Greater Manchester Joint Health Scrutiny Committee

Date: 16 September 2025

Subject: Plan for engagement on procedures of limited clinical value in Greater

Manchester

Report of: Sara Roscoe, Associate Director of Strategic Commissioning,

and Claire Connor, Director of Communications and Engagement,

NHS Greater Manchester

Purpose of Report

To set out the updated engagement plan to support the work of the commissioner to bring increased scrutiny on procedures of limited clinical value in Greater Manchester.

Recommendation:

The Joint Health Scrutiny Committee is requested to review the engagement plan and offer feedback

Contact Officers

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Equalities Impact, Carbon and Sustainability Assessment:

A full equalities impact assessment is in progress in respect of this proposal.

Risk Management

This report is to support the risk management of this proposal, ensuring that JHSC has opportunities to review and comment on planned changes.

Legal Considerations

This report is part of the discharge of NHS Greater Manchester's legal duties to engage with scrutiny committees on to consult local authorities on substantial service changes that affect their population (Health and Social Care Act 2006, section 244 and the Local Authority Regulations 2013, section 21).

Financial Consequences - Revenue

This proposal seeks to ensure appropriate use of resource in Greater Manchester.

Financial Consequences – Capital

Not applicable

Number of attachments to the report: 0

Comments/recommendations from Overview & Scrutiny Committee

Not applicable

Background Papers

Previous GM JHSC papers from December 2024, January 2025.

Tracking/ Process

Does this report relate to a major strategic decision, as set out in the GMCA Constitution

No

Exemption from call in

Not applicable.

GM Transport Committee

Not applicable.

Overview and Scrutiny Committee

16 September 2025

1. Introduction/Background

The Joint Health Scrutiny Committee have received two briefings on the NHS Greater Manchester ICB proposals to ensure compliance with the agreed commissioning policies for procedures with limited clinical value, (PLCV). PLCV are medical procedures (normally surgical procedures) that the research evidence shows that some interventions are not clinically effective or only effective when they are performed in certain circumstances.

The January 2025 update outlined a proposed plan to engage with the public on each of the commissioning policies. This has since been reviewed to ensure a more managed and timely approach which can proactively contribute to the review of the commissioning policies, providing more meaningful patient engagement into the process.

This update will set out the updated proposal and timeframe.

2. Proposed Engagement Plan

It was originally the intention to hold broad engagement on the PLCV policies to seek feedback on nearly 50 of them at the same time. However, following the change in focus of the review the engagement approach has changed.

As many of the policies will not be updated this year, engagement on PLCVs will be held annually on policies that are due to have updated clinical evidence that year. It is expected that we will engage on approximately 6-10 each year, for 2025/26 this new approach will be part-year effect. This will allow broad communications about the engagement, but targeted delivery aimed at the communities, support groups and charities that are identified as most likely to be affected.

Whilst the first cycle for this year is being prepared, individual opportunities to engage on policies have continued, for example, on IVF cycles, varicose veins and rhinoplasty.

Uptake on these remains low, so it is hoped that the new approach will lead to greater engagement and involvement.

3. Policies for engagement - 2025/26

The process to review commissioning policies is usually on a five-year cycle, to ensure they are up to date and relevant to the current evidence base. As previously reported at Joint Health Scrutiny Committee, the rigour involved in the review/update is extensive, involving a full literature review of the evidence by Public Health Consultants, and involvement of subject matter expertise amongst other clinical and managerial leads. There is a rolling programme over the course of the financial year.

For 2025/26, the policies to be reviewed and now subject to the proposed engagement between October 2025 and March 2026, as set out under section 2 will include the following policies:

- Repair of Split Torn Ear Lobes Commissioning Statement
- Shoulder Impingement Commissioning Statement
- Assisted Conception Commissioning Statement following the release of NICE's updated guideline on Fertility problems: assessment and treatment (CG156), expected later this year. Note the separate consultation regarding the harmonisation of number of IVF cycles across GM
- Develop a <u>new</u> commissioning statement for Extracorporeal shockwave therapy for the treatment of tendinopathies (currently there is no GM Commissioning Statement for this intervention).

4. Recommendation

The Joint Health Scrutiny Committee is requested to Review updated proposals for engagement and offer feedback.