

## Clinical Policy Advisory Group (CPAG)

### CLINICAL & GOVERNANCE 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 Integrated Care Board (ICB). The ICB will only fund treatment for clinically effective interventions that are then delivered to the appropriate cohort of patients.

Clinical Policy	Key Changes
<a href="#">Vasectomy Policy</a> (Partial review and update following a stakeholder query)	<p>Vasectomy Services are routinely commissioned in Primary Care. The Vasectomy Policy relates to those procedures that take place within the Acute In-Patient setting, where the criteria within the policy should be met.</p> <p>There have been no major changes to the policy, however at the request of stakeholders, the following minor amendment has been made to the criteria:</p> <ul style="list-style-type: none"> <li>Anticoagulant Therapy                             <ul style="list-style-type: none"> <li>Patients whose anticoagulation cannot be safely stopped to discuss with patients</li> </ul> </li> </ul> <p>A vasectomy is a surgical procedure performed on males in which the vas deferens (tubes that carry sperm from the testicles to the seminal vesicles) are cut, tied, cauterized (burned or seared) or otherwise interrupted. The semen no longer contains sperm after the tubes are cut, so conception cannot occur. The testicles continue to produce sperm, but they die and are absorbed by the body.</p>
<a href="#">Disc Replacement Position Statement</a> (Full routine review)	<p>NHS Derby and Derbyshire ICB has deemed that disc replacement should not routinely be commissioned for people with low back pain.</p> <p>There has been no new significant robust evidence or new national guidance that has been published since the position statement was last reviewed in January 2020 that requires a change reflecting in the position statement's commissioning stance.</p>
<a href="#">Low Back Pain Imaging Position Statement</a> (Full routine review)	<p>NHS Derby and Derbyshire ICB has deemed that imaging should not routinely be commissioned for people with low back pain with or without sciatica unless the result is likely to change management.</p> <p>The following minor amendment has been made to the position statement:</p> <ul style="list-style-type: none"> <li>Addition of rationale behind the ICB's commission stance</li> </ul> <p>There has been no new significant robust evidence or new national guidance that has been published since the position statement was last reviewed in January 2020 that requires a change reflecting in the position statement's commissioning stance.</p>
<a href="#">Spinal Cord Stimulation for Chronic Pain of Ischaemic Origin</a> (Full routine review)	<p>CPAG agreed to remove the position statement acknowledging that the ICB's position statement is based on the <a href="#">NICE spinal cord stimulation for chronic pain of neuropathic or ischaemic origin technology appraisal guidance [TA159] (published 22 October 2008)</a>. NICE TA guidance are mandatory and as a principle the ICB does not produce separate policies or position statements.</p> <p>The group agreed to update the <a href="#">NHS Derby and Derbyshire ICB Clinical Policies website</a> with a statement explaining the ICB's alignment to NICE TAs.</p>
Governance Policy	Key Changes
<a href="#">Ethical Framework for Decision Making</a>	<p>CPAG approved a draft Ethical Decision-Making Framework and will ensure the Individual Funding Request Decision Making Framework is aligned once adopted by the ICB. The framework has been developed to support corporate committees of the ICB in their decision-making processes. The Framework contains the details of the following principles for decision making: Consistency, Evidence of clinical and cost effectiveness, Equity, Health Care need and capacity to benefit, Cost of treatment and opportunity costs, Needs of the community, Policy driver/Strategic Fit &amp; Exceptional Need.</p> <p>As this is a corporate document it will be agreed and ratified in line with the ICB Corporate Policy Management Framework.</p>

### MISCELLANEOUS INFORMATION

Statement	Summary
<a href="#">Individual Funding Requests (IFR) Screening Cases</a>	<p>CPAG reviewed the IFR Screening cases for August 2022 and are assured that no areas for service developments have been identified.</p>

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

The DDICB 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 August 2022:

<b>IPG/MTG/DTG/MIB</b>	<b>Description</b>	<b>Outcome</b>
IPG732	<a href="#">Bioresorbable stent implantation to treat coronary artery disease</a>	Further research – DDICB do not commission
IPG733	<a href="#">Aortic remodelling hybrid stent insertion during surgical repair of an acute type A aortic dissection</a>	Special arrangements – DDICB do not commission
IPG734	<a href="#">Focal resurfacing implants to treat articular cartilage damage in the knee</a>	Special arrangements – DDICB do not commission
IPG735	<a href="#">Transcutaneous electrical neuromuscular stimulation for urinary incontinence</a>	Special arrangements – DDICB do not commission
IPG736	<a href="#">Superficial venous arterialisation for chronic limb threatening ischaemia</a>	Special arrangements – DDICB do not commission In people with no other option for revascularisation
MTG71	<a href="#">Faecal microbiota transplant for recurrent Clostridioides difficile infection</a>  NICE state this guidance is applicable to secondary care – acute	Standard arrangements – not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MTG34 (update)	<a href="#">SecurA cath for securing percutaneous catheters</a>  <b>August 2022:</b> Updated guidance to reflect 2021 costs and revise cost-saving estimates. These are marked <b>[2022]</b> . Details of the changes are explained in the <a href="#">review decision from July 2022</a> .  <b>This technology is supported by MedTech Funding Mandate Policy and is commissioned as per the requirements of the mandate.</b>	Standard arrangements – not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MTG39 (update)	<a href="#">iFuse for treating chronic sacroiliac joint pain</a>  <b>August 2022:</b> Amended guidance to include iFuse-3D, a second-generation 3D-printed implant and updated costs. These updates are marked <b>[2022]</b> . Details of the changes are explained in the <a href="#">review decision</a> .	Standard arrangements – not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB303	<a href="#">Stockholm3 for prostate cancer screening</a>	Not commissioned without the provider submitting a robust, evidenced based business case to the commissioner and subsequent approval
MIB304	<a href="#">Contrast-enhanced spectral mammography for breast cancer</a>	
MIB305	<a href="#">Differential target multiplexed spinal cord stimulation for chronic lower back and leg pain</a>	

Our ICB continues to monitor and implement NICE outputs e.g. IPGs with our main providers.