

**Subject:** Re-Commissioning Adult Hearing Services  
**Date of Meeting:** May 09 2012  
**Report of:** *The Strategic Director, Resources*  
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**Wards Affected:** All

### FOR GENERAL RELEASE

#### 1. SUMMARY AND POLICY CONTEXT:

- 1.1 NHS Brighton & Hove has recently announced that it intends to re-commission local Adult Hearing Services (e.g. hearing aid services for the over-55s), moving away from the current single provider model to an 'Any Qualified Provider' model.
- 1.2 Any Qualified Provider (AQP) allows service users to choose from a range of providers – in essence any body that has registered an interest in providing a service and is able to deliver services in accordance with the service specification. Providers are 'pre-qualified' – that is, they will already have been assessed by the Department of Health as competent in delivering particular kinds of service, although the commissioning PCT will still need to assure itself that they can meet the specific demands of the service being commissioned. Details of how NHS Brighton & Hove intends to undertake this assurance process are included in **Appendices 1 and 2**).
- 1.3 AQP is explicitly intended to encourage a plurality of providers, which may include NHS trusts, private sector organisations or the voluntary/community sector. In essence, any provider which can demonstrate its competence and is willing to work to the service specification and at standard NHS pay rates may become a qualified provider for a given service.

## **2. RECOMMENDATIONS:**

2.1 That members:

- (1) Agree to support the proposed model for adult hearing services, and
- (2) Agree to support the process outlined the appendices to this report for reaching a definitive decision on the selection of Any Qualified Provider.

## **3. BACKGROUND INFORMATION**

- 3.1 The Health & Social Care Act (2012) contains measures to both abolish Primary Care Trusts (PCTs) and establish Clinical Commissioning Groups (CCGs). Until these measures come into force (April 2013 for PCT abolition; from April 2013 for CCG authorisation), formal responsibility for commissioning the bulk of NHS services rests with local PCTs rather than emerging CCGs or sub-regional PCT clusters. Hence these plans are being taken forward under the aegis of NHS Brighton & Hove rather than that of the Brighton & Hove Transitional CCG or NHS Sussex, although they represent the intentions of all the commissioning organisations.
- 3.2 Additional information provided by NHS Brighton & Hove on adult hearing services, and the planned change to an AQP model is included as **Appendix 1** to this report. NHS Brighton & Hove's draft service specification for a re-commissioned hearing services is included as **Appendix 2**.

## **4. CONSULTATION**

- 4.1 This report has been prepared in consultation with NHS Brighton & Hove.

## **5. FINANCIAL & OTHER IMPLICATIONS:**

### Financial Implications:

- 5.1 None for the city council – these are NHS funded health services and there is no shared budget with the council.

### Legal Implications:

- 5.2 Under regulation 4 of the Local Authority (Overview and Scrutiny Committees Health Scrutiny Functions) Regulations 2002, NHS Brighton and Hove must consult the council's Health Overview & Scrutiny Committee whenever it is proposing a substantial variation in the provision of the health service in the city.

Although there is no statutory definition of "substantial variation", the intention to increase the range of Adult Hearing Service providers could be regarded as "substantial" as it would bring about a change in the market place for such services and offer the public wider choice.

This report and the meeting of HOSC to consider its contents will satisfy the said obligation to consult.

Under regulation 7 of the 2002 Regulations, should HOSC consider that the proposal would not be in the interests of the local health service, it may report to the Secretary of State, who may make a final decision on the proposal and require NHS Brighton and Hove to take such action, or desist from taking such action, as he may direct.

*Lawyer consulted: Oliver Dixon*

*Date: 27 April 2012*

Equalities Implications:

- 5.3 NHS Brighton & Hove avers that: "The new model for Any Qualified Provider of Adult Hearing Services will improve equality, providing a comprehensive patient-centred direct access adult hearing service for age related hearing loss in line with national guidance and local requirements."

Sustainability Implications:

- 5.4 NHS Brighton & Hove states that: "Tendering and procurement processes will address sustainability implications which will be a key factor in the decision regarding procurement."

Crime & Disorder Implications:

- 5.5 None

Risk and Opportunity Management Implications:

- 5.6 NHS Brighton & Hove states that: "The implementation of the new service model following successful procurement will ensure the ongoing safety of patients."

Corporate / Citywide Implications:

- 5.7 NHS Brighton & Hove states that: “The proposed service will have a positive impact on all wards of the city, reducing inequalities and improving patient access, outcomes and experience.”

## **SUPPORTING DOCUMENTATION**

### **Appendices:**

- 1 Information provided by NHS Brighton & Hove
- 2 Draft Service Specification provided by NHS Brighton & Hove

### **Documents in Members’ Rooms:**

#### **Background Documents:**

Health & Social Care Act (2012)