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Engagement Report for Clinical Commissioning Policies

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| Unique Reference Number | F03X08 |
| Policy Title | Pre-exposure prophylaxis (PrEP) to prevent the acquisition of HIV in adults |
| Accountable Commissioner | Claire Foreman |
| Clinical Reference Group | HIV CRG |
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| Which stakeholders were contacted to be involved in policy development? | HIV 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 | N/A |
| Identify any particular stakeholder organisations that may be key | None |

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| to the policy development that you have approached that have yet to be engaged. Indicate why? | |
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| How have stakeholders been involved? What engagement methods have been used? | The draft policy was circulated to the full membership of the PWG, the CRG and registered stakeholders for two weeks for their views, both to establish whether any amendments to the policy are required, and to understand from their perspective any issues for explorations during consultation. |
| been useu: | Twenty one responses were received: |
| | 4 from CRG members |
| | 8 from voluntary sector / patient organisations 3 from clinicians |
| | 2 from individuals |
| | |
| | A single response was received from each of the following: healthcare industry, academic institution, local authority and professional association. |
| | Responses included requests for |
| | Some minor edits to the policy proposition and evidence review The inclusion of trans men as a sub population eligible where the clinical criteria are met Consideration of an EU regulations which would apply regarding access and charging Consultation period longer than 30 days based on the need to engage local authority commissioners and an interpretation of the regulations for statutory consultation |
| | Key groups to involve in the consultation |
| What has happened or changed as a result of their input? | Stakeholders were invited to comment. Minor updates were made to the policy proposition and evidence review in response to comments received. Based on extrapolation of the evidence for MSM, it has been agreed to extended the commissioning criteria to high risk trans men. Additional stakeholders identified to be involved in 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. |
| What level of wider public consultation is recommended by | Whilst many of the stakeholders favoured 30 day consultation, it is important to note the timing of the consultation over the summer holiday period and to ensure engagement of the widest range of patient and public stakeholders, as well as local authorities. Consultation of 6 weeks |

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| the CRG for the NPOC Board to | is recommended with specific engagement aimed at local authorities and other stakeholders. |
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| agree as a result of stakeholder involvement? | |