

Individual Patient Funding Request (IPFR) Quality Assurance (QA) Group Audit 2 November 2021 via Teams

Meeting minutes

Present:

| Group members | Observers |
|--|--------------------------|
| Dr James Coulson (Chair) | Mrs Gail Woodland, AWTTC |
| Dr Stuart Bourne (Public Health Consultant) Ms Rosie Spears, AWTT | |
| Mrs Ann-Marie Matthews (lead IPFR co- | |
| ordinator) | |
| Mr Matthew Prettyjohns (Health Technology | |
| Wales representative) | |
| Mr Chris Palmer (Lay representative) | |

Apologies: Mrs Karen Samuels, Mrs Jane Barnard

The meeting commenced at 1.30 pm.

Introduction:

Members were welcomed and asked to declare any interests. Interests were declared as follows and group members would leave the meeting during discussion of these cases:

- Dr Stuart Bourne Powys
- Ann-Marie Matthews Aneurin Bevan and WHSSC

Despite these declared interests the group remained quorate. During the meeting the group considered applications from the period July to September 2021, one from each panel.

Feedback from previous QA meeting:

Arranging for QA Group members to observe at panel meetings

A checklist was prepared for IPFR panel observers, Chris Palmer and Sophie Hughes have now both attended IPFR panel meetings.

Feedback from attendance at IPFR panel

Chris completed the checklist (circulated to the group prior to the meeting) and provided verbal feedback. At the panel there were no new cases discussed (Chair's action, virtual panel decisions and continued funding decisions). The virtual meeting caused some confusion – this was a decision made via email by panel members, there were doubts as to panel quoracy and whether this was in line with the IPFR policy. The use of email virtual panels has been discouraged in the past and this will be raised at the next Network meeting. The Teams platform was used and enabled the meeting to be recorded. Gail will arrange further opportunities for members to attend panel meeting as it was deemed a useful exercise.

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 for the quarter July to September 2021. 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).

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? |
| process decision letter to decision letter to decision letter | IPFR panel minutes, IPFR decision letter to clinician, | Did the letter to the clinician clearly state the decision and explain the reason for the decision? |
| | patient, date on letter vs. | 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 randomised 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 which could be shared across all panels, in particular examples of good practice and any common themes highlighted by this audit process.

For one application the group considered that it was not an appropriate request to be considered by IPFR, no further criteria were assessed for this case. The group were pleased to note that for the remaining seven applications all criteria were met by all of the panels the exception of just three instances.

AOB

IPFR Workshop

Gail provided an update as to progress with preparations for the IPFR Workshop to be held virtually on Zoom on 29th November. The programme has been finalised and cases for consideration on the day have been redacted and circulated to the panels.

The next IPFR QA meeting is TBC The Chair closed the meeting at 2.45 pm