

## CLINICAL POLICY ADVISORY GROUP (CPAG) DECISION AND JUSTIFICATION LOG

Meeting Date: Thursday 2<sup>nd</sup> January 2025

Updated by: Clinical Policies & EBM Support Officer

### Ethical Framework

Chair to ensure that all decisions made are in line with the [ICBs Ethical Framework](#), following examples of evidence of clinical and cost effectiveness, health care need and capacity to benefit, policy driver/strategic fit.

### Declarations of Interest

Committee members are reminded of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of the ICB.

Declarations declared by members of the Clinical Policy Advisory Group (CPAG) are listed in the Register of Interests and included with the meeting papers. The ICB's Registers of Interests are also available via the ICB's Corporate Governance Manager.

MA\* - Matters Arising

Agenda Item number	Agenda Item Title	Owner	Summary of Discussion	Decision & Justification	Action(s)
CPAG01/25 0	Confirmation of Quoracy	JB	CPAG was quorate under the Terms of Reference  DDICB Associate Director of Finance is stepping down as CPAG Finance Representative and the Assistant Director of Finance will be taking over this role.		
CPAG01/25 1a	Declarations of Interest	JB	No Declarations of Interest were made		
CPAG01/25 3a	CPAG Decision & Justification Log December 2024	JB	No further comments from CPAG	CPAG approved the Decision & Justification Log	<ul style="list-style-type: none"> <li>Decision &amp; Justification Log to be uploaded to DDICB Clinical Policies website</li> </ul>
CPAG01/25 4a	CPAG Bulletin December 2024	TG	Suggestion to add a glossary to future CPAG Bulletins to support the use of acronyms.	CPAG approved & ratified December 2024 CPAG Bulletin.	<ul style="list-style-type: none"> <li>Bulletin to be circulated to stakeholders via external communications</li> </ul>
CPAG01/25 5a	CPAG Internal Action Log & Workplan	TG	No further comments from CPAG	CPAG noted the Internal Action Log and the progress to date and items pending review on the workplan.	<ul style="list-style-type: none"> <li>Update CPAG Action Log</li> </ul>

CPAG01/25 6a	MA* – Clinical Policy Engagement Process	TG	The Clinical Policy Engagement and Escalation Process has been agreed with CPAG Provider Trust Representatives for both University Hospitals of Derby and Burton NHS Foundation Trust (UHDBFT) and Chesterfield Royal Hospital NHS Foundation Trust (CRHFT).		<ul style="list-style-type: none"> <li>• Outputs to stakeholders via external communications</li> </ul>
CPAG01/25 6b	MA* – Addition of Personalised Care into Clinical Policies	TG	<p>In line with the Personalisation and Quality Conversations programme CPAG agreed to the integration of personalised care approaches into clinical policies. The NHS Long Term Plan says personalised care will become business as usual across the health and care system.</p> <p>CPAG noted that the DDICB policies will be updated in line with the policy review workplan. The 'Patient Information' section of the Clinical Policies website has been updated to include 'Personalised Care'. Information in regard to the Personalisation and Quality Conversations programme has been shared with colleagues within the wider directorate.</p>	CPAG noted and supported the addition of personalised approaches to DDICB clinical policies.	<ul style="list-style-type: none"> <li>• No further action</li> </ul>
CPAG01/25 6c	MA* – NICE Guidance DG60 - Digital technologies for assessing ADHD	TG/HM	<p>Following the NICE Guidance for DG60, a query was raised in regard to the whether the service is commissioned by DDICB and what the process is with the 'Right to Choose' agenda and referrals.</p> <p>DDICB confirmed the ICB does not commission any providers using their contract to secure 'Right to Choose' referrals, nationally the service provided will be aligned to the lead ICB commissioners contract and service specification.</p>	CPAG noted this information.	<ul style="list-style-type: none"> <li>• No further action</li> </ul>
CPAG01/25 6d	MA* – Outputs from the CPAG Short life Working Group	TG	<p>The background to the Short Life Working Group is referenced in the 'Clinical Policies Assurance' item in September 2024 &amp; November 2024 CPAG Decision &amp; Justification Log.</p> <p><a href="#">CPAG Decision &amp; Justification Log September 2024.pdf (derbyshiremedicinesmanagement.nhs.uk)</a></p> <p><a href="#">CPAG Decision &amp; Justification Log November 2024.pdf</a></p>	CPAG acknowledged the outputs of the Short Life Working Group and the next steps.	<ul style="list-style-type: none"> <li>• Commence stakeholder engagement exercise, activity data and due diligence</li> <li>• Update to be provided to March 2025 CPAG meeting</li> </ul>

			<p><a href="http://derbyshiremedicinesmanagement.nhs.uk">derbyshiremedicinesmanagement.nhs.uk</a></p> <p>A detailed Decision and Justification Log from the Short Life Working Group (SLWG) has been provided to CPAG members.</p> <p>The SLWG made a proposal in the following areas:</p> <ul style="list-style-type: none"> <li>• Commissioned with Restrictions Cosmetic Procedures –</li> <li>• Not Routinely Commissioned Cosmetic Procedures</li> <li>• Three further not commissioned position statements</li> </ul>		
CPAG01/25 6e	MA* – Responses to queries raised by Short Life Working Group	HM	<p>Conservative management of Pelvic Organ Prolapse: Clinicians confirmed they follow NG123 with regards to conservative management.</p> <p>Access to podiatry services for ingrowing toenails, confirmed available through electronic Referral System.</p> <p>Bespoke prosthesis confirmed NHSE is the commissioner.</p> <p>Rationale for weight loss criteria for abdominoplasty – confirmed originally 50% changed in Jan 2021 following query raised by Plastic Surgeon. Criteria in line with BAPRAS 2017 commissioning Guide 'Massive weight loss Body Contouring'</p>	CPAG noted this information.	<ul style="list-style-type: none"> <li>• No further action</li> </ul>
CPAG01/25 7a	EBI Updates (September 2024)	JB/HM	<p>In September 2024, the Academy of Medical Royal Colleges reviewed the Evidence Based Interventions (EBI) Guidance, updating nine areas covered by DDICB clinical policies.</p> <p>CPAG agreed updates to the policies below. A second section of proposals will be presented at the CPAG meeting in March 2025.</p> <p>Section 1 - Policies for approval / ratification:</p> <ul style="list-style-type: none"> <li>• Injections for Isolated Lower Back Pain without Sciatica</li> </ul>	<ul style="list-style-type: none"> <li>• CPAG agreed to pause adoption of updated guidance, which is aligned to EBI, pending further stakeholder engagement with CRHFT and possibly</li> </ul>	<ul style="list-style-type: none"> <li>• Escalate stakeholder engagement to provider representatives at CRHFT</li> <li>• Consider stakeholder engagement with STHFT</li> </ul>

			<ul style="list-style-type: none"> <li>• Removal of Benign Skin Lesions</li> <li>• Grommets for Glue Ear in Children/Removal of Adenoids for Treatment of Glue Ear</li> <li>• Tonsillectomy for Recurrent Tonsillitis</li> </ul>	<p>Sheffield Teaching Hospital NHS Foundation Trust (STHFT)</p> <ul style="list-style-type: none"> <li>• Following adoption of the above, DDICB policy for Lumbar Radiofrequency Facet Joint Denervation to be retired as this is covered under updated EBI policy.</li> <li>• CPAG agreed to adopt EBI updated guidance with the integration of local criteria for lipoma and Epidermoid cyst.</li> <li>• DDICB policy for Surgical Removal of Lipoma/Lipomata to be retired as this is covered under EBI policy.</li> <li>• CPAG agreed in principle pending any further stakeholder comments, to retain and enhance DDICB clinical policy for Grommets in Otitis Media with Effusion with additional EBI details.</li> <li>• CPAG agreed to adopt the updated guidance.</li> </ul>	<ul style="list-style-type: none"> <li>• Outputs to stakeholders via external communications</li> <li>• Escalate stakeholder engagement to provider representatives at CRHFT</li> <li>• Escalate stakeholder engagement to provider representatives at CRHFT</li> <li>• Outputs to stakeholders via external communications</li> </ul>
CPAG01/25 7b	EBI Updates (September 2024)	JB/HM	<p>Section 2a - Policies for CPAG to agree recommendations prior to stakeholder engagement:</p> <ul style="list-style-type: none"> <li>• Varicose Vein Interventions</li> </ul>	<p>CPAG agreed to retain DDICB policy including reference to symptomatic veins.</p> <p>Recommendation to update policy to include:</p>	<ul style="list-style-type: none"> <li>• Update policy with CPAG recommendations</li> <li>• Following updated policy, commence stakeholder engagement exercise</li> </ul>

			<ul style="list-style-type: none"> <li>• Surgical Haemorrhoidectomy</li> </ul>	<ul style="list-style-type: none"> <li>• Rationale as to why symptomatic veins are not commissioned - national variation between DDICB policy and EBI guidance</li> <li>• Symptomatic – include treatment options</li> <li>• Clarify urgent/routine referral time frames</li> </ul> <p>CPAG agreed to maintain current DDICB policy as more descriptive.</p> <ul style="list-style-type: none"> <li>• Seek stakeholder clarification from surgeons in regard to surgical options.</li> </ul>	<ul style="list-style-type: none"> <li>• Table at March 2025 CPAG meeting</li> <li>• Commence stakeholder engagement exercise</li> </ul>
CPAG01/25 7c	EBI Updates (September 2024)	JB/HM	<p>Section 2b - Polices for CPAG to agree post stakeholder engagement:</p> <ul style="list-style-type: none"> <li>• Spinal Fusion for Mechanical Axial Low Back Pain</li> <li>• Dupuytren's Contracture Release in Adults</li> </ul>	CPAG noted the commenced stakeholder engagement and collating of feedback.	• Table at March 2025 CPAG meeting
CPAG01/25 7d	Cataract Surgery	TG/HM	<p>CPAG previously deferred policy approval and ratification at the September 2024 CPAG meeting pending review of the current stakeholder engagement process in coordination with the Clinical and Professional Leadership Group.</p> <p>Additionally, a variation in policy criteria identified during the policy assurance process conducted with Nottingham ICB (Deep Dive) presented at the November 2024 CPAG meeting. Further analysis determined that this variation stems from historical criteria, whereas the Derbyshire policy was updated in 2018 to reflect changes in driving requirements agreed upon with clinicians.</p> <p>Further background information is referenced in the September 2024 &amp; November 2024 CPAG Decision &amp; Justification Log.</p> <p><a href="#">CPAG Decision &amp; Justification Log September 2024.pdf (derbyshiremedicinesmanagement.nhs.uk)</a></p>	CPAG requested further stakeholder engagement in regard to bilateral cataracts.	• Escalate stakeholder engagement to provider representatives

			<p><a href="#">CPAG Decision &amp; Justification Log November 2024.pdf (derbyshiremedicinesmanagement.nhs.uk)</a></p> <p>CPAG members discussed the following:</p> <ul style="list-style-type: none"> <li>• DDICB policy criteria for bilateral cataracts, CPAG asked that this be considered further via stakeholder engagement.</li> </ul>		
CPAG01/25 8a	Evidence Based Interventions Performance Monitoring	TG	<p>DDICB Prior Approval process was decommissioned in March 2024, as part of the oversight CPAG agreed to the review of the impact in 6 months' time.</p> <p>A recent policy assurance review recommended strengthening the policy assurance process and that this would be co-ordinated by the Assistant Director of Business Intelligence and led by Strategy and planning.</p> <p>A cross directorate meeting between the Medical Directorate and the Strategy and Delivery directorate clarified the role of the commissioning team in challenging providers on performance. This would be co-ordinated by the Director or Place and Partnerships.</p> <p>Locally agreed data sets based on DDICB policies (national and local) are expected to be received by CPAG before the end of the finance year.</p> <p>Work is ongoing on the production of National EBI benchmarking data</p> <p>Strategy and Performance to undertake ongoing and periodic performance and management.</p>	<p>CPAG agreed on the following recommendations:</p> <ul style="list-style-type: none"> <li>• Reconcile previous local reporting with national data sets and establish additional value</li> <li>• Review National benchmarking when available</li> <li>• Add the above to CPAG action plan</li> </ul> <p>CPAG acknowledged the role of Strategy and Commissioning in policy assurance.</p>	<ul style="list-style-type: none"> <li>• No further action</li> </ul>
CPAG01/25 8b	Clinical Policies Assurance Report	TG	<p>The assurance of clinical policies is critical to delivering high-quality, evidence-based healthcare.</p> <p>A recent exercise compared DDICB clinical policies with those of five other ICBs to identify variation and potential opportunities for improvement. The analysis showed that DDICB policies are generally aligned with</p>	<p>CPAG agreed the following key components as part of a robust and transparent governance process within DDICB for maintaining Clinical Policy content:</p>	<ul style="list-style-type: none"> <li>• Outputs to stakeholders via external communications</li> </ul>

			<p>best practices while also identifying opportunities to refine certain policies to align more closely with peer organisations.</p> <p>CPAG also noted plans to strengthen policy compliance assurance through the support of healthcare intelligence and the Commissioning and Strategy team.</p>	<ul style="list-style-type: none"> <li>• An established governance process for policy approval.</li> <li>• Appraisal of policies against National Evidence-Based Interventions.</li> <li>• Mechanisms to ensure policy compliance.</li> <li>• Ongoing monitoring and data analysis.</li> </ul>	
CPAG01/25 9a	Individual Funding Request (IFR) – Screening/Panel Cases – November 2024	HM	CPAG reviewed the IFR Screening/Panel cases for November 2024 and were assured that no areas for service development have been identified.	CPAG noted the IFR cases for November 2024.	<ul style="list-style-type: none"> <li>• Outputs to stakeholders via external communications</li> </ul>
CPAG01/25 10a	NICE IPG, DTG, MTG & HTE Updates	TG/HM	It was confirmed that no business cases have been received for any of the NICE outputs.	CPAG noted IPGs, DTGs, MTGs and HTEs for November 2024.	<ul style="list-style-type: none"> <li>• Outputs to stakeholders via external communications</li> </ul>
CPAG01/25 13	Key messages received from / going to PHSCC	HM	No further comments from CPAG.	CPAG noted the papers to be tabled at PHSCC in February 2025.	<ul style="list-style-type: none"> <li>• No further action</li> </ul>

**Date of Next meeting: Thursday 6<sup>th</sup> February 2025 papers to be agreed by email.**  
**Agenda items for February meeting to be received by 12 noon on 20<sup>th</sup> January 2025 please.**