

Appendix B

Engagement document: temporary suspension of fertility treatments in Haringey

March 2011

Proposal

NHS Haringey wishes to engage with key stakeholders on its proposal to introduce a one year suspension of the provision of fertility treatments to residents in Haringey. The suspension would include most of the people currently on the waiting list for treatment, although there would be some exclusions.

NHS Haringey intends to introduce this measure because of the financial pressures that currently exist on its budget. This means it has to make difficult decisions around which services it must prioritise over others for funding.

Background

Infertility is defined as a failure to conceive after regular unprotected sexual intercourse for two years in couples in the reproductive age group in the absence of known pre-existing reproductive pathology.

There are a number of types of fertility treatment to assist pregnancy. The following are currently offered to eligible Haringey patients:

- **In-Vitro Fertilisation (IVF):** Eggs are collected from a woman and fertilised with a man's sperm outside the body. One or two resulting embryos from this procedure are usually transferred to the womb with the aim of starting a pregnancy. NHS Haringey currently offers one full cycle of In Vitro Fertilisation to all patients who meet the access criteria. NICE guidelines on fertility published in February 2004 recommends up to three cycles of IVF for eligible patients and all PCTs in the UK were asked to plan to fully implement NICE guidelines. This is not a legal requirement. Due to current financial climate in the NHS, many primary care trusts are having to delay the full implementation of the NICE guidelines.
- **Intracytoplasmic Sperm Injection (ICSI):** a variation of the IVF in which a single sperm is injected into the inner cellular structure of an egg.
- **Intra Uterine Insemination (IUI):** a procedure in which sperm is placed in the uterine cavity. NHS Haringey funds up to six cycles of IUI and which can include ovarian stimulation to encourage the production of eggs.

Current Commissioning Arrangements

Local GPs refer all suspected sub-fertility patients to a local acute trust e.g. Whittington, UCLH, Royal Free, North Middlesex Hospital etc. for initial investigation of the cause of sub-fertility. These trusts will provide treatment for sub-fertility and if

unsuccessful will then refer to more specialist tertiary services, which NHS Haringey commissions from the Homerton Hospital.

IVF prices differ for each hospital but it is in a range of £ 2,500 to £3,500. In 2009/2010 NHS Haringey commissioned 108 IVF cycles at a total cost of £343,677.

PCTs are statutorily required to keep within the resources made available to them. This means that they are legally required not to overspend. There is currently a high risk that NHS Haringey will fail to meet agreed control total for 2011/12, which means that its financial position will not be sustainable.

The very substantial pressures on the budgets of PCTs in the next two years, and on the North Central London Sector as a whole, mean that we also have to take affordability into account when considering what treatments can be funded.

NHS Haringey's proposal to temporarily suspend IVF treatments in Haringey

Given the pressures on its budget, NHS Haringey is forced to make decisions about which services it will choose to fund, and those service it chooses either to reduce funding for, or stop funding altogether.

Fertility treatments are not life-saving treatments, or even clinical necessities, as is, for example, treatment for most types of cancer, or treatment for coronary heart disease or diabetes. Treating conditions such as osteoarthritis, ankylosing spondylitis and severe psoriasis can significantly increase a person's independence and enable them to undertake everyday living activities that they could otherwise not.

A number of primary care trusts have already decided to stop funding IVF and related procedures, for example Stockport, Warrington, Surrey, North Yorkshire and York.

NHS Haringey therefore proposes to suspend its funding of fertility treatments in 2011/12, as it believes that there are other more important services that it needs to continue to fund. Like most other primary care trusts that offer fertility treatments, NHS Haringey has a long waiting list for treatments, i.e. people who have been accepted for IVF/ICSI treatment but, for various reasons, have not yet received it. There are currently 110 people waiting for IVF treatment in Haringey. The suspension would apply to these people on the waiting list as well unless:

- women who will be the age of 40 by 31 March 2012;
- Patients who have started IVF work up and drug regime;
- Patients on a waiting list for donor eggs; and
- Egg and sperm retrieval and storage for patients who are due to undergo life saving treatment which may cause infertility

We need your views

We want to give service users, patients and the organisations we work in partnership with the opportunity to have their say on changes.

This will help ensure that in future we have clear, fair and equitable guidelines covering who is eligible for continuing care. We hope that you will take time to give your views on the important changes being proposed.

Copies of this briefing document are being sent to key community groups and charities, and service users and their families. We are arranging meetings for service users, carers and community and charity groups. Details of these meetings will be publicised shortly.

Engagement

NHS Haringey is seeking the views of stakeholders on its proposal to temporarily suspend the funding of IVF treatments in the borough, including most of the people on its waiting list.

Below are a list of questions to guide responses to the proposal, although respondents are free to make any comments that they wish:

1. What are your views on NHS Haringey's proposal to temporarily suspend the provision of IVF treatments?
2. If NHS Haringey is to continue funding IVF treatments, it would mean less money would be available for treating other patients. For what reasons do you think IVF treatments be offered above treatments for patients with other medical conditions?
3. Do you think NHS Haringey should suspend funding for people who are on the waiting list for fertility treatments? Please give your reasons.
4. Are the exceptions for patients on the waiting list who will receive treatment appropriate?

What happens next?

During the consultation, all the feedback and responses, along with notes of the public meetings, will be collated and analysed. At the end of the consultation we will produce a report identifying the themes and issues raised which will be presented to the NHS Haringey board.

The final decision will be made in public by the board of NHS Haringey, once they have had time to consider the consultation feedback and responses.

Comments should be sent to the Communications Team at NHS Haringey by 22 June 2011.

your.views@haringey.nhs.uk

or contact Dilo Lalande, NHS Haringey should you require further information.

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Comments can also be posted to:

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