## Maidstone and **NHS** Tunbridge Wells

Ref: FOI/CAD/ID 2831

Please reply to:

FOI Administrator Trust Management Service Centre Maidstone Hospital Hermitage Lane Maidstone Kent ME16 9QQ Email: mtw-tr.foiadmin@nhs.net

06 April 2016

## Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Adult hearing services.

Please see the attached form:

## **INFORMATION REQUESTED**

NOTES:

- Adult refers to patients aged 18 and over that are managed by audiology (e.g. noise and age-related hearing loss and people discharged from ENT). NB. we appreciate that in most cases this will simply cover Direct Access Audiology patients
- Prices and activity refer to the NHS financial year 2014/15 i.e. historical data

Q1) How many adult patients do you have on your audiology database?
A1)
39325
Q2) How many qualified audiology staff do you have? (Please include audiologists and clinical scientists here) A2)
7 including 2 locums
Q3) How many non-qualified audiology staff do you have? (Pease only include those that are paid and directly support audiologists - e.g. technicians that provide hearing aid repairs. Please exclude volunteers and administrative support) A3)
1
Q4) Do you use volunteers in any part of the patient pathway?
A4)
x Yes (please explain how – e.g. aftercare provided by a charity: HI-Kent distribute batteries, change tubing and perform minor cleaning of hearing aid devices)
Q5) What % of patients that are <u>referred to you</u> for a hearing assessment are referred from ENT and what % are referred directly from their GP? A5)
10 % referred from ENT 56 % referred from GP The remainder is self-referrals.
Q6) What % of adults that you assess <u>do you refer</u> on to ENT (e.g. because of pathology or for a second opinion) and what % do you refer back to the GP <i>without</i> fitting hearing aids (e.g. because of wax)? A6)
% you refer to ENT % you refer back to GP without fitting hearing aids The Trust dataset does not hold this level of detail.
Q7) How many adult hearing assessments did you do in 2014/15? A7)
4887 hearing aid referrals – based on clinical and GP diagnosis coding.
Q8 How many adults did you fit with hearing aids in 2014/15? And how many were new patients? A8)
Number of adults fitted with hearing aids : The Trust dataset does not hold this level of detail

Number of these that were new patients: Please see above
Q9) What is your bilateral fitting rate? A9)
90 % <b>adults</b> fitted with two hearing aids – Bilateral fitting is standard unless the patient or symptoms dictate otherwise.
Q10) Are you providing adult hearing services to NHS commissioner(s) under Any Qualified Provider (AQP)?
A10)
Provide adult services under AQP
☐ Yes (if yes, please list all CCGs that you provided this service to in 2014/15 below) x No (if no, <u>please skip to Q13</u> )
List all CCGs:
Q11) In the financial year 2014/15 did you hold any other contract, with <i>any</i> of the CCGs listed in answer to question 10, to provide services to the same group of patients as your AQP contract?
(e.g. did you hold a block contract at the same time as a AQP contract for adults with age- related hearing loss)
A11)
<ul> <li>Yes (if yes, please list all the CCGs where this was the case below)</li> <li>No (if no, please skip to Q13)</li> </ul>
List all CCGs:
Q12) As of July 2015 do you still hold any of the contracts listed in answer 11? A12)
<ul> <li>Yes (if yes, please list all CCGs below)</li> <li>No (please skip to Q13)</li> </ul>
List all CCGs:
Q13) In the year 2014/15, under what type(s) of contract did you provide adult hearing services?
A13)
Please tick <u>ALL</u> that apply
<ul> <li>Block Contract</li> <li>x Non-mandated national tariff/Payment by Results</li> <li>AQP tariff</li> </ul>
Cost per case Other (if ticked please specify here: )

Q14) In 2014/15 what did you charge your CCG(s) for an adult hearing assessment? A14)

## PLEASE COMPLETE FOR YOUR MAIN CCG

Main CCG name here: West Kent CCG

£117 (excluding market forces factor)

£130 including market forces factor (inclusive of any local adjustment. If no adjustment insert N/A)

PLEASE ALSO COMPLETE THE FOLLOWING SECTION IF YOU CHARGE DIFFERENT RATES TO DIFFERENT CCGs. OTHERWISE GO TO NEXT QUESTION

Name of CCG is West Kent CCG

(excluding market forces factor) £

£ (inclusive of any local adjustment. If no adjustment insert N/A)

Name of CCG is

- £ (excluding market forces factor)
- £ (inclusive of any local adjustment. If no adjustment insert N/A)

Name of CCG is

- £ (excluding market forces factor)
- £ (inclusive of any local adjustment. If no adjustment insert N/A)

(please continue on separate piece of paper if necessary)

Q15) In 2014/15 what did you charge your CCG(s) for fitting one hearing aid? (Please include hearing assessment, fit and hearing aid for an adult patient) A15)

PLEASE COMPLETE FOR YOUR MAIN CCG

Main CCG name here: West Kent CCG

£234 (excluding market forces factor)

£260 including market forces factor (inclusive of any local adjustment. If no adjustment insert N/A)

PLEASE ALSO COMPLETE THE FOLLOWING SECTION IF YOU CHARGE DIFFERENT RATES TO DIFFERENT CCGs. OTHERWISE GO TO NEXT QUESTION

Name of CCG is

- £ (excluding market forces factor)
- £ (inclusive of any local adjustment. If no adjustment insert N/A)

Name of CCG is

£ (excluding market forces factor) £ (inclusive of any local adjustment. If no adjustment insert N/A)

Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
(please continue on separate piece of paper if necessary)
Q16) In 2014/15 what did you charge your CCG(s) for fitting <u>two hearing aids</u> ? (please <u>include</u> hearing assessment, fit and two hearing aids for an adult patient)
A16)
PLEASE COMPLETE FOR YOUR MAIN CCG
Main CCG name here: West Kent CCG
£234 Plus cost of second hearing aid which will vary dependent on the type of hearing aid (excluding market forces factor) £260 including market forces factor but plus cost of the second hearing aid which will vary dependent on the type of hearing aid issued (inclusive of any local adjustment. <b>If no adjustment insert N/A</b> )
PLEASE ALSO COMPLETE THE FOLLOWING SECTION IF YOU CHARGE DIFFERENT RATES TO DIFFERENT CCGs. OTHERWISE GO TO NEXT QUESTION
Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
(please continue on separate piece of paper if necessary)
Q17) What do you charge your CCG for one <u>follow-up appointment</u> for an adult patient? A17)
PLEASE COMPLETE FOR YOUR MAIN CCG
Main CCG name here: West Kent CCG
<ul> <li>£62 (excluding market forces factor)</li> <li>£ 69 including market forces factor insert N/A)</li> <li>(inclusive of any local adjustment. If no adjustment</li> </ul>
PLEASE ALSO COMPLETE THE FOLLOWING SECTION IF YOU CHARGE DIFFERENT RATES TO DIFFERENT CCGs. OTHERWISE GO TO NEXT QUESTION
Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>

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Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
(please continue on separate piece of paper if necessary)
Q18) What do you charge your CCG for aftercare visits? (Please state how much you charge and how often. E.g. if you charge for each time a patient visits, please select "each visit", if you charge a flat fee per year please select "each year"). A18)
PLEASE COMPLETE FOR YOUR MAIN CCG
Main CCG name here: West Kent CCG
£118 or £72 (excluding market forces factor) £N/A (inclusive of any local adjustment. <b>If no adjustment insert N/A</b> )
How often did you make this charge?
X Charged this fee for each aftercare Charged this fee once per year regardless how often the patient attended Charged this fee once every three years regardless how often the patient attended Other (if ticked please specify here: )
PLEASE ALSO COMPLETE THE FOLLOWING SECTION IF YOU CHARGE DIFFERENT RATES TO DIFFERENT CCGs. OTHERWISE GO TO NEXT QUESTION
Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
How often did you make this charge?
<ul> <li>Charged this fee for each aftercare</li> <li>Charged this fee once per year regardless how often the patient attended</li> <li>Charged this fee once every three years regardless how often the patient attended</li> <li>Other (if ticked please specify here: )</li> </ul>
Name of CCG is
<ul> <li>£ (excluding market forces factor)</li> <li>£ (inclusive of any local adjustment. If no adjustment insert N/A)</li> </ul>
How often did you make this charge?
<ul> <li>Charged this fee for each aftercare</li> <li>Charged this fee once per year regardless how often the patient attended</li> <li>Charged this fee once every three years regardless how often the patient attended</li> <li>Other (if ticked please specify here: )</li> </ul>
Q19) How often does a typical adult hearing aid user visit you for an aftercare <u>each year</u> ? A19)
Typically 1-2 aftercare visits per year.

Q20) How do you measure quality? (e.g. please state whether or not you measure outcomes, how you ensure continuous quality improvement in your adult hearing service etc.) A 20) Not currently measured