



# AWTTC

All Wales Therapeutics & Toxicology Centre  
Canolfan Therapiwteg a Thocsicoleg Cymru Gyfan

## Individual Patient Funding Request (IPFR) Quality Assurance (QA) Group Audit 25 April 2018

### Meeting minutes

#### Present:

Group members	Observers
Dr James Coulson (Chair)	Mrs Gail Woodland AWTTC
Mrs Ann-Marie Matthews (lead IPFR co-ordinator)	Ms Rosie Spears AWTTC
Dr Susan Myles (HTA Wales representative)	Dr Jessica Davis AWTTC
Mr Chris Palmer (lay member)	Ms Jane Barnard (lay)

#### Apologies:

Professor Phil Routledge (Chair)  
Dr Sharon Hopkins (Public Health representative)

The meeting commenced at 9.30 am and was quorate.

#### Introduction:

The Chair opened up the meeting and welcomed members. Ms Jane Barnard was welcomed who was observing the meeting as a potential future lay member of the group. The group were asked to sign confidentiality agreements and declare any interests. It was noted that Ann-Marie Matthews leads the IPFR team in Aneurin Bevan UHB and would not directly score her own Health Board panel but could still participate in the meeting to provide clarity on IPFR processes. The meeting remained quorate.

#### Feedback from previous QA meeting:

Gail Woodland informed members that the feedback from the previous QA meeting on the 30<sup>th</sup> of January was raised at the IPFR co-ordinators meeting on 18<sup>th</sup> April. The feedback included:

- IPFRs not being considered within the urgency timeline

The coordinators were reminded that there is a date in the database to use when they are satisfied that they have a complete IPFR form and the request can progress, this may be several days after the initial date the application was received and should be used to more accurately assess the time taken to get to panel. If this is used then it is expected that more of the applications will fall within the urgency timeframes.

- the requirement of a letter to patients following a Chair's action decision

It was decided that a letter should always be sent to the patient regardless of urgency or if the decision was made by chair's action.

- the QA Group to continue to consider Chair's action requests.

It was agreed that chair's action considerations are still suitable to be audited though the QA group and should not be excluded from the randomisation process.



## Consideration of the QA function:

The IPFR application and associated documentation had been provided to the QA members for one randomly-chosen anonymised application per IPFR panel. The period covered was between January and March 2018. Betsi Cadwaladr University Health Board did not consider any IPFRs in this period and therefore the QA Group were not able to assess this panel for this quarter. The QA Group were being asked to consider the processes followed for those IPFR applications by assessing against previously agreed and defined criteria (see table 1). The Chair reminded the Group that they were not being asked to make any judgements on the decision reached by the individual panels for the IPFR application under scrutiny, but only on the processes followed in relation to the NHS Wales IPFR policy, which had been sent to all QA Group members before the meeting.

**Table 1. Criteria used for IPFR quality assessment audit**

Process	Evidence to assess whether the process has been adhered to	Criteria
Application process	IPFR application form, clinic letters/associated emails and IPFR panel minutes	Was this an appropriate request to consider via the IPFR route?
		Was the IPFR application form signed?
		Was there sufficient information provided for the case to proceed to panel?
	Date of receipt of IPFR vs. date of IPFR meeting vs. urgency ticked	Was the case taken to panel within the timescale stipulated on the application form?
Panel process	IPFR panel minutes	Was the panel quorate?
		Was the discussion held by the panel in line with the decision making guide?
		Was the decision and rationale for the decision clearly described in the minutes?
Decision process	IPFR panel minutes, IPFR decision letter to clinician, IPFR decision letter to patient, date on letter vs. date of meeting	Did the letter to the clinician clearly state the decision and explain the reason for the decision?
		Was the decision letter sent to the clinician within 5 working days of the panel's decision?
		Did the letter to the clinician state the review deadline date, and enclose the review form and guidance notes where applicable?
		Was the letter to the patient sent within 5 working days of the panel's decision?

## IPFR cases:

The group went through each panel IPFR application in alphabetical order. The group looked at each criterion in turn and were asked as to whether the criterion was met, not met, undecided or not applicable. For any criterion that wasn't met the group provided reasons for their opinion. The group were also encouraged to make general comments



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which could be shared across all panels, in particular examples of good practice and any common themes highlighted by this audit process.

**Feedback/considerations for future meetings:**

The Group discussed the scant or poor quality evidence provided in some cases, particularly in requests for non-medicine technologies. Ann-Marie Matthews noted that there is more work required to provide support for clinicians, for example directing them to the guidance notes and providing training. It was acknowledged that identifying groups of clinicians who might require training is problematic as individually, clinicians complete IPFRs so infrequently. Also, unlike for medicines, there is not the expertise or capacity for in-house evidence summaries to be compiled by health boards or WHSSC. The current guidance documentation available to clinicians will be brought back to the next QA meeting for consideration.

A lack of evidence of economic considerations by the panels in general was highlighted. There was little reference to value for money in the decision rationales or panel meeting minutes. It was noted that the AWTTC health economic team will be running a session on value for money at the IPFR workshop on 2<sup>nd</sup> May.

The discussion of past cases by IPFR panels was raised in relation to past precedent. This will be investigated and brought to the next meeting.

**AOB:**

Members were informed that information regarding the QA process has been added to the IPFR pages on the AWTTC website.

The Chair closed the meeting at 11.30 am.