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Our ref:

Please contact:

Email:

Personal assistant:

Direct tel:

15 July 2024

Re: Your request for information under the Freedom of Information Act 2000 Ref no: FOI-4048-LSC

Thank you for your request dated 14 May 2024

We can confirm that the ICB does hold the information you requested.

Please find our response to your questions below:

1. Does your ICB provide Age-related Hearing Services (including hearing aid provision) throughout your ICB area? (Y/N). If there are areas or localities without provision, then please provide the reason(s) for this. Are there areas where distances for patients to travel to an appointment are deemed by the ICB, or relevant regulatory body to be excessive, or somewhat concerning? Please highlight any such areas, with an idea of the distances patients need to travel. This is likely to relate to smaller population, remote communities.

Yes

2. Is the Hearing aid provision set up differently across different areas within the ICB borders ? (Perhaps these sub-areas were inherited from the CCG era but still operating within the current ICB set up?) Please document the type of service set-ups within your ICB indicating the type for each area e.g. AQP, single provider, Community Services, ENT-led, Hopsital-based only etc.

Entire ICB Area - AQP with multiple community Providers

- 3. Please let us know who the audiology providers are within the ICB
 - Blackpool Teaching Hospitals, Blackpool Victoria Hospital, Whinney Heys Road, Blackpool FY3 8NR – Blackpool
 - Scrivens Limited, Scrivens House 60 Islington Row Middleway Edgbaston Birmingham West Midlands B15 1PH all ICB
 - Beacon Medical Services, Parkway House, Palatine Road, Northenden, Greater Manchester, M22 4DB – Lancashire
 - Specsavers Hearingcare Group Limited, La Villiaze, St Andrews, Guernsey, GY6 8YP all ICB
 - Outside Clinic Limited, Stirling House, 10 Viscount Way, Swindon, SN3 4TN all ICB

4. When did the contract(s) start?

1 January 2020

5. When is/was the contract end date according to the original contract ? (please detail for all contracts in the ICB area)

31 December 2022 plus two-year optional extension.

6. Has the contract been extended with existing Providers beyond the original contracted end date (without going to Tender)? (please detail all dates for all contracts in the ICB area. If they have been extended multiple times, then please itemise all extensions)

Two-year optional extension has been implemented.

7. If the required contract renewal has been delayed beyond the original contracted End Date, then why was a new tender not issued and what are the intentions for the future required contracting of the service? please detail for all contracts in the ICB area, and send any documents or minutes of meetings that relate to the ICBs consideration of their options for the required future contract arrangements.

N/A

8. Are there plans to merge/harmonise multiple services within the ICB into one service Contract for the entire ICB? If so, then please supply information together with proposed start dates. Or are there any plans to change the Contract type significantly in some other way e.g. combine all into AQP, add ear wax removal to the service, change to self-referral model. Please highlight the reasons for the delay in harmonising the service or delays in changing contract specification. Please supply all internal/external documents and minutes of meetings that relate to this question.

No Plans to merge or harmonise

9. Can a Provider be admitted to the contract mid-term/mid-contract? i.e. can new providers be admitted during the current contract, after the initial contract had been awarded. If so, please advise how the Provider would apply to be included within the Contracts Provider List for a mid-term entry. Please also advise how a new Provider could apply to be included at the point of Contract extending i.e. be added to the existing Providers when the original contract is extended. If an interested Provider who holds similar AQP contracts currently elsewhere cannot apply to be added to the current Provider List mid-term during the a current contract, and cannot be considered at the point of the extension of an existing current contract, then please indicate on what grounds the ICB feels this entry would not be acceptable.

At the commencement of the AQP Plus Framework it was agreed that during the initial 3 year period of the Framework the commissioners may re-open the Framework to allow for new applicants the opportunity to submit a bid. As there has not been a requirement to re-open the Framework from a commissioning perspective, this option has not been enacted.

10. What are the current typical wait times for accessing (the various) Hearing Aid Services within the ICB? Please also indicate the areas or localities within the ICB where wait times have breached KPIs in more than two months within the last 6 months.

Wait times are typically held within KPIs

KPIs:

90% of patients accessing the service who have been:

- Referred to the service and assessed within 16 working days of receipt of referral;
- Had their hearing aid fitting within 20 working days of the assessment;

East Lancashire, Fylde and Wyre and Blackpool are localities in which wait times have breached within the last six months.

Specsavers – 6.8 days Scrivens – 5.5 days Beacon – 15 days Outside Clinic – 15 days.

Blackpool Teaching Hospital – Please redirect to the provider directly for this information https://www.blackpoolteachinghospitals.nhs.uk/services/information-governance/freedom-information-foi

11. Have any Providers left the contract for any reason, or restricted their intake very significantly ? Please provide as much detail as possible.

No

12. Have any current Providers been awarded the current Contract without the ICB tendering the opportunity? And why was this deemed permissible? This may be a short term contract that was issued for emergency reasons e.g. due to COVID or Provider terminating their service suddenly. Please detail contract extensions and indicate on what grounds the ICB felt they were able to directly award the contract, and on what grounds they felt that they were not obliged to issue a tender to the market or invite new Providers to apply.

No

- 13. Have there been any material changes during the course of the current specification. (This includes changes during the period of any contract extensions that were based on the Original contract) e.g:
 - Earwax Removal services
 - Self-referral pathway

No

14. A) For AQP services within the ICB, are there any areas or localities where services are currently only available from a single Provider?

No

B. For AQP services within the ICB, are there any areas or localities where services are currently only available from a single Provider for in-clinic appointments, as per activity reports in the last 3 months?

West Lancashire

C. For AQP services within the ICB, are there any areas or localities where domiciliary services are only active from a single domiciliary Provider, as evidenced in ICB activity reports in the last 3 months?

No

15. Please comment further on any future intentions for the procurement of Age-related Hearing services within the ICB (that may not have been mentioned above). Please send any available documents or meeting minutes that support your answers to this issue.

Not yet planned but will be in accordance with PSR.

16. Will commissioners be reviewing the current contract under the new Provider Selection Regime (PSR)? Please detail how the ICB will issue contracts under the PSR requirement. What is the ICBs understanding of how AQP Audiology fits within the PSR requirement, and how does the ICB understand how PSR requirements should be executed for AQP Audiology?

Yes. The relevant direct award process or competitive process will be followed

17. What are the referral to assessment times for patients being seen for domiciliary services specifically?

16 working days from receipt of referral,

Has this been breached by any Provider for two or more of the last 6 months? **No**Are there any areas or localities where domiciliary services are not available in the ICB? **No**

18. In reviewing the KPI data for domiciliary services, would the addition of a new domiciliary Provider improve the service for patients?

No

19. Please could you inform us of any tariff uplifts, if so, how much and which year(s)?

Inflationary price increases have been awarded and have followed the nationally recommended NHSE efficiency and inflator factors.

20. Are there any areas or localities within the ICB where there are typically days without provision e.g. Sundays or Bank Holidays? Similarly, are there any areas or localities where evening appointments are not provided i.e. between 6pm and 8pm?

Yes and Yes

21. NHS hearing aids are now available with Bluetooth functionality, providing better value to NHS, taxpayers and patients when fitted. Are any Providers in your area providing less than 75% of their hearing aids without Bluetooth enabled features including mobile phone streaming, remote control Apps, remote aftercare? Please itemise for each Provider. Please state whether the Provider's 'standard' model(s) provision tends to include or exclude these Bluetooth-enabled functions for their cohirt.

No

Scrivens - Danalogic Ambio 577 + 588. Both Bluetooth enabled

Specsavers – Signia Stretta Aya N/NT/HP/UP and Phonak Bolero M70/Naidia/SP. All Bluetooth enabled

Beacon - Phonak Nova M's, Naidia M-70 SP and UP - all Bluetooth enabled

Blackpool-

Oticon	Engage 85	Bluetooth Enabled		
Oticon	Engage 105	Bluetooth Enabled		
Oticon	Xceed SP	Bluetooth Enabled		
Oticon	Xceed UP	Bluetooth Enabled		
Oticon	Play Px	Bluetooth Enabled		
Oticon	Optim & Wireless CROS	Bluetooth Enabled		
Oticon	Play Px R	Bluetooth Enabled	Rechargeable	
Phonak	Nova M	Bluetooth Enabled		To be replaced with Nova M70 -M
Phonak	Nova M70 SP	Bluetooth Enabled		
Phonak	Nova P90 UP	Bluetooth Enabled		

Phonak	Nova M PR	Bluetooth Enabled	Rechargeable	To be replaced with Nova M70 -PR
Danalogic	AM798	Bluetooth Enabled		

22. Has the ICB noted any areas of concern re Health Inequalities or Access within the current Provision of services? Are there KPIs or Standards not being met with regard to Health Inequalities and /or Access?

No areas of concern

23. NHS England has made self-referral a requirement of AQP audiology. Has Self-referral been implemented for the ICB's Audiology contract(s)? Please provide the self-referral commencement dates. If Self-referral has not been implemented, then on what date will Self-referral commence?

NHS England has not made specific recommendations based on the type of procurement process followed in the original contract award.

Self referral has been implemented for three providers, plans are yet to be agreed for the other providers.

24. Is ear wax removal part of the audiology pathways? If so when was this implemented? If not, then please detail any documented plans to integrate ear wax removal as part of the Audiology pathway.

Ear wax removal commissioned from the providers listed at Q3 is specific to the hearing aid pathway,

- 25. Separate Ear Wax Removal Pathway Do you have an Ear Wax Removal pathway (that is entirely seperate from the Audiology service a)? If yes the please provide the following information
 - a) When did the contract start?
 - b) When is the contract end date?
 - c) Who is the Contracted Provider (or Providers)
 - d) Was the contract subject to a market Tender? If so please send us the link to the Tender.
 - e) If there was no open market Tender then how were the Providers or the Provider selected?

 On what grounds, with what rationale and with what selection process were the Providers or the Provider recruited?
 - f) If the current Contract was extended then on what grounds was the contract extended?
 Using what rationale? Why was the contract extended and a competitive Tender not applied?
 - a-f Yes, part of treatment room services delivered by NHS providers of integrated community services with contracts awarded under PSR Direct Award route A or C.
 - g) Can new Providers be considered for entry mid-term, at contract extension , or via Tender process. Please advise the process required for a new Provider to apply.
 - No. Providers cannot "apply" to deliver ear wax services.
 - h) Will PSR be applied to future ear wax contracts? How will the PSR process be implemented given the different ways that PSR should be used to issue awards?

Yes, the relevant PSR process will be followed.

Right of Appeal

Should you require any further information or clarification regarding this response please do not hesitate to contact us. If you are dissatisfied with the response, you are entitled to request an internal review which should be formally requested in writing and must be within two calendar months from the date this response was issued.

To request an internal review

You can request this by contacting the FOI team by email at MLCSU.FOITeam@nhs.net or by post to Leyland House, Lancashire Business Park, Leyland, PR26 6TR, specifying why you require a review.

If you are not content with the outcome of your internal review, you may apply directly to the Information Commissioner's Office (ICO) for a decision. Generally, the ICO cannot make a decision unless you have exhausted the CCGs FOI complaints procedure. The ICO can be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF www.ico.gov.uk

Yours sincerely

Professor Craig Harris Chief Operating Officer