

Treatment Policies Evidence Based Policy Harmonisation Programme - <u>Update</u>

Sandwell HOSC 20th January 2020



Last HOSC update July 2019

- Reviewed Phase 3 Policy development programme.
- Today: to deliver the results of the Phase 3 public and clinical engagement.



What are Evidence Based Clinical Treatment Policies?

- The NHS has finite resources and continually and consistently has to make decisions to ensure:
 - the best evidence-based treatments are undertaken
 - the best possible clinical outcome for patients
 - the best value treatments are commissioned for patients
- This involves reviewing and developing what we are calling Clinical Treatment Policies (sometimes known in the NHS as Procedures of Lower Clinical Value (PLCV) to ensure they reflect contemporary clinical evidence.



Purpose of Harmonised Clinical Treatment Policy Process

- To ensure policies incorporate the most up-to-date published clinical evidence so that we prioritise funded treatments that are proven to have clinical benefit for patients.
- Stop variation in access to NHS funded services across
 Birmingham, Solihull and the Black Country (sometimes called
 the 'postcode lottery' in the media) and allow fair and equitable
 treatment for all local patients.
- Ensure access to NHS funded treatment is equal and fair, whilst considering the needs of the overall population and evidence of clinical and cost effectiveness.



NHSE Evidence Based Interventions Programme

- NHSE led clinical policy programme
- •SWB CCG has been selected as a Demonstrator Site due to the robust, consistent and evidence based nature of the Harmonised Clinical Treatment Policy Programme.
- •Phase 1 included 17 policies implemented from 1st April 2019 (Appendix 1.0)
- •SWB CCG has engaged with NHSE in planning of Phase 2 EBI programme.
- •NHSE Phase 2 consultation to commence in 2020 (delayed due to purdah period).



Previous Phases 1 & 2 Policy Process

- A joint working group was established across Birmingham, Solihull and Black Country
- Representatives included GPs, Public Health, Medicines Management.
 Commissioning and clinical lead from each CCG
- CCG focus on an initial 'Phase 1' set of 21 commissioning policies launched November 2017
- Phase 2 Launched July 2018 set of 22 commissioning policies, implemented from April 2019
- This is 'Phase 3' List of 13 policies (Appendix 2)



Next steps: Engagement Timetable

Date	Activity
Sept - Oct 2019	Clinical Engagement period (six weeks)
Sept – Oct 2019	Public Engagement period (six weeks)
Oct- Nov 2019	Evaluation of survey results and post engagement final report with recommendations
End Nov 2019	Working Group reconvenes and considers engagement feedback. Where appropriate some policies may be revised
Dec 2019	Engagement Report published (You Said/We Did)
Jan 2020	Final Policy Changes and Sign-Off
Feb 2020	Communication to stakeholders
April 2020	Implementation of updated policies.



Clinical Treatment Policies: Engagement

• 13 policies were prepared for review during a six-week patient, public and clinical engagement period from:

Monday 2nd September until Friday 11th October 2019.

- Clinical engagement targeted:
 - Secondary care clinical and managerial colleagues
 - Primary care colleagues
 - Other key stakeholders
- Public engagement was enabled through:
 - surveys
 - outreach engagement
 - stakeholder briefings
 - website information
 - media.

Clinician Engagement: Approach

- Targeted correspondence to Specialist Clinicians / Medical Directors and Chief Nurses / Private Providers / Contract Managers.
- 260 clinicians were contacted across the region from the following providers:
 - University Hospitals Birmingham NHS Foundation Trust
 - Sandwell and West Birmingham Hospitals NHS Trust;
 - University Hospitals of North Midlands NHS Trust
 - BMI Healthcare
 - Spire Healthcare
 - Birmingham Community Healthcare NHS Foundation Trust
 - Birmingham and Solihull Mental Health NHS Foundation Trust.
 - The Dudley Group NHS Foundation Trust
 - Walsall Healthcare NHS Trust



Clinician Engagement: Outcomes

- Clinicians were understanding and supportive of the CCG in undertaking an evidence based review of treatment policies in order to provide equitable access to healthcare provision.
- Clinicians were pleased to be given the opportunity to engage with the policy development process and keen to do so.
- All of the policies received further clinical feedback which supported further review by the Treatment Policy Clinical Development Group, for example clinical feedback regarding the use of Biological Mesh instigated a change in commissioning position.
- Clinicians are keen for these policies to be widely communicated to those in primary care so that the referral pathways and patient expectations could be appropriately managed.

Public Engagement:

Activity and Outcomes



1

Media release



Website information 400 views



5

Stakeholder Events organised



16

Number of Tweets

10,390

Twitter impressions

Outpatient clinics
General and targeted
Events

100

+
Conversations

Stakeholder briefing

Emailed to over 500 stakeholder organisations

49 Completed Questionnaires



Pubic Engagement: Approach

Key Communication Messages & Approaches

- Tailored and appropriate language to deliver a consistent message to varied audience groups.
- Services are not being decommissioned, but the criteria for accessing the selected treatments is clinical evidence based.
- Fairness through equitable access to consistent services across Birmingham & Solihull and Sandwell & West Birmingham, with fair decisions based on a shared rationale and clinical evidence. No 'postcode lottery'.
- Emphasis that the development and refinement of treatment policies for Sandwell & West Birmingham and Birmingham & Solihull is continuous and remains a priority.
- Review of language and use of accessible English in policy documents as well as patient friendly leaflets.
- 2 way approach inform and listen.

Public Engagement

Community Events:

- Proactive approach to face-to-face and electronic community engagement
- General public & community events organised across
 Birmingham and The Black Country areas.
- Targeted specialised engagement with affected groups



What happened to the feedback from patients and clinicians?

- Feedback from the engagement has been reviewed by the Treatment Policies Clinical Development Group and has resulted in changes to some of the clinical treatment policies and final commissioning position.
- Engagement Report and 'You Said, We Did' Reports were produced.
- Following the Joint HOSC review, a final suite of new treatment policies will be launched; primary care and local acute providers will be notified and the CCG's treatment policies web page https://sandwellandwestbhamccg.nhs.uk/treatment-policies will be updated.



Key points

- Principles that underpin the development of the proposed policies
- Development of You Said We Did document summarising the feedback and response – policy by policy.
- Full Engagement Report Prepared.



Thank You Q&A

Appendix 1.0 NHSE EBI Policies Implemented from April 2019.

- Snoring Surgery (in the absence of Obstructive Sleep Apnoea (OSA))
- Dilatation and curettage (D&C) for heavy menstrual bleeding
- Knee arthroscopy for patients with osteoarthritis
- Injections for nonspecific low back pain without sciatica
- Breast reduction
- Removal of benign skin lesions
- Grommets
- Tonsillectomy
- Haemorrhoid surgery
- Hysterectomy for heavy bleeding
- Chalazia removal
- Shoulder decompression
- Carpal tunnel syndrome release
- Dupuytren's contracture release
- Ganglion excision
- Trigger finger release
- Varicose vein surgery



Appendix 2 Policy Scope - Phase 3

Phase 3A - Treatment Policy List

(Birmingham & Black Country CCGs)

- 1. Arthroscopic sub-acromial decompression
- 2. Image guided therapeutic intra-articular joint injections with corticosteroids with/without local anaesthetic.
- 3. Image-guided HIGH VOLUME intra-articular injections (40mls+) of saline with or without corticosteroid and/or local anaesthetic.



Appendix 2 Policy Scope - Phase 3

Phase 3B Treatment Policy List

Sandwell & West Birmingham CCG and Birmingham & Solihull CCG.

- 1. Liposuction for lymphoedema
- 2. Liposuction for lipoedema
- 3. Bariatric Surgery
- 4. Knee arthroscopy Acute
- 5. Non Invasive Ventilation
 - COPD
 - Neuro-dependent
- 6. Continuous Positive Airway Pressure for Obstructive Sleep Apnoea
- 7. Biological / Bio-Synthetic Mesh for Hernia Repair Surgery
- 8. Non-Cosmetic Body Contouring
- 9. Adenoidectomy
- 10. Hysteroscopy for Heavy Menstrual Bleeding

