

West Hampshire Clinical Commissioning Group

Restricted Treatments and Procedures Policy Statement

The NHS has a duty to spend the funds it receives wisely and ensure patients receive care that is evidence based. Restricted Treatments and Procedures exist where there is not any or only limited clinical evidence for treatments or procedures. They exist to ensure patients avoid unnecessary operations and ensure the interventions that are offered are evidenced based and appropriate for clinical need.

West Hampshire Clinical Commissioning Group (WH CCG) and neighbouring CCGs across Hampshire, in collaboration with South, Central and West Commissioning Support Unit have a list of procedures which are either not normally commissioned by the NHS, or require certain criteria to be met to be funded under NHS care. These procedures are listed in the Individual Funding Request (IFR) and Restricted Treatments Procedures, and Interventions Policy. **The latest policy statements and application process can be found at: <http://www.fundingrequests.ccsu.nhs.uk> and then select 'Hampshire & Isle of Wight'.**

The CCGs Policy does not define patient management pathways but rather specifies arrangements for access to NHS funding. All healthcare professionals working in the local NHS system and subject to West Hampshire CCG contracts are expected to be aware of and operate within the limits of the above Policy. This requires that they work together as referrers and providers to implement the Policy and help patients to understand the arrangements in place. This will ensure that their patients obtain NHS funding where this is available, either through prior approval or individual funding request (IFR):

- Where the patient clearly meets the criteria and the decision is to refer for a specific treatment or procedure, primary care clinicians are expected to engage in the prior approval process before referral. Where prior approval is received, the code should be included with the referral.
- Where the patient clearly doesn't meet the criteria for a restricted treatment or procedure, we would recommend that other management options are considered and a wasted referral avoided, saving time and inconvenience for all parties.
- Where there is uncertainty or the GP needs the support of a specialist opinion all available information supporting the treatment criteria should be included with the initiating referral.
- Where funding is not available, then the patient should be made aware of this and if necessary directed to the IFR or CCG appeals process.

The current procedures/treatments and interventions can be broadly classified into three categories:

- **RED:** Excluded – These procedures or treatments are not routinely funded by The Commissioner (formerly known as, including and not limited to, 'Low Priority', 'Procedures of Limited Clinical Value' and 'Never Dos').
- **AMBER:** These are procedures that require prior approval by written communication through the IFR Service who manage these requests on behalf of the Commissioner.
- **GREEN:** Procedures that are procedures which have criteria which are widely recognised and adhered to and these are routinely funded subject to meeting certain criteria. For

these procedures to be funded, on the NHS, the patient must meet the criteria as outlined in the Policy and on the following website <http://www.fundingrequests.ccsu.nhs.uk/>

NHS England Evidence based Interventions Programme (EBIP)

NHS England has partnered with NHS Clinical Commissioners, the National Institute for Health and Care Excellence (NICE), the Academy of Royal Medical Colleges and NHS Improvement, through the EBIP to develop guidance for commissioners on a number of procedures which should not be routinely commissioned or have clear criteria met before being carried out.

There is also widespread clinical consensus that NHS resources could be more appropriately targeted towards more clinically appropriate interventions. At a time when demand is exceeding the capacity available, effective use of resources is both a national and local priority.

The EBIP details 17 interventions; four that should not be routinely offered to patients unless there are exceptional circumstances and 13 interventions that should only be offered to patients when certain clinical criteria are met.

The EBIP is guided by the following five goals:

1. Reduce avoidable harm to patients. With surgical interventions, there is always a risk of complications. Weighing the risks and benefits of appropriate treatments should be co-produced with patients.
2. Save precious professional time, when the NHS is severely short of staff, professionals should offer appropriate and effective treatment to patients.
3. Help clinicians maintain their professional practice and keep up to date with the changing evidence base and best practice.
4. Create headroom for innovation. If we want to accelerate the adoption of new, proven innovations, we need to reduce the number of inappropriate interventions. This allows innovation in healthcare, prescribing and technology to improve patients' ability to self-care and live with long term conditions.
5. Maximise value and avoid waste. Inappropriate care is poor value for the taxpayer. Resources should be focused on effective and appropriate NHS services.

West Hampshire and neighbouring CCGs are a designated 'Demonstrator Community' for the NHS England EBIP and are working with the national team on testing the initiative and roll out proposals.

Further information on the EBIP can be found at: <https://www.england.nhs.uk/evidence-based-interventions/>

Fit 4 Surgery

The CCG are also working with Primary Care on adopting the existing and new recommendation that every patient is offered lifestyle modification where appropriate, through sign-posting or referral to services, this is known locally as Fit 4 Surgery. The CCG has updated local clinical systems with these policies and relevant information, working with Primary Care in adopting recommended referral guidelines which routinely include information on BMI and smoking status to aid communication with the receiving clinical teams.

Useful information:

<https://www.england.nhs.uk/wp-content/uploads/2017/11/ifr-patient-guide.pdf>

<https://www.england.nhs.uk/evidence-based-interventions/>

Fit 4 Surgery Leaflet



Fit4Surgery leaflet
for publication August

<https://www.nhs.uk/live-well/>

If you have questions or require further information please contact whccg.info@nhs.net.