

Operating process for dealing with Procedures with Restrictions & Thresholds (TNR 2 policy), and Assisted Conception requests

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Audience (delete those that do not apply / add as necessary):	Governing Body

EXECUTIVE SUMMARY

The Prior Approval process is managed by the IFR Team for Surrey Downs CCG.

The Operating process for dealing with Procedures with Restrictions and Thresholds and Assisted Conception requests policy outlines the process in which all Prior Approvals are managed.

Since the previous update, the Procedures of Limited Clinical Effectiveness (PoLCE) policy has been renamed as List of Procedures with Restrictions & Thresholds (LoPwRaT) therefore the policy has been updated accordingly. The following has also been included under 'Funding Validity' to clarify the timeframe in which a procedure/treatment should be initiated following funding approval by the CCG :

- *Where funding approval has been granted by the CCG, individuals must initiate treatment within 6 month of the approval letter.*

The Governing Body are asked to note and agree the changes made.

For further information contact:	agolding@nhs.net
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GOVERNANCE SUMMARY

Compliance:	Finance: The CCG seeks to balance clinically appropriate thresholds with potential cost pressures in this area. These are budgeted for but are kept under review.
	Engagement : These policies have been developed in conjunction with provider trusts, clinicians, and with public health leadership.
	Formal impact assessments: All policies have been formally reviewed prior to Governing Body sign off
	Risk: This policy is not on the risk register but could potentially be high risk areas in terms of compliance with NICE guidance and public interest
	Legal: Potential legal challenge to all policies and in individual cases if policy is not fair and consistent
CCG principal objectives relevant to this paper (delete those that do not apply):	<p>P1) Deliver the Financial Recovery Plan, based largely on a successful transformational QIPP programme</p> <p>P2) Take responsibility, with other partners in the footprint, for the Surrey Heartlands STP and ensure that this contributes significantly to the creation of a sustainable health economy with improved outcomes and quality</p> <p>P3) Prepare the CCG to take on its responsibilities for the commissioning of primary care in 2017-18, ensuring that this is consistent with broader commissioning development</p> <p>P4) Ensure that the CCG's Organisational Development programmes for the Governing Body and Heads of Service create a radically different culture for the delivery of both objectives and Business As Usual.</p>
CCG Operating plan objectives relevant to this paper(delete those that do not apply):	<p>OP1) Implement the quality improvement strategy</p> <p>OP2) Implement pathway programmes</p> <p>OP5) Delivery of other priorities</p>
CCG core functions relevant to this paper(delete those that do not apply):	<p>CSF1 Commissioning of services, including patient choice</p> <p>CSF2 Meeting required national and local performance standards</p> <p>CSF3 Improving quality, including research</p> <p>CSF4 Compliance with standards including patient safety</p> <p>CSF5 Reducing inequalities</p> <p>CSF18) Collaborative arrangements – NHS, local authority and other</p> <p>CSF20 Sustainable development</p>