, and applicability of research through structured critical appraisal. This includes analysing the study's methodology, design, and outcomes to determine its suitability for your clinical setting.
- Select evidence that matches the nature of your clinical query. For example, use randomised controlled trials (RCTs) for intervention-based questions and cohort studies for prognosis
- When reviewing evidence, focus on:
  - Validity Is the study methodologically rigorous and free from bias?
  - Results Are the findings both statistically significant and clinically meaningful?
  - Clinical Relevance Are the outcomes applicable to your patient population and practice context?

This statement and guidance should be read in conjunction with the following:

- The ICS main functions Prioritisation
- <u>CPAG Business Case Effectiveness, Cost effectiveness, Affordability</u>
- <u>CPAG Appeal Process</u>

#### Suggested Resources:

- <u>NHS Knowledge and Library Hub Knowledge and Library Services</u>
- Trip Medical Database (tripdatabase.com)
- <u>CASP CHECKLISTS CASP Critical Appraisal Skills Programme (casp-uk.net)</u>