

NHS Halton Clinical Commissioning Group
NHS Liverpool Clinical Commissioning Group
NHS St Helens Clinical Commissioning Group
NHS South Sefton Clinical Commissioning Group
NHS Southport and Formby Clinical Commissioning Group
NHS Warrington Clinical Commissioning Group

Policy for Cough Assist Devices

Cough assist is a non-invasive device that removes mucus and other secretions in the lungs for patients who can't cough effectively on their own. It works by gradually applying positive pressure to the airway before rapidly shifting to negative pressure, stimulating a stronger, more efficient cough.

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Criteria from the current 2014/15 Cheshire and Merseyside commissioning policy		Proposed criteria for the revised, future policy		High level summary of changes
Intervention		Intervention	Policy for Cough Assist Devices	
Policy Statement		Policy Statement	Restricted	
Minimum eligibility criteria	Not Applicable as there is no current policy for cough assist devices in place.	Minimum eligibility criteria	<p>Cough Assist devices will be commissioned where the following criteria are met:</p> <ul style="list-style-type: none"> • Patient is unable to cough or clear secretions effectively with a PCF (Peak Cough Flow) less than 160 L/min <p>OR</p> <ul style="list-style-type: none"> • Peak cough flow between 160-270 in addition to a history of chest infections (National neuromuscular guidelines) <p>Requests for MI-E or 'cough assist therapy' for patients who do not meet the above criteria are considered low priority and will not be routinely funded.</p> <p>For patients, who are unable to carry out lung function tests, an assessment of the appropriateness of such as device for that patient should be based on the following criteria:</p> <ul style="list-style-type: none"> • The patient has repeated chest infections i.e. 3 within a period of 6 months <p>OR</p> <ul style="list-style-type: none"> • The patient has had multiple hospital admissions i.e. 3 within 6 months or any HDU/ICU admission, <p>OR</p> <ul style="list-style-type: none"> • a prolonged admission for respiratory difficulties i.e. over 3 weeks <p>OR</p> <p>The patient has a weak cough or inability to clear their own secretions</p>	<p>Reason for proposed change(s)</p> <p>There is no current policy for cough assist devices across the Merseyside CCGs. It was identified as an important area for policy development because of the number of applications for these devices coming through as individual funding requests.</p> <p>EIA - This is a new policy due to increased requests. The assessment therefore recommended further engagement to identify any negative impact.</p>
		Rationale	This is because cough assist devices are seen to be effective in supporting patients with a range of lung conditions.	
		Evidence for inclusion and threshold	<p>Motor Neurone Disease a Problem Solving Approach for General Practitioners and Allied Health Professionals 2011 https://www.mndscotland.org.uk/media/1618/a-problem-solving-approach-2012.pdf</p> <p>National Institute for Health and Care Excellence Multiple Sclerosis Stakeholder</p>	

		<p>Comments – Draft Guideline June 2014 https://www.nice.org.uk/media/default/about/what-we-do/our-programmes/public-consulation-comments-and-responses.doc NICE Evidence search https://www.evidence.nhs.uk/search?q=cough+assist+machines Nottingham University Hospital NHS Trust Cough Assist Guideline August 2013 https://www.nuh.nhs.uk/download.cfm?doc=docm93jjim4n4634.pdf&ver=9164 5. Muscular Dystrophy UK 2015 #Right To Breath Campaign http://www.muscular dystrophyuk.org/news/campaign-success-as-nhs-bosses-in-cornwall-agree-to-fund-cough-assist-machines/</p>	
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