

Service Review Policy – Public Consultation

Public view sought on changes to some NHS services

Why are we consulting?

The NHS faces a big challenge with demographic changes leading to increasing pressure and demand on health and care services. The [NHS Five Year Forward View](#) (FYFV) was published in 2014 and outlines three key areas for change that are needed if the NHS is going to be sustainable now and in the future, these are as follows:

- **Health and wellbeing**
- **Quality of care**
- **NHS finance and efficiency**

In order to address these gaps, NHS Clinical Commissioning Groups (CCGs) are increasingly working together to focus on some specific areas for review.

By doing this we can begin to address the gaps highlighted in the FYFV to ensure that NHS services are safe, effective and sustainable. A lot of work has taken place to date with a particular focus on people living healthier lives and NHS organisations working together more to provide high quality care. CCGs across Cheshire and Wirral are looking at areas where they feel they positively impact on the efficiency of services and to ensure that treatments and procedures provided for patients are based on good clinical evidence and value.

We have recognised that in a number of cases there is a variation in services provided by different CCGs and how clinical policies are applied. Put simply, we need to look at providing similar treatments and procedures as well as having the same criteria by which these are completed.

The proposals outlined within this summary document and within the more detailed [service review document](#) are intended to reduce variation in services across Cheshire and Wirral, to ensure uniformity of access criteria and to ensure the NHS across Cheshire & Wirral operates within its available resources.

Engagement

How we engage with patients and the public is important as we move forward with this work and a number of CCGs have already started engaging with their communities about the challenges ahead. This will increasingly see more CCGs working together, not only to review

services but also to coordinate their public engagement/consultation across a wider area. With this in mind, the CCGs for Wirral, Eastern Cheshire, West Cheshire, South Cheshire and Vale Royal have come together in partnership to work on a programme of change to review some of the services they provide. The public and other stakeholders are being asked for their views before we make any decisions to ensure we have a thorough understanding of the impact these changes may have on our local population.

NHS Eastern Cheshire CCG currently has a [Commissioning Policy listing Procedures of Lower Clinical Priority](#) (PLCP). This policy details a number of procedures which are not funded unless a specified criterion is met. This policy was approved via public consultation and implemented across Cheshire and Merseyside and will remain in place.

What are we asking the public to consider?

Some of the treatments and procedures provided have a set clinical criterion – a checklist of sorts that allows a decision to be made, and this helps to ensure they are only carried out where there is clinical evidence that they are effective, beneficial to patients and affordable to our local health economy. Therefore each of the services included in this consultation will be in one of the following three categories:

Threshold approval – This means that we are proposing making changes to the threshold that needs to be met before a treatment or procedure can be carried out.

Individual funding request – We are proposing that some treatments and procedures are no longer routinely carried out and an [individual request for funding](#) will need to be completed by the referring clinician.

Not funded – We are proposing that some services are no longer funded unless it is considered to be a clinical exception.

What impact will these changes have on the local NHS?

[This review](#), along with a number of other proposals the CCG is undertaking this year will help to make a significant impact on our ability to meet our legal duty to reduce our £10.77 million deficit. It will also mean that we are contributing to the wider changes necessary across the NHS as detailed earlier.

We believe [this proposal](#) will offer an opportunity to reduce the amount spent each year on health services which have the lowest impact on patient care; this will enable us to allocate resources to other priority services. We understand however, there will be an impact on

those directly affected and are keen to find out exactly what that impact will be before we make a decision.

[Please click here to take the survey.](#)

For more information, please email CCG Engagement and Involvement Manager **Usman Nawaz**: usman.nawaz@nhs.net or call 01625 663864.

What are the proposed changes?

Procedure/treatment	Proposal
Section 1 - Cosmetic Procedures	<ul style="list-style-type: none"> • To stop funding for correctional surgery for asymmetrical breasts • To stop funding for surgery to reduce the size of breasts • To stop funding for Gynaecosmatia (surgery to correct enlarged breasts in men) – this would exclude patients with enlarged breasts caused by cancer treatment • To stop funding for hair removal treatments for patients with hirsutism (excessive hair growth on certain areas of the body) such as laser hair removal or Electrolysis (eradicating hair growth by treating each hair follicle individually with a sterile probe to stop future hair growth) • To stop funding for all procedures deemed to be primarily for cosmetic purposes
Section 2 - Dermatology (branch of medicine dealing with skin) Services	<ul style="list-style-type: none"> • To introduce a further threshold for the way we commission (buy) surgery to remove benign (non-cancerous) skin lesions (e.g. a skin tag) • To introduce a threshold approval for how we commission (buy)

	desensitising light therapy using UVB or PUVA (light therapy to induce sunlight tolerance using controlled exposure)
Section 3 – Ears Nose and Throat (ENT)	<ul style="list-style-type: none"> A number of options are proposed to change the way we commission (buy) procedures and treatments for the removal of ear wax, including microsuction (gentle suction to remove wax)
Section 4 - Fertility treatments (treatments to help females get pregnant) and Sterilisation (a medical treatment that intentionally leaves a person unable to reproduce (male & female))	<ul style="list-style-type: none"> A number of options are proposed to change the way we commission (buy) fertility treatments A number of options are proposed to change the way we commission (buy) sterilisation (male & female) treatments including procedures such as vasectomy
Section 5 - Trauma & Orthopaedics (an area of surgery concerned with injuries and conditions that affect the bones, joints, ligaments, tendons, muscles and nerves) and Musculoskeletal (relating to the muscle and the skin together)	<ul style="list-style-type: none"> To introduce a threshold for patients being referred for shoulder arthroscopy (surgery that uses a tiny camera called an arthroscope to examine or repair the tissues inside or around the shoulder joint. A number of changes are proposed for the way we commission (buy) surgical and non-surgical interventions for Dupuytren's Contracture (a condition in which there is fixed forward curvature of one or more fingers) To add a further threshold to how we commission (buy) knee replacement surgery A number of options are proposed for the way we commission (buy) hip

	injections
Section 6 – Urology (urinary tract system and male reproductive organs) and Urogynaecology (incontinence and female reproductive organs) services	<ul style="list-style-type: none"> • To stop funding pharmaceutical (medications) and secondary care treatment for erectile dysfunction (also known as impotence, inability to get and maintain an erection) • To stop funding for male circumcision (surgical removal of the foreskin) for religious reasons (please note Eastern Cheshire CCG, South Cheshire CCG, Vale Royal CCG and West Cheshire CCG do not commission (fund) this procedure for religious reasons, therefore responses to this question will relate to Wirral patients only) • To stop funding for percutaneous posterior tibial stimulation (PTNS) for urinary and faecal incontinence. PTNS involves inserting a needle into a nerve just about the ankle. A mild electric current is passed through the needle and carried to the nerves that control bladder and bowel function)

Please note: criteria for each procedure and treatment will be finalised after the consultation to ensure feedback received during consultation can be incorporated as appropriate

If you would like a detailed list of any of these clinical areas, please email CCG Engagement and Involvement Manager **Usman Nawaz**: usman.nawaz@nhs.net or call 01625 663864.

The procedures listed do not stop the referrer (GP or consultant) from being able to refer patients with suspected cancer.

What happens next?

NHS Eastern Cheshire CCG is undertaking [a consultation](#) to seek views on these proposals and obtain feedback from patients, health professionals and the public.

[This consultation](#) will run from **Tuesday 25 October 2016** until **midnight on Tuesday 17th January 2017**.

At the end of the [consultation period](#) an analysis of what people have told us during the consultation will be completed and will be considered as part of the final proposal. The NHS Eastern Cheshire CCG Governing Body will consider the proposal, including the consultation feedback, on 25 January or 22 February 2017 when a final decision will be made.

As part of [the consultation](#) we need your views on the proposal and to understand the impact they may have on you.

Share your thoughts

We would really like to hear your thoughts and ideas on other initiatives that we as a CCG could adopt to help improve the quality of care and ensure we are commissioning procedures and treatments that are beneficial to patients and affordable to the local economy.

Please share your views by contacting:

CCG Engagement and Involvement Manager **Usman Nawaz**:

Email: usman.nawaz@nhs.net

Telephone: 01625 663864.

Public meetings:

A number of public meetings will be held to give people a further opportunity to have their say. Details will be published on the CCG website www.easterncheshireccg.nhs.uk