

## Engagement Report for Clinical Commissioning Policies

<b>Unique Reference Number</b>	1776
<b>Policy Title</b>	Hyperbaric oxygen therapy for necrotising soft tissue infections
<b>Lead Commissioner</b>	Jacquie Kemp
<b>Clinical Reference Group</b>	HBOT CRG then HBOT Clinical Advisory Group
Which stakeholders were contacted to be involved in policy development?	CRG was involved in the process – however there remains concern and disagreement in the outcome of the policy proposal in its proposal to only commission decompression illness and gas embolism.
Identify the relevant Royal College or Professional Society to the policy and indicate how they have been involved	British Hyperbaric Association (BHA). Most of the clinical members of the CRG work in facilities that are members of the BHA.
Which stakeholders have actually been involved?	As above plus two weeks testing with the CRG, providers and registered stakeholders
Explain reason if there is any difference from previous question	
Identify any particular	No discrete organisation but patients are difficult to consult as a group due to small numbers being treated and the heterogeneous

stakeholder organisations that may be key to the policy development that you have approached that have yet to be engaged. Indicate why?	nature of the medical conditions for which they are treated.
How have stakeholders been involved? What engagement methods have been used?	Stakeholder testing, Previous consultation on a combined policy that included all 6 indications resulted in a repeated evidence review and production of 6 policies rather than one combined one to make the commissioning position based on the evidence clearer. Others will be informed of the consultation and invited to comment and feedback.
What has happened or changed as a result of their input?	Initial consultation period increased two months Further evidence was considered during consultation and then a further Solutions for public health review was commissioned. The decision to split the one policy into 6 policies to allow for further evidence review followed by further one month's consultation.
How are stakeholders being kept informed of progress with policy development as a result of their input?	Clinical Advisory Group updated re progress of the policy and HBOT clinicians involved on the development of the revised policies.
What level of wider public consultation is recommended by the CRG for the NPOC Board to agree as a result of stakeholder involvement?	Two months consultation during 2016 on the original combined policy document and informing the other colleges and stakeholders as listed above. The policies have now been split into six separate policies as a result of consultation and completion of further evidence reviews for each condition. These 6 policies will be consulted on from 5th January.