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**Meeting:** Central Bedfordshire Council Overview and Scrutiny Committee  
**Date:** June 2014  
**Subject:** Specialist Fertility Treatment Local Criteria  
**Report of:** Dr Diane Bell and Angelina Florio  
**Summary:** This report informs the OSC of a consultation process that Bedfordshire Clinical Commissioning Group plans to undertake in respect of the local eligibility criteria for IVF.

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**Advising Officer:** Dr Diane Bell, Director of Strategy and Redesign  
**Contact Officer:** Angelina Florio, System Redesign Manager  
**Public/Exempt:** Public  
**Wards Affected:** All  
**Function of:** Council

<b>CORPORATE IMPLICATIONS</b>	
<b>Council Priorities:</b>	
1.	• Promote health and wellbeing and protecting the vulnerable.
<b>Financial:</b>	
2.	Not Applicable
<b>Legal:</b>	
3.	Not Applicable
<b>Risk Management:</b>	
4.	Not Applicable
<b>Staffing (including Trades Unions):</b>	
5.	Not Applicable
<b>Equalities/Human Rights:</b>	
6.	BCCG is in the process of assessing the project using the EIA template.
<b>Public Health</b>	
7.	Not Applicable
<b>Community Safety:</b>	
8.	Not Applicable.
<b>Sustainability:</b>	
9.	Not Applicable.

**Procurement:**

10. Not applicable.

**RECOMMENDATION(S):**

**The Committee is asked to:-**

- 1. Consider whether the plan for public consultation is sound and review the recommended option proposal with a view to determining whether it would like to review the outcome of the consultation.**

**What is the nature of the proposed change or development or services?**

11. Until March 2013, specialist fertility services were commissioned regionally by the East of England Specialised Commissioning Group (EoE SCG). Since April 2013, individual Clinical Commissioning Groups became responsible for commissioning these services.
12. Bedfordshire Clinical Commissioning Group (BCCG) has been working with Clinical Commissioning Groups (CCGs) in the East of England to procure region wide specialist fertility service via a collaborative agreement (made up of 19 CCGs within the EoE region).
13. Whilst the East of England wide collaborative addresses the contractual element of the service i.e. the service providers, it is the responsibility of each CCG to determine their local eligibility criteria and policy that will specify service user access to the service.
14. In February 2013, the National Institute for Health and Clinical Excellence (NICE) updated their guidance in respect of fertility (CG156, February 2013). The new guidance provides specialist fertility treatments to a certain section of the population for whom it was not previously available to and shortens the waiting time for treatment from 3 years to 2 years.
15. There are two key changes in the NICE guideline which differ from the existing policy and have a resource implication on BCCG. These are:
  - Access to IVF after 2 years rather than 3 years with earlier access for women aged 36 years or over
  - Offer one cycle of IVF treatment to women aged 40-42 years
16. NICE provides various types of national guidance on promoting good health and preventing and treating ill health. The fertility guidance referred to within this report is one that provides recommendations about the treatment and care of fertility. This type of guidance is not mandatory for commissioners to follow and fund its recommendations. This type of guidance is very different from the 'technology appraisal guidance' produced by NICE which is mandatory for CCGs to fund.

## Patient Journey now

17. Consultants within secondary care providers e.g. Bedford Hospital and Luton and Dunstable Foundation Trust refer Bedfordshire patients to specialist fertility providers (Barts and London NHS Trust, Bourn Hall Clinic, Imperial College Healthcare NHS Trust and Oxford Fertility Hospitals).
18. A decision by a Consultant to refer a couple for NHS funded IVF or other fertility service is based on an assessment against the East of England eligibility criteria. The criteria currently in use were developed by the EoE Specialist Commissioning Group in 2011 when it was responsible for the commissioning of specialist fertility services.
19. The criteria includes the following:

	<b>Waiting time for access to IVF</b>	<b>Age restrictions</b>	<b>Number of cycles</b>
<b>Existing Policy</b>	Access to IVF after 3 years	Aged 23 to 40 years	3 full cycles of IVF
<b>East of England SCG Policy 2011</b>			

## Patient Journey in the future

20. Secondary care providers will continue to refer patients to specialist fertility providers. A decision to refer a couple for NHS funded IVF or other fertility services will be based on an assessment against local Bedfordshire eligibility criteria that are yet to be determined.

## Future Commissioning of Specialist Fertility Treatment

21. Unfortunately all CCGs in the UK find themselves in a very difficult position where the cost of implementing the entirety of the revised fertility NICE guidance is far more expensive than the current fertility expenditure.  
  
BCCG currently spends £799,000 each year on specialist fertility treatments. If BCCG commissions future specialist fertility services in line with all recommendations in the revised NICE guidance, it would need to find an additional £289,000 – an increase of 36% of the current IVF budget. In a climate where additional funding is absent, the reality of implementing the NICE recommendations in their entirety would result in the requirement to decommission health services elsewhere in Bedfordshire.

22. Clinicians from the East of England collaborative recognised the dilemma faced by CCGs not being in a position to financially afford commissioning the revised guidelines in their entirety. Collectively, they identified a number of alternative potential commissioning options that comprised a variation of elements of the revised NICE guidance along with variations that diverge from the NICE guidelines. The variations within these options are to the number of cycles offered, the age range of women that can access IVF and the number of years waiting time prior to service users accessing IVF.
23. These discussions further resulted in the identification of a future commissioning option that Clinicians in the EoE considered to be the best value for money option if CCGs were unable to fund the revised NICE guidelines in full. The option includes the following:

	<b>Waiting time for access to IVF</b>	<b>Age restrictions</b>	<b>Number of cycles</b>
<b>Option 1</b>  <b>EoE collaborative recommended option</b>	Access to IVF after 3 years	Aged 23 to 42 years	2 full cycles of IVF treatment for women age 23 to 40  1 full cycle of IVF treatment for women aged 40-42

24. Clinicians considered the EoE recommended option as the option that is closest to the revised NICE guidelines with the least financial implication. Extending the age range in line with the NICE guidelines enables women aged 40 to 42 to access IVF whilst they previously were excluded. Therefore this option provides opportunity for more of the population to access IVF than the other options and the existing criteria. The majority of CCGs in the East of England have opted for this recommended option.
25. The table below shows a comparison of options against the existing EoE policy and the revised NICE guidelines. It clearly demonstrates the variations in the costs associated with the options and how option 1 (the recommended option) incorporates the NICE guideline enabling women between the ages of 40 to 42 to access IVF services.

26.

	<b>Waiting time for access to IVF</b>	<b>Age restrictions</b>	<b>Number of cycles</b>	<b>Costs</b>
Existing Policy  East of England SCG Policy 2011	Access to IVF after 3 years	Aged 23 to 40 years	3 full cycles	£799,000
NICE CG156, 2013 guidelines	Access to IVF after 2 years with earlier access for women aged 36 years or over	Aged 23 to 42 years	3 full cycles of IVF treatment for women age 23 to 40  1 full cycle of IVF treatment for women aged 40-42	£1,088,000
Option 1  EoE collaborative recommended option	Access to IVF after 3 years	Aged 23 to 42 years	2 full cycles of IVF treatment for women age 23 to 40  1 full cycle of IVF treatment for women aged 40-42	£650,000
Option 2	Access to IVF after 3 years	Aged 23 to 40 years	2 full cycles of IVF	£547,000
Option 3	Access to IVF after 2 years	Aged 23 to 40 years	2 full cycles of IVF	£807,000

27. Locally, Bedfordshire CCGs executive management team considered the options for future commissioning of IVF in light of the revised NICE guidelines and options proposed by the EoE collaborative. Additional funding for the application of the revised NICE guidance in full is not available. The executive management team therefore considered that the consensus recommendation by the clinicians from the EoE collaborative (Option 1) would also be Bedfordshire CCG's recommended option, given that it increases the availability of IVF to patients whilst remaining in budget and thereby not risking decommissioning of other services. However, the executive management team also recognised the sensitivities of any decisions in this area and the need for consultation with the public before making a final recommendation to the CCG governing body.

#### **Who is affected and how many patients?**

28. In 2013/14, BCCG commissioned 243 cycles of IVF across the whole of Bedfordshire. This equates to about 80 patients. In the absence of definitive figures split by Local Authorities, it is estimated that approximately 48 women in Bedfordshire Central received IVF treatment in 2013/14.
29. Whilst the individuals that would potentially be affected by a change in IVF criteria is very low in proportion to the population of Bedfordshire residents, BCCG recognises that IVF can be a very emotive topic for the few individuals concerned.
30. The number of patients affected will depend on the local eligibility criteria selected.

#### **What engagement has there been and what are the plans for further consultation?**

31. The East of England collaborative has garnered comments, input and opinion from a number of clinicians across the region. Local GPs have actively participated in this process, along with hospital specialists and public health consultants. Much detailed deliberation has taken place considering the future potential commissioning options for IVF in light of the revised NICE guidance.
32. BCCG's executive team has considered the trade-offs required between extending availability to IVF (as per the revised NICE guidance) and the necessary increased funding that full implementation of such guidance would need. Given the potentially sensitive nature of such funding decisions, the CCG plans to consult with the public and other local clinicians on the options as set out in the table, which include the status quo, the recommendation from the EoE collaborative and the full NICE guidance.
33. BCCG recognises the need for a meaningful and appropriate level of consultation in respect of IVF and has therefore been in discussion with the Consultation Institute (CI). BCCG has been successful in securing a dedicated resource from the CI who would work with BCCG in developing a sensitive but purposeful approach to consulting with patients on this emotive issue. The Consultation Institute would underwrite the BCCGs plans to engage with the local public and further engage with its local clinicians in a consultation process prior to making a decision in respect of its eligibility criteria for Bedfordshire residents, in particularly whether option 1 is the preferred option.
34. The consultation would start in June 2014 and would last for a period of 3 months, after which a final recommendation would be made to the Governing Body in October 2014.

**Conclusion and Next Steps** (optional)

35. BCCG is working with the Consultation Institute to prepare the pre engagement process that would commence in June followed by a consultation beginning in August 2014.

**Appendices:**

N/A

**Background papers and their location:** (open to public inspection)

N/A