

***HEALTH AND WELL BEING BOARD  
Regulatory Committee  
Agenda***

Date Tuesday 25 September 2018

Time 2.00 pm

Venue Crompton Suite, Civic Centre, Oldham, West Street, Oldham, OL1 1NL

- Notes
1. DECLARATIONS OF INTEREST- If a Member requires advice on any item involving a possible declaration of interest which could affect his/her ability to speak and/or vote he/she is advised to contact Paul Entwistle or Lori Hughes at least 24 hours in advance of the meeting.
  2. CONTACT OFFICER for this agenda is Lori Hughes Tel. 0161 770 5151 or email [lori.hughes@oldham.gov.uk](mailto:lori.hughes@oldham.gov.uk)
  3. PUBLIC QUESTIONS - Any member of the public wishing to ask a question at the above meeting can do so only if a written copy of the question is submitted to the contact officer by 12 noon, Thursday, 20 September 2018.
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Independent Members: Dr Zubair Ahmad, Dr Zuber Ahmed, Jon Aspinall, Jill Beaumont, Julie Daines, Neil Evans, Julie Farley, Nicola Firth, Majid Hussain, Dr Keith Jeffery, Merlin Joseph, Stuart Lockwood, Donna McLaughlin, Raj Patel, Dr. John Patterson, David Smith, Katrina Stephens, Charlotte Stevenson, Mark Warren, Carolyn Wilkins OBE and Liz Windsor-

Welsh

Item No

12          Public Consultation Process on Proposed IVF Changes (Pages 1 - 8)

## **BRIEFING TO OLDHAM HEALTH AND WELLBEING BOARD**

### **Report Title: IVF cycle – proposal to consult**

**Report Author:** John Patterson, Chief Clinical Officer (Oldham CCG),  
Nadia Baig, Acting Director of Performance and Delivery (Oldham CCG)

**Date:** 25 September 2018

#### **What the issue is:**

In-vitro fertilization (IVF) is part of a range of assisted conception services available to couples finding it difficult to conceive a child naturally. NHS Oldham CCG commissions assisted conception care in line with guidance from the National Institute for Health and Care Excellence (NICE). For women under the age of 40, Oldham currently funds up to 3 cycles of IVF as recommended by NICE Clinical Guideline 156.

However, only 12% of CCGs now fund 3 cycles, with the majority (61%) now funding only 1 cycle. NHS Oldham CCG, like the wider NHS is under financial strain and is actively seeking to find savings to ensure future financial sustainability. IVF has been identified as one of the potential areas where savings can be made. Balancing the small number of people potentially affected, but notwithstanding the large impact of childlessness on individuals, the CCG's preferred option is to fund 1 cycle only going forward which would save the local NHS an estimated £147,500 per year.

The CCG will undertake public consultation on this from 12 October – 7 December 2018, offering all viable options (3, 2, 1 and 0 cycles funded) and setting out the pros and cons of each. A decision is expected to be reached on 17 January 2019.

#### **Requirement from the Health and Wellbeing Board:**

For the Board to be satisfied that due process is being followed and that the decision will be informed by public consultation.

#### **Recommendations:**

That Oldham CCG undertakes a public consultation on the potential reduction of NHS funded IVF cycles, following due process.

**Briefing: IVF Case for Change and Consultation**

**What is IVF?**

IVF (in vitro fertilization) is one of several methods available to help a woman to have a baby. In IVF an egg is removed from a woman's ovaries and fertilized with sperm in a laboratory. The fertilized egg (embryo) is then replaced into the womb to grow and develop. In IVF, the couple's own eggs and sperm can be used, or eggs or sperm from donors.

A full cycle of IVF includes one episode of ovarian stimulation, egg recovery, insemination, and embryo replacement into the womb. The cycle ends with the final transfer of all resultant fresh and frozen embryos or a successful live birth occurring during the cycle.

The Human Fertility and Embryology Authority (HFEA) reports on the activity and success rates of IVF clinics nationally. Its most recent analysis reports that around one in three treatment cycles results in a live birth for patients under the age of 35. Success rates reduce with rising female age, as the number of unsuccessful cycles increases.

**IVF cycle availability and provision**

NHS Oldham CCG commissions assisted conception services in line with guidance by the National Institute for Health and Care Excellence (NICE). NICE guidance on fertility problems recommends the provision of three full IVF cycles for eligible couples where the woman is aged less than 40 years. This is what NHS Oldham CCG currently commissions. The guidance is not mandatory to CCGs, and a number of CCGs have recently implemented changes to their policies following local consultations and in effect have reduced the scope and availability of NHS funded IVF cycles.

There is a wide variation in availability of funding for IVF across the English NHS (a so-called postcode lottery). Some CCGs do not fund IVF treatment for their residents at all. In contrast, Oldham offers up to 3 cycles (the maximum funded by any CCG) to eligible couples where at least one partner has no children. It is becoming financially unsustainable to continue to offer 3 cycles of IVF to Oldham residents at a time when other vital services are being inundated with an expanding population who have greater health needs. Oldham CCG wants to provide a number of cycles which is more consistent with other boroughs.

In May 2017 Fertility Fairness reported the number of NHS funded IVF cycles commissioned in England:

<b>Number of cycles funded by CCG</b>	<b>Percentage of CCG's in England which fund cycles</b>
0	4%
1	61%
2	23%
3	12%

In recent years there has been a marked reduction in provision to NHS funded IVF in England. According to Fertility Fairness, thirteen CCGs have made reductions to provision of fertility treatment since the beginning of 2017 and seven CCGs do not fund IVF treatment at all.

The Greater Manchester Assisted Conception Policy, which applies to Oldham, sets out a common eligibility framework for IVF treatment across Greater Manchester CCGs, but allows individual CCGs to determine the number of cycles they will fund.

The current provision across GM is described in the table below:

CCG	Number of Cycles
NHS Bury CCG	3*
NHS Heywood, Middleton and Rochdale CCG	3
NHS Oldham CCG	3
NHS Tameside and Glossop CCG	3
NHS Salford CCG	2
NHS Stockport CCG	2
NHS Wigan CCG	2
NHS Bolton CCG	1
NHS Trafford CCG	1
NHS Manchester	1

\*This is currently out to consultation on reducing the number of cycles offered.

The two main providers of the service to the people of Oldham are: Central Manchester University Hospital (NHS) and Care Manchester (non NHS private provider). Other NHS and private providers also receive payments from Oldham CCG to deliver IVF services to Oldham residents under the Patient Choice Model (see <https://www.england.nhs.uk/patient-choice/> for more information re: patient choice model).

The table below illustrates the number of cycles provided and the expenditure by provider on IVF services for NHS Oldham.

Oldham CCG	No of cycles 2016/17	Total IVF Expenditure 2016/17	No of cycles 2017/18	Total IVF Expenditure 2017/18
<b>NHS Providers</b>	173	£479,789	183	£493,733
<b>Private Providers</b>	18	£80,173	12	£51,225
<b>Total</b>	<b>191</b>	<b>£559,962</b>	<b>195</b>	<b>£544,958</b>
<b>% NHS split</b>	91%	86%	94%	91%
<b>% Private split</b>	9%	14%	6%	9%

## Finance/Activity

In 2017-18 NHS Oldham spent £544,958 on IVF. The average cost per cycle from NHS providers is approximately £2,698. Table 3 shows the current providers and financial spend on IVF for the last 2 years.

Provider	2016-17	2017-18
Central Manchester University Hospital	£474,254	£492,771
Care Manchester	£60,805	£29,625
Wrightington Wigan and Leigh NHS Foundation Trust	£5,535	£961
Manchester Fertility Services	£9,500	£20,750
Bourn Hall Clinic	£9,868	£850
<b>Total</b>	<b>£559,962</b>	<b>£544,958</b>

During 2017-18, NHS Oldham funded 195 cycles of IVF. Out of these, the CCG spent approximately 70% of the IVF spend on cycle 1, which is all patients, and the remaining 30% of the spend on cycle 2 and 3. This is shown in figures for 2017/18 below:

Cycles	Type	No of cycles	Average Price per cycle	Cost
Cycle 1	NHS Patients	134	£2,698	£361,088
	Private			
Cycle 1	Patients	9	£4,269	£36,370
Cycle 2	NHS Patients	39	£2,698	£105,010
	Private			
Cycle 2	Patients	3	£4,269	£11,782
Cycle 3	NHS Patients	10	£2,698	£27,634
	Private			
Cycle 3	Patients	1	£4,269	£3,074
	<b>Total Cycles</b>	<b>195</b>		<b>£544,958</b>

Out of a total spend of £544,958, £116,792 was spent on the provision of second cycles, and £30,708 on third cycles.

## Service and financial considerations

To make sure we are spending our budget as effectively as possible, we are continually reviewing the services we commission and pay for – and this includes IVF. Oldham CCG recognises the pain of infertility and the effects it can have on individuals/couples, and we are immensely proud that IVF was developed in Oldham.

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The NHS as a whole is facing significant financial pressure to maintain high quality services while experiencing ever increasing demand, which looks set to continue for the foreseeable future. An aging and growing population plus rising costs are all placing pressure on an already stretched system.

The Oldham system is also experiencing increasing demand for services. Oldham spends around £1.25 million a day on health and social care, and commissions services for the quarter of a million people who live in the communities that make up the Borough of Oldham. The CCG, as part of Oldham Cares, is responsible for approximately £380 million a year of healthcare spending for Oldham patients. The CCG works hard to ensure that we do not spend more money than we have by focusing resources on the greatest health needs of our population in order to reduce health inequalities and secure the best possible health outcomes for local people.

In January 2018, Oldham CCG reviewed a number of ways it could maintain its fiscal responsibility by avoiding non-essential expenditure. It was agreed to develop proposals for a number of these, including potentially reducing the number of IVF cycles offered from 3 to 1.

On 30<sup>th</sup> August 2018, the Joint Commissioning Committee agreed in principle to go to consultation with the preferred option of reducing cycles offered to one cycle. A formal decision on whether to go to consultation will be made by the CCG's Governing Body on 4 October 2018.

## **Options and Impact**

We understand the number of IVF cycles a CCG commissions is a contentious and sensitive topic. We are keen to ensure that the CCG makes an informed decision taking into account patient and public opinion, demand for health and care services in Oldham and the duty to spend the 'Oldham Pound' most judiciously. In order to ensure that the CCG can make an informed decision about this, it is imperative that a thorough and robust consultation with patients and the public is carried out. Any decision the CCG subsequently makes regarding IVF cycles would take into account the views expressed in the consultation.

## **Population impact**

We funded 195 cycles in 2017/18. Whilst this involves a very small percentage of the population, it is important to remember that this is a service that seeks to fulfil parenting ambitions. Other local areas who have consulted with their patients on the reduction of IVF cycles have highlighted: population increases being economically important, family support in older age saving money and reducing demand on health and social care, and social value within communities.

Subject to the approval of the CCG Governing Body, it is proposed that all valid options on cycles funded would be presented in the consultation, with the CCG's preferred option of 1 cycle indicated.

The options are listed below with a brief outline of some of the risks/benefits of each:

Option	IVF cycle offer	Benefits	Risks
1	Continue to offer 3 cycles	Continues the "status quo"	Demand is likely to increase due to reduced funding in other CCG's (so called health tourism). This option does not address the financial strains the CCG is facing so other services may experience financial implications
2	Offer 2 cycles	Still allows for Oldham residents to receive NHS funded IVF Financial savings of approx. £30,707 per year	Subject to challenge. The total cost of the service provision is likely to increase yearly.
3	Offer 1 cycle	Still allows for Oldham residents to receive NHS funded IVF Financial savings of approx. £147,500 per year	Subject to challenge.
4	Do not offer any cycles (0 cycles)	Financial savings of approx. £545k per year	Subject to challenge Other implications may take effect on individuals (mental health, debt, relationship strain) due to inability to access IVF

It is important to note that the scope of the consultation would not include eligibility criteria or other assisted conception treatments. Therefore other than the number of cycles, options 2 and 3 would continue to be compliant with NICE guidelines and the Greater Manchester Assisted Conception Policy in terms of access criteria. The individual funding request route would be available for cases considered to be exceptional to the policy.

In case of a decision to reduce the number of available IVF cycles, those couples who have already been referred and/or are in the process of receiving 3 cycles of IVF would continue to have access to 3 cycles if needed. For referrals which are received for a first cycle during the consultation period, the outcome of the consultation will apply to those patients.

Oldham CCG will engage with their providers as part of the consultation process, and will keep them informed about the outcomes and implications.



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## Preferred Option

Oldham CCG's preferred option is Option 3 – to offer 1 cycle of IVF per patient. We believe this is the most appropriate option for Oldham because:

The number of people affected is less than an estimated 0.05% of the total population

- Due to the small number of patients who receive more than one cycle at a cost of £147,500 per year
- Provides the opportunity to protect and reinvest in other vital services
- The value of being able to offer one cycle to those seeking to start a family through the assisted conception route.

Therefore, removing the offer of a second and third cycle of IVF, yet still providing one full cycle (which is compliant with NICE guidance in terms of eligibility criteria) is the preferred option of the CCG.

## Consultation

Oldham CCG is aware of and committed to fulfilling our public involvement responsibilities under section 14Z2 of the Health and Social Care Act (2012). The CCG is also bound by the NHS Constitution and the rights of all patients to be involved in decision making processes which affect them. As an NHS body, the CCG has a responsibility to put patients at the heart of everything we do and we are accountable to the public, communities and patients the CCG serve.

The consultation will set out all valid options on the NHS funding of IVF cycles for Oldham patients (i.e. 3, 2, 1 and 0 cycles) and set out the rationale for the preferred option (1 cycle).

The process of consulting with the public will be carried out through a mixture of face to face and online work. The face to face work will target groups known to have an interest in conception and especially assisted conception and typically involve presentations and facilitated discussions on the issues.

Online questionnaires will be hosted on Oldham CCG's website and promoted via social media channels and the Health Huddle database which currently has over 1,500 members. This is more likely to reflect the views of the wider public. Paper copies of the consultation questionnaire will be made available on request.

Partners such as Healthwatch, Fertility Fairness and Fertility Network UK, alongside local news organisations will also be asked to promote the consultation through their social media channels and support networks.

The consultation will be overseen by a Consultation Oversight Group chaired by the CCG's Vice Chair/ Lay Member for Patient and Public Involvement. This group will ensure

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statutory duties are met and formally receive and review the consultation submissions with clinical input before making a recommendation to the CCG Governing Body.

The consultation timeline is as follows:

- 30 Aug Joint Commissioning Committee – for review
- 25 Sept Health and Wellbeing Board – presentation for information
- 4 Oct CCG Governing Body – decision to consult
- 12 Oct Consultation Starts
- 23 Oct Health Scrutiny consulted
- 7 Dec Consultation Ends
- 17 Jan CCG Governing Body –decision on outcome