## FOR PUBLIC CONSULTATION ONLY



## **Engagement Report for Clinical Commissioning Policies**

Unique Reference Number	D16X01
Policy Title	Extra corporeal membrane oxygenation (ECMO) service for adults with cardiac failure
Accountable Commissioner	Fiona Marley
Clinical Reference Group	Adult critical care
Which stakeholders were contacted to be involved in policy development?	Adult critical care CRG membership and all registered stakeholders
Identify the relevant Royal College or Professional Society to the policy and indicate how they have been involved	Representatives of relevant Royal College or Professional Societies were contacted for Stakeholder Testing as part of the CRG
Which stakeholders have actually been involved?	All of the key stakeholders listed above were invited to comment
Explain reason if there is any difference from previous question	Not applicable

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Identify any particular stakeholder organisations that may be key to the policy development that you have approached that have yet to be engaged. Indicate why?	None
How have the stakeholders been involved? What engagement methods have been used?	The draft policy was circulated to the full membership of the CRG and registered stakeholders for one week for their views, both to establish whether any amendments to the policy are required, and to understand from their perspective what the key questions to ask at consultation might be.  A total of six responses were received: 6 from CRG-registered stakeholders, and none from CRG members.  Key response themes were the following:  (1) Several stakeholders requested for additional evidence to be reviewed. These studies have been reviewed by the policy working group, who have confirmed that these studies were published after the evidence review was completed, were correctly excluded based on the search strategy or do not materially impact outcome of policy proposition  (2) Stakeholders requested for unpublished evidence to be considered  (3) One stakeholder has requested to include cardiomyopathy surgical revascularisation as a treatment for cardiogenic shock caused by ischaemic cardiomyopathy. Section 2 of the policy proposition was updated with this treatment  (4) There was consistent feedback from stakeholders regarding the need for a national strategy /service for this group of patients. There was a general view that ECMO should be commissioned for a subset of patients, from a small number of designated centres.  (5) One of the stakeholders did not agree with the inclusion criteria agreed in the search strategy  (6) Additional stakeholders were identified: Association of Cardiothoracic Anaesthetists (ACTA), Society for Cardiothoracic Surgery in Great Britain and Ireland (SCTS), The Society of Clinical Perfusion Scientists of Great Britain and Ireland (SCPS), Faculty of Intensive Care Medicine  (FICM), Intensive Care Society (ICS), British Society for Heart Failure (BSH), NHS Blood and Transplant (NHSBT), The College of Emergency Medicine, Society of Clinical Perfusion Great Britain and Ireland, British Association of Critical Care Nurses (BACCN), London Ambulance  Service (LAS), London Air Ambulance (LAA), C
What has happened or changed as a result of their input?	Stakeholders were invited to comments. Minor updates were made to the policy proposition. No updates were made to the evidence review.  Additional identified stakeholders will be invited as part of public consultation
How are stakeholders being kept informed of progress with policy development as a result of their input?	This engagement report, along with the updated policy proposition will be circulated as part of the public consultation. Stakeholders will be notified and invited to comment further

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What level of wider public consultation is recommended by the CRG for the NPOC Board to agree as a result of stakeholder involvement?	Public consultation for a period of 30 days as supported by stakeholders
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