

Engagement exercise

**Your views on assisted
conception treatment in
Worcestershire**

Wednesday 8 March 2017 to Wednesday 12 April 2017

Introduction

NHS Redditch and Bromsgrove Clinical Commissioning Group, NHS South Worcestershire Clinical Commissioning Group and NHS Wyre Forest Clinical Commissioning Group are the local organisations responsible for planning, buying and monitoring standard NHS services for Worcestershire residents.

Between us we have a combined budget of more than £700 million to buy hospital services, mental health services, learning disability services, community services, general practitioner (GP) services and medicines.

We are membership organisations, comprising 65 GP practices across Worcestershire. We also work in partnership with Worcestershire County Council, NHS providers and voluntary and community sector organisations across the county to transform the health and social care system to meet the challenges of the future.

What are the challenges?

The challenge faced by all organisations across the NHS is how to spend the available budget in ways that most benefit the health of the whole population and deliver good value for money. We need to ensure that we allocate our resources in an effective and fair way for the benefit of the whole population in order to achieve the best clinical outcomes for the most number of patients.

We have a duty to ensure that every service we commission is delivered to a high standard, is clinically effective and can be provided within our budget.

We have a big financial challenge to meet. This has arisen because the demand for services – as a result of a growing and ageing population as well as advances in medical interventions – is rising faster than the NHS budget, despite an increase each year.

A number of planned savings have been identified and will come from the transformation of services to reduce possible waste and inefficiency, but in order to meet our challenging financial targets we have also had to look at restricting some services to protect other services.

What have we done so far?

Last year more than 4,400 Worcestershire residents responded to our ‘Have your say about the future of healthcare services’ questionnaire about a wide range of different clinical areas which we could consider changing in the future. These results, which can be found on the CCG websites (<http://bit.ly/2jdJO00>), have been considered at various committees and groups and a number of areas were identified for further public engagement work.

What are we asking your views on?

We are proposing to reduce NHS access to assisted conception treatments in Worcestershire.

At this stage this remains a proposal – no final decision has been made. We are committed to hearing people's views before making a decision in the future.

This document sets out:

- Why we are making this proposal
- How you can have your say.

Give us your views

We want to hear from anyone who may be affected by this proposal and listen to your views.

Please send us your feedback by 5pm on Wednesday 12 April 2017.

To give us your views please complete our online survey at
https://www.surveymonkey.co.uk/r/assisted_conception

Alternatively you can complete the survey at the end of the document and post it to:

FREEPOST, RTBR- SRGU-CXAL
Locality Office
Wyre Forest Clinical Commissioning Group
Kidderminster Health Centre
Bromsgrove Street
Kidderminster
DY10 1PG

If you would like to talk about these proposals in more detail you can book to attend a public discussion group.

If you would like to attend please let us know by emailing [william.overfield@nhs.net](mailto:wiliam.overfield@nhs.net) or by telephoning 01527 482952 (venue and details to be confirmed depending on numbers).

Next steps

When this period of engagement is complete a full report detailing the responses to this most recent stage as well as the responses to last year's engagement will be compiled and presented to the CCGs' Governing Bodies for discussion, consideration and decision at their public meetings held on Thursday 25 May 2017 (RBCCG and SWCCG) and Wednesday 7 June 2017 (WFCCG).

This document is available in alternative formats upon request.

Assisted conception

What is assisted conception?

Assisted conception is a term used for the medical interventions available to help a person get pregnant (conceive). People who have trouble getting pregnant may have clinical investigations to see if they would benefit from medical intervention to help them to conceive.

In Vitro Fertilisation (IVF) or Intra-Cytoplasmic Sperm Injection (ICSI) are two of the main techniques used to help people with fertility problems have a baby.

- During IVF, an egg is removed from the woman's ovaries and fertilised with sperm in a test tube (in vitro)
- ICSI involves the removal of an egg from a woman, and a sperm cell from a man is then injected directly into the egg.

If the cells fuse successfully, the fertilised egg starts to divide and becomes an embryo. The fertilised egg / embryo is then returned to the woman's womb to grow and develop as a normal embryo. It can be carried out using a person's eggs and their partner's sperm, or eggs and / or sperm from donors.

What do we currently fund?

In Worcestershire we currently fund up to two full cycles of IVF or ICSI.

At present, to be eligible to access the assisted conception treatments, individuals are required to meet the eligibility criteria set out in the 'Tertiary treatment for assisted conception services' policy (2014). A copy of the current policy can be found here: <http://bit.ly/2j4h7TQ>.

The policy defines the full eligibility criteria for accessing treatment/s. The policy requirements are determined by how effective/ineffective treatment can be based on a variety of measures; including age, weight, lifestyle factors (eg. alcohol, smoking) and prior fertility treatment amongst other things.

People who have demonstrated infertility, and meet the policy requirements, may access a range of treatments including IVF and ICSI if clinically appropriate. This may include up to two full cycles of IVF or ICSI but will depend on prior interventions received, clinical investigations and the response to treatment received.

What are we proposing?

We are proposing to reduce access to assisted conception treatments.

Specifically we are asking your views on whether we should:

- **Reduce the number of cycles we fund from two to one for patients who meet appropriate clinical and lifestyle* requirements.**

* Lifestyle requirements will be based on the evidence of impact of lifestyle choices on fertility, conception and pregnancy. These will include age, weight, smoking status and alcohol consumption, and will aim to ensure the best clinical outcomes for patients.

Who will be affected?

This proposal will affect people with fertility problems who are trying to have a baby and who would meet the current policy for assisted conception.

To put this in perspective, in 2013/14, there were 194 cycles of assisted conception funded by the Worcestershire CCGs. This equates to around 130 couples. Based on these figures, we estimate the number of couples who could be affected by this proposal is 61.

What would this mean for them?

Depending on the outcome of this exercise, it may affect patients as follows:

- If assisted conception treatment cycles are reduced, patients who may have been previously eligible for two treatment cycles would only be entitled to one
- People who do not meet the new policy requirements would be able to seek private treatment; this is the same option available to people who do not meet the existing policy.
- One cycle of IVF / ICSI from a private provider can cost in the range of £4000 to £8000 per cycle including consultation, investigations, procedures and prescription costs for the fertility medication. The cost varies depending on the method of treatment used: ICSI costs more than IVF because ICSI requires more clinical workup
- If a patient's GP or specialist considers the patient's condition / symptoms to be clinically exceptional to the policy, they could complete an Individual Funding Request for consideration of NHS funded treatment as an exception. However, we would not expect many, if any, patients to be considered clinically exceptional to the policy.

Note: Prescribing of any drugs to increase fertility and / or assist with conception should be undertaken by the healthcare provider who is managing the patient. This means that if a patient is being managed by a private provider, then they will need to pay for all required medication privately.

How much money will this save?

In 2015/16, the three Worcestershire CCGs spent a total of £470,000 on assisted conception services. We think we could make the following cost savings:

Proposed change to policy	Estimated saving
Reduce cycles 2 to 1	£220,538

What do other Clinical Commissioning Groups do?

Fertility Fairness <http://www.fertilityfairness.co.uk/> (March 2017) suggests that of the CCGs in England offering assisted conception to patients:

- 125 CCGs fund one cycle of treatment (60%)
- 46 CCGs fund two cycles of treatment (22%)
- 34 CCGs fund three cycles (16%)
- 4 CCGs do not fund any treatment whatsoever (2%).

There are currently five CCGs consulting on reducing the number of cycles provided (from either three cycles to two or one cycle) and four CCGs consulting on decommissioning assisted conception (i.e. no assisted conception cycles).

Please note: IVF is the most common form of assisted conception treatment and therefore this information is most likely to represent the current level of assisted conception service provision.

Additional information

- Around one in seven heterosexual couples may be affected by infertility equating to roughly 33,000 couples in Worcestershire. However, not all these patients will require assisted conception. The number of patients from other LGBT groups who may be affected is not known.
- In the general population, more than eight out of ten couples where the woman is aged under 40 will get pregnant within 1 year if they have regular sexual intercourse (that is, every two to three days) and do not use contraception. More than nine out of ten couples will get pregnant within two years.
- The current policy prioritises access to assisted conception for people whose treatment is most likely to be successful and those who have no existing children.
- The majority of patients experiencing difficulty conceiving are physically well.
- Previous engagement with residents of Worcestershire suggests that funding of assisted conception is considered a low priority in relation to other treatments for people who are unwell. For more information, please see: <http://bit.ly/2jdJO00>
- The national average live birth rate for routine IVF / ICSI is 33.7% for patients aged less than 35 years; this means that almost three people need to be treated to achieve one live birth.
- The success of IVF / ICSI declines with age so the national average live birth rate for patients aged between 38 and 39 is 21.9%; this mean that almost five people need to be treated for every live birth achieved.
- People undergoing/requiring assisted conception should be aware that it becomes less effective with each unsuccessful treatment cycle attempted.

Have your say

We want to hear from anyone who may be affected by these proposals and listen to your views.

To give us your views please complete our online survey at
https://www.surveymonkey.co.uk/r/assisted_conception.

Alternatively you can complete the survey below and post it to:

FREEPOST, RTBR-SRGU-CXAL
Locality Office
Wyre Forest Clinical Commissioning Group
Kidderminster Health Centre
Bromsgrove Street
Kidderminster
DY10 1PG

1. Do you understand why the Worcestershire CCGs wish to make the change proposed in this document? (*please tick one option*)

- Yes
- No
- Partially

2. Do you agree that we should reduce the number of cycles we fund from two to one? (*please tick one option*)

- Yes
- No
- Don't know

3. Do you have any further comments on assisted conception?

Please tell us about yourself

4. Please tell us your age (in years)

5. Are you... (*please tick one option*)

- Male
- Female
- Transgender
- Prefer not to say

6. Please tell us your postcode

7. Have you, a friend, family member or someone you care for... (*please tick one option*)

- Used assisted conception treatments?
- Currently waiting to use or be referred for assisted conception treatments?
- None of the above

8. Are you... (*please tick one option*)

- Responding as a clinical or healthcare professional
- Responding on behalf of an organisation / group / charity? If so, please state: _____
- Responding as a Political figure, either as an elected representative or member of a political group. If so, please state: _____
- None of the above

Please complete this online at https://www.surveymonkey.co.uk/r/assisted_conception or return to the address given overleaf by 5pm on Wednesday 12 April 2017.

Thank you