



Med Tech Funding- What you can apply for

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Med Tech Working Group

Spectra Optia [MTG28](#) is an Apheresis machine which has NICE guidance for the automation of red cell exchange for sickle cell patients. The MTFM policy guidance for 22/23 policy - mandates NHS commissioners to fund selected technologies that are NICE approved (with a published MTG or DG guidance), save resources and costs, and are affordable to the NHS (not more than £20m to implement).

The group was formed to ensure that the MTFM is used effectively to address the inequalities in access to RBCX throughout England. It will ensure collaboration between NHSE, NHSBT, the HCC Network and the HIN (AHSN).

Our role will be to work together to ensure that the funding for automated red cell exchange gives maximum benefit to patients.

Objectives of the group





Membership

- Membership includes NHS England Specialised Commissioning, Accelerated Access Collaborative Policy team (patient advocate), NHS England National Programme of Care – Haemoglobinopathies clinicians; a National Healthcare Inequalities Improvement Programme member, the National Speciality Clinical Advisor for Haemoglobinopathy, Terumo (Spectra Optia technology supplier) and co-opted clinicians from a variety of Trusts, and, to represent the patient, a member of the Sickle Cell Society.

Current position

- The success of this working group has been largely due to the diverse membership, who all share the same desire to increase access to automated red cell exchange and avoid inequitable access to treatment in England. The (AHSN) now health Innovation Network can work in an agile manner, using its local connections to facilitate regional connections within HCCs, working with the regional commissioners and NHS BT to determine gaps in provision, undertake options appraisals and produce business cases. AHSNs are ensuring that all the Specialist and Local Trust stakeholders are included in the discussions, so there should be no gaps in service provision.

Med Tech Commissioning

- Specialised commissioning have funds available to support service improvement but not capital expenditure for new machines, which enabled the group to focus on whole system pathway improvement as our key driver. For example, how could Specialised Commissioning funds be utilised to provide the costs of apheresis service expansion, consumables, such as blood, staffing and transport, in a locally agreed and developed way?



What
recurrent
requests
have been
included in
business
cases to
date

Increased activity since 2019/2020
to cover gaps in current tariff
minus ERF

Cost of blood

Increased staffing requirements,
BMS, CNS, Consultant, Admin,
play specialists, psychologists

Extracts from BC



Optias

Separate funding has been requested by the Specialist commissioner for 25 Optia devices

Submissions have been accepted from individual trusts

Awaiting business case sign off from NHSE

NHSBT and Med Tech

Greater Manchester

Whittington

Birmingham Childrens Hospital

Bradford

Milton Keynes

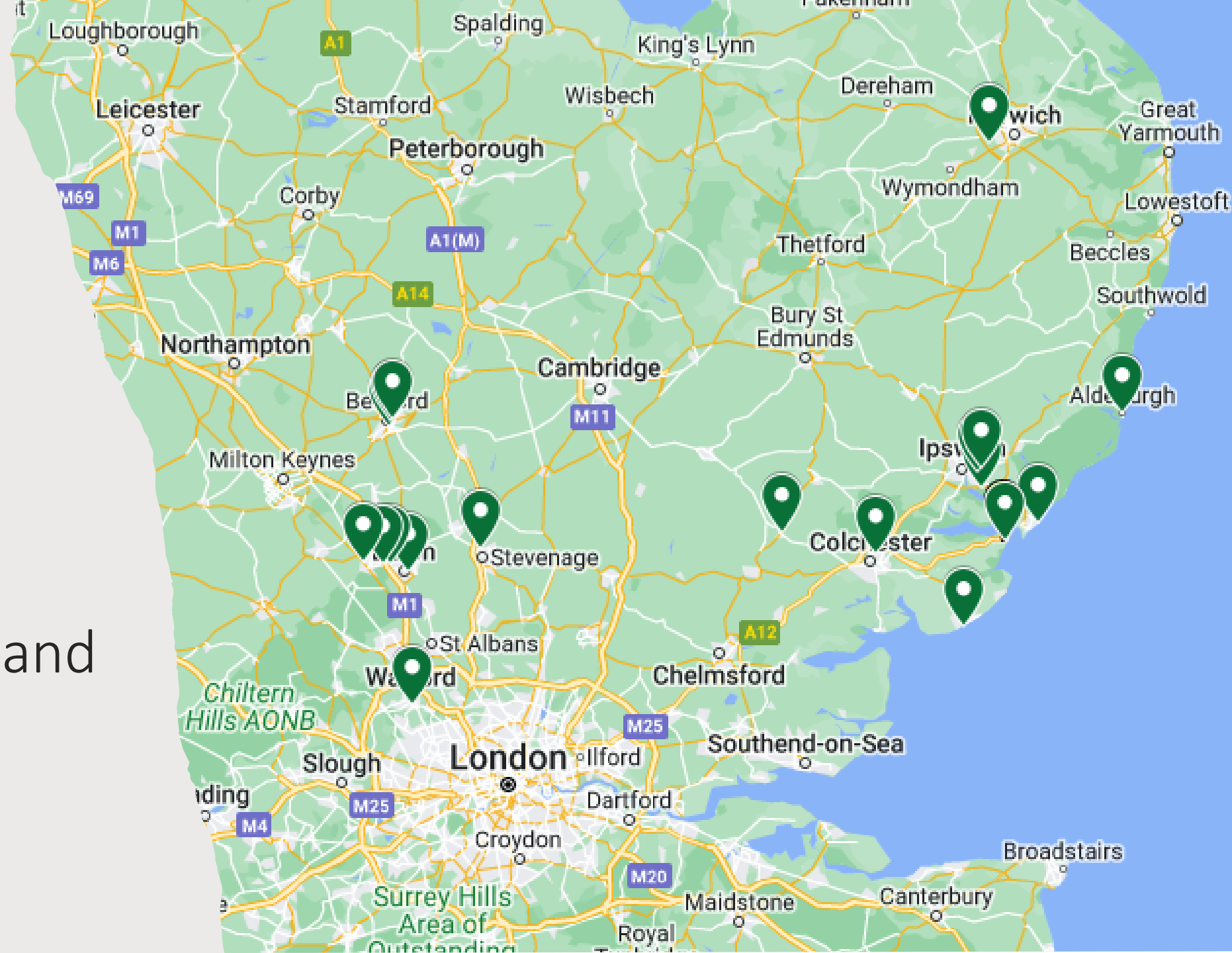
North Middlesex

Middlesbrough

Lewisham and Greenwich

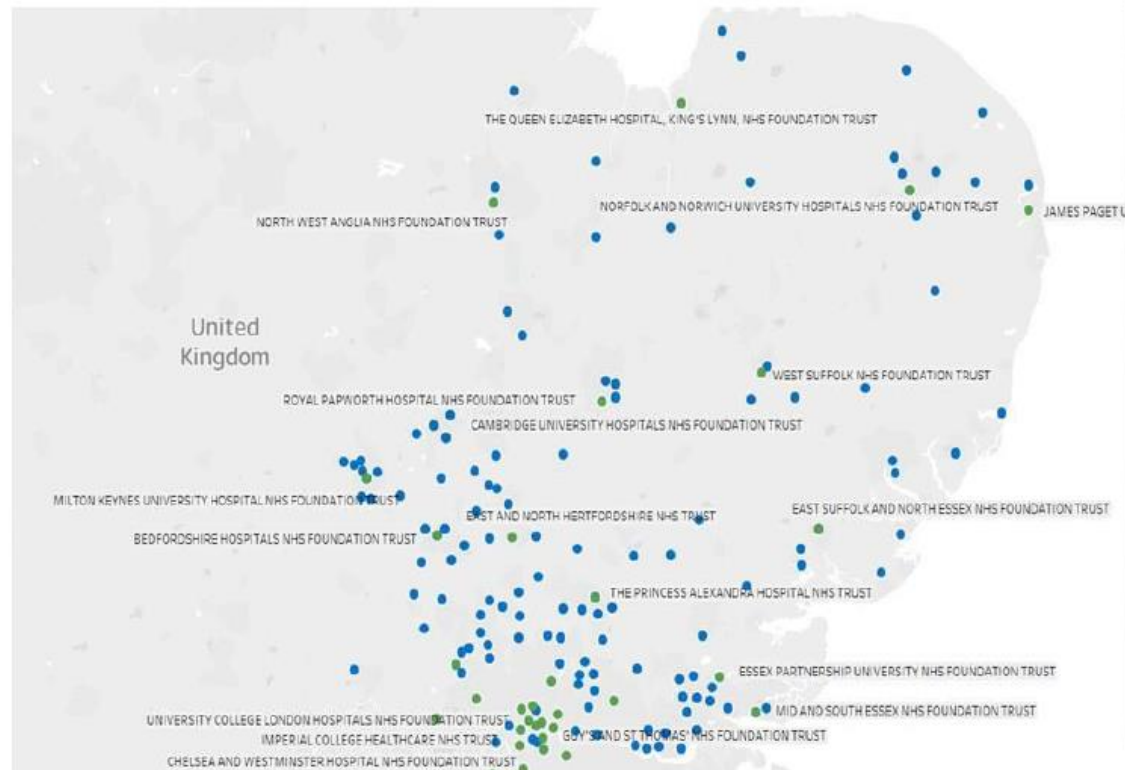
East of England (Luton and Bedford, Ipswich and Colchester, Norfolk and Norwich

East of England
project



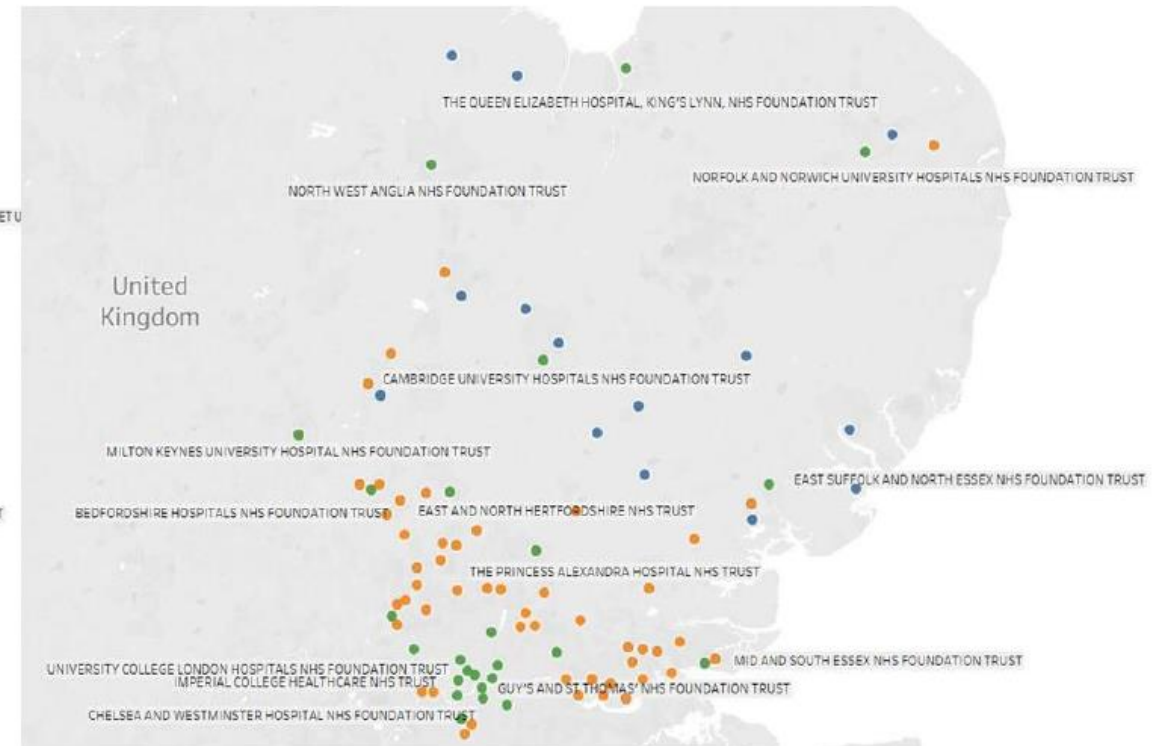
Care patterns for sickle cell patients in the East of England

Map 1 - Non elective care across the EOE



- **blue dots** represent patients having non elective care
- **green dots** are hospitals

Map 2 - Elective care across the EOE



- **blue dots** represent patients having elective care locally.
- **orange dots** represent patients who travelled (usually into London) for elective care

Map of HCCs

