

**Scar Revision
Individual Funding Requests Policy**

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Application Form	Generic IFR application form

INDIVIDUAL FUNDING REQUEST POLICY

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INDIVIDUAL FUNDING REQUEST POLICY

VERSION CONTROL

Document Status:	Current policy
Version:	1516.v1.1a

DOCUMENT CHANGE HISTORY		
Version	Date	Comments
V1	2010	Updated Guidance for Clinicians Policy Document
V8e	October 2015	Reviewed by the SCCG CCPF no amendments Removed from the SCCG Guidance for Clinicians Policy Document
1516.v1.1	July 2017	Change of policy template from SWCSU template to SCCG

Equality Impact Assessment (EIA) Form OR EIA Screening Form completed. Date:	20151126 v1a
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SCAR REVISION POLICY

Scar Revision is not routinely funded by the CCG

General Principles

Funding approval will only be given in line with these general principles. Where patients are unable to meet these principles in addition to the specific treatment criteria set out in this policy, funding approval will not be given.

1. The CCG does not commission surgery for cosmetic purposes alone.
2. Funding approval must be secured by primary care prior to referring patients seeking corrective surgery.
3. Referring patients to secondary care without funding approval having been secured not only incurs significant costs in out-patient appointments for patients that may not qualify for surgery, but inappropriately raises the patient's expectation of treatment.
4. On limited occasions, the CCG may approve funding for an assessment only in order to confirm or obtain evidence demonstrating whether a patient meets the criteria for funding. In such cases, patients should be made aware that the assessment does not mean that they will be provided with surgery and surgery will only be provided where it can be demonstrated that the patients meets the criteria to access treatment in this policy.
5. Funding approval will only be given where there is evidence that the treatment requested is effective and the patient has the potential to benefit from the proposed treatment. Where it is demonstrated that patients have previously been provided with the treatment with limited or diminishing benefit, funding approval is unlikely to be agreed.
6. Patients should be advised that receiving funding approval does not confirm that they will receive treatment or surgery for a condition as a consent discussion will need to be undertaken with a clinician prior to treatment.
7. Patients with an elevated BMI of 30 or more are likely to receive fewer benefits from surgery and should be encouraged to lose weight further prior to seeking surgery. In addition, the risks of surgery are significantly increased. (Thelwall, 2015)
8. Patients who are smokers should be referred to smoking cessation services in order to reduce the risk of surgery and improve healing. (Loof S., 2014)
9. Where funding approval is given by the Individual Funding Panel, it will be available for a specified period of time, normally one year.

Background

Changing Faces is a charity for people and families who are living with conditions, marks or scars that affect their appearance

<https://www.changingfaces.org.uk/About-Us>

The Skin Camouflage Service programme was established in 1975 by the British Red Cross; in 2011 Changing Faces took over the service. The Skin Camouflage Service is available to Somerset patients on a self-referral basis. An appointment with the service is free.

The Skin Camouflage Service can provide patients living with scarring, or a skin condition that affects how they look and their confidence, a way of regaining self-confidence and independence. The Service finds products that provide the best colour match for each patient and then teaches them how to apply the products effectively. The Service then completes a prescription request for the required products (type, colour, size etc), which should be then taken to the patient's GP Practice for authorisation. Please contact skincam@changingfaces.org.uk or call 0300 0120 276, or visit their website for further information.

Links:

<https://www.changingfaces.org.uk/Skin-Camouflage>

<https://www.changingfaces.org.uk/Skin-Camouflage/I-want-an-appointment>

Policy - Criteria to Access Treatment - IFR

1. Scars that are resulting in physical disability due to contractures, tethering or recurrent breakdown will be treated.
2. Photographic supporting evidence to be sent with the application form

Keloid Scars:

3. Significant keloid scarring on the face or those that result in physical distress due to significant pain or pruritis will be considered
4. Keloid scars that are on other parts of the body or are secondary to ear piercing or other body piercing procedures will not normally be funded

Scars secondary to trauma/accidents:

5. Scars on the face that are exceptional in terms of size and disfigurement will be considered
6. Scar revision on the rest of the body for cosmetic purposes will not be considered unless there is evidence of exceptionality

In order for funding to be agreed there must be some unusual or unique clinical factor about the patient that suggests that they are exceptional as defined below:

- Significantly different to the general population of patients with the condition in question.
- Likely to gain significantly more benefit from the intervention than might be expected from the average patient with the condition.

Individual cases will be reviewed at the Commissioner's Individual Funding Panel upon receipt of a completed application form from the patient's GP, Consultant or Clinician.

Applications cannot be considered from patients personally.

Provided these patients receive the full support of their general practitioner, or clinician, in pursuing their funding request an application may be made to the Individual Funding Request Panel for consideration.

In order for funding to be agreed there must be some unusual or unique clinical factor about the patient that suggests that they are exceptional as defined below:

- Significantly different to the general population of patients with the condition in question.
- Likely to gain significantly more benefit from the intervention than might be expected from the average patient with the condition.

It is expected that clinicians will have ensured that the patient, on behalf of who they are forwarding the application for, is appropriately informed about the existing policies prior to an application to the IFRP. This will reassure the Panel that the patient has a reasonable expectation of the outcome of the application and its context.

If you would like further copies of this policy or need it in another format, such as Braille or another language, please contact the Patient Advice and Liaison Service on Telephone number: 08000 851067.

Or write to us: NHS Somerset Clinical Commissioning Group, Freepost RRKL-XKSC-ACSG, Yeovil, Somerset, BA22 8HR or **Email us:** somccg.pals@nhs.net

References