

Central
Bedfordshire
Council
Priory House
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**TO EACH MEMBER OF THE
SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE**

14 March 2016

Dear Councillor

**SOCIAL CARE, HEALTH & HOUSING OVERVIEW & SCRUTINY COMMITTEE - Monday
21 March 2016**

Further to the Agenda and papers for the above meeting, previously circulated, please find attached the following report:-

12. BCCG Value Based Elective Commissioning

To scrutinise the proposed Bedfordshire Clinical Commissioning Group's value based elective commissioning service changes and provide feedback on the impact to Central Bedfordshire residents.

Should you have any queries regarding the above please contact the Overview and Scrutiny Team on Tel: 0300 300 4196.

Yours sincerely

Paula Everitt
Scrutiny Policy Advisor
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Central Bedfordshire Council
SOCIAL CARE HEALTH AND HOUSING OVERVIEW AND SCRUTINY
COMMITTEE

21 March 2016

Value-based Commissioning of Elective Care

Advising Officers: Andrew Moore, Chief Operating Officer
Bedfordshire Clinical Commissioning Group
(andrew.moore@bedfordshireccg.nhs.uk)

Dr Helena Jopling, Public Health Registrar
Bedfordshire Clinical Commissioning Group
(helena.jopling@bedfordshireccg.nhs.uk)

The purpose of the attached report is to provide Members with details of proposed services changes, during a period of preliminary engagement, being undertaken by Bedfordshire Clinical Commissioning Group (BCCG). Feedback gathered will be considered and a decision made by the BCCG in April on whether to propose disinvestment in the three services and to undertake a public consultation.

RECOMMENDATIONS

The Committee is asked to consider and provide comments on the BCCG's proposed service changes:

- **gluten-free foods for people with coeliac disease**
- **over-the-counter medicines which are prescribed for short, self-limiting illnesses**
- **specialist fertility services**

Council Priorities

This report supports the following council priority

- Protecting the vulnerable, promoting well being

Corporate Implications

The report, Value-based commissioning of elective care, has been produced by Bedfordshire Clinical Commissioning Group and any corporate implications to the Council are detailed in this report.

Conclusion and next Steps

Members are requested to consider and comment on the information provided by the Bedfordshire Clinical Commissioning Group.

Appendices

Appendix A – BCCG Value-based commissioning of elective care report.

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Value-based commissioning of elective care

**Services identified as possible candidates for consideration in
2016/17**

Andrew Moore

Chief Operating Officer

Dr Helena Jopling

Public Health Registrar

08 March 2016



Bedfordshire Clinical Commissioning Group (BCCG) receives a fixed budget to buy and provide health services for all our population. The range of possible services which could be commissioned will always exceed the allowed allocation, so we need to make careful decisions about how to invest our budget to get the maximum possible health gain overall.

BCCG has stated the principles on which it makes its commissioning decisions; we seek to buy good quality, good outcomes, good value for money, and equity.

Based on these principles, BCCG has already chosen not to fund certain treatments on the NHS for the people of Bedfordshire, such as cosmetic surgery and the removal of gallstones which are not causing any symptoms. This is in line with guidance from the Bedfordshire and Hertfordshire Clinical Priorities Forum and is also known as value-based commissioning of elective care.

In November 2015, BCCG introduced an improved process for making sure those commissioning policies are applied more fully and consistently. Noting the new policies that many CCGs around the country were adopting in response to their own commissioning challenges, we also undertook an exercise to see if there were more treatments we should be considering a low priority and therefore might choose to limit or cease in 2016/17.

A 'long list' of possible treatments, based on research from around England was considered by BCCG's Executive management team and Governing Body during December and January. Several areas were not pursued any further, including:

- stopping funding hearing aids for people with mild hearing loss;
- stopping funding elective caesarean delivery of babies on grounds of maternal choice;
- stopping funding vasectomy and female sterilization; and
- increasing the visual acuity threshold for second-eye cataract surgery.

Three treatments were considered by our clinical leaders to potentially be low priorities and therefore possibilities for limiting or ceasing to fund:

- specialist fertility services;
- prescription of gluten-free foods; and
- over-the-counter medicines which are prescribed for short, self-limiting illnesses.

The CCG is now engaging with our stakeholders to gather views on these possibilities. Service changes of this sort require a public consultation before being pursued. We are using a period of preliminary engagement to gather views from stakeholders before making a decision about whether we should formally propose limiting or ceasing to fund these three treatments, at which point a formal public consultation would begin. The stakeholders we are engaging with include public and patient groups, our GP membership and voluntary groups such as Coeliac UK.

There will be a report to BCCG's Governing Body at its April meeting for consideration of stakeholders' feedback and it is at this meeting that BCCG may make a decision about whether to continue to a full public consultation to pursue some or all of these options.