CLINICAL PRIORITIES ADVISORY GROUP Month Year

Agenda Item No	
National Programme	Trauma
Clinical Reference Group	Adult Critical Care
URN	1707

Title (Insert Service Specification title in full)

Actions Requested	Agree the Service Specification Proposition	

Proposition

Adult Critical Care – Extra Corporeal Membrane Oxygenation (ECMO) for Respiratory Failure in adults

Clinical Panel recommendation

The	The committee is asked to receive the following assurance:		
1.	The Head of Clinical Effectiveness confirms the proposal has completed the appropriate sequence of governance steps and includes where necessary an: Evidence Review; Clinical Panel Report		
2.	The Head of Acute Programmes/Head of Mental Health Programme confirms the proposal is supported by an: Impact Assessment; Stakeholder Engagement Report; Consultation Report; Equality Impact and Assessment Report; Service Specification Proposition. The relevant National Programme of Care Board has approved these reports.		
3.	The Director of Finance (Specialised Commissioning) confirms that the impact assessment has reasonably estimated a) the incremental cost and b) the budget impact of the proposal.		
4.	The Operational Delivery Director (Specialised Commissioning) confirms that the service and operational impacts have been completed.		

5. The Director of Nursing (Specialised Commissioning) confirms that the proposed quality indicators have been adequately defined.

The following documents are included (others available on request):		
1.	Service Specification Proposition	
2.	Consultation Report	
3.	Evidence Summary (Not completed)	
4.	Clinical Panel Report (Not completed)	
5.	Equality Impact and Assessment Report	

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The	The Benefits of the Proposition			
No	Metric	Grade of evidence (where evidence review completed)	Summary of benefit (where applicable)	
1.	Survival	Not measured	Where an evidence review has been completed, please include metric of survival (e.g., 30 days benefit, 50 years benefit)	
2.	Progression free survival	Not measured		
3.	Mobility	Not measured		
4.	Self-care	Not measured		
5.	Usual activities	Not measured		
6.	Pain	Not measured		
7.	Anxiety / Depression	Not measured		
8.	Replacement of more toxic treatment	Not measured		
9.	Dependency on care giver / supporting independence	Not measured		
10.	Safety	Not measured		
11.	Delivery of intervention	Not measured		

Other health metrics determined by the evidence review (where evidence review completed)			
No	Metric	Grade of evidence	Summary from evidence review
		Grade A	[AS ABOVE]
		Grade A	

Considerations from review by the Rare Disease Advisory Group

Not applicable

Pharmaceutical considerations

Not applicable

Considerations from review by National Programme of Care

POC Board support:

Select appropriate option:

- 1) The proposal received the full support of the <insert PoC name> Board on the <insert date>
- 2) The proposal received the support of the <insert PoC name> PoC Board on the <insert date>, subject to the following comments <insert comments>
- 3) The proposal received the support of the <insert PoC name> PoC Board on the <insert date> but CPAG is asked to note that the proposal did not have the full support of the Working Group, who have raised the following concerns: <insert reasons>
- 4) Other free text (only for minority of cases not fitting into the above)

Benefit of Service Specification:

This service specification has been updated to ensure that it is reflective of current practice and that appropriate Quality Indicators are in place for the service.

Implementation timescale:

Select appropriate option:

1) Non material amendments and therefore suitable for immediate adoption

No	Item	N/Cost £K	Level of uncertainty
1.	Number of patients affected in England	Source: IA Report, A1.2	200-300
2.	Total cost per patient over 5 years	Source: IA Report C2.1 and 2.2, and Model	[TO BE COMPLETED BY FINANCE LEAD]
3.	Budget impact year 1	Source: IA Report C3.1 and Model	Not applicable – no material change to the service
4.	Budget impact year 2	Source: IA Report C3.1 and Model	Not applicable – no material change to the service
5.	Budget impact year 3	Source: IA Report C3.1 and Model	[Not applicable – no material change to the service
6.	Budget impact year 4	Source: IA Report C3.1 and Model	Not applicable – no material change to the service
7.	Budget impact year 5	Source: IA Report C3.1 and Model	Not applicable – no material change to the service
8.	Total number of patients treated over 5 years	Source: IA Report A3.2	1000 - 1500
9.	Total cost per patient benefitting over 5 years		

Key additional information

This is considered to be cost neutral because there is no material change to the service. The specification is reflective of current practice with a focus on updating the measured Quality Indicators.

[TO BE COMPLETED BY NHS ENGLAND FINANCE (Andy Leary / Justine)