

Lancashire and South Cumbria Clinical Commissioning Groups Commissioning Policy Reviews

Varicose Veins Public Engagement Outcomes			
When the public engagement took place	Start date	End date	Duration
	10 September 2018	19 October 2018	6 weeks
Number of survey respondents – electronic or on paper	Total	By gender	By disability
	55	Female: 78% Male: 20%	No disability: 67% Disability: 26%
	By sexual orientation	By ethnicity	
	Heterosexual: 83% Gay/Lesbian: 0% Bisexual: 0%	White British: 98% Asian ethnicity: 0% Other: 0%	Mixed ethnicity: 0% Black ethnicity: 0%
Number of people seen face-to-face	Not applicable		
	0		
Survey question response rates from patients and members of the public	96% of respondents read the varicose veins policy before completing the survey	60% of those who responded felt it should only be funded for those people who meet the criteria	32% of survey respondents had received this treatment/procedure
	59% of survey respondents agreed with the criteria for the treatment of varicose veins and 37% disagreed with the criteria		
Key issues/themes raised by patients and members of the public	Symptomatic (painful, aching or uncomfortable) veins are not included which impacts on patients and is against NICE		
	Should treat varicose veins early rather than let them get worse and therefore, more expensive to treat		
	Warning against compression hosiery in the policy seemed counter to existing practice		
	Unightly varicose veins can cause mental health, body image and stress issues in patients		
	Symptomatic varicose veins not included on the basis of affordability – further assessment to be undertaken to determine whether this stance remains valid		

Responses to key issues/themes raised during public engagement	Evidence indicates that most cases do not lead to venous ulcers or other complications; exceptions can be treated via Individual Funding Requests
	Psychological distress is considered within the exceptionality policy and not normally supported
Key changes to the policy following public engagement (if applicable)	Following additional considerations of the Evidence-based interventions (EBI) guidance from NHS England and of the affordability of treating symptomatic varicose veins, it was agreed to add the treatment of symptomatic varicose veins to the eligibility criteria of the revised policy
	Reference to compression hosiery to be addressed to cover existing patient treatments
	It was agreed that under Section 3.4 of the Policy for considering applications for exceptionality to commissioning policies be added - "The following arguments will not normally provide a basis for a determination of exceptionality - The patient healthcare intervention sought should be funded simply on the basis that the patient is suffering problems with psychological wellbeing as a result of the condition or of the unavailability of funding".
Policy ratified by Joint Committee of Clinical Commissioning Groups on 2 May 2019	