

Southend-on-Sea City Council

Agenda
Item No.

Report of Mid and South Essex Integrated Care System
To

People Scrutiny Committee

On

29 November 2022

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Service Harmonisation

Relevant Scrutiny Committee(s) – People Scrutiny Committee
Cabinet Member: Councillor Burton
Part 1 (Public Agenda Item)

1. Purpose of Report

The purpose of this report is to update the Committee on the Service Harmonisation Consultation for Mid and South Essex (MSE) Integrated Care Board (ICB). It sets out our ambition to harmonise the provision of six service areas due to differing historic commissioning policies within the five clinical commissioning groups.

The six service areas are:

- Bariatric Surgery (weight loss surgery)
- Breast asymmetry (surgery for uneven breasts)
- Breast reduction (making breasts smaller)
- Female Sterilisation
- Vasectomy (male sterilisation)
- Tertiary Fertility Services including:
 - Intra-uterine insemination (IUI)
 - In vitro fertilisation (IVF), with or without intra-cytoplasmic sperm injection (ICSI)
 - Sperm and oocyte donation.

2. Recommendations

The committee is asked to:

- Note this update
- Support the promotion of the consultation
- Agree to receive the analysis of public consultation at a future meeting

3. Background

We want to change the policies for six clinical services that are only funded by the NHS in our area under certain circumstances.

At the moment the policies for these six services differ depending on where you live in our area. For example, people living in the commissioning areas of Basildon, Brentwood and Mid Essex can't access IVF services on the NHS, when people living in other areas of mid and south Essex can.

We want to change these policies, so everyone living in mid and south Essex has the same opportunities.

We have looked at the latest clinical evidence and practice for all six services nationally and locally. We have taken advice from a range of doctors, nurses, and other health and care professionals.

We have spoken to patients, the public and other key stakeholders across mid and south Essex to understand what is important for people when we make these decisions.

The cost of providing these services and the potential consequences of a decision to be made in the future has also been reviewed.

This is because we will need to balance the cost of providing these services with the cost of all the other care provided by the NHS in our area.

4. Process so far

4.1 Clinical Review Process

The Clinical and Multi-Professional Congress (hereafter referred to as Congress) is a group of experienced clinical and multi-professional staff, drawing together expertise from across our health and care system. The Congress was asked to review the six service areas (listed above) where service provision policies differed across the five CCGs. A panel of expert clinicians from across mid and south Essex was also convened where Congress recommended the use of criteria to define the population for which care should be funded e.g. Group Prior Approval or Individual Prior Approval.

4.2 Equality and Health Inequality Impact Assessments

Draft Equality and Health Inequality Impact Assessments (EHIIA) were completed for all six areas by a panel with expertise in inequalities, public health, Place (Alliance), primary care, clinical and procurement.

4.3 Pre-consultation engagement

Pre-consultation engagement took place during August 2022. This was conducted via an online survey and targeted focus groups with those most likely to be impacted by the policies.

A desk-top review of all previous reports, consultations and engagement covering these areas was undertaken.

This also covered a review of the policies for neighbouring ICS's.

The following points appeared across all six treatment areas for the committee to note:

- The importance of fairness and equity.
- Affordability (particularly about fertility services).
- Impact on mental health for individuals.

Two clear and consistent themes were fairness and equity, ensuring that anyone in mid and south Essex should be able to access services in the same way regardless of where they live.

Affordability, keeping a service free, was also essential to provide those on lower income or those with an inability to pay access to services.

When it comes to making decisions about access to services, people wanted there to be greater consideration of the emotional impact of infertility, dealing with larger and/or uneven breasts and obesity.

4.5 Review of Finance

Looking at our finances, we have found:

- The current cost of the existing provision of these services is around £1 million
- We estimate adopting the policies across mid and south Essex will result in an additional annual cost of around £1 - 1.1 million
- The largest increase in demand would relate to fertility services because of extending their availability in areas where previously there was less availability

The proposals we have set out are therefore likely to mean a greater cost to the NHS as more people will be able to access them than are currently entitled to under the existing policies.

4.5 Consulting on Proposals

The proposals for the consultation and the survey can be found in appendix 1 and the consultation period will run from 31st October to 19th December 2022. An Easy Read version of the consultation document has also been created and can be found in appendix 2.

The consultation process will be promoted as a programme of activities with an emphasis on seeking participation from those groups most likely to be impacted by any change.

People will be encouraged to use an online feedback questionnaire to submit their views, but we will also invite feedback in any of the following ways:

- By letter or email to the ICB central get involved email
- By attending a meeting or workshop, where there will be structured notes taking and minutes
- Focus group/conversations with a range of targeted groups including, LGBTQ+, learning disabilities groups, faith groups, fertility groups, men's groups

The consultation plan, documents and questionnaire will be sent out to all Committee members before the committee meeting.

For the intervening period between now and decision-making, residents will continue to be subject to the policy according to the location of their registered GP (e.g., if registered to a practice in Basildon and Brentwood, the service offered for the registered population by the predecessor CCG would be observed).

5. Reasons for Recommendations

The committee is asked to note and support the service harmonisation consultation process with the mid and south Essex residents on the proposed harmonisation of the ICB's commissioning policy.

6. Next Steps

The consultation will commence 31st October 2022 and run through until 19th December 2022.

The MSE ICB Board will be presented with a decision-making business case in February 2023 including the analysis of the public consultation

7. Appendices to the Report

Appendix 1.



FINAL - Service
Harmonisation ConsDOC - Service Harmc



FINAL - SURVEY

Appendix 2.



Making services
more equal for people