

Reference: FOI.ICB-2324/460

**Subject**: AQP Audiology

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
1. Which of the following types of audiology service models are commissioned within your ICB;  a. Age-Related Adult Hearing Loss / Non-complex Hearing Aids service  b. Complex Hearing Loss / Hearing Aids service  c. Acute Audiology  d. Paediatric Audiology  e. Other (please provide details)	<ul> <li>BNSSG ICB commissioners Audiology services for Age Related Hearing Loss and providing hearing aids if clinically proven necessary.</li> <li>BNSSG ICB Commissions 1 AQP Acute provider and 3 AQP community audiology providers for this service</li> <li>BNSSG ICB commission separate Acute ENT services.</li> </ul>
<ol> <li>For each type of commissioned audiology service model, please provide;</li> <li>a. Details of the contractual model for each service e.g. Multi-Provider AQP; Multi-Provider Non-AQP; Single Provider; Prime Provider / Consortia / Alliance; Acute contract.</li> <li>b. the names of the provider organisations</li> <li>c. how the providers are paid for activity e.g. locally priced cost and volume; block contract, cap and collar d. their activity levels and spend by currency e.g. Assessment; Monaural Hearing Aid Fitting; Binaural Hearing Aid Fitting; Re-Assessment; Monaural</li> </ol>	2a-c. All requested information can be found within the BNSSG contract register: https://bnssg.icb.nhs.uk/wpcontent/uploads/2018/11/Clinical-Contracts-Register_March-23.pdf  2d. BNSSG ICB do not hold this information.



	Hearing Aid Re-Fitting; Binaural Hearing Aid Re- Fitting.	
and a re-fit	u are unable to distinguish between a first pathway tting, please confirm this is the case and give the er the first pathway headings.	
con alor	ere the payment basis is block, please give the atracted activity levels versus the actual activity levels, ng with the contracted financial value versus the actual spend, for each of the past three financial years	All Audiology services are paid by activity only. The Indicative Activity Plan for these contracts is zero.
volu	ere the payment basis is a locally priced cost and ume arrangement, please provide the current tariffs ainst the relevant activity currencies.	Please find enclosed.
hea nec	at is the typical timeframe for a patient to have their aring aids replaced (other than where this is cessitated due to loss or damage)? Where this varies service type, please provide information for each type.	BNSSG ICB does not hold this information.
	here a contractual timeframe for a patient to be resessed for replacement hearing aids?	BNSSG ICB does not hold this information.
sch	you have any kind of prior approval or comparable leme relating to replacement of hearing aids. If so, ase provide that policy or scheme document	BNSSG ICB does not hold this information.



Is IQIPS accreditation a mandatory requirement of your contracts?	Adherence to IQIPS is now no longer mandatory for these contracts
9. By service model, which of the providers named under Question 2 have current IQIPS accreditation for all sites, which are accredited for only some sites and which do not have any accreditation at all.	BNSSG ICB does not hold this information.
10. Has any performance notice been issued, within the last 3 years, to any of the providers mentioned in Q2? If the answer is yes, please detail which provider(s), the reason for the notice, when the notice was served and when the notice was withdrawn.	No Performance notice has been issued to any AQP Audiology providers in the last three years.
11. Have there been any audiology-related formal contractual disputes or comparable legal actions taken against or by providers within the last 3 years? If the answer is yes, please provide brief details of the provider(s) in question, the nature of the dispute, when it took place and whether it has been resolved or remains ongoing.	No legal action has been taken against any AQP Audiology providers in the last three years.

The information provided in this response is accurate as of 12 March 2024 and has been approved for release by Sarah Truelove, Deputy Chief Executive and Chief Finance Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.

Tariff	Basis of Contract	Price		Overview of what is included
''		Standard	Domiciliary	(Refer to specification for full details)
1	Assessment only	£48	£48	Assessment only, within 28 calendar days of receipt of referral; Patient advice; Clinical interview; Full Otoscopy; Measurements; Loudness Levels; Intervention options  This is only paid if patient does NOT require a hearing aid(s). If a hearing aid(s) is required, the assessment cost is covered in the fitting tariff (Tariff 2 or Tariff 3)
2	Assessment, fitting of 1 aid, cost of 1 aid, follow-up, 3 years aftercare and 3rd year review	£269	£304	Fitting within 28 calendar days (if not done at assessment appointment); Otoscopy; patient review; cost of hearing aid(s);selection and programming of hearing aid(s): real ear measurements; modification of ear moulds; patient instructions & advice; Arrange follow up appointment to be undertaken within 70 calendar days of fitting (can be face to face; telephone; postal) ,covers:  • Discussion with patient;
3	Assessment, fitting of 2 aids, cost of 2 aids, follow-up, 3 years aftercare and 3rd year review	£362	£394	<ul> <li>Check aid – comfort, sound quality, cleaning; battery life, etc.;</li> <li>Check patient is able to remove and insert aid;</li> <li>Review hearing aid data logging;</li> <li>Measurements;</li> <li>Patient advice;</li> <li>Maintain secure and confidential electronic records.</li> </ul>
3a	Delayed Fitting of second aid where patient is eligible for Bilateral Fitting	£82	£90	Payable where the patient does not have both aids fitted at the same time. The 1-aid pathway (Tariff 2) would be charged when the first aid is fitted and the Delayed fitting charge (Tariff 3a) charged when the second aid has been fitted.

Tariff	Basis of Contract	Price		Overview of what is included
		Standard	Domiciliary	(Refer to specification for full details)
4	Annual aftercare and review (after 3rd year review, where hearing needs have not changed)	£22	£24	Access to Aftercare Service within 2 working days of request Aftercare services to include services as detailed below:
5a	Replacement hearing aid (Mechanical failure)	£69	£75	Payable where a replacement aid is required due to mechanical failure outside of warranty during a period of annual aftercare following the 3rd year review  To include fitting services as described above.
5b	Replacement hearing aid (Loss or damage)	£69	£75	Payable where a replacement aid is required due to patient loss or damage.  To include fitting services as described above.  Limited to one replacement per patient per annum.