



Enfield

Clinical Commissioning Group

DATE AND TIME OF MEETING	19 April 2017 7:30pm
CCG STAFF	Dr Mo Abedi Matt Rogers Laura Andrews
ATTENDEES	Cllr Dinah Barry (Labour) Cllr Elaine Hayward (Conservative) Cllr Ertan Hurer (Labour) Around 25 members of the public.

FEEDBACK:

[Will we have to pay for the treatments listed in the consultation document?](#)

No – all the treatments will still be available on the NHS. This is about introducing new thresholds for referral.

[I am a retired district nurse – I worked for 50 years in the NHS. If someone has a hernia for example and is housebound, who will monitor their symptoms if you are taking a wait and watch approach?](#)

It will be the duty of the GP to visit if the patient feels the problems are getting worse as the issues we will be monitoring is things like pain, protrusion etc.

[What are you watching and waiting for? Pain? Or complications?](#)

Yes and in the majority of cases, there is no need for an operation unless the condition is directly causing a problem.

[What are the budgetary consequences of this review? How much do you have to save?](#)

This review is not about saving money but instead improving referral criteria.

[Is funding for these conditions ring fenced for future years?](#)

These conditions will still be treated on the NHS – but on the basis of clinical need. We don't ring fence funding – we respond to health needs of patients.

Isn't this what you are supposed to be doing anyway?

Yes, but when we plan to make changes to the NHS we have a duty to consult our public. In this case, we are trying to standardise referral criteria across the borough.

How much do you spend on homeopathy?

Currently around £160,000 – all at UCLH.

How does £160,000 relate to your budget?

This is from a budget of

Should you not offer people choice to have homeopathy?

In this consultation we are proposing to decommission homeopathy as we have no clinical evidence that it works. This consultation is about reviewing evidence base and ensuring that we only put patients forward for treatment that measurably improve their health.

Do you think this is the thin end of the wedge in terms of you implementing the cuts from central government and having not enough money for the NHS?

This is not about money this is about improving patient care.

What about hearing aids for children? I don't see children mentioned?

We want to put thresholds in for hearing aids to ensure that people only get them if they need them. These proposals do not apply to children or anyone who currently has a hearing aid.

What about children? Conditions like hernia develop completely differently for children.

These proposals do not affect children. Children have different health needs.

If you didn't have funding issues would you still be doing this?

Yes, this is about ensuring patients across Enfield are treated fairly and there is clear referral guidance for these conditions .