

HEALTH & WELLBEING BOARD

Subject Heading:	CCG - Consultation on Service Restriction	
Board Lead:	Dr Atul Aggarwal, Havering CCG	
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The subject matter of this report deals wand Wellbeing Strategy	vith the following themes of the Health	
Theme 1: Primary prevention to pr community and reduce health inec	romote and protect the health of the qualities	
Theme 2: Working together to identify those at risk and intervene early to improve outcomes and reduce demand on more expensive services later on		
Theme 3: Provide the right health place at the right time	3	
☐ Theme 4: Quality of services and to	user experience	

SUMMARY

As part of Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups' work to save £55 million in 2017/18, 'Spending NHS money wisely' identified a potential £5.2 million of savings through restricting or ceasing funding for a number of non-life threatening treatments and procedures in the following areas

- In-vitro fertilisation (IVF)
- Male and female sterilisation
- NHS prescribing
- Cosmetic procedures
- Weight loss surgery

An eight week consultation ran from 23 March to 18 May 2017 to seek local people's views on the proposals.



This report outlines the decisions reached by the CCG governing bodies regarding which treatments and procedures will no longer be funded, which are estimated to save the CCGs up to £3.03 million a year.

RECOMMENDATIONS

The board is asked to note the decisions reached.

REPORT DETAIL

Spending NHS money wisely' identified a potential £5.2 million of savings through restricting or ceasing funding for a number of non-life threatening treatments and procedures in the following areas

- In-vitro fertilisation (IVF)
- Male and female sterilisation
- NHS prescribing
- Cosmetic procedures
- Weight loss surgery

An eight week consultation ran from 23 March to 18 May 2017 to seek local people's views on the proposals.

During the consultation, CCG staff and clinical leads presented to community groups and patient groups, held drop-in sessions in public places, and carried out social media activity, in order to reach as many people as possible across the three boroughs.

This involved:

6 - public drop in sessions

26 - public meetings and events attended

800+ - leaflets distributed at meetings and events

2,200 - consultation website views

490 – consultation-related documents downloaded from websites

12 – newspaper and radio reports about the consultation

128 – tweets about the consultation

80,998 – potential number of people the tweets could have reached

661 - responses received

Analysing the responses to the consultation, showed that there was a mix of support for and against the proposals. Overall, the most strongly-supported proposals were in the prescribing and cosmetic procedures categories. More than 80% of respondents support or strongly support proposals to stop prescribing fish oil



supplements, multivitamins, rubefacient creams, cough and cold remedies, and over the counter painkillers such as paracetamol. The same strong levels of support were received for proposals to stop funding facelifts and brow lifts, breast enlargement, and re-doing breast enlargement.

The least strongly-supported proposals were stopping funding IVF for women aged 40-41 (60% of respondents against or strongly against), stopping funding male and female sterilisation (54% of respondents against or strongly against), as well as certain cosmetic procedures including treatment for swelling in testicles, varicose vein surgery, and surgery for excessive sweating.

Clinical evaluation panel and process

A 'clinical evaluation panel' of GP clinical directors was convened to consider the evidence and make recommendations on the proposals.

The panel was supported by a panel of non-voting experts including a pharmacist, patient engagement manager and Dr Andrew Rixom, Consultant in Public Health, London Borough of Havering.

The objective was to arrive at a recommendation for each proposal that considered the amount each proposal was likely to save, the impact that proposal was likely to have on affected individuals and the wider impact the proposal could have on the health of the population as a whole as well as other health and social care services.

Clinical leads scored on the following:

- 1. **Patient experience**: how much the patients' quality of life will be affected by the proposal.
- 2. Clinical impact: how much patients' health will be affected by the proposal.
- 3. **Equality impact:** the extent to which the change will disproportionately impact one part of the community.
- **4. Impact on other services:** the extent to which the proposal will affect the way that other services operate.

Reaching a decision

The clinical evaluation panel's recommendations regarding which treatments and procedures the CCGs should no longer fund, and in some cases continue to fund, formed part of a decision-making business case that went to the governing bodies.

This meeting in common took place on 29 June 2017 and the following was agreed:

Procedures the local NHS will no longer fund	
Procedure	Decision
Gluten-free products	GPs to stop prescribing gluten-free products.



Medicines for dental conditions	GPs to stop prescribing medicines for dental conditions.
Head lice and scabies medicines	GPs to stop prescribing medicines for head lice and scabies.
Rubefacient creams and gels	GPs to stop prescribing Rubefacient creams and gels such as 'Deep Heat' and 'Tiger Balm'
Omega-3 and other fish oil supplements	GPs to stop prescribing Omega-3 and other fish oil supplements
Multivitamin supplements	GPs to stop prescribing multivitamin supplements
Eye vitamin supplements	GPs to stop prescribing eye vitamin supplements
Colic remedies for babies	GPs to stop prescribing colic remedies for babies
Cough and cold remedies	GPs to stop prescribing cough and cold remedies
Painkillers	GPs to stop prescribing painkillers for adults with acute pain Children and those with chronic pain will continue to be prescribed these
Soya-based formula milk	GPs to stop prescribing soya-based formula milk.
Travel vaccinations	GPs to stop providing the following vaccines free of charge: • Hepatitis A and B combined • Hepatitis B • Meningococcal meningitis • Japanese encephalitis • Rabies • Tick-borne encephalitis • Tuberculosis • Yellow fever
Face lift and brow lift surgery	Stop funding face lift and brow lifts
Breast enlargement	Stop funding breast enlargement surgery.
Revising breast enlargement	Stop funding revision of breast enlargement surgery
Hyperhidrosis surgery	Stop funding surgery to reduce excessive sweating.
Trigger finger surgery	Stop funding surgery for trigger finger
Scrotum swellings surgery	Stop funding surgery to treat scrotum swellings
Labiaplasty	Stop funding labiaplasty surgery
Varicose vein surgery	Stop funding surgery for varicose veins

Note: Stopping funding these surgical procedures does not apply to patients who have had major trauma, cancer or severe burns and require this surgery as a result.

Procedures the local NHS will restrict access to		
Procedure	Decision	
IVF	Fund one IVF embryo transfer for women aged 23-39 (previous policy was to fund three) Stop funding IVF for women aged 40-41 (previous policy was to fund one embryo transfer)	



New eligibility criteria for weight loss surgery	Weight loss surgery will only be funded if a person has a body mass index (BMI) of 35 or above and type 2 diabetes	
Procedures the local NHS will continue to fund		
Procedure	Decision	
Male and female sterilisation	Continue to fund male and female sterilisation.	
Surgery to the outside of the ear	Continue to fund cosmetic surgery to the outside of the ear.	
Surgical removal of moles,	Continue to fund cosmetic procedures for surgical	
scars, cysts and birthmarks	removal of moles, scars, cysts and birthmarks.	
Surgical removal of vascular	Continue to fund cosmetic procedures for surgical	
lesions	removal of vascular lesions.	
Hair removal	Continue to fund cosmetic procedures for hair removal.	
Breast reduction	Continue to fund cosmetic procedures for breast reduction.	
Surgery for 'man boobs'	Continue to fund surgery for 'man boobs'.	
Tummy tuck surgery	Unable to reach a decision.	

These changes will result in a potential saving to the CCGs of £3.03 million a year.

IMPLICATIONS AND RISKS

Next steps

These changes take effect from Monday 10 July 2017, meaning that only new referrals and prescriptions will be affected. The decisions have been communicated to all GPs, stakeholders and providers. All GPs will receive a suite of materials that will help them to explain the changes to affected patients.

BACKGROUND PAPERS

Further information, including the consultation document and decision-making business case is on the CCG website: www.haveringccg.nhs.uk/spending-wisely