

# Administration of Gonadorelin Analogue Injections 2019-20

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## 1. Purpose of Agreement

This agreement outlines the expectations and obligations of clinical practice, on practices that choose to undertake the administration of Gonadorelin analogue injections.

No part of the specification by commission, omission or implication defines or redefines essential or additional services.

## 2. Duration of Agreement

This agreement is for a period of six months, commencing **1st April 2019** and ending on **30<sup>th</sup> September 2019**.

## 3. Background

### Administration of Gonadorelin Analogue Injections

Gonadorelin analogues are used primarily, though not exclusively, in the treatment of carcinoma of the prostate. There are a number of treatment regimes, which vary in the detail of their programme of administration and main purpose. Broadly they can be divided on the basis of the progress of the disease into advanced local disease and metastatic disease. The central usage, however, remains the treatment of metastatic cancer of the prostate.

Virtually all the prescriptions issued for injectable gonadorelin analogues are written by GPs and most of these are also administered by GPs. In some practices an appropriately trained practice nurse will site the depot implants.

There are varying treatment models for administering gonadorelin analogues to patients with carcinoma of the prostate dependent on the clinical management programme agreed for that patient. Cambridgeshire & Peterborough CCG formulary recommendations are available at <http://www.cambsphn.nhs.uk/CJPG/NHSCambridgeshireFormulary.aspx>

Degarelix (Firmagon) has recently been reviewed by C&P Joint Prescribing Committee and it was agreed to be included in the CCG formulary in line with NICE TA404 'Treatment of hormone-dependent prostate cancer in patients with spinal metastasis' <https://www.nice.org.uk/guidance/ta404>. Maintenance treatment is by monthly injection as recommended in the manufacturers 'Summary of Product Characteristics' <https://www.medicines.org.uk/emc/medicine/21686> .

We understand Secondary Care clinicians expect very few patients will use this in replace of alternative options.

#### 4. Scope of service to be provided

This locally commissioned service will fund:

- The administration of Gonadorelin analogue injections for the treatment of carcinoma of the prostate and other licensed indications as recommended in the CCG formulary
- The administration of Degarelix (Firmagon) for treating advanced hormone-dependent prostate cancer

#### 5. Requirements under this service

It is a requirement of this local commissioned service that the contractor;

- **Create a register -**  
Practices will need to produce and maintain a valid up-to-date register of patients being treated as part of this enhanced service. Patients should be added to the register in a timely fashion using the relevant Read Codes.
- **Operate a call and recall system -**  
Practices will need to ensure that they operate a systematic call and recall of patients on the register and have in place the means to identify and follow up patients who default. It is the responsibility of the practice to pursue further contact with any Patient who DNAs. Any 'informed dissent' must be fully recorded.
- **Agree a joint clinical management programme –**  
Patients should be managed on the basis of individual treatment plans, which will normally be drawn up by local consultants. Practices will be expected to follow these treatment plans unless there has been discussion and agreement with local consultants to modify them.
- **Provide an outline individual management plan –**  
Wherever possible to ensure that the patient has an outline individual management plan, which gives the reason for treatment, agreed treatment programme and the planned duration.
- **Maintain Adequate Records**  
Each practice is required to maintain adequate records of the service provided, incorporating all known information relating to any significant events e.g. adverse reactions, hospital admissions, and relevant deaths of which the practice has been notified. Any telephone advice should be recorded as a consultation as part of patient record
- **Training & Development of Primary Care Staff**  
Each practice must ensure that all staff involved in providing any aspect of care under this scheme has the necessary training and skills to do so. Practices should be able to demonstrate that they have in place a policy to cover staff training and maintenance of skills
- **Provide safe and suitable facilities for undertaking invasive procedures –**  
Practices providing this service must ensure that they have adequate and appropriate facilities and equipment comparable to those required for the safe provision of any invasive procedure

#### 6. Pricing and Payment Arrangements

##### - Pricing

Practices will receive **£25.25 per patient, per quarter** for administering gonadorelin analogue injections or Degarelix (Firmagon) to either male/female patients in line with the patients individual treatment plan (**this payment is per patient per quarter and not per injection**)

## - **Payment Arrangements**

Practices will be commissioned in the first instance against their commissioned levels of activity and the indicative budget for the provision of each service for the forthcoming year. Practices will receive 6 monthly payments based on the total indicative budget for the year with any adjustments to be made at year end if necessary.

If a practice performs within their indicative budget for that service they will be paid at the full rate. However, payment for over performance will only be paid the full rate for activity above their budget if there is sufficient funding in the enhanced services cash pool.

Practices may be paid a marginal rate for activity above their budget if there is insufficient funding in the Enhanced Services cash pool to pay the full rate. The marginal rate for excess activity may be between 0-99% of the full rate depending on level of over performance across all practices.

## **7. Activity Reporting**

Practices are required to submit the number of patients receiving gonadorelin analogue injections or Degarelix (Firmagon) by the Practice in each quarter via the Practice Commissioning Statement to [capccg.enhancedservices@nhs.net](mailto:capccg.enhancedservices@nhs.net) by the 15<sup>th</sup> day of the following month, following Quarter end.

If Practices require help or advice on clinical recording, coding and reporting, please contact The Primary Care Information team via the following email address: [capccg.primarycareinformation@nhs.net](mailto:capccg.primarycareinformation@nhs.net)

## **8. Payment Verification**

Practices entering into this contract agree to participate fully in the post payment verification/validation process determined by the Commissioner and LMC. Practices should ensure that they keep accurate records to ensure a full and proper audit trail is available and Practices are encouraged to utilise Practice computer systems to enable this condition to be met.

## **9. Performance**

The CCG reserves the right to suspend the commissioning of this service where there are concerns around compliance and patient safety.

## **10. Safeguarding Adults**

It is important that practices protect adults from avoidable harm (as defined in Safeguarding Adults guidelines) including safeguarding training, training on the Mental Capacity Act and Deprivation of Liberty. A Safeguarding lead should be identified in each practice.

## **11. Care Quality Commission (CQC)**

The provider must meet CQC standards and where appropriate be registered with the Care Quality Commission (CQC). The standards and the relevant services are contained in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the Care Quality Commission (Registration) Regulations 2014.

## **12. Termination**

Should either party wish to terminate this agreement, a minimum period of 3 months notice must be provided in writing.

## **13. Signatories to the Agreement**

Practices wishing to provide this service are required to complete and sign the application form, and return to the Commissioner for consideration.