

Prescribed Specialised Services Advisory Group

Recommendations to Ministers

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Introduction

Since its last report was published in February 2018, the Prescribed Specialised Services Advisory Group (PSSAG) has continued to provide advice to Ministers on specialised services. The latest meeting was held on 16th January 2019. This report presents PSSAG's recommendations from that meeting and sets out Ministers' decisions on each of the recommendations it made. In deciding whether it would be appropriate for a health service to be nationally commissioned by NHS England, the Secretary of State must have regard to four statutory factors (as set out in section 3B(3) of the National Health Service Act 2006 as amended by the Health and Social Care Act 2012). These are:

- The number of individuals who require the provision of the service or facility;
- The cost of providing the service or facility;
- The number of persons able to provide the service or facility; and
- The financial implications for Clinical Commissioning Groups if they were required to arrange for the provision of the service or facility.

Before deciding to make regulations requiring NHS England to commission such services, the Secretary of State must (a) obtain appropriate advice for that purpose, and (b) consult NHS England. PSSAG was established by the Department of Health in 2013 to provide the Secretary of State with this advice.

The specialised services directly commissioned by NHS England are listed in Schedule 4 to the National Health Service Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012, 'the Regulations'.

It is NHS England's responsibility to determine how these services are commissioned. Service descriptions for each of the specialised services are set out in NHS England's 'Manual for prescribed specialised services' (first published November 2012 and updated in October 2017). The Manual should be considered alongside service specifications, NHS England commissioning policies and the technical requirements NHS England imposes on providers.

Prescribed Specialised Services Advisory Group (PSSAG)

PSSAG is a Department of Health and Social Care expert committee that was established in 2013 to provide advice to Ministers on whether services are specialised and should be nationally commissioned by NHS England, rather than locally commissioned by Clinical Commissioning Groups (CCGs).

Membership of the group includes representatives from the Royal Colleges and CCGs, lay members to represent the interests of patients and the general public, and members with financial and technical expertise who can offer assistance with how the specialised elements of a service can be separately identified. The full PSSAG membership is at Annex A.

Evidence and supporting information on services currently prescribed in legislation for direct commissioning by NHS England and any services identified as potentially suitable for such commissioning, is made available to PSSAG from a range of sources. These may include Clinical Reference Groups (CRGs), patient groups, clinicians, commissioners and members of the public. The proposals the Group considers are in large part generated by NHS England through its CRGs.

Process

PSSAG considers four specific questions:

- 1. Whether the services currently included on the list of prescribed specialised services set out in legislation should continue to be commissioned by NHS England.
- 2. Whether there are services currently commissioned by NHS England, which would be more appropriately commissioned by CCGs.
- 3. Whether there are services currently commissioned by CCGs, which would be more appropriately commissioned by NHS England.
- 4. Whether there are innovative new treatments and interventions that are not part of existing services and which should be commissioned by NHS England.

When considering if a service is specialised or not the group must review existing services and assess new ones on the basis of the four factors within the National Health Service Act 2006. These are are:

- The number of individuals who require the provision of the service or facility;
- The cost of providing the service or facility;
- The number of persons able to provide the service or facility; and
- The financial implications for Clinical Commissioning Groups if they were required to arrange for the provision of the service or facility.

In developing its advice, PSSAG may also consider such matters as:

- How activity can be identified to enable separate contracting, monitoring and payment;
- Likely running costs associated with separate and direct commissioning;
- Defining elements of the service to be commissioned; and
- The number of provider contracts NHS England is likely to need to develop to directly commission the service.

As part of the process in advising the Secretary of State about statutory prescribed services, the group will also consider proposals from NHS England on the formulation of its service descriptions and will provide advice to Ministers on whether the service descriptions (and any proposed changes) are appropriate in respect of the prescribed service.

Executive Summary

PSSAG considered 2 services at the meeting held in Januaty 2019. The first is POEMS (polyneuropathy-organomegaly-endocrinopathy-M protein-skin lesions syndrome). The second is the use of Voriconazole in patients with fungal asthma and Aspergillus bronchitis, including those with cystic fibrosis.

POEMS was proposed by Dr Michael Lunn a Consultant Neurologist at University College London Hospitals.

Voriconazole, for fungal asthma and Aspergillus bronchitis was proposed by David W. Denning, Professor of Infectious Diseases in Global Health.

No separate view from NHS England was sought before considering either proposal.

Outcomes

1. POEMS (polyneuropathy-organomegaly-endocrinopathy-M protein-skin lesions) syndrome

Service summary and proposal

POEMS (polyneuropathy-organomegaly-endocrinopathy-M protein-skin lesions) syndrome is a rare, complex, disabling, progressive multisystem disorder requiring complex multi-disciplinary care from a range of specialists (in particular neurology, haematooncology and endocrinology) and therapists. NHS England currently does not commission a service that covers the whole treatment of POEMS.

View of PSSAG

In discussing this proposal, PSSAG noted that this is a complex syndrome with a number of aspects, some of which already fall under the commissioning responsibility of NHS England. PSSAG also noted that the focus of the application was on the rehabilitation element, which is not the responsibility of NHS England.

In consideration of the four factors in the proposal, the numbers requiring the service are relatively small (the figure given is between 100/150 patients in England). The cost per patient is quite high and there is currently only one provider, although this could be expanded if the application was successful. The proposal suggests that there could be a considerable cost to CCGs if they were required to provide the service.

Suggested Changes

PSSAG concluded that it would need further advice on the proposal from the Royal College for Physicians and the Royal College of Pathologists, and agreed that they required further advice from the clinician making the proposal about diagnosis and referral to the service.

PSSAG agreed that before it could recommend that NHS England should become the responsible commissioner for POEMS it would need;

Further information about diagnosis and referral to the service Further information about the nature of the rehabilitation and the rationale for delivering this at the expert centre rather than more locally Further information about the number of patients who have the condition and who might be treated by a service

The secretariat will be seeking this information for further consideration of the service by PSSAG.

2. Use of voriconazole in patients with fungal asthma and Aspergillus bronchitis, including those with cystic fibrosis

Service summary and proposal

This proposal is for a drug (viriconazole) that has recently been become generic and therefore cheaper with the potential for extended use. The drug is currently only used in two situations by NHS England. Firstly, for people having bone marrow transplants who have suppressed immune systems and are more likely to pick up fungal infections and secondly, in the Chronic Pulmonary Aspergillosis service which is a single centre in Manchester.

(The group noted that in the past, they have felt that their role is to decide whether or not a service should be prescribed rather than making decisions about individual drugs.)

View of PSSAG

PSSAG considered the proposal and noted that the application makes the case for voriconazole to be used in some services where NHS England is the responsible commissioner and in some servies where it is not. NHS England has responsibility for commissioning services for people with cystic fibrosis and patients that have severe asthma, but some of the conditions mentioned in the application are not the responsibility of NHS England.

PSSAG discussed a number of options for taking this forward, including:

- asking NHS England to work up a policy for all voriconazole use by the NHS;
- asking NHS England to work up a policy for voriconazole use in NHS England commissioned services; or
- recommending that NHS England becomes the responsible commissioner for all conditions for which voriconazole could be used

Suggested Changes

The Group agreed that it would not be appropriate to recommend to NHS England to add this as a specialised service at this stage.

The Group agreed that PSSAG would need further information about its guidelines and pathways for use, in order to propertly determine whether it should advise this to be a specialised service. PSSAG hs been advised that the clinical and cost effectiveness evaluation of anti-microbials (including anti-fungals) is outside the scope of the National

Institute for Health and Care Excellence (NICE) so any evaluation would need to be considered by NHS England or individual CCGs.

NHS England will keep the evidence for this drug under review.

Annex A - Prescribed Specialised Services Advisory Group Membership

Chair

Professor Sir Ian Gilmore

Members

Helen Donovan (Royal College of Nursing)
Donal O'Donoghue	(Royal College of Physicians Registrar)
Dr J E Tim Burke	(Clinical Commissioning Group South)
Dr Christine Moss	(Clinical Commissioning Group Midlands and East)
Professor Tim Barrett	(Royal College of Paediatrics and Child Health)
Ceri Townley Operation	ns – (NHS England Specilised Commissioning)
Fiona Marley Operation	ns – (NHS England Specilised Commissioning)
Manoj Mistry	Lay representative
Steve McNeice	ay representative
Amit Bhagwat L	ay representative

Secretariat

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