

Title of Paper: Treatment Advice and NICE Technology Appraisals - Recommendations to the CCG

Governing Body Meeting Date: 24/01/2019 **Item Number:** 18

Report Sponsor: Dr Charles Parker	Report Author: Ken Latta
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1. Conflicts of Interest

A conflict of interest occurs where an individual's ability to exercise judgement or act in one role is or could be impaired or otherwise influenced by his or her involvement in another role or relationship. The individual does not need to exploit his or her position or obtain an actual benefit, financial or otherwise. A potential for competing interests and/or a perception of impaired judgement or undue influence can also be a conflict of interest.

Are there any potential conflicts of interest relating to this paper, which may arise within the committee and need to be addressed by the Chair of the Committee prior to this item being tabled?

Yes No

If yes, please detail here the action taken by the Interim Chief Finance Officer to prevent conflicts of interest within the decision making process

2. This paper is for:

Approval	Decision	Assurance – For Discussion	Assurance – For Information Only
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3.

CCG Strategic Aims Objectives supported by this paper	X
1. We will involve people in their care and we will encourage self-care	<input checked="" type="checkbox"/>
2. We will buy quality services.	<input checked="" type="checkbox"/>
3. We will change services for the better and in doing so we will provide care as close to home as possible that is easily accessible.	<input checked="" type="checkbox"/>
4. We will use the money we have in the best possible way.	<input checked="" type="checkbox"/>

4.

Transformational Programmes	X
CS000 - Community Care	<input type="checkbox"/>
FH000 - Forces Family Health	<input type="checkbox"/>
PC000 - Primary Care	<input checked="" type="checkbox"/>
PL000 - Planned Care	<input checked="" type="checkbox"/>
UC000 - Urgent and Emergency Care	<input type="checkbox"/>

5.

Other Programmes	X
Maternity & Paediatrics	<input type="checkbox"/>
Mental Health and Learning Disabilities	<input type="checkbox"/>

6.

Enabling Programmes	X
WSC000 - Whole system commissioning and new payments models	<input type="checkbox"/>
CE000 - Communications and Engagement	<input type="checkbox"/>
TE000 - Better use of Technology and IT	<input checked="" type="checkbox"/>
ES000 - Estates	<input type="checkbox"/>
WF000 - Workforce	<input type="checkbox"/>
MM000 - Medicines Management	<input checked="" type="checkbox"/>
QU000 - Quality	<input checked="" type="checkbox"/>
Promote good governance and proper stewardship of public resources in pursuance of CCG goals and in meeting its statutory duties	<input checked="" type="checkbox"/>

7.

	CCG Values Underpinned in this paper	X
1	Integrity	<input checked="" type="checkbox"/>
2	Transparency	<input checked="" type="checkbox"/>
3	Collaboration	<input checked="" type="checkbox"/>
4	Focus	<input checked="" type="checkbox"/>
5	Action	<input checked="" type="checkbox"/>
6	Energy	<input checked="" type="checkbox"/>
7	Courage	<input checked="" type="checkbox"/>

8. Does this paper provide evidence of assurance against the Governing Body Assurance Framework? Click [here](#) for link

	X
YES	<input checked="" type="checkbox"/>
NO	<input type="checkbox"/>

If you answered yes above, please indicate which principle risk and outline

Principle Risk No	Principle Risk Outline
Principal Risk No: 2.2	We will buy quality services (including drug treatments). The CCG cannot afford to buy the services it needs. Quality is compromised. Approving the use of safe and cost effective drugs, with demonstrated evidence based research, will enhance the health for our population.
Principal Risk No: 4.1	We will use the money we have in the best possible way. The CCG is unable to manage activity within resources. Including meeting QIPP targets and unplanned care demands. Using evidence based drugs (and challenging the use of those without) will improve the efficiency of use of NHS resources.

9. Does this paper mitigate risk included in the CCGs Risk Registers? If Yes, please outline. Click [here](#) for link

	Ref: Risk No	Outline
Yes	HRW135	Quality, safe and cost-effective drug treatments are not available to our population through primary or secondary care providers of NHS services.
No		

10. Executive Summary

The Medicine Management Team (MMT) reviews evidence for new treatments that have not to date been routinely commissioned by the CCG. This includes existing treatments where evidence has recently emerged to merit reconsideration of its place in therapy and new treatments. The process includes consultation with neighbouring NHS commissioners, specialists and associated providers from across the region. This aids the CCG Prescribing Lead and their team to make a more informed recommendation for the CCG's commissioning position that is fitting with the needs of the broader local population.

The CCG needs to make commissioning decisions on healthcare interventions, including drugs, based on clinical outcomes, value for money and affordability. This process also assists the CCG in the development of care pathways supported by general commissioning policies and established commissioning arrangements with providers for those commissioned treatments. This paper assists the Governing Body to determine its own commissioning positions in response to the recommendations in Appendix 1, including drug treatments covered by NICE Technology Appraisals.

11. Any statutory / regulatory / legal / NHS Constitution Implications

Implementation of each NICE technical appraisal needs to be completed within 90 days from publication, this being a statutory duty of the commissioner.

12. Equality Impact Assessment Click [here](#) for link

No risks identified relating to equality impact.

13. Implications / Actions for Public and Patient Engagement

No additional implications or actions for the public if the CCG accepts the recommendations identified in Appendix 1.

14. Recommendations / Action required

By considering and approving the recommendations identified in Appendix 1, the CCG will be clarifying its commissioning positions on the identified treatments. This will support the CCG and its commissioned providers to offer quality treatment to its population consistent with best use of NHS resources and to ensure statutory requirements of the CCG are met with regards to NICE Technology Appraisals. Note and formally approve the recommendations as defined in the appendix.

15. Monitoring

No defined monitoring requirements have been identified.

For further information please contact: Ken Latta, Head of Medicines Management