

**POLICIES AND PROCEDURES FOR THE COMMISSIONING OF
APPROPRIATE, EFFECTIVE AND PRIORITY HEALTHCARE**

POLICY NUMBER 3

**Procedure for the Monitoring and Enforcing of CCG Policies
for the Commissioning of Appropriate, Effective and Priority
Health Care**

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Fylde and Wyre Clinical Commissioning Group

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Policies for the Commissioning of Appropriate, Effective and Priority Health Care - Procedure for the Monitoring and Enforcing of CCG Policies for the Commissioning of Appropriate, Effective and Priority Health Care

1 Introduction

- 1.1 Fylde and Wyre Clinical Commissioning Group (the CCG) has adopted a number of policies which define eligibility for health services.
- 1.2 This is the procedure by which the policies will be monitored and enforced.

2 The application of these policies within the portfolio of service agreements

- 2.1 General Practitioners within the CCG will be advised of the policies. They will be asked not to refer patients for services which the CCG does not normally commission without prior discussion with the Commissioning Panel.
- 2.2 The Chief Executives of all NHS Trusts and other organisations with which the CCG has service agreements (including the CCG itself) will be advised of these policies. They will be asked to draw them to the attention of the relevant clinical staff who may otherwise offer or refer for the services addressed by the policies.
- 2.3 The CCG will monitor data about individual patients that it routinely receives from Trusts and other providers, to determine whether any treatments appear to be inconsistent with the policy. No action will be taken in respect of cases which the CCG or its predecessors authorised as ones to whom a policy should not be applied. Otherwise, the nominated Director will make whatever enquiries s/he sees fit. If the Trust is unable to confirm that the treatment it provided was consistent with the policies, then that patient's treatment will not be counted towards the level of healthcare activity required of the Trust in the service agreement.

3 The application of these policies for treatments within NHS Trusts that are outside of the portfolio of service agreements

Commissioning Policies – Policy Number 3 – Procedure for the Monitoring and Enforcing of CCG Policies for the Commissioning of Appropriate, Effective and Priority Health Care

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- 3.1 Local General Practitioners and Trusts within the portfolio of Service Agreements will be advised of the policies in accordance with sections 2.1 and 2.2 above.
- 3.2 The Chief Executives of all NHS Trusts and other organisations with which the CCG has service agreements will be advised of this suite of policies. They will be asked to draw them to the attention of the relevant clinical staff.
- 3.3 The Chief Executives of all NHS Trusts known to provide services addressed by these policies will be advised of this suite of policies. They will be asked to draw them to the attention of the relevant clinical staff. These letters will be copied to the Chief Executives of their host Fylde & Wyre Clinical Commissioning Groups.
- 3.4 The CCG will monitor data about individual patients that it routinely receives from Trusts, to determine whether any treatments appear to be inconsistent with the policy. No action will be taken in respect of cases which the CCG had authorised as ones for which its policy would not apply. Otherwise, the nominated Director will make whatever enquiries s/he sees fit.
- 3.5 If a treatment inconsistent with a policy had been provided by a Trust which had previously been advised of the policy, then officers of the CCG will take all steps available under national policy to retain or recover resources in respect of the treatment in question. Additionally the consultant who provided the treatment, and the doctor who referred the patient for the treatment (if appropriate) will be reminded of the policy.
- 3.6 If a treatment inconsistent with a policy had been provided by a Trust which had not previously been advised of the policy, the consultant providing the treatment, and the Chief Executive of the Trust will be advised of this suite of policies. Additionally the doctor who referred the patient for the treatment (if appropriate) will be reminded of the policy.
- 3.7 In the case of referrals from consultants from Trusts within service agreements, CCG officers may consider recovering the cost of the treatment (in full or in part) from the referring Trust. This would recognise the fact that the referral was made in breach of a policy of which that Trust was aware. Any such action would be in addition to actions under section 3.6 above, and as an alternative to actions under section 3.5 above.

- 4 The application of these policies for treatments within non-NHS organisations (or within private patient facilities of NHS organisations) that are outside of the portfolio of service agreements**
- 4.1 Local General Practitioners and Trusts within the portfolio of Service Agreements will be advised of the policies in accordance with sections 2.1 and 2.2 above.
- 4.2 The CCG will provide no funding to such organisations unless authorisation had been given prior to the treatment date. Any request for such authorisation will be considered by the Commissioning Panel in accordance with CCG policies.

Dr F Atherton
Director of Public Health
29 November 2006