**Clinical Thresholds** **Policies Supporting Information**

**Introduction**

To ensure finite resources are managed to provide the population with as wide a range of healthcare interventions NHS Norfolk & Waveney Integrated Care Board (N&W ICB) prioritise resource allocation based on evidence of the clinical effectiveness and safety of treatments, their cost effectiveness and affordability, and on which interventions provide the best health outcomes.

Historically, the NHS Norfolk & Waveney CCG approved a policy for low priorities and procedures for funding along with a number of treatment thresholds which were included within the Non-routine Treatments and Treatment Thresholds Policy - now known as the Clinical Thresholds Policy (please refer to Appendix 2 for version history). The Clinical Thresholds Policy has previously included all policy statements (those with threshold criteria and those requiring individual approval via an Individual Funding Request) ratified by the NHS Norfolk & Waveney CCGs. From August 2017, the individual policy statements have been separated from the main policy document and have been allocated an individual policy reference. As a consequence, new policies and variations to existing policies can be rolled out to providers swiftly and implemented more rapidly.

From July 1st, 2022, Clinical Threshold Policies will be ratified by Norfolk and Waveney Integrated Care Board.

1. **Policy**

**2.1 Non-routine procedures and therapies / Individual Funding Request (IFR) Panel**

Non-routine procedures and therapies will not normally be funded unless the circumstances of the individual patient are considered to be exceptional by the Individual Funding Request Panel. This includes all treatments which are listed as *not routinely funded* which should be referred to the IFR panel for consideration. An IFR form must be completed for every referral and should contain detail demonstrating exceptionality in support of the application for funding.  Application forms can be found on the Knowledge Anglia website. Request forms will be returned to providers if the correct data is not supplied.

The IFR Panel meet once a month to consider applications. Where all relevant clinical information is provided, applications will be discussed at the next available panel meeting. Where further information is awaited in order to progress an application, the application will remain on hold until the required information is submitted. The application will then be taken to the next available panel meeting for discussion.

**2.2 Procedures and therapies where thresholds apply**

Threshold procedures and therapies are those in which a clinical threshold has been set which needs to be exceeded before funding will be made available for treatment.

Where the threshold criteria for a procedure or treatment has not been met, an application can be made to the Individual Funding Request Panel if there are clinically exceptional circumstances.

Please refer to Appendix 1 for a list of the IFR and Threshold procedures with the relevant procedure codes.

**2.3 New and novel treatments (procedures and therapies) developed in year**

NHS Norfolk & Waveney ICB make decisions on investments and disinvestments as part of an annual commissioning and business cycle. NHS Norfolk & Waveney ICB will not expect to make decisions outside this process and do not normally expect to commit new resources in year to the introduction of new and novel treatments, since to do so risks *ad hoc* decision making and can destabilise previously identified priorities.

**Where there is non-compliance with this policy, payment will not be made for the activity.**

* 1. **Threshold Criteria**

Commissioners agree with Providers the management of referrals which are covered by this policy.

* 1. NHS Norfolk & Waveney ICB have identified treatments which are subject to threshold criteria. These may include:
	+ Services that are not available in contracts
	+ Exceptions to this Clinical Threshold Policy
	+ Certain elective tertiary referrals outside agreed pathways and local networks
	+ Internal Consultant to Consultant referrals outside of agreed exceptions or pathways
	+ Where the threshold criteria for a procedure or treatment has not been met, an Individual Funding Request application can be made if the referrer considers there are clinically exceptional circumstances.
1. **Statements**

**Equality Statement**

NHS Norfolk & Waveney ICB and the Clinical Policy Development Group (CPDG) are committed to ensuring equality of access and non-discrimination as enshrined in the Health and Social Care Act 2012. In carrying out its functions, the CPDG will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. The policy statement documents prepared by the NHS Norfolk & Waveney Clinical Policy Development Group are compliant with the NHS Constitution and the Human Rights Act 1998.

**Clinical Governance Statement**

It is important the implementation of policies is seen as an opportunity to encourage team working and cooperation between commissioners, primary and secondary care providers. Service Providers will be expected to collect and provide audit data on request as part of a professionally led clinical review and audit cycle.

**Exceptionality**

For patients not meeting the threshold criteria or where a treatment is not routinely funded, an application should be made to the Individual Funding Request (IFR) panel if the referrer considers there are clinically exceptional circumstances. IFR policy and procedure documents can be found on Knowledge Anglia.

**Psychological Exceptionality & Aesthetic Surgery**

Patients experiencing psychological distress or social impairment as a result of their condition cannot be considered to be “clinically” different from other patients with the same condition. Normal psychological and social experiences of illness, impairment or deformity may cause distress, but are not likely to render the patient “exceptional” according to the definition used by NHS England. This is because the definition explicitly states that only clinical factors may be considered. It is expected that any psychological distress is managed through local mental health care pathways.

Note: C*linical threshold policies are not applicable to patients on a cancer treatment pathway, or a 2 week wait pathway.*