

BIRMINGHAM CITY COUNCIL AND SANDWELL MBC

**JOINT HEALTH SCRUTINY COMMITTEE
(BIRMINGHAM CITY COUNCIL AND
SANDWELL METROPOLITAN BOROUGH
COUNCIL) 7 OCTOBER 2014**

**MINUTES OF A MEETING OF THE JOINT HEALTH SCRUTINY COMMITTEE
(BIRMINGHAM CITY COUNCIL AND SANDWELL METROPOLITAN
BOROUGH COUNCIL) HELD ON WEDNESDAY 7 OCTOBER 2014 AT
1000 HOURS IN COMMITTEE ROOM 6, COUNCIL HOUSE, BIRMINGHAM**

PRESENT: - Councillor Susan Barnett (Chairperson); Councillors Sue Anderson, Elaine Costigan, David Hosell, Ann Jarvis, Bob Lloyd, Karen McCarthy, Eva Phillips and Paul Sandars.

IN ATTENDANCE:-

Saadia Ahmed – Scrutiny Research and Policy Officer, Birmingham City Council
Jyoti Atri – Director of Public Health, Sandwell Metropolitan Borough Council
William Hodgetts – Healthwatch Sandwell
Paul Holden – Committee Manager, Birmingham City Council
Jayne Salter-Scott – Senior Commissioning Manager - Engagement, Sandwell and West Birmingham Clinical Commissioning Group (CCG)
Dr George Solomon – Chair of Strategic Redesign Committee, Sandwell and West Birmingham CCG
Sarah Sprung – Scrutiny Officer, Sandwell Metropolitan Borough Council
Andy Williams – Accountable Officer, Sandwell and West Birmingham CCG

NOTICE OF RECORDING

4/14 It was noted that the meeting was being webcast for live or subsequent broadcast via the Council's Internet site (www.birminghamnewsroom.com) and that members of the press/public may record and take photographs. The whole of the meeting would be filmed except where there were confidential or exempt items.

APOLOGY

5/14 An apology was received on behalf of Councillor Andrew Hardie for his inability to attend the meeting.

DECLARATIONS OF INTERESTS

6/14 No interests were declared.

MINUTES OF PREVIOUS MEETING

7/14

The Minutes of the meeting held on 23 April, 2014 were confirmed.

ASSISTED CONCEPTION POLICY FOR BIRMINGHAM, SOLIHULL AND THE BLACK COUNTRY

Andy Williams (Accountable Officer), Dr George Solomon (Chair of Strategic Redesign Committee) and Jayne Salter-Scott (Senior Commissioning Manager - Engagement), Sandwell and West Birmingham Clinical Commissioning Group (CCG) were in attendance.

Members were advised by the Chair that she had received notification that Birmingham South Central CCG had agreed to adopt the new policy and that Birmingham CrossCity CCG which had not yet made a decision would be reviewing the matter on 18th November, 2014.

A letter was received and the following PowerPoint slides were presented to the Joint Health Scrutiny Committee by the Accountable Officer who made clear that the Sandwell and West Birmingham CCG would act in accordance with the advice received but could only justify an inequality in service provision if explicitly responding to the views of the Joint Health Scrutiny Committee:-

(See document No. 1)

During the discussion that ensued the following were amongst the issues raised and comments made further to questions:-

- a) The Accountable Officer indicated that £500k - £750k in savings would need to be made from amongst the following areas if the Sandwell and West Birmingham CCG standardised on two cycles of infertility treatment: Quality, Innovation, Productivity and Prevention (QIPP) spend to save schemes; proposed investment in GP practices although making any savings would be difficult owing to a Government directive; and work in developing healthy communities.
- b) It was confirmed that a person who was already in the system in Sandwell would continue to be entitled to two cycles of infertility treatment if the number of cycles reduced to one in May, 2016.
- c) Members were advised that there was not usually a qualifying period in respect of receiving services when patients moved from one CCG area to another. The Accountable Officer undertook to report back on whether a person who had already received infertility treatment was entitled to another course of treatment if in a new relationship.
- d) It was suggested that other factors such as a mild winter could release funding and considered that equality should be achieved by improving the level of service across the board and not reducing it. The Member voiced concern that if only a single cycle of treatment was offered fertility would be dependent less on treatment and more on wealth as some individuals would have the option of using the private sector. He indicated that individuals in the ward he represented would be adversely affected and there would not be equality in terms of outcomes.

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- e) In responding to comments made, the Accountable Officer confirmed that it was the case that funding could be found to continue to offer two cycles of infertility treatment in Sandwell until May 2016. However, there would be an opportunity cost. In addition, he highlighted that, when the percentage of survey respondents who considered that fertility treatment should cease to be offered on the NHS was added to those who endorsed a policy of only one cycle, the figure of just over 40%, was closer to the 48% of respondents who wished to see an increase in the number of treatment cycles offered.
- f) The Chair highlighted that the Birmingham Health and Social Care Overview and Scrutiny Committee had indicated its acceptance of only one cycle of infertility treatment within the City in the knowledge that the access criteria was being widened. Consequently, if this needed to be revisited it would be necessary to go back to that Committee.
- g) Members were advised by the Accountable Officer that there was no surplus funding and this was why the harmonised policy only offered one cycle of infertility treatment and not two. In the CCG's judgement infertility treatment was not the right area to invest in relative to other things that could be done.
- h) Councillor Paul Sandars (Joint Chair) highlighted that the Sandwell Members fully understood Birmingham's position and that the City had within its boundary two CCGs and part of Sandwell and West Birmingham CCG. However, he considered that Sandwell was entitled to a different view. In addition, he pointed out that as reported earlier in the meeting Birmingham CrossCity CCG had not yet made a decision on whether to adopt the new policy.
- i) In response to other comments made, the Accountable Officer reiterated that it was unequivocally the view of Sandwell and West Birmingham CCG Governing Body that additional resources should not be committed to offering more than one cycle of infertility treatment as this would impinge on capacity to prioritise other areas such as supporting people to live independently. It would not be in the population's better interests to offer a second cycle of infertility treatment. Nonetheless, the CCG would proceed in line with the wishes of the democratically elected Members.
- j) Jyoti Atri, Director of Public Health, Sandwell Metropolitan Borough Council highlighted that not providing a second cycle of infertility treatment was not likely to be without cost as it would impair the quality of some people's lives and could result in the need for psychological therapy; provided figures showing that the average cost of a successful cycle of treatment was £12,000 if two treatment cycles were offered and £13,235 where there was only access to one cycle; and referred to longer-lasting outcomes that could be achieved if more funding was redirected to infertility treatment.
- k) In the course of responding to j) above, the Accountable Officer highlighted that it was the size of the overall budget for infertility treatment that was the issue for the CCG and stressed the importance of the QIPP programme.

(At 1108 hours proceedings were adjourned following a request from a Member; the meeting reconvened at 1138 hours)

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The Chair in referring to informal discussions that had taken place advised the meeting that the full Birmingham Health Overview and Scrutiny Committee's decision could not be overturned without going back to that Committee but there was acknowledgment of Sandwell's position regarding the number of infertility treatment cycles that should be offered. The Chair therefore proposed amendments to the second of the two recommendations on the final slide and the recommendation, as amended, was agreed by Members.

It was:-

8/14

RESOLVED:-

That this Joint Health Scrutiny Committee acknowledges the recommendation from Sandwell Health Scrutiny Board to defer implementation of the policy in Sandwell until May 2016, accepting that this would create an inequality across the Sandwell and west Birmingham boundary and acknowledges the decision that was taken in January 2014 by the full Birmingham Health and Social Care Overview and Scrutiny Committee.

The Accountable Officer undertook to proceed on the basis recommended by Sandwell Health Scrutiny Board and indicated to Members of the Joint Health Scrutiny Committee that the wider access criteria would also be applied in Sandwell.

The Chair thanked everyone for attending the meeting and their questions and comments.

The meeting ended at 1141 hours.