

Guidance notes for Clinicians on the Individual Funding Request (IFR) process.

When considering which organisation to submit an IFR to it is important to first determine the responsible commissioner.

NHS England will be the statutory body for the consideration of IFRs for Prescribed Specialised Services (including services for Military and Offender Health, specified High Cost Drugs and the Cancer Drugs Fund). Information on the Prescribed Specialised Services is available in the NHS England Manual available to download from :- [PRN00115-prescribed-specialised-services-manual-v6.pdf \(england.nhs.uk\)](#)

If you wish to submit an IFR for a specialised services please contact either your Trust High Cost Medicines pharmacist (if the request is for a medicine) or the NHS England Area Team via england.ifr@nhs.net

IFRs for procedures or medicines commissioned by ICB should be discussed with the IFR team for the Nottingham and Nottinghamshire ICB via nnicb-nn.ifrteam@nhs.net (only for patients registered with a GP within the boundaries of Nottingham and Nottinghamshire).

Please read the FAQs below before making a submission.

1. How should I decide whether to make an Individual Funding Request?

An IFR application is appropriate if you:

Consider your patient to be clinically exceptional compared to other patients excluded from funding set out in a particular commissioning policy.

OR

When the ICB do not have a policy stating who is eligible for the treatment that is being requested. The key consideration is whether the treatment that you wish to request for your individual patient will meet the definition for '*exceptional clinical circumstances*' that is set out in the policy.

2. What is meant by 'exceptional clinical circumstances'?

The ICB cannot fund requests that should be fairly applied to other patients who have similar clinical circumstances and who should rightly also be offered the treatment if your patient was to be approved. This would require the ICB to agree a new commissioning policy (or amend an existing one) setting out that the treatment was now available for a new group of patients and setting out how this group had been identified. Therefore, to meet the definition of 'exceptional clinical circumstances' your patient must demonstrate that they are both:

Significantly different clinically to the group of patients with the condition in question and at the same stage of progression of the condition

AND

Likely to gain significantly more clinical benefit than others in the group of patients with the condition in question and at the same stage of progression of the condition

In other words, you must show that your patient is very different from others in group of patients with the same condition/stage of the disease and has clinical features that mean that they will derive much more benefit from the treatment you are requesting.

3. Why are only clinical features taken into account?

The ICB must make decisions fairly about funding treatments and not on the basis of age, sex, sexuality, race, religion, lifestyle, occupation, family status (including responsibility for caring for others) social position, financial status etc. unless these directly affect the expected clinical benefit that an individual will derive from a treatment e.g., the effect of the increasing age of a woman on fertility.

4. How do I make an Individual Funding Request (IFR)?

All requests must be made on a standard IFR funding request form treatment request form which can be obtained electronically on the ICB website at:-
<https://notts.icb.nhs.uk/about-us/our-policies-and-procedures/>

The request should be typewritten using this form to ensure that all information is legible. The form aims to ensure that all the necessary information is obtained so it is important that it is completed comprehensively and accurately, along with any relevant research papers. You should highlight how the patient compares to the research population in who evidence of a beneficial effect has been demonstrated. These measures will avoid delays in reaching a decision. The form should be returned electronically to the ICBs secure NHS Net email account to to preserve patient confidentiality - nnicb-nn.ifrteam@nhs.net

5. How can I get advice on what to include when completing a treatment request form?

Please review the IFR Policy on the ICB website.

You can e-mail the Individual Funding Request Manager at the ICB for advice on whether to submit a treatment request form and what to include. You should ensure that all parts of the IFR request form are completed to avoid delay in the IFR process. The 40 day response timeline for IFR requests is suspended whilst the IFR team is waiting for your response to any queries relating to the request. It is therefore in the interest of a timely response for your patient that you provide accurate contact details and that requests for further information are addressed as soon as possible.

6. Who will make the decision on whether the Individual Funding Request (IFR) is approved?

All new Individual Funding Requests are 'screened' by a Public Health Consultant, IFR Manager and ICB Clinical member to decide whether the request meets the criteria for consideration as an IFR and 'exceptional clinical circumstances' have been demonstrated. If there is no evidence of exceptional circumstances (often because the patient is clearly part of a definable cohort) then the request is declined at this stage.

If evidence of exceptionality is presented, or if the screeners are uncertain whether the case then the case will be forwarded to the ICB's IFR Panel.

The panel will include: -

- Public Health Consultant
- Chief Nurse – or nominate deputy
- Senior Finance Officer
- GP Advisors
- Pharmacy Advisors

Together, the IFR Panel will determine whether there is a case for exceptionality and whether the intervention is safe and clinically and cost effective.

7. How will I be informed of the ICB IFR Panel decision?

Following initial screening of the IFR funding application form, the IFR Tema will acknowledge, via email, advising of the action that will/or has been undertaken within 5 working days of receipt. If the IFR is progressed to the IFR panel for consideration, the referring clinician will be informed when the next panel meeting will take place. The IFR Panel outcome will be sent within 5 working days after the meeting, via letter to the referring clinician. It is the responsibility of the referring clinician to inform the patient of the outcome.

8. How will my patient be informed of whether the request has been approved?

All correspondence on the outcome at each stage of the IFR process will be copied to their GP. The rationale for the decision will be included at each stage of the process. It is the responsibility of the referring clinician to inform the patient of the outcome.

9. Can either the patient, or a clinician involved in their care, attend the panel?

No. The panel will only consider the written evidence that has been submitted so it is very important that all the evidence is presented in your treatment request form.

10. Can I or my patient appeal against the ICB decision?

There is no right to appeal against the decision at the 'screening' stage although it is possible to complain under the ICBs Complaints Policy. However, this will not overturn the decision of the screening stage but will examine whether the policy was properly followed. If the ICB panel does not approve your request you, or your patient, are entitled to ask for a review of the process that was undertaken by the ICB. The Review Panel will decide if the ICB followed the correct procedures and the ICB Panel reached a decision that was rational and based on all the evidence that was presented.

11. What can I do if my patient is not exceptional e.g. represents a group of patients in similar clinical circumstances?

If you disagree with an existing policy, then you can try to change it but this cannot be achieved through the IFR process. If the treatment or services is covered by NHS England Prescribed Specialised Services, you should contact the area team responsible for managing IFRs england.ifr@nhs.net for all other services and

treatments you should contact your directorate management team for discussion with the relevant ICB.

Please note that it would be unusual to introduce a new development in year as each year resources are already committed through an annual round of prioritisation. Hence new developments will usually require reallocation of resources from existing services.

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