

# Top tips for commissioners – how to make choice in adult hearing services work well

We asked commissioners around the country about their experiences of patient choice in adult hearing services. These tips on how to make choice a success are based on what they told us.

# 1. Be clear about why you are introducing choice

Before you start, know what you want to achieve. Some commissioners introduce choice as they think choice is a good thing in itself or choose to expand services to satisfy unmet need. Others think that choice will encourage providers to take more notice of what patients want and care will improve as a result and feel that patient choice can help make costs and outcomes clearer. Whatever your reasons, be clear about your objectives and shape everything you do around them. Work with existing and potential providers to explore whether choice is likely to achieve the desired objective.

### 2. Engage providers early and be frank about what you expect

Tell current and potential providers early on about what you want to achieve and what you expect of them, including during the qualification process. This will help you clarify your expectations and help to build positive relationships. Nominating someone as a single point of contact for providers could help too.

3. Recognise how crucial GPs' support is and get stakeholders' commitment from the start

Obtain GPs' support and commitment from the start. GPs are important to making choice work, their commitment will help make choice work well. In particular, they need information on how services have been commissioned and what providers are operating in the area. To give GPs confidence about quality, explain how you have selected providers. Describe what you expect of providers and what they offer, such as levels of ongoing support for patients. And don't forget GP practice staff – they can inform GPs and tell patients what's available.

# 4. Be clear about your processes

Commissioners and providers both benefit from being clear about processes such as qualification timelines, what happens to get services going once providers have qualified, future opportunities for providers to qualify, what happens when the contract expires etc.

# 5. Be open to a full range of providers

Patients told us they have different preferences – from hospitals to the high street to other community locations. The most successful processes are not geared to a particular type of provider but keep options open and recognise that a diversity of providers can drive innovation. Be careful not to exclude providers who may offer something valuable to patients.

# 6. Make realistic financial and operational plans

Anticipate any impacts on budget from the start. If there is unmet demand in your area, introducing additional capacity through choice is likely to lead to more patients being treated as more providers are available in the area. Use sources such as the Atlas of Variation to estimate likely levels of unmet need and therefore any potential impacts on your budget. You should also explore opportunities for obtaining better value for money overall - explore pricing possibilities with providers and ask other CCGs what they pay for services. If you have concerns about whether patients are benefiting from their NHS hearing aids, you could issue referral guidance to GPs

to ensure services are being used by patients who most need them. You can also use providers' data to monitor whether patients are satisfied with their hearing aids and still wearing them.

# 7. Promote fairness amongst providers

All providers should work to the same service specification and be accountable to commissioners for their performance. Patients can then choose with confidence the provider that best suits them. If you don't expect all providers to meet the same service specification, or pay them different amounts for doing the same job, you undermine this benefit. This can happen if old contracts with existing providers remain in force when patient choice is introduced.

# 8. Give patients information about the services available

We found that half the patients offered a choice weren't given any information to help them choose their provider. They should be offered information they can consider in their own time without being rushed into a decision. Patients will likely want to know about waiting times, types of hearing aid and quality of aftercare. You could also give them data from providers about whether patients are satisfied with their hearing aids and still wearing them.

Posters and leaflets might help, and you might make hearing aid samples available at GP practices.

#### 9. Get providers and hearing support services talking to each other

Evidence suggests patients are not being told about all the services available to support them with their hearing loss. These might include lip-reading classes, devices like flashing doorbells and telephones, and local support groups. Many patients don't know about these because not all service providers tell them. Commissioners can help by facilitating contact between providers and support services.

# 10. Use providers' data to continue improving services

Providers are often required to give you data about service use and quality. This means you can benchmark providers against each other, follow up with any who may not be performing well and identify best practice. Making outcome data available to patients could help them choose who provides their care.

# For more information, visit our website:

www.gov.uk/government/publications/nhs-adult-hearing-services-in-england-exploring-how-choice-is-working-for-patients