

# Referral Guidelines and Individual funding requests

**Dr David Geddes**  
Medical Director  
NHS North Yorkshire and York

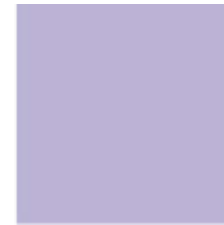




# THE NHS CONSTITUTION

**You have the right** to drugs and treatments that have been recommended by NICE for use in the NHS, if your doctor says they are clinically appropriate for you.

**You have the right** to expect local decisions on funding of other drugs and treatments to be made rationally following a proper consideration of the evidence. If the local NHS decides not to fund a drug or treatment you and your doctor feel would be right for you, they will explain that decision to you.



# 2009 'Directions to PCTs and NHS trusts

## ***General policies***

Each Primary Care Trust must have in place arrangements for making decisions and adopting policies on whether particular health care interventions are to be made available for patients

Each Primary Care Trust must on request provide a written statement of the reasons for its general policy on whether a particular health care intervention is to be made available for the benefit of patients

## ***Individual Funding Requests***

Each Primary Care Trust must have arrangements for the determination of requests for the funding of a health care intervention for an individual, where the Primary Care Trust's general policy is not to fund that intervention



# Informing the commissioning policy

- National e.g.
  - NICE
  - National Commissioning Group
- Local e.g.
  - Drug & Therapeutics Committee, Area Prescribing Committee, Medicines and Technologies Board
- Regional e.g.
  - Clinical networks
  - Specialised Commissioning Group



# Individual funding requests (IFR)

- An IFR is a request to a PCT to fund healthcare for an individual who falls outside the range of services and treatments that the PCT has agreed to commission.
- IFRs are not:
  - decisions that are related to care packages for patients with complex healthcare needs
  - prior approvals, which are used to manage contracts with providers.



# IFRs generally occur in one of three circumstances:

- the patient has a very rare condition and is making the request for funding of the recommended care pathway
- the patient has a more common condition but claims that the usual care pathway does not work for him or her (exceptionality)
- the patient wants to take advantage of a medical treatment that is novel, developing or unproven, and which is not part of the PCT's commissioned treatment plans.



# Where a decision to refuse a request for the funding has been taken...

“the Primary Care Trust must provide that individual with a written statement of its reasons for that decision.”

Where necessary, NYYPCT will also offer an opportunity to speak with clinician



# What is 'exceptional'?

To be an exception, there must be unusual or unique clinical factors about the patient that suggest that he or she is:

- Significantly different from the wider group of patients with the same condition;
- Likely to gain significantly more benefit from the intervention than might be expected from the average patient with the same condition.



# Can non-clinical factors be reasons for exceptionality?

- Same ethical framework and guidelines for decision-making that underpin the general policies for health care interventions.
- Where social, demographic or employment circumstances are not considered relevant to population-based decisions, these factors will not be considered for IFRs.
- Patients established on treatment as part of a clinical trial or following payment for additional private care will be considered to neither advantage nor disadvantage the patient.



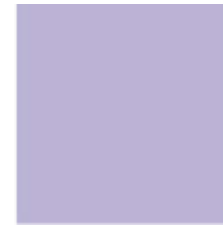
# Individual funding requests panel

- members have specific training in the assessment of individual funding requests
- In making its decision, the Panel will, as a minimum, consider the following
  - Patient safety
  - Clinical and cost-effectiveness and strength of evidence
  - Place in therapy relative to available health care interventions
  - Affordability
  - National guidance and priorities
  - Local priorities

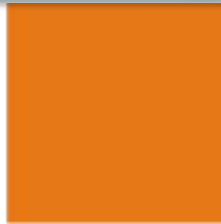
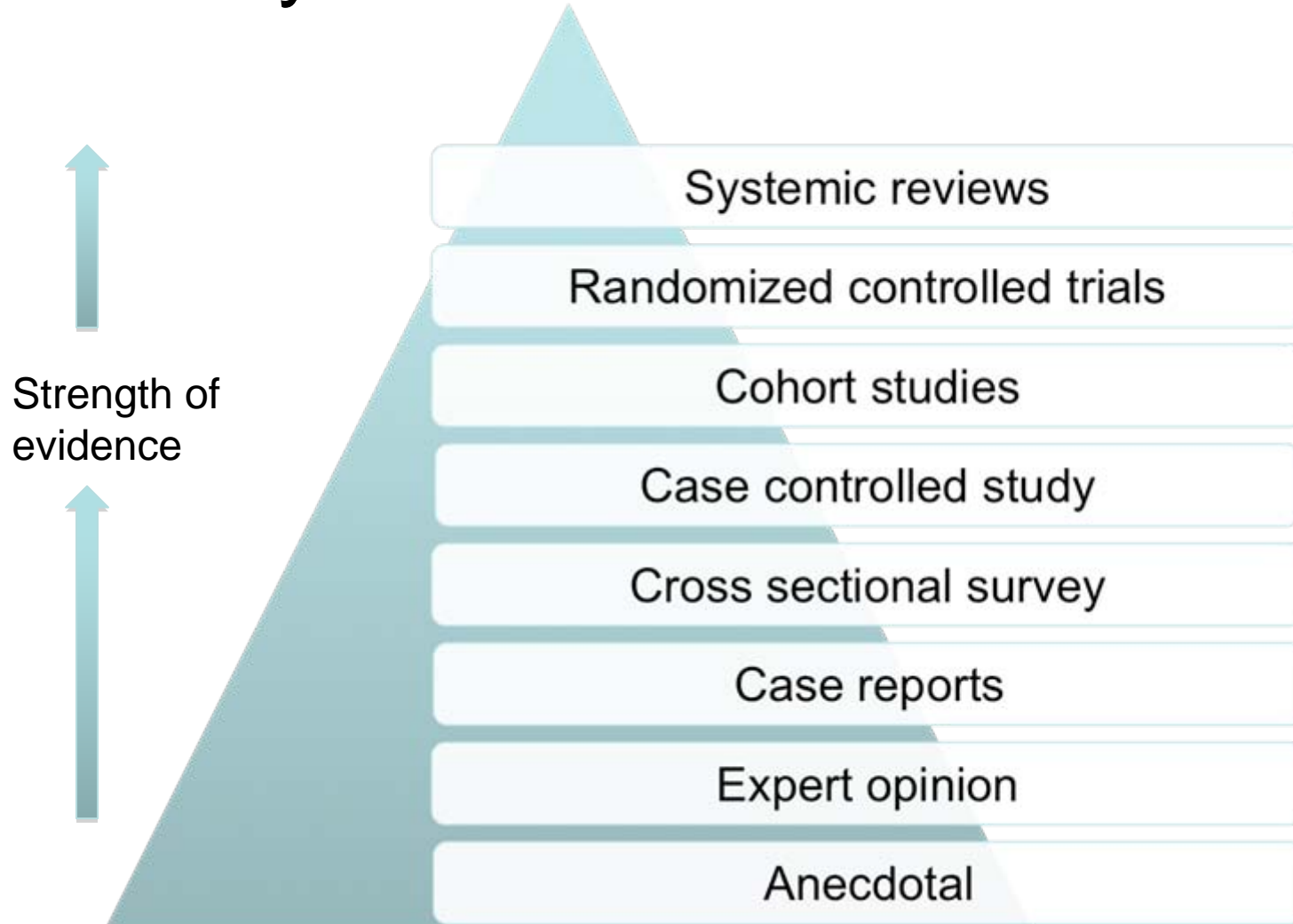


# Individual funding requests panel

- Associate director of commissioning (chair)
- Two medics – either public health consultant or medical director
- Specialist pharmacy advisor
- Mental health commissioning advisor
- Legal advisor
- Senior commissioning manager



# Hierarchy of evidence



# Balancing the needs of the individual with the needs of the community



# IFR panel

- Does the patient meet PCT referral criteria?
- Nature of proposed treatment/intervention or investigation and its clinical effectiveness
- Analysis of alternative treatment and its cost effectiveness/value for money
- Long term benefits/cost analysis
- Patient exceptional circumstances
- Number of people in North Yorkshire & York that may be affected by the decision
- Precedent setting



# Individual funding request (IFR) panel

- Statistics for 09/10
  - Total no of cases to *IFR Panel*:
  - Approved: ; Declined; withdrawn / pending
  - Total no of cases to '*Exceptions panel*'
  - Approved; Declined; withdrawn / pending



# Appeals process

- Appeals panel
- Membership different from the original IFR panel
- Provides procedural review
  - Was due process followed? Did the PCT follow its own policies and procedures?
  - Did the IFR panel take in to account all of the relevant information available at the time?
  - Was the decision reasonable and in line with the evidence
- Decision of the Panel communicated to the PCT, the patient, and their clinician
- Total no. appeals 09/10 – 7, (2 appeals successful)

