

# Blueteq and IFR

## Online submission

# Individual Funding Requests (IFR)

An IFR is a request to fund, for an individual patient, a treatment that falls outside existing contracts and commissioning arrangements.

## Are appropriate when:

- A patient's treatment falls outside generic or treatment-specific policies where an unusual ('exceptional') clinical circumstance applies to the individual
- A particular treatment or intervention could benefit a patient with a very rare clinical condition.

## Are inappropriate when:

- A patient can be classified as being part of a larger cohort
- A patient is referred for physical treatment on the grounds of psychological problems, which should in the first instance be treated through the mental health route
- Social factors motivate the request

# Blueteq

- Online portal which facilitates the submission of Individual Funding Requests (IFRs)
- Cloud based and can be accessed remotely
- Reduces the administrative burden associated with the submission of IFRs by:
  - replacing the current manual form with a streamlined online version
  - Supporting the submission process by being a learning system
  - Retains previous applications and clinical information in 'patient case files'

# Administrative requirements

- Creation of a Blueteq account
- Internal process for information sharing i.e. where practice managers are responsible for submitting requests how will you ensure the right information is included in the application? Will GPs be responsible for their own submissions?
- Engagement with platform; monitoring for IFR outcomes

# Submission Process



The image shows a login interface for the NHS HiCost | Prior Approval | IFR Database National Trust Edition. The interface is divided into two main sections. The left section features the NHS logo, the text 'HiCost | Prior Approval | IFR Database', and 'National Trust Edition' below it. To the left of this text is a graphic of a document with a blue arrow pointing to it. The right section is a dark blue box containing a login form. It has two input fields labeled 'Login:' and 'Password:'. Below these fields is a 'Login' button. At the bottom of the dark blue box, there are three links: 'Register', 'Forgotten Password?', and 'No unauthorised access'.

**NHS**  
HiCost | Prior Approval | IFR Database  
National Trust Edition

Login:   
Password:

Login

[Register](#)  
[Forgotten Password?](#)  
No unauthorised access

# Creating a user account

New User Registration

Full Name:

Preferred User Name:

Job Title:

Personal Email:

(nhs.net only)

GP Practice/Trust(s) currently working at:

Account Request Type(s):

☐ High Cost Drugs
 ☐ CDF
 ☐ IFR/PoLCV/Prior Approval

Additional Comments (optional):

Submit

Cancel

# Home page



North Central London  
Integrated Care Board

[Patient](#) [Notes](#) [Administration](#) [Requests](#) [Options](#) [Help](#) [Document Library](#) [Log Out](#)

**Provider:** BARTS HEALTH NHS TRUST - [Switch Provider](#)

**Trust Mode:** Prior Approval / IFR - [Switch Mode](#)



Find Patient:  By: [Patient](#)



**Current User:** Ryan Hainey  
[Report a bug to support](#)

**IMPORTANT** - Please note that you are now able to send High Cost Drug requests to your NHS England Local Area Team. This changes the way that you search for request forms. For further details please click on either of the following links:  
[Existing Users](#) [New Users](#)

# Action tabs

Patient Notes Administration Requests Options Help Document Library Log Out

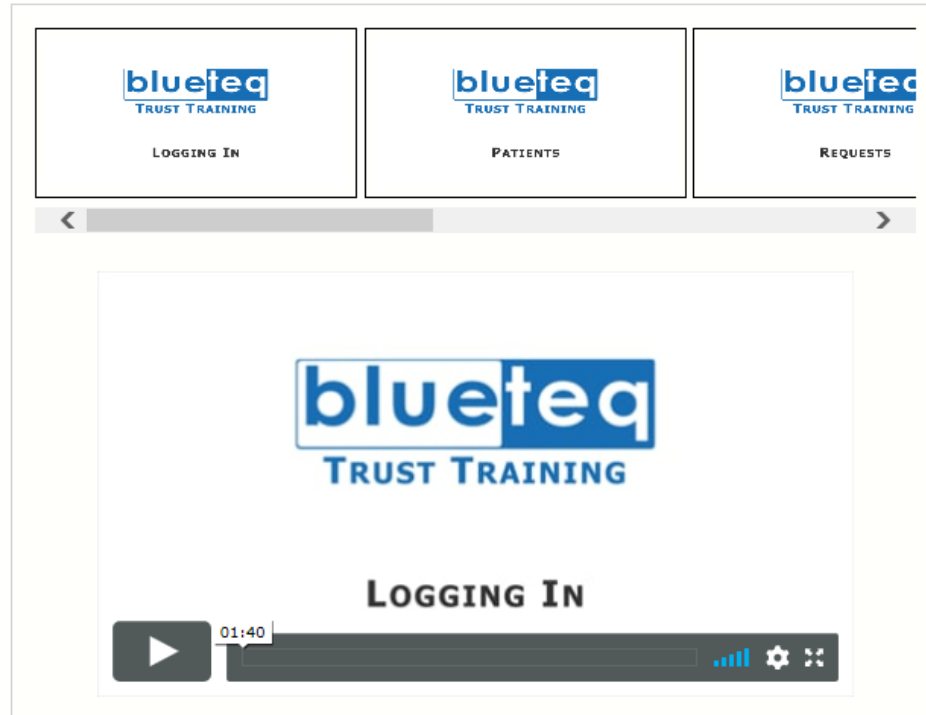
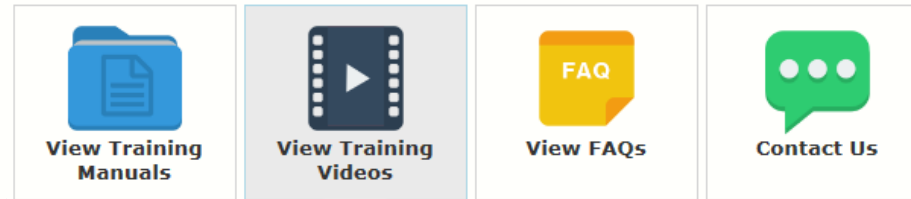
- Patient: Add/edit existing patient
- Administration: Overview of all requests made and current status
- Requests: Make new request
- Help: Resources for assistance with submissions
- Document library: Internal resource for use i.e. EBICS policy



# Help tab



What would you like to do?



IFR Quick Reference Sheet

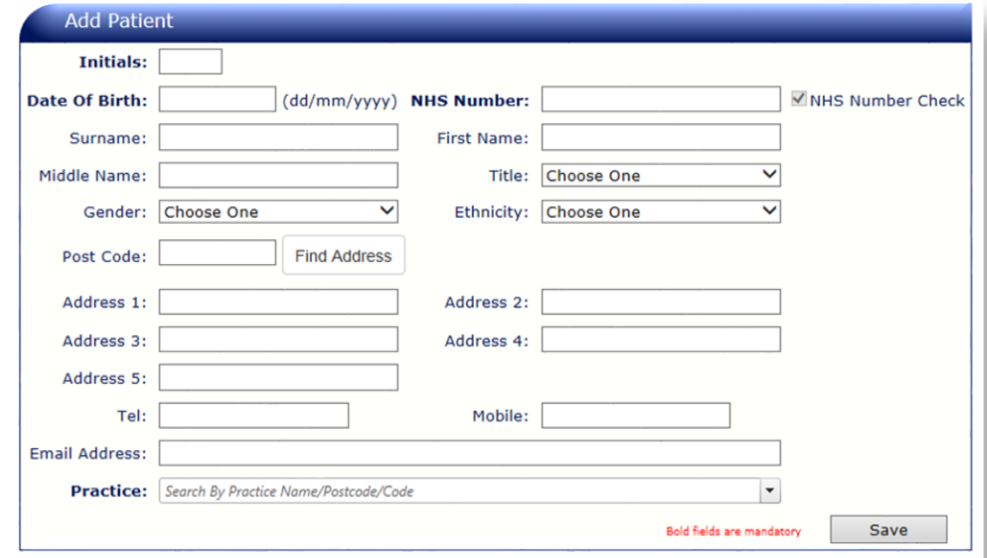


Prior Approval | IFR Manual

# Adding a patient

FOUR dataset minimum:

- Patient's initials
- Date of birth
- NHS number
- Practice

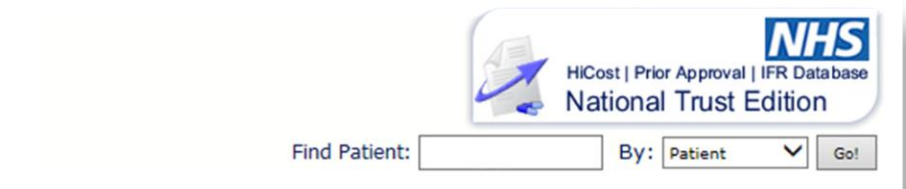


The 'Add Patient' form contains the following fields and controls:

- Initials:** Text input field.
- Date Of Birth:** Text input field with a date format hint '(dd/mm/yyyy)'.
- NHS Number:** Text input field with a checkbox labeled 'NHS Number Check'.
- Surname:** Text input field.
- First Name:** Text input field.
- Middle Name:** Text input field.
- Title:** Dropdown menu with 'Choose One' selected.
- Gender:** Dropdown menu with 'Choose One' selected.
- Ethnicity:** Dropdown menu with 'Choose One' selected.
- Post Code:** Text input field with a 'Find Address' button next to it.
- Address 1:** Text input field.
- Address 2:** Text input field.
- Address 3:** Text input field.
- Address 4:** Text input field.
- Address 5:** Text input field.
- Tel:** Text input field.
- Mobile:** Text input field.
- Email Address:** Text input field.
- Practice:** Dropdown menu with 'Search By Practice Name/Postcode/Code' selected.
- Save:** Button at the bottom right.

Bold fields are mandatory

If a patient already exists on the platform you can find them using the search tool



The search tool includes the following elements:

- NHS logo**
- HiCost | Prior Approval | IFR Database**
- National Trust Edition**
- Find Patient:** Text input field.
- By:** Dropdown menu with 'Patient' selected.
- Go!** Button.

# Patient case file

Patient Notes Administration Requests Options Help Document Library Log Out

**Provider:** BARTS HEALTH NHS TRUST - [Switch Provider](#)

**Trust Mode:** Prior Approval / IFR - [Switch Mode](#)

  
HiCost | Prior Approval | IFR Database  
National Trust Edition

Find Patient:  By:

 Patient Notes: RH - 29/04/1986 NHS No: 7172953002 ID: 653168

Current Status: **No information found**

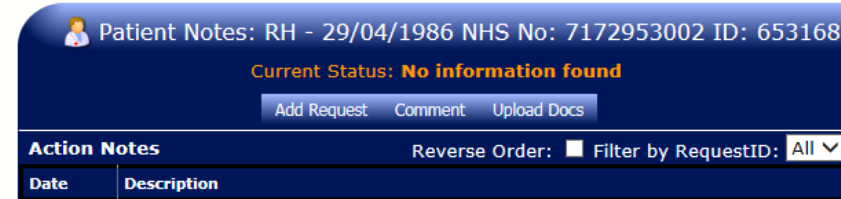
## Action Notes

Reverse Order: ☐ Filter by RequestID:

| Date | Description |
|------|-------------|
|------|-------------|

# Adding a request

- Select the *'Add Request'* tab
- Confirm GP practice
- Select the appropriate form



Patient Notes: RH - 29/04/1986 NHS No: 7172953002 ID: 653168

Current Status: **No information found**

[Add Request](#) [Comment](#) [Upload Docs](#)

**Action Notes** Reverse Order: ☐ Filter by RequestID:

| Date | Description |
|------|-------------|
|------|-------------|

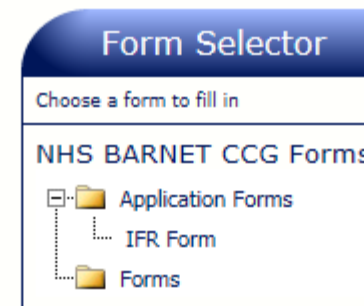


Current Registered GP

Please select the current registered GP for the patient if it is different.  
The patient GP will be updated with this value.



[Next](#)



Form Selector

Choose a form to fill in

NHS BARNET CCG Forms

- Application Forms
  - IFR Form
- Forms

# Adding a request

## INDIVIDUAL FUNDING REQUEST (IFR) APPLICATION FORM

Are you sure that the intervention being requested is not routinely commissioned by the CCG?

☐ Yes ☐ No

## INDIVIDUAL FUNDING REQUEST (IFR) APPLICATION FORM

The clinical applicant (primary, secondary, tertiary or other) completing this form is responsible for collating all information and relevant evidence, which may involve working with other clinicians, outside of your organisation, involved in this patient's care. All forms must be typed, acronyms / abbreviations must be written out in full and all fields must be completed (or N/A stated where a field is not applicable). Incomplete mandatory fields and hand-written forms will result in the form being returned and may cause delays to consideration for funding. Please refer to your Clinical Commissioning Group's (CCGs) IFR policy or team (details at bottom form if any further support is required)

**Anonymity - Please ensure that in order to protect patient's identity, apart from Section A, the patient is not referred to by name or initials within the application form.**

Mandatory for all requests - \*  
Mandatory for drug requests - \*\*  
Mandatory for non-drug requests - \*\*\*

|   |   |
|---|---|
| Before completing this form, please answer the following questions  |   |
| Type of Intervention *  | Select One <input type="button" value="v"/> * Missing<br>Intervention |
| Is this drug or non-drug request for a treatment currently commissioned by NHS England? *<br>If Yes, then STOP HERE and refer to NHS England.   | <input type="radio"/> Yes <input type="radio"/> No                    |
| Drug requests   |   |
| Is the requested intervention part of a clinical trial? **<br>If Yes, then STOP HERE. This funding route is not appropriate. Please speak to your trust chief pharmacist regarding drug trials.   | <input type="radio"/> Yes <input type="radio"/> No                    |
| Is the drug listed on the National Tariff excluded drug list and is for use in accordance with a NICE Technology Appraisal Guidance / locally commissioned pathway **<br>If Yes, then STOP HERE. This funding route is not appropriate. Please redirect to the appropriate High Cost Drug (HCD) team.   | <input type="radio"/> Yes <input type="radio"/> No                    |
| Governance - Has the treatment been approved through the provider's clinical governance arrangements for the requested intervention for use? **<br>If No, then STOP HERE. The application requires trust governance approval. Evidence MUST be supplied e.g. drug and therapeutic committee (DTC) minutes, a letter from the DTC Chairman, if Chairman's action has been taken. | <input type="radio"/> Yes <input type="radio"/> No                    |
| Non drug requests   |   |
| Does the intervention requested fall under an existing policy (Treatment Access Policy (TAP), Effective Commissioning Initiative (ECI), Policy of Limited Clinical Value / Effectiveness (POLCV/E), prior approval)? ***<br>If Yes, and this application is being submitted by a GP, please check whether your CCG provides a referral management, clinical assessment          | <input type="radio"/> Yes <input type="radio"/> No                    |

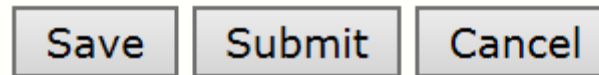
# Adding a request (points to note)

The clinical applicant (primary, secondary, tertiary or other) completing this form is responsible for collating all information and relevant evidence, which may involve working with other clinicians, outside of your organisation, involved in this patient's care. All forms must be typed, acronyms / abbreviations must be written out in full and all fields must be completed (or N/A stated where a field is not applicable). Incomplete mandatory fields and hand-written forms will result in the form being returned and may cause delays to consideration for funding. Please refer to your Clinical Commissioning Group's (CCGs) IFR policy or team (details at bottom form if any further support is required)

|  |  |
|--|--|
| Non drug requests  |  |
| <p><b>Does the intervention requested fall under an existing policy (Treatment Access Policy (TAP), Effective Commissioning Initiative (ECI), Policy of Limited Clinical Value / Effectiveness (POLCV/E), prior approval)? ***</b></p> <p>If <b>Yes</b>, and this application is being submitted by a GP, please check whether your CCG provides a referral management, clinical assessment or prior approval service.</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
| <p><b>Has this request already been declined by a referral management/clinical assessment centre or Prior Approval Service? ***</b></p> <p>If <b>Yes</b>, and the patient does not meet local policy criteria then your application needs to explicitly explain why your patient is clinically exceptional or rare in section G.</p>   | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |

# Save, submit, or cancel

At the bottom of the online application please make sure you select one of the following options:



# Patient case file (active request)

 Patient Notes: CS - 27/05/1969 NHS No: 4000356429 ID: 919926

Request ID: **6128518** - 09/01/2020 - Open MRI Scan / - Status: **Received By Commissioner**

[Add Request](#) [Comment](#) [Upload Docs](#)

**Action Notes** Reverse Order: ☐ Filter by RequestID: All 

| Date       | Description   |   |   |   |
|------------|---|---|---|---|
| 09/01/2020 | <b>On-Line Referral Received by Commissioner from Miss Jandira Trindade</b><br><b>User:</b> Jandira Trindade<br><b>ID:</b> 6128518<br><b>Hospital Number:</b> 6244065<br><b>Intervention:</b> Open MRI Scan<br><b>CCG ReferenceID (UIN):</b> 2020-38292 5K8 CS<br><b>CCG:</b> NHS ISLINGTON CCG |  |  |  |



# Additional information

Where additional information (e.g. clinical letters, letters from patients, clinical photographs, published literature) form part of the submission these can be added (in PDF format) using the 'Upload Docs' tab on the patient screen

Patient Notes: CS - 27/05/1969 NHS No: 4000356429 ID: 919926

Request ID: 6128518 - 09/01/2020 - Open MRI Scan / - Status: Received By Commissioner

Add Request   Comment   Upload Docs

**Action Notes**   Reverse Order: ☐   Filter by RequestID: All

| Date       | Description   |  |  |  |
|------------|---|--|--|--|
| 09/01/2020 | <b>On-Line Referral Received by Commissioner from Miss Jandira Trindade</b><br><b>User:</b> Jandira Trindade<br><b>ID:</b> 6128518<br><b>Hospital Number:</b> 6244065<br><b>Intervention:</b> Open MRI Scan<br><b>CCG ReferenceID (UIN):</b> 2020-38292 5K8 CS<br><b>CCG:</b> NHS ISLINGTON CCG |  |  |  |

# Triage outcomes

IFR applications submitted to the NHS North Central London Integrated Care Board IFR team are reviewed weekly

Potential outcomes are:

- **Declined, no clinical exceptionality:** the application did not provide sufficient evidence to demonstrate how the clinical presentation of the patient differs from other patients and/or how the patient would gain greater health benefit than other patients with the same condition
- **Not for IFR:** Standard treatment, NHS England remit, covered by an existing contract/service
- **Refer to IFR panel**

Outcomes will appear on the patient file alongside a rationale

# Useful contacts



North Central London  
Integrated Care Board

- Blueteq: <https://www.blueteq-secure.co.uk/Trust/default.aspx>
- IFR team email: [nclicb.ifr@nhs.net](mailto:nclicb.ifr@nhs.net)