

7 September 2018

## FREEDOM OF INFORMATION – DECISION NOTICE

Dear Requester

**FOI Reference Number: 18508**

I refer to your email of 13 August requesting information in respect of bariatric surgery.

I can confirm on behalf of Great Yarmouth and Waveney, North Norfolk, South Norfolk, Norwich and West Norfolk CCGs and in accordance with S.1 (1) of the Freedom of Information Act 2000 (FOIA) that we do hold the information that you have requested. A response to each element of your request is detailed below:

### **Request**

1. *What criteria do patients need to meet in order to be referred for bariatric surgery (tier 4 weight management) in your Clinical Commissioning Groups' (CCGs) area?*
2. *What criteria do patients need to meet in order to be referred for elective hernia repair in your Clinical Commissioning Groups' (CCGs) area?*

### **North, South, West and Norwich CCG's response**

**For Tier 4 bariatric surgery, patients must fulfil the following criteria:**

#### **Eligibility for bariatric surgery**

Surgery will only be considered as a treatment option for people with morbid obesity providing all of the following criteria are fulfilled:

- The individual is considered morbidly obese. For the purpose of this policy bariatric surgery will be offered to adults with a BMI of 40kg/m<sup>2</sup> or more, or between 35 kg/m<sup>2</sup> and 40kg/m<sup>2</sup> or greater in the presence of other significant diseases.
- There must be formalised MDT led processes for the screening of co-morbidities and the detection of other significant diseases. These should include identification, diagnosis, severity/complexity assessment, risk stratification/scoring and appropriate specialist referral for medical management. Such medical evaluation is mandatory prior to entering a surgical pathway.
- Morbid/severe obesity has been present for at least five years.
- The individual has recently received and complied with a local specialist obesity service weight loss programme (non-surgical Tier 3 / 4), described as follows:

This will have been for duration of 12-24 months. For patients with BMI > 50 attending a specialist bariatric service, this period may include the stabilisation and assessment period prior to bariatric surgery. The minimum acceptable period is six months. The specialist obesity weight loss programme and MDT should be decided locally. This will be led by a professional with a specialist interest in obesity and include a physician, specialist dietician, nurse, psychologist and physical exercise therapist, all of whom must also have a specialist interest in obesity. There are different models of local MDT structure. Important features are the multidisciplinary, structured and organised approach, lead professional, assessment of evidence that all suitable non invasive options have been explored and trialled and individualised patient focus and targets. In addition to offering a programme of care the service will select and refer appropriate patients for consideration for bariatric surgery.

**For Hernia repair the current criteria are below, however please note that this policy is being reviewed following updated guidance regarding watchful waiting:**

### **Inguinal:**

For asymptomatic or minimally symptomatic hernias, a watchful waiting approach, under informed consent, is advocated.

Surgical treatment should only be offered when one of the following criteria is met:

- symptoms of pain or discomfort that interfere with activities of daily living, **OR**
- the hernia is difficult or impossible to reduce, **OR**
- it is an Inguino-scrotal hernia, **OR**
- the hernia increases in size month on month.

### **Femoral:**

- All suspected femoral hernias should be referred to secondary care due to the increased risk of incarceration/strangulation.

### **Umbilical:**

- All suspected umbilical hernias should be referred to secondary care due to the increased risk of strangulation of the bowel.

### **Incisional**

Surgical treatment should only be offered when **both** of the following criteria are met:

- Symptoms of pain/discomfort that interfere with activities of daily living **AND**
- Appropriate conservative management has been tried first e.g. weight reduction where appropriate.

### **“Gilmore’s groin”**

Not routinely funded

## **Diastases/Divarication of Recti**

Diastases/Divarication of recti is a separation between the left and right side of the rectus abdominis muscle and causes a protrusion in the midline, but is not a 'true' hernia and does not carry the risk of bowel becoming trapped within it and thus does not require repair<sup>14, 15</sup>. The CCGs consider repair of divarication of recti as a cosmetic procedure and a low priority. Evidence suggests that divarication does not carry the same risks as that of actual herniation.

For patients not meeting the above criteria, an application should be made to the IFR Panel if the referrer considers there are clinically exceptional circumstances.

### **Great Yarmouth and Waveney CCG response**

This information is published within the CCG's 'Clinical Threshold Policy' available at the following link:

[http://www.greatyarmouthandwaveneyccg.nhs.uk/\\_store/documents/clinical\\_threshold\\_policy\\_gyw\\_final\\_aug\\_2017.pdf](http://www.greatyarmouthandwaveneyccg.nhs.uk/_store/documents/clinical_threshold_policy_gyw_final_aug_2017.pdf)

I hope that this answers your queries with the information we currently hold, but if I can be of any further assistance please do not hesitate to contact me.

If you are dissatisfied with the handling of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to

Arden & GEM CSU  
FOI Team, Room 18  
Scarsdale  
Newbold Road  
Chesterfield  
S41 7PF

Email [agcus.foi.norfolkwaveneyccgs@nhs.net](mailto:agcus.foi.norfolkwaveneyccgs@nhs.net)

If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a decision. Generally, the ICO cannot make a decision unless you have exhausted the complaints procedure provided the CCG.

The Information Commissioner can be contacted at: Information Commissioners Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF, telephone 0303 123 1113, email [casework@ico.org.uk](mailto:casework@ico.org.uk)

*The FOIA gives a right of access to information but no right to re-use it. Datasets provided may be subject to Intellectual Property Rights and the re-use of datasets requires permission. Please contact us if you intend to re-use information provided by us.*

*For the conditions of re-use please refer to the Open Government License for public sector information: <http://www.nationalarchives.gov.uk/doc/open-government-licence/version/2/>*

Yours faithfully

Philip Humphreys

***FOI Manager, Arden & GEM CSU***

**On behalf of  
Great Yarmouth and Waveney,  
North Norfolk, South Norfolk  
Norwich and West Norfolk CCGs**