

Appendix C: Prioritisation Matrix

NHS Croydon CCG assessment criteria Decommissioning of IVF/ICSI

Score the potential initiative 1 - 5 against each question using the guide below highlighted in green

Domain	Q	Score of 1 means - Minimal Adverse Impact	Score of 5 means - Significant Adverse Impact	Score 1 - 5	Comments
Patient Benefit	1.1	To what extent would the proposal reduce accessibility for users of the affected services?		4	Individual Funding Requests will continue to be available. Those who can afford will be able to have privately funded treatment.
	1.2	How many patients would be impacted by reduced access as a result of the initiative?		1	94 couples per annum (on average) (0.047% of CCG population)
	1.3	To what extent would the proposal contribute to reducing health inequalities?		4	The proposal will have the potential for increasing health inequalities.
	1.4	To what extent would the proposal impact upon equity of access for all residents across the Borough?		1	The proposal involves a small number of people
	1.5	What is the scale of potential impact on a patient's quality of life from these changes?		4	There could be an impact on family life. Will need to offer IAPT service
	1.6	How likely is an exceptions criteria?		1	None identified
Clinical Benefit	2.1	To what extent would the proposal detract from the implementation of clinical practices designed to improve quality of life e.g., admission avoidance or case management?		n/a	
	2.2	To what extent would the proposal adversely impact the achievement of evidence based outcomes?		3	There will be a reduction in outcomes, although the treatment has a limited level of effectiveness
	2.3	How safe is the proposal for patients?		2	Some risk of mental health issues
National Priority	3	To what extent would the proposal address the key national priorities set out in the operating framework and in the DH's reform agenda?		1	
Local Priority	4.1	To what extent would the proposal address key local priorities and objectives?		1	
	4.2	To what extent is there pressure for change in the area of the proposal from people or organizations outside the local health community (e.g. patient groups or politicians)?		4	
	4.3	To what extent is there pressure for change in the area of the proposal from internal factors (e.g. workforce, equipment, changes to regulations, alternative providers)?		2	
Stakeholders	5.1	To what extent are stakeholders within the local community supportive of this proposal (e.g., local acute Trust, PEC, PbC Clusters, social care, local mental health trust)?		3	Croydon Hospital Services and public health are not fully supportive. PH have concerns about health inequalities

	5.2	What is the likely reaction of local patient groups and politicians to the proposal (e.g. Overview & scrutiny committee, local involvement network/Patient Public Involvement Forum)?	3	Some concern was raised by a member of the HOSC in relation to inequalities and one cycle of treatment providing insight in the condition and treatment,
	5.3	How much can patients support the CCG to implement the change?	n/a	
	5.4	How much support would patient groups need to manage the change?	3	
	5.5	How much capacity does the CVS to support the change and/or deliver the service more effectively?	2	Could provide support around mental health issues and advising on IFR
Buildings & Equip	6.1	To what extent would this proposal require changes to buildings and equipment?	n/a	
	6.2	How accessible is the building/equipment (DDA)?	n/a	
	6.3	How much will it cost to ensure DDA compliance?	n/a	
Work-force	7.1	To what extent would the proposal require the current workforce to be redeployed?	2	CUH is concerned about the viability of the service if IVF is not funded by CCG. Service staff would need to be redeployed.
	7.2	To what extent are any new or additional skills that are required for the proposal scarce or reliant on long term training once staff have been appointed?	n/a	
	7.3	How seamlessly could staff be deployed to support the change?	n/a	
Service Delivery	8.1	To what extent does this proposal represent a complex service change (e.g., extent and number of changes, inter dependencies with other projects)?	4	The change requires consultation around interdependencies
	8.2	To what extent would the proposal affect the viability of other services?	3	Fertility services could be de-stabilised. CUH raised a potential impact on scanning services.
	8.3	Is there a provider capable of delivering the service required through this proposal?	3	Yet to be identified
	8.4	Has this proposal been undertaken successfully elsewhere?	3	1 CCG in England - Basildon and Brentwood
	8.5	How easily and swiftly could this proposal be implemented?	3	Six months contract notice, ongoing storage of frozen materials, potential challenge to consultation
	8.6	How flexible can the services be, e.g. on-line elements, increased as well as decreased as demand is better managed?	n/a	
Financial Benefit	9.1	Would the proposal require additional financial investment?	1	
	9.2	To what extent would the initiative result in financial savings?	1	
	9.3	How long would it before the initiative produced financial savings?	3	Six months - clear waiting list, if there is no challenge to consultation
	9.4	How much does this proposal contribute to the financial strategy?	2	Reduced returns
	9.5	To what extent is the proposal good value for money in the longer term?	2	May want to reinvest in this service in the future
	9.6	How much of the service can be deliver through cheaper and safer ways? e.g. On-line elements	n/a	
Investment Required	10.1	How much additional investment would the proposal require?	n/a	
Future Impact	11.1	How significant are the potential longer term impacts of the proposal for patients, staff, carers and Croydon residents?	2	Significant impact on a small number of residents

	11.2	How much will the proposal impact on existing health inequalities in Croydon in 10, 20 years' time?	3	Significant impact on a small number of residents
	11.3	To what extent will the proposal impact upon equity of access for Croydon patients and public in 10, 20 years' time?	3	Cumulative figures could mean an impact on 1 880 couples over 20 years

Priority assessment score 75

