

Terms of Reference Non-Drugs Individual Funding Request Panel

BACKGROUND AND ROLE

The Individual Funding Request (IFR) panel considers requests for clinically supported applications for individual funding, in line with Norfolk & Waveney Integrated Care Board (ICB) Individual Funding Request Commissioning Policy, to ensure the request is considered in a fair and transparent way. An IFR request should be received from a clinician leading the patient's care.

SCOPE

The ICB IFR Panel have a formal process to review standard IFR submissions and will make a decision to fund a request based purely on patients' 'clinical exceptionality', therefore, the referring clinicians are requested to submit information in relation to the patient's clinical circumstances and provide literature as to why they feel the patient should receive the proposed treatment, even though the condition falls outside the published thresholds.

As the discussion is predominantly clinical, and largely relates to situations where there is a standard price, for instance, through the Payment by Results system, this is reflected in the composition of the Panel which has appointed Specialty Advisors and a Consultant in Public Health Medicine

CHAIR

The Chairperson will be a lay member appointed by N&W ICB.

In the absence of a chair, one of the nominated voting members will be required to deputise.

MEMBERS

The IFR panel is comprised of 5 specialists appointed by Norfolk & Waveney ICB:

- ICB Prescribing Specialty Advisor
- ICB Elective Care Specialty Advisors
- Associate Medical Director for Primary Care
- Consultant in Public Health Medicine

QUORUM

For a panel meeting to be quorate, there is a requirement for three clinical members of the panel to be present.

Should the instance occur where the IFR meeting is not quorate, the IFR Panel will only be authorised to make a recommendation to fund treatment. The N&W ICB will

be expected to ratify that recommendation within 4 working days of a decision being made.

NON-VOTING/ADVISORY ATTENDEES

- Chair
- IFR Manager
- IFR Administrator
- Other Public Health and ICB team member(s) as appropriate

FREQUENCY OF MEETINGS

The meetings will be held monthly. These will be administered by the IFR administration team.

REMIT & RESPONSIBILITIES

The ICB members of the IFR Panel will be responsible for making decisions as to whether treatments are approved for funding. The appointed voting panel members will have delegated authority to make funding decisions up to a maximum of £50,000 per case request per annum.

Where there is an ICB Clinical Threshold Policy, the IFR Administration Triage team will assess all IFR submissions against policy criteria and will make a recommendation to approve or decline a request for funding. That recommendation will then be made to the IFR panel for formal ratification.

The duty of the IFR panel is to consider and determine exceptional clinical circumstances, make decisions on requests for treatment to be funded where the patient's particular clinical presentation falls outside the N&W ICB commissioned Clinical Threshold Policy, or where the N&W ICB does not have a policy for the presenting medical condition.

To consider and determine exceptional clinical circumstances, the referring clinician should evidence the following:

- Significantly different to the general population of patients with the condition in question

AND






- Likely to gain significantly more benefit from the intervention than might be expected for the average patient with the same condition.

The N&W ICB will consider the development of a clinical commissioning policy where the numbers of patients for whom the treatment will be requested per year is likely to be 5 or more patients in the population served by N&W ICB. Upon receipt of the fifth request for funding a business case/clinical commissioning policy will be requested. (The IFR Panel will continue to have the right to make decisions on any further similar applications for funding whilst a policy is in the process of being produced).

Agendas and papers for the meetings will be anonymised and circulated by the IFR Administrator via secure nhs.net email or uploaded to the IFR database ,1 week before Panel meets.

APPROVAL OF COSTS – DELEGATED AUTHORITY

The NWICB IFR panel will have delegated authority to approve a request up to a maximum of £50,000 per case per annum. Any approved treatment which will exceed the sum of £50,000 must be agreed by the ICB and ICB Accountable Officer/Chief Finance Officer before the referring clinician is notified that the requested treatment can proceed.

IFR Panel have delegated authority to a maximum of £50,000 per case per annum		
Request for treatment does not exceed £50,000 per case per annum	Request approved by IFR panel, but treatment costs exceed £50,000 per case per annum	Request declined by IFR panel (regardless of costs)
Individual Funding Request Approved  Request <u>approved</u> by IFR voting members  IFR administration team to notify requester of outcome Within 5 working days after panel	Individual Funding Request Approved  To be approved jointly by Executive Medical Director or Deputy Medical Director and Executive Director of Finance or Director of Commissioning Finance  IFR administration team to notify requester of outcome Case to be processed within 40 working days of receipt	Individual Funding Request Declined  IFR administration team to notify requester of outcome Within 5 working days after panel

REPORTING

A report detailing IFR activity will be provided monthly.

PATIENT CONFIDENTIALITY AND CONFLICTS OF INTEREST

Any IFR Panel members who believe they may have had any clinical involvement with a particular case will withdraw from the decision making upon the case which should be noted

in the minutes. Confidentiality is the responsibility of all Panel members and should be maintained at all times. Individuals should declare any interests in line with appropriate N&W ICB Policies.

ATTENDANCE AT IFR PANELS

Requesting clinicians and patients will not be invited or permitted to attend IFR Panels but may submit written evidence or factual information in support of clinical exceptionality to the IFR Panel.

DECISIONS

The N&W ICB is responsible for decisions regarding IFRs for its population. The IFR Administrator will write on behalf of the N&W ICB to the referring clinician within five working days setting out the decision and the rationale for that decision.