

Report of the Evaluation of the Individual Funding Request Process

Consultation Response

IPEM welcomes the proposals for the IFR process in Northern Ireland to be made more efficient, consistent and transparent, and for the establishment of a Special Medicines Fund to meet the costs of the treatments in question.

Members of IPEM based in Northern Ireland (specifically those working in Nuclear Medicine, which gives the context for the remainder of this submission) have expressed concern that patients requiring clinically justified access to specialist drug treatments may be at a disadvantage compared to those elsewhere in the UK. This state of affairs may be exacerbated as there is a move toward radionuclide therapies of increasing complexity. If a stable, efficient funding process is not in place, local services will be unable to evolve to meet these changes. Transforming a Nuclear Medicine department performing only diagnostic procedures, or a limited range of therapeutic procedures, into a full, complex therapeutic department may not be possible.

If initial funding for local delivery of complex therapies (and the associated infrastructure and expertise) is not in place, then later funding may be unable to make up for the shortfall in experience in a rapidly changing field. Consequently, patients may have to travel to the UK mainland in order to receive treatment – increasing discomfort and expense for those well enough to travel, and ruling out treatment for those who are not. There are knock-on issues around radioactive patients travelling by plane or ferry (radionuclide therapy leaves residual radioactivity in the patient's body, which takes some time to decay to background levels).

The establishment of more streamlined IFR processes will also enable treatment to be made available to patients sooner (while they are still suitable for therapy) and improve service planning in general. Other more complex knock-on benefits are envisioned.