

Briefing for the Petitions Committee

Y Pwyllgor Deisebau | 13 September 2016

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Petition number: P-05-xxx

Petition title: A Treatment Fund for Wales – there must be an end to the Healthcare Postcode Lottery

Text of petition: One of the greatest creations to come out of Wales was the National Health Service. It is one of our most valuable assets and we must hold on to it. At present, we are in the desperate situation where treatment for costly, life-saving drug treatments is not fairly or evenly distributed throughout Wales. Patients with a desperate need for live-saving drugs are being denied the treatments that they so urgently require by their Local Health Boards, with grave consequences to their health and life expectancy. I am calling on the Welsh Government to review their procedures in relation to the sanctioning of high-cost drug treatments with immediate effect. I further call on the Welsh Government to assess each patient and each patient's needs on a case-by-case basis as the current requirement for all funded drug treatments to appear on a list of 'Approved Drugs' is too narrow and prevents patients from accessing treatments which are not yet on the list but which Consultants say will have a positive impact on a Patient's long-term health and life expectancy.

Background

Appraisal of medicines

Before new medicines can be routinely used to treat NHS patients, they undergo an appraisal process to determine whether the benefit to patients justifies the cost.

The National Institute for Health and Care Excellence (NICE) advises the NHS on both the clinical and cost effectiveness of some newly-licensed medicines. This advice has a statutory basis in England and Wales, with Welsh health boards legally obliged to fund NICE-approved medicines.

The All Wales Medicine Strategy Group (AWMSG) has a remit to appraise new medicines that are not on the NICE work programme. Health Boards in Wales also have a legal requirement to fund medicines approved by AWMSG.

Cancer Drugs Fund

In England, the Cancer Drugs Fund routinely funds a number of cancer medicines not generally available on the NHS. Throughout the Fourth Assembly, the Welsh Government resisted calls for a similar fund. It argued that it discriminates against other health conditions, and said that the fund has not resulted in English patients having better access to new, cost-effective medicines than Welsh patients.

Individual patient funding requests

If a particular medicine has not been approved by NICE or AWMSG for routine use within NHS Wales, a clinician can make an Individual Patient Funding Request (IPFR) to a health board. Requests are considered on the basis of 'exceptionality'. An all Wales IPFR policy was published in 2011 to support a consistent approach to decision-making.

There has been continued criticism of the IPFR process. The Fourth Assembly Health and Social Care Committee's 2014 cancer inquiry heard that health board IPFR panels might take different approaches to these requests, and recommended that a national IPFR panel be established to ensure consistency and equity across Wales. A Welsh Government-commissioned review (published in 2014) made a number of recommendations to strengthen the IPFR process, but did not propose moving to a single, all-Wales IPFR panel.

The All Wales Therapeutics and Toxicology Centre has established a potential funding pathway for some new treatments in Wales. The 'One Wales' process will allow for interim commissioning of medicines for specific cohorts of patients, which will be conditional on

manufacturers committing to engage in a subsequent appraisal by AWMSC or NICE. It is envisaged that this process would not be used often. An example of where this route has been followed recently is to enable Welsh prostate cancer patients to receive the chemotherapy drug docetaxel at an earlier stage.

Welsh Government Action

On the [12 July 2016](#), the Cabinet Secretary for Health, Well-being and Sport, Vaughan Gethin AM stated that the Welsh Government were taking forward two measures to help ensure that patients in Wales have access to equitable treatment wherever they live. The Cabinet Secretary announced that the Welsh Government will introduce a New Treatment Fund in Wales, which should be operational by December 2016:

We will make £80m available over the life of this government to ensure new medicines, which address unmet clinical need and represent a significant step forward for the treatment of life-limiting and life-threatening diseases are available. This will be delivered consistently across Wales as soon as possible following a positive recommendation by either NICE or AWMSC.

The Cabinet Secretary also confirmed that an independent review of the IPFR process will be carried out, stating that:

The NHS Wales process has been improved following a review in 2013–14. A further review will now take place to ensure better consistency of decisions across Wales and make recommendations about what clinical criteria should be applied when determining eligibility.

[...] The review will consider in particular the clinical exceptionality criteria and the possibility of a single national IPFR panel.

I want the review to be short and sharply focused to address these issues. I will provide a further update in September.

Every effort is made to ensure that the information contained in this briefing is correct at the time of publication. Readers should be aware that these briefings are not necessarily updated or otherwise amended to reflect subsequent changes.