

Geraldine Hoban
Chief Operating Officer
Brighton & Hove Clinical Commissioning
Group

Date: May 21 2012

Dear Geraldine,

I'd like to thank you for attending the recent (05 May 2012) Brighton & Hove HOSC meeting to explain plans for re-commissioning adult hearing services. I felt that the discussion around this was useful, and thought it might be helpful to capture the main issues raised by committee members.

Pressure to buy additional products/services.

We know that some users of NHS ophthalmology services have felt pressured to buy additional services, spectacles etc. when they've visited high-street opticians for 'free' NHS eye-testing – locally, this is something that's been raised as an issue by the LINK and by the Older People's Council. There's an obvious worry that a 'high street' model for hearing services would present a similar temptation to commercial providers. We'd therefore want assurances that the contract for hearing services will bar providers of NHS services from improperly promoting commercial services to NHS patients.

'Cherry-picking'.

We've seen, with the Independent Sector Treatment Centre initiative, that there's a risk that new providers can come into a market and take on only relatively simple procedures, leaving more complex matters (such as dealing with patients who have significant co-morbidities) to the NHS 'provider of last resort'; and clearly this can have an impact on the finances of the provider of last resort, as it's widely recognised that the NHS tariff on average offers fewer risks and more opportunities for profit at the lower end of complexity. We'd therefore like to see the contract minimise the opportunity for providers to cherry-pick services, and ensure that risk and opportunity are fairly shared between providers.

Impact on Current Provider

You made the point at the HOSC meeting that moving services from an acute to a community setting inevitably involves a risk for the acute provider, which will lose income but might not be able to adjust capacity accordingly (e.g. a hospital might lose some beds from a ward but still be required to keep the ward open to provide other services). Again, the HOSC would like to see this risk reflected in the planning for this re-commissioning.

Outreach.

Our LINK co-optees raised the issue of 'outreach' services at the HOSC meeting – i.e. hearing services delivered in the homes of vulnerable service users/nursing homes etc. Once more, we trust that this will be picked up in the service specification.

I'd be really grateful if you could address each of these issues, perhaps in the first place via a letter, and then ultimately by presenting your final re-commissioning plans to the Health & Wellbeing Overview & Scrutiny Committee.

Yours sincerely

A handwritten signature in black ink that reads "Sven Rufus". The signature is written in a cursive, flowing style.

Councillor Sven Rufus
Chair, Brighton & Hove HWOSC