



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

Completing application forms

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All Wales Medicines Strategy Group



An IPFR application would normally fall within one of the following categories:

- A patient requires a treatment which is new, novel, developing or unproven and is not within the Health Board or WHSSC's routine schedule of services and treatment, **e.g. a treatment or drug which is not NICE approved for the patient's condition**
- A patient requires a treatment which is outside of existing clinical policy criteria, **e.g. a new treatment that has not been approved and is therefore not within the policy**
- A treatment is required for a patient with a rare or specialist condition and is not eligible for treatment in accordance with the clinical policy criteria, **e.g. a person is outside the age range for specialist fertility treatment**

IPFR Submission

- Options for submitting an IPFR include:
 - E-form (requires registration using your NHS email address)
 - Copy of IPFR form

Both options are available via the AWTTC website:

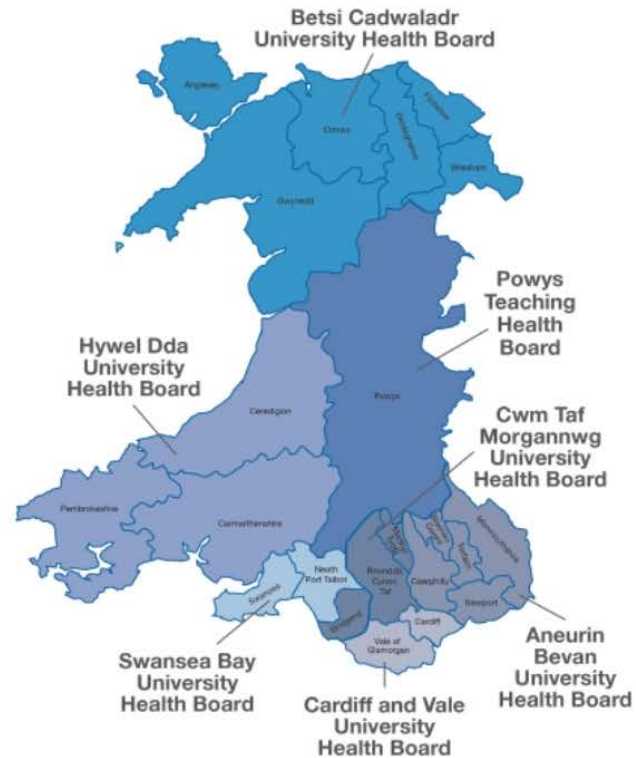


E-submissions



[Click here to log on or register as a user](#)

Welcome to the All Wales Individual Patient Funding Request (IPFR) Database





My Application Search

IPFR ID: Surname: NHS No: [Search](#) [Click here for help](#)

[Create new IPFR application](#)

IPFR ID ↑	Local ID	NHS Number	Forename	Surname	App. Status	Panel	Health Board	Submitted	
1226					Submitted	Cardiff and Vale University	Cardiff and Vale University	31/07/2023	
1228	5	8564738902	CSC	TEST	Submitted	Cardiff and Vale University	Cardiff and Vale University	31/07/2023	
1236		5185302038	PKB13	TEST	Considered by panel	Cardiff and Vale University	Cardiff and Vale University	03/08/2023	
1266					Submitted	Cardiff and Vale University	Cardiff and Vale University	04/03/2024	
1267					Created	Cardiff and Vale University	Cardiff and Vale University		
1268					Submitted	WHSSC	Abertawe Bro Morgannwg University	13/03/2024	
1269					Created	WHSSC	Aneurin Bevan University		

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Designed and built by the Hospital Pharmacy Team

[Log Issue](#)

Web browser: IE/Edge





IPFR Panel



[< Return to my applications](#)

[> Save and continue with application](#)

*Indicates required field **

[Click here for help](#)

Panel: *	<input type="text" value="Please Select"/>
Health board: *	<input type="text" value="Please Select"/>

[< Return to my applications](#)

[> Save and continue with application](#)

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Application has been successfully submitted

Thank you for your IPFR application it has been submitted to the WHSSC IPFR panel, your reference number is 1269

If your IPFR application is urgent (decision required within 24-48 hours) then please also telephone the IPFR team to confirm that you have submitted an application via the e-submission process.

If your application is less urgent and you do not receive an email from the IPFR team regarding your e-submission within 48 hours (excluding weekends and bank holidays) of submitting your application then please email them at Emma.James7@wales.nhs.uk.

Close

How are decisions made? Evidence

EVIDENCE BASED CONSIDERATIONS

Does the treatment work?

What is the evidence base for clinical and cost effectiveness?

PART 7: EVIDENCE OF CLINICAL EFFECTIVENESS

The panel will consider the evidence supplied in the application, and supplementary evidence (where applicable) supplied by professional advisors, these are the types of questions they will be trying to answer:

- What does NICE/AWMSG/ Scottish Medicines Consortium recommend or advise?
- What does Public Health Wales advise?
- Are there peer reviewed clinical journal publications available?
- What information does the locally produced evidence summary by pharmacy or Health Technology Wales provide?
- Is there evidence from clinical practice or local clinical consensus?
- Has the rarity of the disease been considered in terms of the ability for there to be a comprehensive evidence base available?
- Does the decision indicate a need to consider policy or service change? If so, refer to service change processes.

Application form

PART 7: EVIDENCE OF CLINICAL EFFECTIVENESS

Give details of key studies supporting the use of the requested intervention for this condition: <i>Please provide references or attach articles</i>	
The intervention has been considered for this indication by:	<input type="checkbox"/> AWMSG <input type="checkbox"/> NICE <input type="checkbox"/> Not considered <input type="checkbox"/> Other (e.g. SMC, Royal College, Locally Agreed Clinical Pathway)
Please reference technology appraisal number and specify outcome/status	
Points to Consider	<ul style="list-style-type: none"> • Are there peer reviewed clinical journal publications available? • Is there evidence from clinical practice or local clinical consensus? • Has the rarity of the disease been considered in terms of the ability for there to be a comprehensive evidence base available? • Service and Policy Implications • Does the decision indicate a need to consider policy or service change? If so, refer to service change processes.

E-Submission

The screenshot shows the NHS GIG E-Submission interface. At the top, there's a navigation bar with 'Patients', 'Apps', 'My Applications', 'Evidence', 'Report', and 'Admin'. The user is logged in as 'admin@example.com'. The main heading is 'PART 7: EVIDENCE OF CLINICAL EFFECTIVENESS'. Below this is a progress bar with 10 steps, where step 7 is currently active. Navigation links include '<< Skip Back' and 'Skip Next >>'. A red button says 'Click here for help'. The form contains the same questions as the application form, with a '+ UPLOAD EVIDENCE' button and a note '(Maximum file size is 20 MB)'. The 'Points to Consider' section is repeated at the bottom of the form.

How are decisions made? Economic assessment

ECONOMIC CONSIDERATIONS

PART 8: EVIDENCE, PLEASE PROVIDE ACTIVE LINKS

Is it a reasonable cost?

What is the cost of the treatment and is the cost of the treatment likely to be reasonable? i.e.

Is the cost of the treatment in balance with the expected clinical benefits?

Consider the evidence supplied in the application, and supplementary evidence (where applicable) supplied by professional advisors to the Panel:

- What is the specific cost of the treatment for this patient?
- What is the cost of this treatment when compared to the alternative treatment they will receive if the IPFR is declined?
- Has the concept of proportionality been considered? (Striking a balance between the rights of the individual and the impact on the wider community), in line with Prudent Healthcare Principles.
- Is the treatment reasonable value for money?

Application form

PART 8: ECONOMIC ASSESSMENT

<p>What is the cost of the intervention? (inc VAT)</p> <p><i>Where appropriate, include here the total cost of the treatment, taking into consideration the patients weight or BMI, any loading dose required and the number of cycles applied for. It would be helpful to break down the cost per cycle/month.</i></p>	
<p>If this treatment is part of a regimen / pathway, what is the total cost of the rest of the regimen /pathway to deliver the treatment?</p> <p><i>This should include cost for any additional follow up/outpatient appointments.</i></p>	
<p>What is the cost of the alternative interventions or formulary alternative?</p>	
<p>Are there any offset costs?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>	
<p><i>If Yes, please describe</i></p>	
<p>What is the potential net cost to the health board division, if any?</p>	
<p>Points to Consider</p>	<p>Treatment costs may vary significantly based on a patient's weight/BMI. Costs included must reflect true costs to the Health Board as the amount of funding agreed will be based on the economic assessment provided within this request. If true costs are higher they will not be funded.</p>

E-Submission

PART 8: ECONOMIC ASSESSMENT

<< Skip Back | << Save Save >>

Indicates required field *

What is the cost of the intervention? (inc VAT)
Where appropriate, include here the total cost of the treatment, taking into consideration the patients weight or BMI, any loading dose required and the number of cycles applied for. It would be helpful to break down the cost per cycle/month.

If this treatment is part of a regimen / pathway, what is the total cost of the rest of the regimen /pathway to deliver the treatment?
This should include cost for any additional follow up/outpatient appointments.

Breakdown of costs:

What is the cost of the alternative interventions or formulary alternative? *

Are there any offset costs?
Please select

If Yes, please give details:

What is the potential net cost to the health board division, if any?

Points to consider: Treatment costs may vary significantly based on a patient's weight/BMI. Costs included must reflect true costs to the Health Board as the amount of funding agreed will be based on the economic assessment provided within this request. If true costs are higher they will not be funded.

<< Skip Back | << Save Save >>

How are decisions made? Significant clinical benefit

SIGNIFICANT CLINICAL BENEFIT

Is the clinical presentation of the patient's condition significantly different in characteristics to other members of that population?
and
Does this presentation mean that the patient will derive a greater clinical benefit from the treatment than other patients with the same condition at the same stage?

PART 9: YOU MUST COMPLETE PART A OR PART B

The panel will consider the evidence supplied in the application that describes the specific clinical circumstances of the IPFR:

- What is the clinical presentation of this patient?
- Is evidence supplied to explain why the clinical presentation of this patient is significantly different to that expected for this disease/condition and this stage of the disease?
- Is evidence supplied to explain why the clinical presentation means that the patient will gain a significantly greater clinical benefit from the treatment than another patient with the same disease/condition at the same stage?

PART 9: STATEMENT IN SUPPORT OF APPLICATION

Please describe as clearly as possible the clinical case for this patient, complete either part A or B depending upon whether there are guidelines indicating not to use this intervention (Part A) or no guidelines are available (Part B).

Part A	
<p>If guidelines (e.g. from NICE or AWMSG) recommend not to use the intervention, explain:</p> <p>Why the patient's clinical circumstances are significantly different to the general population of patients AND why the patient is likely to gain significantly more clinical benefit from the intervention than would normally be expected from patients for whom the recommendation is not to use the intervention.</p> <p>Include here any additional information you may have about why the value for money of the intervention for that particular patient is likely to be reasonable.</p>	
Part B	
<p>If the intervention has not been appraised (e.g. in the case of medicines, by NICE or AWMSG) explain:</p> <p>Why the patient is likely to gain significant clinical benefit when compared to patients with the same condition and at the same stage in the progression of that condition.</p> <p>Include here any additional information you may have about why the value for money of the intervention for that particular patient is likely to be reasonable.</p>	
<p>Point to Consider</p>	<ul style="list-style-type: none"> • If guidelines do not exist or do not provide clear rationale for a negative recommendation then use part B. • Refer also to guidance notes.

E-Submission

The screenshot shows the NICE GIG application form interface. At the top, there is a navigation bar with links for Patients, Apps, My Applications, Evidence, Report, and Admin. The user is logged in as admin@example.com. The main heading is "PART 9: STATEMENT IN SUPPORT OF APPLICATION". Below this is a progress indicator showing 10 steps, with step 1 highlighted. Navigation buttons include "<< Skip Back" and "Save >>".

The form content includes the same instructions as the paper form: "Please describe as clearly as possible the clinical case for this patient, complete either part A or B depending upon whether there are guidelines indicating not to use this intervention (Part A) or no guidelines are available (Part B)." A dropdown menu is set to "Part A".

The "Part A" section contains the same text as the paper form: "If guidelines (e.g. from NICE or AWMSG) recommend not to use the intervention, explain: Why the patient's clinical circumstances are significantly different to the general population of patients AND why the patient is likely to gain significantly more clinical benefit from the intervention than would normally be expected from patients for whom the recommendation is not to use the intervention. Include here any additional information you may have about why the value for money of the intervention for that particular patient is likely to be reasonable." There is a "Help" button below this text.

The "Part B" section contains the same text as the paper form: "If the intervention has not been appraised (e.g. in the case of medicines, by NICE or AWMSG) explain: Why the patient is likely to gain significant clinical benefit when compared to patients with the same condition and at the same stage in the progression of that condition. Include here any additional information you may have about why the value for money of the intervention for that particular patient is likely to be reasonable." There is a "Help" button below this text.

At the bottom, there is a "Point to Consider" section with the same bullet points as the paper form: "If guidelines do not exist or do not provide clear rationale for a negative recommendation then use part B." and "Refer also to guidance notes."



Further information

- Includes:
- Access to IPFR database
- How to videos (coming soon)
- Guidance
- FAQs
- IPFR process
- Patient information leaflet



<https://awttc.nhs.wales/accessing-medicines/make-a-submission/healthcare-professionals-submissions/submit-an-ipfr-application/>

Diolch yn fawr
Thank you

