



Mid and South Essex  
Integrated Care  
System



Mid and South Essex

# Feedback survey

31st October to 19th December 2022



## Service harmonisation

Bringing equity to services across mid and south Essex

You can also complete this survey online at: [www.smartsurvey.co.uk/s/MidSouthEssexTalkToUs](https://www.smartsurvey.co.uk/s/MidSouthEssexTalkToUs) or by scanning this QR code:

### Service Harmonisation – Bringing equity to services across mid and south Essex

Mid and South Essex Integrated Care Board (ICB) wants to harmonise 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 the area. Mid and South Essex ICB wants to update these policies, so everyone living in mid and south Essex has the same opportunities.

The policies it wants to update cover:

- Weight loss surgery (bariatric surgery)
- Correction for uneven breasts (breast asymmetry)
- Breast reduction (making breasts smaller)
- Female sterilisation

- Vasectomy (male sterilisation)
- Tertiary Fertility Services including:
  - Intrauterine insemination (IUI)
  - In vitro fertilisation (IVF), with or without intra-cytoplasmic sperm injection (ICSI)
  - Sperm and oocyte (egg) donation.

On the Mid and South Essex ICS website – [www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/](https://www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/), or in the accompanying Consultation Document, you can find information regarding the proposals for updates to the policies to help bring them into a new single policy for each of the six service areas.

This will support the ambition to end the variation that has existed up until now in accessing these services for those who would clinically benefit in our communities.

**THANK YOU** for taking the time to let us know what you think.

**Please tell us which council area you live in:**

- ☐ Basildon Borough Council
- ☐ Braintree District Council
- ☐ Brentwood Borough Council
- ☐ Castle Point Borough Council
- ☐ Chelmsford City Council
- ☐ Maldon District Council
- ☐ Rochford District Council
- ☐ Southend-on-Sea City Council
- ☐ Thurrock Council
- ☐ Other (please specify):

**Which of the following statements apply to you? You can select more than one.**

- ☐ I am currently affected by this policy – patient or service user
- ☐ I might be affected by this policy in the future
- ☐ I have a close relationship with someone who is affected or has been affected by this policy in the past e.g. carer
- ☐ I have a professional interest in this policy – staff / clinician
- ☐ I am not affected by this policy in any way
- ☐ Other (please specify):

**Please answer the questions relating to the services you would like to share your views on.**

**Weight loss surgery (bariatric surgery)**

**New policy**  
Service provision via Group Prior Approval

- Recommended threshold criteria:**
- The person has a body mass index (BMI) of 40 kg/m2 or more, or between 35 kg/m2 and 40 kg/m2 and other significant diseases (e.g. type 2 diabetes or high blood pressure) that could be improved if they lost weight.
  - All appropriate non-surgical measures have been tried but the person has not achieved or maintained adequate, clinically beneficial weight loss.
  - The person has been receiving or will receive intensive management in a tier three service. (A tier three service is a weight management programme that supports adults with severe and complex obesity to lose weight through a range of interventions including psychological approaches and dietary changes).
  - The person is generally fit for anaesthesia and surgery.
  - The person commits to the need for long-term follow-up.

The current policies across all areas can be found at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

**To what extent do you support or oppose the proposed policy update to weight loss surgery?**

- ☐ Strongly support
- ☐ Somewhat support
- ☐ Neither support nor oppose
- ☐ Oppose
- ☐ Strongly oppose

**Please explain your answer**

## Correction for uneven breasts (breast asymmetry)

### New policy

Service provision via Individual Prior Approval

### Recommended threshold criteria:

The goal of surgery is to correct a significant deformity that is causing an impact on health. Patients will be eligible if all the following are confirmed:

- Clinical evidence rules out any other medical/physical problems to cause these symptoms; and the wearing of a professionally fitted bra has not relieved the symptoms, and
- There is a difference of at least two cup sizes (e.g. C and DD cup size differential) OR evidence of another serious functional impairment for at least one year, and
- Full evidence is provided of all conservative management options that have been attempted, and
- The patient is a non-smoker, and
- Patient has had no change in cup size for one year and has reached the end of puberty (referral should be delayed if the end of puberty has not been reached), and
- Only unilateral breast reduction (not unilateral breast augmentation) will be funded, and
- This policy does not cover gynecomastia (when boys' and men's breasts swell and become larger than normal).

The current policies across all areas can be found at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

### To what extent do you support or oppose the proposed policy update relating to correction for uneven breast?

- ☐ Strongly support    ☐ Somewhat support    ☐ Neither support nor oppose
- ☐ Oppose    ☐ Strongly oppose

Please explain your answer

## Breast reduction

### New policy

Service provision via Individual Prior Approval

### Recommended threshold criteria:

- The patient is suffering from neck ache and/or backache. Clinical evidence will need to be produced to rule out any other medical / physical problems to cause these symptoms, and the wearing of a professionally fitted bra has not relieved the symptoms, and
- The patient has had persistent intertrigo (inflamed skin caused by friction/rubbing) for at least one year and confirmed by GP OR another serious functional impairment for at least one year, and
- Full evidence is provided of all conservative management options that have been attempted, including weight management services where appropriate, and
- The patient has a BMI less than 27 and evidence that the weight has been stable for 12 months, and
- The patient is a non-smoker, and
- At least 1kg is planned to be removed from each breast.

Patients who have predictable breast changes due to pregnancy are excluded.

The current policies across all areas can be found at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

### To what extent do you support or oppose the proposed policy update for breast reduction?

- ☐ Strongly support    ☐ Somewhat support    ☐ Neither support nor oppose
- ☐ Oppose    ☐ Strongly oppose

Please explain your answer

# Female sterilisation

New policy  
Service provision via Group Prior Approval

Recommended threshold criteria:

- **Family complete:** The woman is certain that her family is complete or that she never wants children in the future.
- **Contraception:** there is an absolute clinical contraindication to Long Acting Reversible Contraception (LARC) or has severe side effects to the use of LARC or declines a trial of LARC after counselling from a healthcare professional experienced in fitting these devices.
- **Capacity:** the woman has mental capacity OR all necessary arrangements have been completed to either support her to a position of having capacity or where appropriate advocacy arrangements are in place, in compliance with the latest capacity guidance.
- **Counselling:** she is aware that the procedure is permanent but has a failure rate, that reversal is not funded on the NHS (except via Individual Funding Requests), and that other forms of LARC have a similar success rate, with a lower risk profile. Counselling must also include consideration of vasectomy for her partner where appropriate.
- **BMI:** she must have a BMI less than 35, due to increased clinical risk associated with a BMI of 35 and above.
- **Exemptions:** women who have a medical condition making pregnancy dangerous or where LARC is contra-indicated or inappropriate will be exempt from these criteria and female sterilisation will be routinely funded.

The current policies across all areas can be found  
at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

To what extent do you support or oppose the proposed policy update relating to female sterilisation?

- ☐ Strongly support
- ☐ Somewhat support
- ☐ Neither support nor oppose
- ☐ Oppose
- ☐ Strongly oppose

Please explain your answer

# Vasectomy (male sterilisation)

New policy  
Service provision via Vasectomy under Local anaesthetic: Routinely funded  
Vasectomy under General anaesthetic: Group Prior Approval

Recommended threshold criteria or Vasectomy under General Anaesthetic:

Previous documented adverse reaction to local anaesthesia.

OR

Scarring or deformity that distorts the anatomy of the scrotal sac or content making identification and / or control of the spermatic cord through the skin difficult to achieve.

The current policies across all areas can be found  
at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

To what extent do you support or oppose the proposed policy update relating to vasectomies?

- ☐ Strongly support
- ☐ Somewhat support
- ☐ Neither support nor oppose
- ☐ Oppose
- ☐ Strongly oppose

Please explain your answer

Tertiary fertility services including in vitro fertilisations (IVF) with or without intra-cytoplasmic sperm injection (ICSI) and sperm and egg donation (sperm and oocyte donation).

New policy  
Service provision via Individual Prior Approval

Recommended threshold criteria:

- **IVF:** A full cycle defined as up to one fresh and one frozen embryo transfer. This will include the cost of freezing and storage. The transfer of one frozen embryo will be funded for patients who do not achieve a live birth with the fresh embryo transfer. The age of the mother at the time that the embryos are frozen is required to be within the age limits set out in the policy. This also applies to the age at transfer.
- **Cause of infertility:** Couples who have been diagnosed as having a male factor or female factor problems or have had unexplained infertility for at least two years, taking into consideration both age and waiting list times. Where the partner receiving IVF is 40- 42, the period of unexplained infertility should be at least one year.
- **Eligible Couples will be offered:** a maximum of two full cycles of IVF+/-ICSI (local definition of a full cycle) where the partner receiving treatment is between the age of 23 and 39. Where the partner is between the age of 40-42, a maximum of one full cycle (local definition) will be offered.
- **Patients younger than 23** will be considered where investigations have shown conception would be impossible without fertility treatment.
- **Any previous IVF** cycles, whether self - or NHS-funded, will count towards the total number offered by the ICB.
- **The partner receiving IVF** should have been registered to a mid and south Essex GP practice for at least 12 months preceding referral to IVF services.
- **BMI:** Women will only be considered for treatment if their BMI is between 19-30 (Kg/m2). Women with BMI higher than 30 should be referred to the appropriate obesity management pathway.
- **Men with a BMI of higher than 35** will not be considered for treatment and should be referred to the appropriate obesity management pathway.
- **Smoking:** Couples must be non-smoking at the time of treatment.
- **Same-Sex Couples:** If six cycles of privately funded IUI have been unsuccessful, demonstrating infertility, the couple will be eligible for IVF as above. Under recommended criteria, same-sex couples would now be eligible for the same number of cycles as heterosexual couples.

- **Donor gametes (eggs and sperm):** Up to one batch (usually six) of donor oocytes (immature eggs) and one batch of sperm will be funded. Where more than two viable embryos are generated, up to two transfers will be funded in line with the rest of the policy. Any remaining embryos will be subject to the same criteria as if the oocytes were the couple’s own. Fertility products will be stored in line with relevant national guidance.
- **Living Children:** Fertility treatment will only be offered to couples where the following two criteria are met: a) where there are no living children in the current relationship and b) where neither partner has children from previous relationships. This includes any adopted child within their current or previous relationships.

The current policies across all areas can be found at [www.midandsouthessex.ics.nhs.uk/publications/srp](http://www.midandsouthessex.ics.nhs.uk/publications/srp)

To what extent do you support or oppose the proposed policy updates to special fertility services?

- ☐ Strongly support
- ☐ Somewhat support
- ☐ Neither support nor oppose
- ☐ Oppose
- ☐ Strongly oppose

Please explain your answer

# Overview of proposed policy changes

Mid and South Essex ICB has produced a consultation document about the proposed service harmonisation which is available on its website at [www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/](http://www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/) and in libraries.

It gives an overview of current policies, the proposed updates to the policies and highlights what this means for each of the areas impacted.

## To what extent do you support or oppose the proposed policy updates?

- ☐ Strongly support
- ☐ Somewhat support
- ☐ Neither support nor oppose
- ☐ Oppose
- ☐ Strongly oppose

Please explain your answer

# Other comments

## What is important to you as we review these services?

# About you

## Why are we asking these questions?

- 1. It helps us understand how different groups of people experience things in different ways.
- 2. It helps us ensure that we are representing different groups in the community, especially those whose voice is sometimes not heard.
- 3. It helps us refine recommendations to suit different groups of people.

The following questions are optional but knowing a bit more about you helps us to understand your feedback better. Be assured that the information you give us is collected anonymously and cannot be used to identify you personally.

The information you provide will be protected and stored securely in line with data protection laws and will only be used to help us analyse your feedback.

## What was your age group at your last birthday?

- ☐ 16 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65 to 74
- ☐ 75 to 84
- ☐ 85 and over
- ☐ Prefer not to say

## Are you currently pregnant or have you given birth in the last year?

- ☐ Yes
- ☐ No
- ☐ Does not apply
- ☐ Prefer not to say

## Please choose one of the following options that most accurately describes your ethnic group or background.

- ☐ White – English, Welsh, Scottish, Northern Irish or British
- ☐ White – Irish
- ☐ White – Gypsy or Irish Traveller

- ☐ White – Roma
- ☐ Mixed or multiple ethnic groups – White and Black Caribbean
- ☐ Mixed or multiple ethnic groups – White and Black African
- ☐ Mixed or multiple ethnic groups – White and Asian
- ☐ Asian or British Asian – Indian
- ☐ Asian or British Asian – Pakistani
- ☐ Asian or British Asian – Bangladeshi
- ☐ Asian or British Asian – Chinese
- ☐ Black, Black British Caribbean or African – African
- ☐ Black, Black British Caribbean or African – Caribbean
- ☐ Arab
- ☐ Prefer not to say
- ☐ Any other ethnic group, please describe:

## Which of the following options best describes how you think of yourself?

- ☐ Bisexual
- ☐ Gay or lesbian
- ☐ Heterosexual or straight
- ☐ Prefer not to say

## Is your gender identity the same as the gender you were assigned at birth?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

## Which of the following options best describes how you think of yourself?

- ☐ Woman (including trans woman)
- ☐ Man (including trans man)
- ☐ Non-binary
- ☐ Prefer not to say



What is your religion?

- ☐ Buddhist
- ☐ Christian
- ☐ Hindu
- ☐ Jewish
- ☐ Muslim
- ☐ Sikh
- ☐ No religion
- ☐ Prefer not to say
- ☐ Other (please specify):

Do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

If you have answered yes to the question above, does your condition or illness/ do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

- ☐ Yes, a lot
- ☐ Yes, a little
- ☐ No
- ☐ Prefer not to say

Which of the following best describes your current financial situation?

- ☐ I have more than enough money for basic necessities, and a lot spare, that I can save or spend on extras or leisure
- ☐ I have more than enough money for basic necessities, and a little spare, that I can save or spend on extras or leisure
- ☐ I have just enough money for basic necessities and little else
- ☐ I don't have enough money for basic necessities and sometimes or often run out of money
- ☐ Prefer not to say
- ☐ Not known

What is your main language?

- ☐ English
- ☐ Prefer not to say
- ☐ Other (please specify):

Thank you

Thank you for taking the time to give us your views on the proposed policy updates for these services.

Please hand this in at the library or event where you received it, or you can post it to:

NHS Mid and South Essex  
Unit 10 Phoenix Court  
Christopher Martin Road  
Basildon  
Essex  
SS14 3HG

For more information on the consultation and to see the final analysis report of this survey, visit the website:  
[www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/](http://www.midandsouthessex.ics.nhs.uk/getinvolved/how/consultations/)

Data processing statement:

Mid and South Essex ICB has appointed Stand, independent patient involvement and public engagement specialists, to conduct this survey. Stand will provide independent reports which will make sure that the feedback we receive from individuals is anonymous. Stand will process any information you provide in line with the latest data protection regulations. Stand will use your information only for the policy harmonisation consultation exercise. Stand will never share your contact details for marketing purposes. They will keep any personal information that could identify you for no more than one year after the engagement activity has finished.

For more information about the way Stand uses the information you provide, your rights, and how to complain, please visit [wearestand.co.uk/mydata](http://wearestand.co.uk/mydata)



