Appendix C
SEL ICB IFR Triage Group: Terms of Reference

1. Governance Arrangements

1.1 The Individual Funding Request (IFR) Triage meeting is a clinically led multi-professional meeting responsible for determining that an IFR application is eligible for consideration by the IFR Panel.

1.2 The IFR Triage Group is accountable to the IFR Panel, so will act as a sub-committee of the IFR Panel. The IFR Panel is accountable to the SEL Integrated Care Board (ICB) Board or equivalent via its committee structure.

2. The IFR Triage Process

2.1 The IFR Panel will only consider requests as defined within the SEL ICB IFR policy so the IFR Triage process is undertaken in order to reduce inappropriate requests.

2.2 Once an application has been administratively screened, it will be submitted to the next triage meeting to determine whether the IFR is eligible for consideration by the IFR panel, from a clinical perspective.

3. Duties and Responsibilities

3.1 The purpose of the Triage Group is to determine that an IFR is eligible for consideration by the IFR Panel. The triage meeting will consider the following questions for each IFR requests:

- Is the treatment requested funded within an existing commissioning policy?
- Is the treatment requested covered by another SEL policy or process?
- Is the treatment an obvious Service Development (i.e. a request pertaining to a cohort of patients and not reflective of an individual's clinical circumstances)?
- Does the submission make an arguable case for clinical exceptionality or rarity? If submitted on the basis of exceptionality does the submission demonstrate why and how this patient might be expected to gain more benefit compared to other patients with this condition?
- Is the request an appeal or resubmission of a previous case?

3.2 Triage has the authority to close cases when further information has not been received in the given timescales (see appendix G for IFR Operating timescales) or a repeat application containing no new or additional information has been received.

3. 3 Triage has the authority to undertake a preliminary assessment of an appeal request, assessing the submission against the grounds for appeal criteria to determine whether the request is eligible for consideration by the IFR Appeal Panel. The grounds for appeal are set out within the Appeals Panel Terms of reference and the IFR Policy.

4. Reporting

4.1 The triage meeting decisions and rationales shall be recorded by the relevant IFR officer.

5. Membership & Quorum

5.1 IFR Triage will be made up of a multi-professional membership comprising:

- Senior Pharmacist (SEL ICB)
- Consultant in Public Health (or their delegate)
- Senior Clinician (medically qualified)
- Senior contracts Manager
- IFR manager

5.2 The meeting will be considered quorate if one medically qualified member is present. If a drug case is to be considered, a pharmacist must be present.

5.3 Triage members are required to declare any interests before serving on an IFR Triage meeting. Any conflicts of interest must be declared as a standing item at the commencement of every meeting and the Chair will decide the appropriate action, including requesting that members withdraw from the meeting.

6. Chair

6.1 Triage can be chaired by any of the members provided that they have sat as an IFR Triage member at least 4 times. The Chair must be identified in advance of the meeting, and must be available to approve the minutes/letters and fulfil and any other obligations within the specified time frame.

7. Frequency of Triage Meetings

7.1 Triage meetings will take place weekly until further notice.

8. Venue of Triage Meetings

8.1 The triage meeting will take place virtually online.

9. Confidentiality

9.1 Anonymity is essential for two reasons:

- In order to protect patient's identity, for this reason the requesting clinician is asked to not refer to the patient by name or initials within the rest of the application form.
- For equity of decision making, to ensure that the panel decisions do not take into account personal details such as age or sex

9.2 Depending upon individual clinical circumstances it may be necessary to re-introduce information on the patient's age and/or sex for consideration. When cases are considered which require access to confidential clinical information through triage, consent to disclosure of such information to all members of the IFR Triage Panel is provided by the applicant's declaration of patient consent within the submission. This will be indicated to patients by the referring clinician and be confirmed in IFR publicity material.

10. Review

10.1 The IFR Triage Meeting Terms of Reference will be reviewed annually or sooner in light of any changes in legislation, practice or local/national guidance.

Next review June 2023