# MedTech Funding Mandate policy – communications briefing note

This briefing note provides background information and key messages to inform communications about the 2022/23 MedTech Funding Mandate policy.

## Background

NHS commissioning structures and historical approaches do not always support local funding provision for the improvement of clinical pathways through the implementation of NICE-approved medical technologies.

The MedTech Funding Mandate (MTFM) policy aligns to the NHS Long Term Plan and sets out to solve this problem by mandating the use of local ICS funding (provided from commissioners’ existing allocations) to support the adoption and spread of designated medical technologies.

The aim of the policy is to accelerate equitable patient access to medical technologies that are clinically effective; cost saving in three years (as determined by NICE); and affordable to the NHS (costs not exceeding £20 million), by supporting their implementation and scaling (adoption and spread).

## MedTech Funding Mandate policy 2022/23

The technologies included in the MTFM 2022/23 policy are categorised into the following two themes:

**Benign prostatic hyperplasia (BPH)** – a common condition in ageing men and others with a prostate (trans women, some non-binary and some intersex people). It is commonly treated with the surgical procedure, transurethral resection of the prostate (TURP) which usually requires the patient to stay in hospital for one to three days.

The following four less invasive innovations allow patients with BPH to be treated as day cases and have seen increased utilisation over the last four-five years. However, as recognised by the GIRFT urology team, there is still an opportunity to increase utilisation of these four innovations, particularly in the context of elective recovery following the coronavirus pandemic.

The four BPH technologies are:

* Greenlight XPS – uses a laser to reduce the size of an enlarged prostate.
* Rezum – uses water vapour to destroy excess prostate tissue.
* PLASMA System – uses electrodes to cut out prostate tissue.
* UroLift – lifts and holds the enlarged prostate tissue away from the urethra, relieving the compression of this organ.

**Improving the patient experience during procedures – using technology can provide more efficiency, improved outcomes and in some cases offer less invasive alternatives.**

Three technologies are:

* Spectra Optia – apheresis and cell collection platform for people with sickle cell disease who require automated red cell exchange.
* XprESS Multi Sinus Dilation System – a sterile, single-use device for treating chronic sinusitis with a dilating balloon.
* Thopaz+ – a portable digital chest drain system which accurately monitors and records air leak and fluid drainage.

Thopaz+ and Spectra Optia use digital technology to increase efficiency and improve outcomes compared to the alternatives, whilst XprESS is a minimally invasive alternative to invasive sinus surgery.

**Technologies receiving continued support from the 2021/22 policy are:**

* Placental growth factor-based testing (PlGF) – a blood test to rule out pre-eclampsia in pregnant women.
* SecurAcath – for securing percutaneous catheters.
* HeartFlow – creates a 3D model of a patient’s coronary arteries and assesses the extent and location of blockages.
* gammaCore – a handheld device which alleviates the symptoms of severe cluster headaches.

## The AHSN Network role

We work in partnership with NHS England and NHS Improvement’s Innovation Research and Life Science’s (IRLS) team to deliver the MTFM policy.

Stuart Monk is the AHSN Network’s National Programme Director for Rapid Uptake Products and MedTech Funding Mandate, coordinating our national approach, providing strategic oversight and developing our partnership with the IRLS policy team.

There are eight product leads, working in regional AHSNs, who act as national leads for the supported technologies. The lead works with their supplier to provide in-depth advice and guidance on each product, share implementation resources and become the conduit for harnessing learning for each technology – sharing with all implementation leads across the 15 AHSNs.

Through the coordinated efforts of our programme teams, the AHSNs can add value by:

* **Understanding context** – understanding our ICS priorities and key stakeholders to plan our approach to policy implementation and technology support
* **Raising awareness** – ensuring clear messages on the aims of the policy, how it works and the technologies themselves
* **Supporting implementation** – working with suppliers to share implementation resources and learning
* **Understanding barriers** – capturing all barriers to both policy and technology uptake and feeding these back to the AHSN and NHSE/I Policy teams
* **Sharing Learning** – to ensure that successful policy and technology implementation is understood and learned from.

It is the AHSN Network’s responsibility to ensure that all ICSs understand the MTFM policy, to share individual technology implementation resources, to understand barriers to policy and technology adoption and to feed this knowledge and learning back to the NHS England and NHS Improvement MTFM policy team.

Our role in supporting the policy is different to how we would approach a Rapid Uptake Product (RUP) programme. For RUPs, AHSNs are more hands on in the support that they offer to improve individual clinical pathways around specific innovations. For the MTFM, whilst we will share resources and learning to support implementation, it is the responsibility of the ICS and the supplier to ensure that adoption occurs and is sustained.

## Communications approach

As a result of the role of the AHSNs as described above, rather than focusing on the specific products, our communications objective is to raise the profile of the policy overall.

Our initial audience for engagement on the MTFM policy are ICS stakeholders working in finance, commissioning and operations. Once initial engagement is established and the policy is understood, AHSNs are then likely to work with clinicians associated with the specific technology pathways.

The AAC communications team are responsible for producing content to support communications about the MTFM policy. The AHSN Network communications team will cascade any new content and opportunities throughout the year. You can find some useful collateral and links below.

* AAC webpage and policy guidance link: <https://www.england.nhs.uk/aac/what-we-do/how-can-the-aac-help-me/the-medtech-funding-mandate/>
* AHSN Network webpage:

<https://www.ahsnnetwork.com/accelerated-access-collaborative/medtech-funding-mandate>

* 2022/23 MTFM launch videos: <https://youtube.com/playlist?list=PLWIbAbHNcSAxLvauM3sRC7rpuQZjRvMTB>
* Case studies including guidance for permissions for use (please don’t use these case studies unless it states they have been approved in the accompanying spreadsheet): <https://future.nhs.uk/AHSNCOMMS/view?objectId=34264272>

The regional lead communication teams aren’t expected to hold specific communications plans for the technologies a programme lead in their AHSN is supporting. However, there may be an ask to sense check programme materials from time to time.

## Communications stories

Regional AHSNs are encouraged to continue to collect and share stories about their work and successes on the MTFM policy and with the products leads in their region. You are advised to mention the policy overall in all the stories you publish. Please use messaging from the approved webpage copy below.

Please share these with the national AHSN Network communications team and your MTFM lead for consideration for future briefings, materials, and news releases.

Please also tag in any social media content: @AACinnovation

### Suggested website copy

**MedTech Funding Mandate**

The MedTech Funding Mandate (MTFM) is a NHS Long Term Plan commitment to get selected NICE-approved cost-saving devices, diagnostics and digital products to NHS patients more quickly. The policy launched on 1 April 2021. After the first year of the new policy, new guidance was published for 2022/23. [Access the policy guidance here](https://www.england.nhs.uk/aac/what-we-do/how-can-the-aac-help-me/the-medtech-funding-mandate/).

The policy supports devices, diagnostics or digital products that:

* are effective and improve patient outcomes, demonstrated through positive NICE guidance;
* are cost-saving within three years: NICE modelling demonstrates a net saving within three years of implementing the technology;
* are affordable to the NHS: the budget impact should not exceed £20 million, in any of the first three years.

The policy defines a list of NICE-approved technologies that NHS commissioners and providers are mandated to agree local funding arrangements for through their existing allocations. This is to ensure healthcare providers across England enable equitable access to patients.

The policy has three key objectives:

* Ensure equity in healthcare provision is achieved by monitoring patient access to the supported technologies across the NHS in England.
* Direct the NHS to the medical technology innovations that are most effective and likely to give savings on investment.
* Support the NHS to develop a sustainable approach to overcoming the financial barriers to adopting medical devices, diagnostics and digital products.

The MTFM policy is an NHS England initiative, delivered with the support of the 15 AHSNs who work closely with their local ICSs.

INSERT REGIONAL CALL TO ACTION

**Technologies included in the 2022/23 policy:**

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