

**Excluded: Procedure not routinely funded**

**Thames Valley Priorities Committee Commissioning Policy Statement**

**Policy No. TVPC41      Implementation of NICE Interventional Procedures Guidance (IPGs), Medical Technologies Guidance (MTGs) and Diagnostic Technologies Guidance (DTGs)**

**Recommendation made by the Priorities Committee:      March 2016; updated January 2019<sup>1</sup>**

**Date of issue:      May 2016 / Update April 2019**

NHS CCGs have no statutory duty to fund the use of the procedures or technologies assessed under the National Institute for Health and Clinical Excellence (NICE) Interventional Procedures Guidance (IPG), Medical Technologies Guidance (MTG) and Diagnostic Technologies Guidance (DTG) programmes.

Thames Valley Priorities Committee has considered these types of NICE guidance, and agreed that the use of any procedure or technology assessed by NICE under their IPG, MTG and DTG programmes are **not normally funded** unless:

1. the NICE IPG states 'use with standard arrangements for clinical governance, consent and audit'  
**OR**  
the NICE MTG states 'the case for adoption within the NHS as described is supported by the evidence'  
**OR**  
the NICE DTG makes a recommendation as an option for use  
**AND**
2. funding has been agreed by commissioners through either of the funding routes detailed below.

To obtain funding, in advance of the use of an interventional procedure, medical or diagnostic technology:

- the provider must submit a business case to the CCG for approval

**OR**

- The CCG agrees to commission the procedure or technology following consideration of an evidence review and positive recommendation by the Thames Valley Priorities Committee.

Regardless of equivalent cost, the CCG will not commission the use of interventions or technologies that are less effective or pose a greater risk to patients than standard interventions.

Trusts wishing to undertake research associated with the use of new technologies and interventions, including IPG, MTG or DTG technologies, must apply for research funds in the usual way.

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<sup>1</sup> No changes have been made to this policy.

A NICE IPG recommendation for use with standard arrangements means that there is enough evidence to show that the procedure works well enough and is safe enough for doctors to consider it as an option for their patients, providing that they follow their hospital's existing policies around getting permission to perform operations and monitoring the results afterwards.

The recommendation does not mean that all patients who have the condition or symptom in question "should" or "must" be offered the procedure - this is decided at a local NHS level. An IPG does not consider the cost or cost-effectiveness of a procedure.

A NICE MTG reviews the clinical and cost impact evidence for a technology compared with currently available technologies. If the case for adopting the technology is supported, then the technology has been found to offer advantages to patients and the NHS. The specific recommendations on individual technologies are not intended to limit use of other relevant technologies which may offer similar advantages.

A NICE DTG focuses on the evaluation of an innovative medical diagnostic technology in order to ensure that the NHS is able to adopt clinically and cost effective technologies rapidly and consistently. Positive recommendations are clearly stated as options only.

This policy is in alignment with NICE Guidance for [Interventional Procedures](#), [Medical Technologies](#) and [Diagnostics](#).

#### NOTES:

- Potentially exceptional circumstances may be considered by a patient's CCG where there is evidence of significant health status impairment (e.g. inability to perform activities of daily living) and there is evidence that the intervention sought would improve the individual's health status.
- This policy will be reviewed in the light of new evidence or new national guidance, eg, from NICE.
- Thames Valley clinical policies can be viewed at <http://www.fundingrequests.ccsu.nhs.uk/>