

## Suggestions about how we could save money

We have been asking local people for suggestions about how we can save money, here are their suggestions and our responses.

### **You said**

### **We did**

**Stop prescribing medicines that can be bought over the counter**

GPs have now stopped prescribing a number of medicines that can easily be bought over the counter and have limited clinical benefit to patients. We are now looking for ways to make further savings in this area – see pages 11-19.

**Cut down on medicines wastage**

Unused medicines cannot be re-issued to other patients because once medicines have left the pharmacy their storage conditions cannot be guaranteed and they may become less effective. We're looking at how we can reduce medicines wastage, working with GPs, pharmacists and the public. See page 10.

**Reuse or recycle occupational therapy and other medical equipment**

We do recycle and reuse some medical aids such as beds, mattresses, cushions and commodes and we are looking to increase the reuse of items. In Redbridge we loan rather than give these items to patients (saving around £350,000 a year) and we want to do this in Barking and Dagenham and Havering as well.

However, it is not possible to reuse every item, as some aren't suitable for reuse, such as specially made beds which are made to fit certain weight requirements. All items need to be given to the patient 'as new', so some cannot be reused because they are either damaged, dirty, too old or broken beyond repair. In some cases patients don't return equipment, or don't allow it to be collected. In other cases, the costs of collection and recycling are more than the cost of purchasing a new item.

**Make non-UK patients pay for treatment or ensure they have medical insurance**

All hospitals are required to check whether patients are eligible for free NHS treatment and charge people who are not eligible for any non-urgent, planned care.

We are working with our local hospitals to make sure people who are supposed to pay for their NHS care do so. Under a pilot scheme backed by the Department of Health looking at how best to establish whether or not people are eligible for free NHS care, pregnant women attending Queen's Hospital will be asked to provide a photo ID and proof of address at their first appointment.

**Patients could pay a small charge towards the cost of IVF**

That the NHS is free at the point of delivery is one of the core principles of the NHS, so we cannot charge patients for IVF. However, we have restricted who can have NHS-funded IVF treatment and the number of NHS-funded embryo transfers they can have.

**Review gluten-free food on prescription or offer vouchers against the cost for low-income families.**

GPs will no longer prescribe gluten-free food. People can find reasonably priced gluten-free foods in a wide range of places, including supermarkets, convenience stores, local pharmacies and online and there are plenty of foodstuffs that don't have gluten in them, such as rice and potatoes.

**Review what cosmetic surgery is available on the NHS.**

Following consultation, we have decided to no longer fund a number of cosmetic procedures.

Patients who need this surgery as a result of suffering from major trauma, cancer or severe burns will continue to have these procedures paid for.

**Reduce administration costs, the number of managers and use of agency staff**

We are three organisations that have pooled our resources to operate more efficiently, but we have reduced our limited interim staffing and general operating costs and are operating as leanly as possible. As a small organisation with a single shared management team there are limits to what further administrative savings we can make.

**The NHS should not treat heavy smokers, alcoholics, obese people or those abusing drugs, or should charge these people**

While we encourage people to lead healthy lifestyles and discourage them from taking illegal drugs, smoking or drinking too much, we recognise addictions such as alcoholism or drug dependency as diseases and treat them as such.

During our first 'Spending NHS money wisely' consultation earlier this year, some of you told us we should be stricter about not funding costly procedures for people who are heavy smokers, who are very overweight, or who have drug and/or alcohol issues. Our GPs regularly see patients who are heavy smokers, are very overweight or who have drug and/or alcohol issues. At the moment they routinely refer these patients to smoking cessation and other healthy lifestyle services. We have heard what some people think about us funding such treatments but we are not considering stopping them at this time.