

**SPECIALISED COMMISSIONING - CLINICAL EVIDENCE EVALUATION
CRITERIA FOR CLINICAL COMMISSIONING POLICY PROPOSITION**

URN: 1830

TITLE: Haematopoietic stem cell transplantation for sickle cell disease in adults

CRG: Haemoglobinopathies

NPOC: Blood & Infection

Date: 20/02/19

This policy is being considered for:	For routine commissioning	Not for routine commissioning	X
Is the population described in the policy similar to that in the evidence reviewed, including subgroups?	Yes.		
Is the intervention described in the policy similar to the intervention for which evidence is presented in the evidence review?	Yes. As stated in the previous Panel report.		
Are the comparators in the evidence reviewed plausible clinical alternatives within the NHS and are they suitable for informing policy development?	As stated in the previous Panel report.		
Are the clinical benefits described in the evidence review likely to apply to the eligible population and/or subgroups in the policy?	As stated in the previous Panel report.		
Are the clinical harms described in the evidence review likely to apply to the eligible and /or ineligible population and/or subgroups in the policy?	As stated in the previous Panel report.		
The Panel should provide advice on matters relating to the evidence base and policy development and prioritisation. Advice may cover:	In the absence of any progress relating to research, Panel were content to recommend the policy proposition as a 'not for routine commissioning' position. However, it has been proposed that there could an option for the PWG to return with an evidence based subgroup that is proposed for routine commissioning to Clinical Panel within 1 month,		

<ul style="list-style-type: none"> • Balance between benefits and harms • Quality and uncertainty in the evidence base • Challenges in the clinical interpretation and applicability of policy in clinical practice • Challenges in ensuring policy is applied appropriately • Likely changes in the pathway of care and therapeutic advances that may result in the need for policy review. 	<p>otherwise the existing policy proposition will proceed to stakeholder testing. The emphasis of the policy proposition needs to be adapted to ensure that the wording reflects the commissioning position.</p> <p>The Programme of Care will decide how support can be given to the clinical body to ensure that a high quality submission is made to the NIHR.</p>		
Overall conclusion	This is a proposition for routine commissioning and	Should proceed for routine commissioning	
		Should be reversed and proceed as not for routine commissioning	
	This is a proposition for not routine commissioning and	Should proceed for not routine commissioning	X
		Should be reconsidered by the PWG	

Overall conclusions of the panel

Report approved by:
James Palmer
Clinical Panel Chair
22/2/19

Post meeting note:

Please note that the Blood & Infection Programme of Care have incorporated and completed the above amendments required following Clinical Panel in February, 2019.