

NHS Dorset Clinical Commissioning Group

Apronectomy/Abdominoplasty

Criteria Based Access Protocol



Supporting people in Dorset to lead healthier lives

NHS DORSET CLINICAL COMMISSIONING GROUP

APRONECTOMY/ABDOMINOPLASTY CRITERIA BASED ACCESS PROTOCOL

1. INTRODUCTION AND SCOPE

- 1.1 This protocol describes the exclusions and access criteria in respect of Apronectomy/ Abdominoplasty. It is applied in accordance with the Policy for Individual Patient Treatments.
- 1.2 This protocol does not apply to patients who are covered under the cosmetic surgery criteria based access protocol.
- 1.3 This protocol is applied in accordance with the Policy for Individual Patient Treatments.

2. DEFINITIONS

- 2.1 Any definitions related to this Criteria Based Access Protocol are included as a Glossary at Appendix B.

3. ACCESS CRITERIA

- 3.1 Abdominoplasty/Apronectomy surgery for patients who have lost a significant amount of weight and have been left with an overhang of skin is not supported. This exclusion applies equally to those who have undergone bariatric surgery.
- 3.2 Abdominoplasty/Apronectomy surgery would only be considered in exceptional cases, subject to prior approval, for those patients evidencing a strong clinical need and where there is more than one year's documentary evidence from the GP/Clinician of clinical need, e.g. persistent and recurring infections that have failed to respond to treatment. A full history of treatments will need to be supplied with any patient request. The expectation would be that the history will include the range of treatments and outcomes already undertaken.

4. EXCLUSIONS

- 4.1 NHS Dorset Clinical Commissioning Group does not support Apronectomy/ Abdominoplasty for cosmetic purposes.

5. CASES FOR INDIVIDUAL CONSIDERATION

- 5.1 Should a patient not meet the criteria detailed within this protocol, the Policy for Individual Patient Treatments (which is available on the NHS Dorset Clinical Commissioning Group website or upon request), recognises that there will be occasions when patients who are not considered for funding may have good clinical reasons for being treated as exceptions. In such cases the requesting clinician must provide further information to support the case for being considered as an exception.

- 5.2 The fact that treatment is likely to be effective for a patient is not, in itself a basis for exceptional circumstances. In order for funding to be agreed there must be some unusual or unique clinical factor in respect of the patient that suggests that they are:
- significantly different to the general population of patients with the particular condition; and
 - they are likely to gain significantly more benefits from the intervention than might be expected for the average patient with the condition

- 5.3 In these circumstances, please refer to the Individual Patient Treatment Team at the address below:

First Floor West
Vespasian House
Barrack Road
Dorchester
DT1 1TG
Telephone no: 01305 368936
Email: individual.requests@dorsetccg.nhs.uk

6. CONSULTATION

- 6.1 Prior to approval from Dorset CCG's Clinical Commissioning Committee this Protocol was reviewed by the Planned and Specialist CDG which includes commissioners, clinicians and other relevant stakeholders.
- 6.2 An Equality Impact Assessment for this Criteria Based Access Protocol is available on request.

7. RECOMMENDATION AND APPROVAL PROCESS

- 7.1 As documented in NHS Dorset CCG's 'Procedure for the management and development of procedural documents', Criteria Based Access Protocols must be formally recommended by the Clinical Delivery Group responsible for the protocol, prior to formal approval by the Clinical Commissioning Committee.

8. COMMUNICATION/DISSEMINATION

- 8.1 Following approval of Criteria Based Access Protocols at Clinical Commissioning Committee each Protocol will be uploaded to the CCG's Intranet, Internet and added to the next GP Bulletin.

9. IMPLEMENTATION

- 9.1 Following review of this Criteria Based Access Protocol it was agreed there were no new aspects to be included in this version and therefore no requirement for an implementation plan.

10. DOCUMENT REVIEW FREQUENCY AND VERSION CONTROL

- 10.1 This Criteria Based Access Protocol requires a review every three years, or in the event of any changes to national guidance or when new guidance is issued.

FREQUENTLY ASKED QUESTIONS

N/A

GLOSSARY

N/A

A DOCUMENT DETAILS	
Procedural Document Number	112
Author (Name and Job Title)	Jenny Jones, Programme Officer
Clinical Delivery Group (recommending group)	Planned and Specialist
Date of recommendation by CDG	20 January 2016
Date of approval by CCC	17 February 2016
Version	4.0
Review frequency	3 Years
Review date	January 2019

B CONSULTATION PROCESS			
Version No	Review Date	Author and Job Title	Level of Consultation

C VERSION CONTROL					
Date of recommendation	Version No	Review date	Nature of change	Approval date	Approval Committee
January 2016	4.0	January 2016	Review and format change.		CCC

D ASSOCIATED DOCUMENTS
<ul style="list-style-type: none"> • Policy for individual patient treatment, NHS Dorset Clinical Commissioning Group • Making sense of Local Access Based Protocols, NHS Dorset Clinical Commissioning Group • State any other CCG documents that need to be read in conjunction with this procedural document.

E SUPPORTING DOCUMENTS/EVIDENCE BASED REFERENCES		
Evidence	Hyperlink (if available)	Date

G DISTRIBUTION LIST			
Internal CCG Intranet	CCG Internet Website	Communications Bulletin	External stakeholders
✓	✓	✓	✓