



**Individual Patient Funding Request (IPFR) Quality Assurance (QA)
Group Audit
7 November 2018**

Meeting minutes

Present:

Group members	Observers
Professor Phil Routledge (Chair)	Mrs Gail Woodland, AWTTC
Dr James Coulson (deputy Chair)	Ms Rosie Spears, AWTTC
Mrs Ann-Marie Matthews (lead IPFR co-ordinator) via teleconference	Dr Jessica Davis, AWTTC
Dr Susan Myles (Health Technology Wales representative)	Ms Kate Moss, medical student
Mrs Jane Barnard (lay member) via teleconference	Ms Rebekah Alexander, medical student

Apologies:

Mr Chris Palmer (lay member)
Dr Sharon Hopkins (Public Health representative)

The meeting commenced at 1.30 pm and was quorate.

Introduction:

The chair opened the meeting and welcomed members. The group were asked to sign confidentiality agreements and declare any interests. It was noted that Ann-Marie Matthews, as a member of the Aneurin Bevan IPFR panel, would not directly score her own Health Board submission. The meeting remained quorate.

Feedback from previous QA meeting:

The minutes of the July QA meeting were agreed and will be made available on the AWTTC website. Matters arising from the July meeting were:

- Guidance documentation and training for clinicians

Prior to the meeting the group had been provided with the guidance notes available for clinicians filling in the IPFR application form. Dr Susan Myles highlighted that the guidance for Part 9 of the application form (i.e. statement in support of application) does not include reference to Health Technology Wales. Gail Woodland agreed to update the guidance notes accordingly. Gail Woodland also raised the idea of producing a video showing clinicians how to use and complete the electronic IPFR application form. This will be investigated further.

- Value for money checklist

A value for money checklist was presented to the group prior to the meeting. This checklist has been developed as a potential tool to support IPFR panel members in considering value for money as part of their decision making process. The group provided feedback on the checklist at the meeting. Gail Woodland will re-look at the list taking in to account the points raised.



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 July and September 2018. 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 versus date of IPFR meeting versus 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. Mr Chris Palmer provided his comments on each IPFR application prior to the meeting, and this was shared with the QA Group. The group were also encouraged to make general comments which could be shared across all panels, in particular examples of good practice and any common themes highlighted by this audit process.



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Feedback/considerations for future meetings:

No additional comments received. Each IPFR panel will receive a copy of their individual report and actions which will be assessed at the next IPFR QA meeting.

The Chair closed the meeting at 3.30 pm.