

Reporting Committee	JCC - All Wales Individual Patient Funding Request (IPFR) Panel
Chaired by	Elizabeth Abderrahim
Lead Executive Director	Director of Nursing and Quality Assurance
Date of last meeting	WHSSC IPFR Panel meeting 15 December 2024

Summary of key matters considered by the Committee and any related decisions made.

The following table demonstrates the number of requests considered at the Chair's Action Panel meetings and All Wales IPFR Panel meetings during this reporting period.

	Number of Requests discussed as Chair's Actions	Number of Requests discussed by WHSSC IPFR Panel
November	3	23
December	2	19

Key risks and issues/matters of concern and any mitigating actions

Health Board Attendance progress

There are no concerns to escalate during this reporting period.

Vice Chair Vacancies

Emails have been sent out to all non-JCC Panel members requesting expressions of interest for the two AW IPFR Panel Vice Chair Vacancies. The deadline given for nominations is 15 January 2025 for a proposed voting of appointment on 5 February 2025.

Individual Patient Funding Request (IPFR) Quality Assurance (QA) Group Audit Report – November 2024

One of the roles of this group is to consider an anonymised random sample of IPFR reports (one from each IPFR panel in Wales) in relation to their completeness, timeliness and efficiency of communication in line with the NHS Wales IPFR policy process. During this meeting the group considered one application from each panel considered between **July and September 2024**.

The report highlighted that six of the ten criteria were met for the IPFR assessed from the JCC. The urgency for the IPFR assessed was requested as non-urgent and so should have been considered within six weeks of receipt of the completed form. The request went to the panel for a decision over three months after it was received, the group consider this to be an unacceptable delay. Correspondence

provided to the QA group showed that panel would not discuss the case in July as they believed the associated policy was out of date. The policy in question was still live at the time of the request submission. The group are of the opinion that the panel should have considered the case and then make a recommendation to the policy group to update the policy.

The group felt that the discussion by the panel did not follow the criteria within the IPFR policy. Under 9a, the panel is required to consider whether the patients' clinical circumstances are significantly different to other patients for whom the recommendation is made not to use the intervention' (in this case their condition is not clinically different but their single status is out with policy) and whether the patient is likely to gain significantly more clinical benefit from the intervention than would normally be expected for patients for whom the recommendation has been made not to use the intervention (compared to other single patients). The economic considerations could also have been discussed and then consideration of ethical issues raised would have facilitated the decision where the other criteria had not.

Between July and September 2024, 85% of application considered by the NWJCC panel met the urgency stipulated in the application form. In the previous quarter 93% of cases met the urgency requested and in the same quarter in 2023 all cases met the urgency. The panel has carefully considered these findings, but were concerned that on occasions the requested urgency from clinicians was dissonant with the urgency with which the IPFR form was submitted.

Matters referred to other Committees

- None

Confirmed Minutes for each of the meetings are available on request.

Date of next meeting	15 January 2025
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