



TNRF1 (CL02)

List of Procedures That Are Not Routinely Funded Requiring Individual Funding Applications

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Approved by	CCG Governing Body
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Version control sheet

Version	Date	Author	Status	Comments / changes since last version
1	01/03/2013	Amended from NHS Surrey policy CLIN 13 (a) version 1 Oct 2012.	Draft	Adapted for approval by the Executive and Governing Body
	01/04/2013	Adapted for CCG	Draft	For approval by Executive Committee
	01/07/2013	Adapted for CCG	Final	For approval by CCG Governing Body
	01/07/2013	Adapted for CCG	Final	Final version approved by Governing Body 19 July 2013
2	01/08/2014	Dr. Liz Saunders	Final	<p>Changes approved by Priorities Committee:</p> <ul style="list-style-type: none"> • Breast Reduction removed and transferred to TNRF2 policy. Breast augmentation: need for approved Gender Dysphoria cases to be considered via IFR process. • Blepharoplasty/ptosis surgery removed and transferred to TNRF2 policy. • Benign skin lesions removed as already in TNRF2 policy. • Rhinoplasty removed as already in TNRF2 policy. • Labial reduction removed and transferred to TNRF2 policy. • Metal on metal hip resurfacing new addition.

				<p>Removed from TNRF2 policy.</p> <ul style="list-style-type: none"> • Varicose veins removed as already in TNRF2 policy. Surgery for blushing and sweating are under review. • Extracorporeal electrophoresis for chronic graft-versus-host disease in cutaneous T Cell Lymphoma removed as it is standard practice. • FES for drop foot: details of commissioning added
2.2	01/01/2016	Surrey Priorities Committee	Final	<ul style="list-style-type: none"> • Radiofrequency Spinal Denervation new addition. Removed from TNRF2 policy. • MLD/Complex Decongestive Therapy amended • Enhanced External Counter Pulsation (EECP) added • Breast Augmentation guidance notes reworded • Breast Implant Removal guidance notes reworded • Male Breast Reduction for Gynaecomastia moved to TNRF2 • Iontophoresis, Botox or surgical procedures for hyperhidrosis amended
2.3	01/01/2017	Surrey Priorities Committee	Final	<ul style="list-style-type: none"> • Guidance notes for Spinal Cord Stimulation amended

2.4	01/03/2017	Surrey Priorities Committee	Final	<ul style="list-style-type: none"> • Soft Palate Implants inserted • Surgical treatment for OSAS inserted
2.5	01/05/2017	Surrey Priorities Committee	Final	<ul style="list-style-type: none"> • Epiduroscopic lumbar discectomy through the sacral hiatus for sciatica inserted
2.6	01/07/2017	Surrey Priorities Committee & Local Management Team	Final	<ul style="list-style-type: none"> • Extracorporeal Shockwave Therapy inserted – omitted from SPC updates April 2016 • Included details relating to funding requests for equipment/devices under 'Treatments Not Routinely Funded'
2.7	01/06/2018	Surrey Priorities Committee	Final	<ul style="list-style-type: none"> • Subacromial Shoulder Decompression inserted • Repair of Diastasis of the Rectus Abdominis Muscle inserted
2.8	01.06.2019	Surrey Priorities Committee	Draft	<ul style="list-style-type: none"> • Occipital Nerve Stimulation (ONS) for management of medically intractable migraine, medically refractory cluster headaches and facial pain
2.9	26/09/19	Surrey Priorities Committee	Draft	<ul style="list-style-type: none"> • TNRF1 068 Lumbar Facet joint injections added • TNRF1 069 Cervical and Thoracic Facet Joint Injections added • TNRF1 070 Platelet rich plasma injections (autologous blood injections) added • TNRF1 071 Surgical treatment for male gynaecomastia added

				<ul style="list-style-type: none"> • TNRF1 058A Radiofrequency facet joint denervation (RFD) of lumbar and cervical facet joints for chronic facet pain removed • TNRF1 058B Radiofrequency spinal denervation removed
3.0	08/01/2020	Approved by Governing Body - Chair's Action	Final	Approved as Chair's Action
3.1	01/11/2020	Virtual Surrey Priorities Committee	Draft	Agreed by Surrey Heartlands CCG ICP Directors and Surrey Heath CCG Medical Director TNRF1 020 Liposuction amended
3.1	02/12/2020	Virtual Surrey Priorities Committee	Final	Approved and ratified by Quality & Performance Board via Chair's Action
3.2	12/05/2021	Virtual Surrey Priorities Committee	Draft	Agreed by Surrey Heartlands CCG ICP Directors and Frimley CCG (Surrey Heath only) Medical Director TNRF1 057 EECP reviewed against current evidence – no changes made TNRF1 072 Functional Electrical Stimulation (FES) in dropped foot amended Review cycle moved from 3 to 5 years.
3.2	07/06/2021	Virtual Surrey Priorities Committee	Final	Agreed by the Quality & Performance Board
3.2	18/06/2021	Virtual Surrey Priorities Committee	Final	Ratified for publication by the Health & Care Professionals Executive

Equality statement

Surrey Heartlands Clinical Commissioning Group (CCG) is committed to promoting equality and diversity in all its activities and to promote inclusive processes, practices and culture.

- We will strive to work to eliminate any unlawful or unfair discrimination including direct or indirect discrimination, discrimination by association, discrimination linked to a perceived characteristic, harassment and victimisation.
- We will remain proactive in taking steps to ensure inclusion and engagement for all the people who work for and with us.
- We will continue to strive towards a culture that is diverse and inclusive that recognises and develops the potential of all staff and service users.
- We recognise the business benefits and opportunities of having a diverse community of staff who value one another and realising the contribution they can make to achieve the CCG's vision.

This includes promoting equality and diversity for all irrespective of:

- age*
- disability*
- ethnic group*
- gender*
- gender reassignment*
- religion or belief*
- sexual orientation*
- marriage and civil partnership*
- pregnancy and maternity*
- carers
- people with diverse communication needs

*Under the Equality Act (2010) these are known as “protected characteristics”.

The CCG aims to meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. We take into account the Human Rights Act 1998 and promote equal opportunities for all. We embrace the seven staff pledges in the NHS Constitution that represent a commitment by the NHS to provide high-quality working environments for staff. This policy is consistent with these pledges.

This document has been assessed to ensure that no employee or member of the public receives less favourable treatment based on their protected characteristics.

Members of staff, volunteers or members of the public are invited to request assistance with this policy if they have particular needs. If the member of staff has language difficulties and difficulty in understanding this policy, the use of an interpreter will be considered.

Equality analysis

Equality analysis is a way of considering the effect on different groups protected from discrimination by the Equality Act, such as people of different ages. There are two reasons for this:

- to consider if there are any unintended consequences for some groups
- to consider if the policy will be fully effective for all target groups

<p>Title of Policy: List of Procedures That Are Not Routinely Funded Requiring Individual Funding Applications</p>	<p>Policy Ref: TNRF 1 (CL02)</p>
<p>Assessment conducted by (name, role): Clare Johns (Lead Commissioning Pharmacy Technician, Pharmaceutical Commissioning, Surrey Heartlands CCG)</p>	<p>Date of analysis: 17th April 2020</p>
<p>Give a brief summary of the policy. Explain its aim. The policy provides information for clinicians about the procedures that are not routinely funded by the Surrey CCGs and where an individual funding request would be required if clinical exceptionality could be demonstrated for an individual patient.</p>	
<p>Who is intended to <u>benefit from</u> this policy? <i>Explain the aim of the policy as applied to this group.</i> All patients who have a clinical need will be able to access the treatments within this policy</p>	
<p>1. Evidence considered: <i>What data or other information have you used to evaluate if this policy is likely to have a positive or an adverse impact upon protected groups when implemented?</i> Information from NHS England at https://www.england.nhs.uk/</p>	
<p>2. Consultation: <i>Give details of all consultation and engagement activities used to inform the analysis of impact.</i> Liaison with Effective Commissioning Initiative (ECI) team acting on behalf of all Surrey CCGs</p>	

<p>3. Analysis of impact: <i>In the boxes below, identify any issues in the policy where equality characteristics require consideration for either those abiding by the policy or those the policy is aimed to benefit, based upon your research.</i></p> <p><i>Are there any likely impacts for this group? Will this group be impacted differently by this policy? Are these impacts negative or positive? What actions will be taken to mitigate identified impacts?</i></p>	
<p>a) Age</p> <p>Ageism is prejudice or discrimination on the grounds of a person's age. Ageism can affect anybody, regardless of their age</p>	<p>Neutral impact (be aware)</p> <p>Breast Augmentation (TNRF1-027), children under the age of 18 and under the NHS England Gender Dysphoria pathway are considered not to have finished growing therefore would not be considered for surgery until the patient is 18.</p>
<p>b) Disability</p> <p>A person has a disability (by law) if they have a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.</p>	<p>Neutral impact</p>
<p>c) Gender reassignment</p> <p>Gender reassignment is a personal, social, and sometimes medical process by which a person's gender appears to others to have changed. Anyone who proposes to, starts or has completed a process to change his, her or their gender is protected from discrimination under the Equality Act. A person does not need to be undergoing medical supervision to be protected.</p>	<p>Negative impact (be aware)</p> <p>Breast Augmentation (TNRF1-027), children under the age of 18 and under the NHS England Gender Dysphoria pathway are considered not to have finished growing therefore would not be considered for surgery until the patient is 18.</p>
<p>d) Marriage or civil partnership</p> <p>This is the relationship between two people who are husband and wife, or a similar relationship between people of the same sex (as defined by Marriage (Same Sex Couples) Act 2013).</p> <p>Civil partners must be treated the same as married couples on a wide range of legal matters.</p>	<p>Neutral Impact</p>

<p>e) Pregnancy and maternity (adoption is covered within this)</p> <p>Pregnancy - being pregnant or expecting a baby. Maternity is the period after the birth or adoption and is linked to maternity and adoption leave in the employment context.</p>	<p>Neutral impact</p>
<p>f) Race</p> <p>Race characteristics refers to a group of people defined by their race, colour and nationality (including citizenship) ethnic or national origins.</p>	<p>Neutral impact</p>
<p>g) Religion and belief</p> <p>Religion refers to any religion while belief comprises religious and philosophical beliefs including lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.</p>	<p>Neutral impact</p>
<p>h) Sex</p> <p>This is defined as a person's legal sex; in the UK this is recognised as either being a man or a woman. Sex is more commonly referred to as gender identity, which is the internal sense of being male, female, a combination of male and female, or neither male or female.</p>	<p>Neutral impact</p>
<p>i) Sexual orientation</p> <p>Refers to a persons' orientation or attraction towards; the same sex, opposite sex or to both sexes.</p>	<p>Neutral impact</p>
<p>j) Carers</p> <p>A carer is anyone, including children and adults who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid.</p>	<p>Neutral impact</p>

4. Monitoring: *How will you review/monitor the impact and effectiveness of your actions?*

Equality impact assessment will be repeated each time this policy is updated. Complaints received by the effective commissioning Initiative (ECI) team will be used to determine impact of this policy on service users.

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List of Procedures That Are Not Routinely Funded Requiring Individual Funding Applications

The Clinical Commissioning Group's (CCG's) have considered evidence of clinical effectiveness and experience, information on current activity, resources, costs and provision across the South East Coast in order to formulate the following recommendations. The CCG has also undertaken a comparative analysis with policies adopted by CCGs in Brighton, Kent and London and acknowledges with thanks the permission given to utilise their policy statements. There is no blanket ban on these procedures. There is an established mechanism for dealing with individual funding requests (IFR)/exceptions. The application form for clinicians wishing to request funding for individuals that are eligible against the definitions of a "rarity request" or an "exceptionality request" as set out in the CCGs Policy and Operating Procedures for dealing with Individual Funding Requests (IFRs).

The specific OPCS codes to which each of the treatments could be assigned are listed in the document embedded below and will be updated as and when national PbR guidance is released. Local coding will also be monitored and reflected in the listing.

All procedures contained in this policy, with the exception of any equipment/device requests, will require an Individual Funding Request application before the procedure can take place (unless related to the treatment of cancer). This policy will be updated periodically as new clinical evidence emerges and in line with the Surrey Priorities Committee work plan.

For details on the process for securing funding for equipment/devices, please see the Operating Process for dealing with IFR's.

1. Alternative Therapies

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 – 001	Acupuncture	This procedure is not routinely funded
TNRF 1 - 002	Aromatherapy	This treatment is not routinely funded. (It is only available as part of palliative care packages)
TNRF 1 - 003	Chinese medicines	This treatment is not routinely funded
TNRF 1 - 004	Chiropractic therapy	This treatment is not routinely funded
TNRF 1 - 005	Clinical ecology	These procedures are not routinely funded
TNRF 1 - 006	Herbal remedies	This treatment is not routinely funded
TNRF 1 - 007	Homeopathy	This treatment is not routinely funded
TNRF 1 - 008	Hydrotherapy, unless part of an established care package	This treatment is not routinely funded
TNRF 1 - 009	Hypnotherapy	This procedure is not routinely funded
TNRF 1 - 010	Massage	This treatment is not routinely funded. (It is only available as part of commissioned palliative care packages)
TNRF 1 - 011	Osteopathy	This treatment is not routinely funded
TNRF 1 - 012	Reflexology	This procedure is not routinely funded

2. Cosmetic/Plastic Surgery

2.1 Body Contouring Procedures

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 013	Apronectomy/Abdominoplasty	This procedure is not routinely funded
TNRF 1 - 014	Removal of excess skin following weight loss	This procedure is not routinely funded, in line with South East Coast Policy Recommendation Committee (PR 2009-09). Bariatric Surgeons, GPs and other clinicians supporting patients in losing weight should document discussions with patients regarding the possibility of being left with excess skin after profound weight loss, and inform patients that surgery to remove excess skin is not routinely available on the NHS. Where appropriate, this should be part of the consent process.
TNRF 1 - 015	Body contouring	This procedure is not routinely funded
TNRF 1 - 016	Brachioplasty/Upper arm lift	This procedure is not routinely funded
TNRF 1 - 017	Buttock Lift	This procedure is not routinely funded
TNRF 1 - 018	Calf implants	This procedure is not routinely funded
TNRF 1 - 019	Excision of redundant skin or fat	This procedure is not routinely funded
TNRF 1 - 020	Liposuction	The CCG will not routinely fund cosmetic liposuction
TNRF 1 - 021	Neck lift	This procedure is not routinely funded
TNRF 1 - 022	Plastic operations on umbilicus	This procedure is not routinely funded
TNRF 1 - 023	Refashioning of scar	This procedure is not routinely funded
TNRF 1 - 024	Submental lipectomy	This procedure is not routinely funded
TNRF 1 - 025	Thigh lift	This procedure is not routinely funded

TNRF 1 - 026	Upper arm reduction	This procedure is not routinely funded
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2.2 Breast Surgery

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 027	Breast augmentation	This procedure is not routinely funded. This recommendation does not apply to patients undergoing breast reconstruction as part of treatment for breast cancer; South East Coast Policy Recommendation 2011-03. Patients requiring this procedure as part of a Gender Dysphoria care pathway approved by NHS England will be considered on an IFR basis.
TNRF 1 - 028	Breast Implant Removal	Surrey Downs CCG will consider a funding application for the removal of breast implant(s) where it is clinically indicated. The CCG will not fund replacement implants.
N/A	Breast reduction	See TNRF 2 List of Procedures with Restriction/Thresholds Policy
TNRF 1 – 028a	Mastopexy	This procedure is not routinely funded. Mastopexy is not funded within the local NHS for any patient group. This recommendation does not apply to patients undergoing breast reconstruction as part of treatment for breast cancer; South East Coast Policy Recommendation 2011-06.
TNRF 1 - 029	Correction of inverted nipple	This procedure is not routinely funded. Nipple eversion is not funded within the local NHS for any patient group. This recommendation does not apply to patients undergoing breast reconstruction as part of treatment for breast cancer; South East Coast Policy Recommendation 2011-07.
TNRF1 071	Surgical treatment for male gynaecomastia	This procedure is not routinely funded

2.3 Facial Procedures

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Blepharoplasty / Ptosis Surgery	See List of Procedures with Restriction/Thresholds Policy
TNRF 1 - 031	Face lift	This procedure is not routinely funded
TNRF 1 - 032	Brow lift	This procedure is not routinely funded
TNRF 1 - 033	Correction of brow ptosis	This procedure is not routinely funded

2.4 Skin and Subcutaneous Procedures

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 034	Hair transplant /Hair graft/ Hair replacement /Intralace hair system for abnormal hair loss	Procedures for this are not routinely funded. (Hair pieces and wigs for patients experiencing total hair loss as a result of alopecia totalis, cancer treatment, previous surgery or trauma are available from local NHS Trusts)
TNRF 1 - 035	Irregularities of aesthetic significance	Procedures for this are not routinely funded
TNRF 1 - 036	Repair of chronic tear of lobe of external ear	This procedure is not routinely funded
TNRF 1 - 037	Repair of chronic clefts due to avulsion of body piercing	This procedure is not routinely funded
TNRF 1 - 038	Skin grafts for scars	This procedure is not routinely funded. The CCG will fund this treatment for burns and as part of reconstruction following major trauma
TNRF 1 - 039	Tattoo removal	This procedure is not routinely funded

3. Dermatology

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 040	Chemical peels	This procedure is not routinely funded
TNRF 1 - 041	Dermabrasion of skin	This procedure is not routinely funded
TNRF 1 - 042	Electrolysis	This procedure is not routinely funded with the exception of the treatment of ingrowing eyelashes, which is routinely funded
TNRF 1 - 043	Hirsutism procedures	Hair removal procedures for hirsutism are not routinely funded
TNRF 1 – 044	Iontophoresis or Botox for Hyperhidrosis	This procedure is not routinely funded
TNRF 1 - 045	Laser therapy / Laser treatment/ Tunable dye laser for aesthetic reasons	These procedures are not routinely funded
TNRF 1 - 046	Tattooing of the skin	This procedure is not routinely funded. Removal of nipple tattooing will be funded as part of breast reconstruction for cancer patients
N/A	Removal of benign skin lesions	See TNRF 2 List of Procedures with Restriction/Thresholds Policy

4. Dental

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Dental Implants	This service is commissioned and applications are managed by the NHS England Area Team.
N/A	Orthodontics (Grade 3.5 and below on the Index of Orthodontic Treatment Need)	This service is commissioned and applications are managed by the NHS England Area Team.
N/A	Orthognathic surgery	This service is commissioned and applications are managed by the NHS England Area Team.

5. Ear Nose and Throat

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 – 047a	Procedures to correct Rhinophyma	Surgical procedures/treatments for this condition are not routinely funded
TNRF 1 – 047b	Rhinoplasty for cosmetic reasons	This procedure is not routinely funded
N/A	Rhinoplasty	See TNRF 2 List of Procedures with Restriction/Thresholds Policy
TNRF1 – 47c	Soft Palate Implants	This procedure is not routinely funded
TNRF1 – 47d	Surgical treatment for Obstructive Sleep Apnoea Syndrome	Surgical procedures for the treatment of this condition will only be funded if a sleep clinic or respiratory consultant makes a recommendation for a surgical assessment of a patient with sleep apnoea and the subsequent surgical assessment confirms the need for a surgical intervention to address the sleep apnoea

6. Gynaecology

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 048	Reversal of female sterilisation	The CCG will not routinely fund female sterilisation reversals. Patients who have a sterilisation procedure should be made aware that subsequent reversal of sterilisation will not normally be available on the NHS
N/A	Labial reduction	See TNRF 2 List of Procedures with Restriction/Thresholds policy

7. Musculoskeletal

7.1 Pain Management

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 – 057a	Epidural Injections for non-radicular pain	This procedure is not routinely funded
N/A	Radiofrequency Denervation (RFD) to treat osteoidosteoma	See TNRF 2 List of Procedures with Restriction/Thresholds policy
TNRF1 - 058C	Epiduroscopic lumbar discectomy through the sacral hiatus for sciatica	This procedure is not routinely funded

N/A	Occipital Nerve Stimulation (ONS) for management of medically intractable migraine, medically refractory cluster headaches and facial pain	This procedure is commissioned by NHS England
TNRF1 068	Lumbar Facet joint injections	For patients with chronic non – specific low back pain and those with sciatica will not be routinely funded
TNRF1 069	Cervical and Thoracic Facet Joint Injections	Facet Joint Injections or Medial Branch Block Injections for chronic pain in the cervical or thoracic spine will not be routinely funded
TNRF1 070	Platelet rich plasma injections (autologous blood injections)	This procedure will not be routinely funded for any MSK conditions

7.2 Orthopaedic

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 059	Metal-on-metal hip resurfacing	This procedure is not routinely funded in line with South East Coast policy
TNRF1 – 065	Extracorporeal Shockwave Therapy	This procedure is not routinely funded
TNRF1 - 066	Subacromial Shoulder Decompression	This procedure is not routinely funded

8. Neurology/Neurosurgery

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Cerebellar stimulator implants	This service is commissioned and applications are managed by the NHS England Area Team.

N/A	Spinal cord stimulation (SCS)	This procedure is commissioned in highly specialist pain management centres by NHS England. Applications are managed by the NHS England Area Team. Where commissioning responsibility falls with the CCG (outside of highly specialist pain management centres) the procedure is not routinely funded.
N/A	Neurosurgery for cerebral metastases	This service is commissioned and applications are managed by the NHS England Area Team.

9. Oncology

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Indwelling pleural catheter for the treatment of malignant pleural effusions in a community setting.	This service is commissioned and applications are managed by the NHS England Area Team
N/A	Stereotactic Radiation Therapy	This service is commissioned and applications are managed by the NHS England Area Team

10. Ophthalmology

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 049	Arteriovenous crossing sheatotomy for branch retinal vein occlusion	This procedure is not routinely funded. If NHS clinicians undertake this procedure as part of a research project, the CCG should be notified and informed of research governance arrangements
TNRF 1 – 050a	Excimer laser surgery for short sight/long sight or Astigmatism	This procedure is not routinely funded
TNRF 1 – 50b	Xanthelasma	This procedure is not routinely funded

11. Weight Management

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Bariatric surgery in adults	See TNRF 2 List of Procedures with Restriction/Thresholds policy

12. Other Surgery

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Endoscopic thoracic sympathectomy for facial blushing and sweating.	See TNRF 2 List of Procedures with Restriction/Thresholds policy
N/A	Gender reassignment	This Gender Dysphoria service is commissioned and applications are managed by the NHS England Area Team. 'Non-core' procedures are the commissioning responsibility of the CCG but are not routinely funded, I.e. Breast Reduction, Facial Feminisation Surgery, Lipoplasty/contouring and gametes storage so can only be considered as part of an IFR application.
TNRF1 - 067	Repair of Diastasis of the Rectus Abdominis Muscle	This procedure is not routinely funded

13. Urology

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 060	Penile Implants	This procedure is not routinely funded

TNRF 1 - 061	Reversal of vasectomy	This procedure is not routinely funded. Patients who have a sterilisation procedure should be made aware that subsequent reversal of sterilisation will not normally be available on the NHS
TNRF 1 - 062	Retractile penile surgery	This procedure is not routinely funded.

14. Other Procedures/Equipment

Code	Procedure / Treatment	TNRF Guidance Notes
TNRF 1 - 051	Intralace hair system for abnormal hair loss	This procedure is not routinely funded
N/A	Prostheses for body parts (Prosthetic components not covered by the NHS contract will not be funded)	A range of prosthetics are available on the NHS. Prosthetic components not routinely provided by the NHS will not be funded. This service is commissioned and applications are managed by the NHS England Area Team.
TNRF 1 - 052	Surgical implantation of bioelectrical or kineplastic equipment in limbs	A range of prosthetics are available on the NHS. Prosthetic components not covered by the NHS contract will not be funded.
N/A	Extracorporeal photopheresis for the treatment of chronic graft versus host disease for cutaneous T cell lymphoma	Removed as this is standard practice.
N/A	Hyperbaric oxygen therapy for wound healing	This service is commissioned and applications are managed by the NHS England Area Team.

TNRF 1 - 053	Manual Lymphatic Drainage (MLD)	Manual lymphatic drainage (MLD) for Lymphoedema is currently routinely funded. However if clinicians wish to provide Complex Decongestive Therapy of which MLD is usually a component, then pre-authorisation will need to be sought
TNRF 1 - 054	Polysomnography in the investigation of children with sleep-related disorders	This procedure is not routinely funded
TNRF 1 - 055	NHS patient transfers to private treatment providers.	When clinicians retire from the NHS they may continue to practice privately. Patients may wish to continue seeing them rather than see a new NHS clinician. The CCG will not routinely fund private consultations or treatment where previously provided as an NHS funded service
N/A	Residential pain management programmes	This service is commissioned and applications are managed by the NHS England Area Team
TNRF 1 - 056	Trans-cranial doppler ultrasonography with frequent transfusion to prevent stroke in children with sickle cell disease	This procedure is not routinely funded.
TNRF1 - 072	Functional electrical stimulation (FES) in dropped foot	<p>Advice may be given about other aspects of mobility/postural management such as use of vehicles, static seating, standing frames etc. NHS England would in certain circumstances supply items for use in specialised centres whilst an inpatient.</p> <p>The patient's CCG will commission the device where it is used in the community AND it can be demonstrated that the patient is clinically exceptional therefore requiring an Individual Funding Request (IFR) application. NHS England specialist centres are available to offer advice.</p>

TNRF 1 – 057	Enhanced External Counter Pulsation (EECP)	This procedure is not routinely funded.
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15. Vascular Surgery

Code	Procedure / Treatment	TNRF Guidance Notes
N/A	Varicose Vein Surgery – Classes 1 and 2	See TNRF 2 List of Procedures with Restriction/Thresholds policy

16. Appendix 1 – Nice Interventional Procedure Guidance

NICE Interventional Procedure Guidance

NICE issues Interventional Procedure Guidance (IPGs) with the aim of protecting the safety of patients and supporting the NHS in the process of introducing new procedures. The IPGs are not covered by the Secretary of State's directions to NHS organisations to fund the implementation of NICE recommendations within a given timescale because this direction relates only to NICE Technology Appraisal Guidance (TAGs). Interventional Procedure Guidance makes recommendations on the safety of the procedure and how well it works. The guidance does not recommend whether the NHS should fund a procedure or not and these decisions are therefore for the CCGs. The CCG recognises that it is not within the remit of the NICE IPG Programme to evaluate the cost-effectiveness of interventional procedures or to advise the NHS whether interventional procedures should be funded.

Details can be found on the following website:

<http://www.nice.org.uk/guidance>

The specific commissioning position with respect to different categories of IPG

Special Arrangements

The CCG will not routinely fund health care interventions that are subject to a NICE IPG where the IPG states: 'current evidence on safety is inadequate, current evidence on efficacy is inadequate, evidence of safety and efficacy is on small numbers of patients and of limited quality, no major safety concerns but efficacy has not been shown, evidence is limited to a small number of patients, good short term efficacy but little evidence of long term efficacy, there is adequate evidence of safety and efficacy but the technical demands are such that it should not be used without special arrangements, evidence for short term efficacy is limited and long term outcomes are uncertain'.

Research Only

The CCG will not routinely fund health care interventions that the NICE IPG programme has recommended should only be undertaken in the context of research. Clinicians wishing to undertake such procedures should ensure they fulfil the normal requirements for undertaking research. Where there is a possibility that there may be impacts on NHS funded care following the cessation of the trial, or a patient's completion of a trial, clinicians are strongly encouraged to discuss this with the CCG at the earliest opportunity.

Do not use

Please note: The CCG will not fund health care interventions where a NICE IPG recommends that the intervention should not be used in the NHS.