Dear Conor Burke,

Spending NHS Money Wisely 2

This letter is in response to Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups’ consultation on Spending NHS Money Wisely 2, and represents the views of the London Borough of Barking and Dagenham.

We support the following recommendations:

- No longer funding, earwax removal in secondary care where there is no underlying reason for the procedure to be done in secondary care; some injections for lower back pain injections in local clinics (we understand that local pain clinicians have shaped the restrictions, and that they are in line with NICE guidance); and osteopathy (this is currently not available in the borough).

- Restricting who is eligible for podiatry so that it is only available to residents with specific underlying disease e.g. diabetes or rheumatoid arthritis.

- No longer prescribing over the counter medicines including anti-malarials, probiotic supplements, sunscreens, and hay fever medication,

We disagree with the following recommendations:

- Restricting who is eligible for cataract surgery
  We are concerned that using visual acuity at 6/12 is a crude, but commonly used, method of measuring if cataract surgery is needed.
Draft NICE guidance\(^1\) states:
“Although visual acuity is still commonly used to decide whether cataract surgery is needed, it is a crude measure that will often fail to detect other vision problems that may justify surgery (for example, glare and loss of colour vision). The best possible decision-making aids would be measures of preoperative and postoperative vision-related quality of life, which could then be used to identify groups of people who do not have an improvement in quality of life after surgery”.

The guidance recommends that access to cataract surgery is not restricted based on visual acuity. We ask that the CCGs re-consider this recommendation and align recommended changes to NICE guidance on cataracts in adults.

**No longer prescribing vitamin D**
We disagree with the statement about sufficient Vitamin D being obtained from sunlight and diet, and with the approach that someone who is deficient should only be prescribed supplements until they reach normal levels. We are aware that it is possible that a significant proportion of the population in Barking and Dagenham may potentially be vitamin D deficient, of concern is our population of South Asian heritage who are at high risk of deficiency.

Dietary change alone in high risk groups is likely to be ineffective. In these circumstances, prescribing until normal levels are reached then stopping will mean that residents will become deficient again.

This approach is inconsistent with the decisions on vitamin supplements in the initial round of consultations and decisions. In that round the CCGs decided to stop prescribing multivitamins but said that the prescribing of single vitamins supplements for a proven deficiency would continue. We ask that this recommendation be reviewed.

We consider that our response will support the spending of money wisely for the residents of Barking and Dagenham.

Yours sincerely

Councillor Peter Chand  
**Chair of the Health & Adult Services Select Committee**