Impact on NHS workforce and resources

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This guideline has been reviewed for its potential impact on NHS workforce and resources.

Impact

The recommendation within this guideline that is considered most likely to generate a resource impact nationally relates to hearing assessment and the fitting of hearing aids.

Of the 9 million adults in England affected by hearing loss, NHS England <u>estimates that 5.6</u> <u>million</u> people would benefit from a hearing aid. At present, only around 3 million people actually have hearing aids.

Of people who present to a healthcare professional with hearing difficulties, 73% are currently referred for a hearing assessment, and the recommendation is to increase this proportion to 100%.

Services for people with hearing loss are commissioned by clinical commissioning groups (CCGs). Providers are NHS hospital trusts, community providers (in some parts of England this is through the Any Qualified Provider scheme) and primary care.

Support to put this guideline into practice

It is recognised that implementing this guideline might lead to an increased use of resources.

If the recommendation to make referrals in all eligible cases, as proposed in the guideline, were to be implemented in a gradual and managed way, and if those referrals were to a secondary care setting (on the illustrative basis that robust cost data is available for referrals in these settings), the estimated increase in the cost of assessing and managing hearing loss could be up to £5 million in 2019/20, and up to £20 million per year from 2022/23 onwards.

However, there is evidence that innovative commissioning models have been able to deliver significant cost savings, such that it may be possible to increase referrals with a much lower resource impact.

If referrals were to increase in line with this recommendation, this might also require workforce growth to deliver these services. Any such growth would likely depend on the extent of existing spare capacity, and whether increased referrals were to be delivered in a secondary care setting or via alternative models.

The other recommendations within this guideline are at this stage thought unlikely to impose a significant resource burden.

To support this service transformation:

- NHS England will continue to work with CCGs, other health system partners and with deafness/hearing loss groups to develop models of care that are integrated and innovative. NHS England will support the system to deliver service improvements aligned to the Five Year Forward View, by supporting CCGs with decision-making and high-quality care provision, and to reduce inequalities.
- NHS Improvement will continue to work with providers to support efficient working in this area, highlighting areas of good practice and innovative models of care.

The NICE guideline on hearing loss supports the implementation of the <u>NHSE action plan</u> on hearing loss and the associated commissioning strategy <u>Commissioning services for</u> people with hearing loss: a framework for clinical commissioning groups.

The guideline resource and implementation panel

The panel reviews NICE guidelines that have a substantial impact on NHS resources. It includes NICE, NHS England, NHS Improvement, Health Education England and when appropriate Public Health England, Skills for Care, and a topic expert may also attend.

The panel does not comment on or influence the guideline recommendations outside of NICE's usual consultation processes and timelines.