Interim Clinical Commissioning Policy: Mirena Coils in Secondary Care

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Interim Clinical Commissioning Policy

Mirena Coils in Secondary Care

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Policy Statement

NHS England will commission insertion of Mirena Coils in Secondary care in accordance with the criteria outlined in this document.

In creating this policy NHS England has reviewed this clinical condition and the options for its treatment. It has considered the place of this treatment in current clinical practice, whether scientific research has shown the treatment to be of benefit to patients, (including how any benefit is balanced against possible risks) and whether its use represents the best use of NHS resources.

This policy document outlines the arrangements for funding of this treatment for patients where NHS England directly commission this service.

Equality Statement

NHS England has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as enshrined in the Health and Social Care Act 2012. NHS England is committed to ensuring equality of access and non-discrimination, irrespective of age, gender, disability (including learning disability), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation. In carrying out its functions, NHS England will have due regard to the different needs of protected equality groups, in line with the Equality Act 2010. This document is compliant with the NHS Constitution and the Human Rights Act 1998. This applies to all activities for which they are responsible, including policy development, review and implementation.

Plain Language Summary

The IUS (intrauterine system) is a long-acting reversible contraceptive (LARC) method. It works for five years and is a small, T-shaped plastic device that is inserted into the womb (uterus) by a specially trained doctor or nurse. The brand name of the IUS used in the UK is Mirena.

1. Introduction

Mirena coils fitted in secondary care are regarded as a procedure of low clinical priority and therefore not routinely funded by the Commissioner.

2. Criteria for commissioning

Mirena Coils should be fitted and removed by primary care and not secondary care unless:

- specific medical issue which prevents fitting by primary care
- it is to be fitted as part of contraception provided in conjunction with Termination of Pregnancy, or as part of family planning services.
- the decision to fit a Mirena coil is made as part of an operative procedure.

Insertion and removal of IUCD should only be undertaken in a primary care setting, it is not commissioned as a secondary care service unless specific medical issues prevents fitting or removal by primary care or if fitted as part of contraception provided in conjunction with Termination of Pregnancy.

The Clinician proposing this intervention is required to secure Prior Approval from the Armed Forces Commissioning or Health & Justice Commissioning Team in their area

(Application form and contact details can be found on NHS Internet http://www.england.nhs.uk/ourwork/d-com/policies/ssp/)

3. Evidence Base

This procedure is considered to be of limited clinical value