

**Stop the cuts  
to NHS hearing  
aid services**

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LOSS**

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## **Action on Hearing Loss local supporter briefing Enfield CCG hearing aids consultation**

**Enfield Clinical Commissioning Group (CCG) is proposing to scale back NHS-funded hearing aid services for adults. It has announced intentions to stop providing hearing aids for adults with mild hearing loss, and for some people with moderate hearing loss**

**These proposals have been put forward among a list of treatments the CCG thinks have limited clinical effectiveness.** They are proposing to “revise clinical criteria for some treatments currently available on the NHS”. The CCG’s “**Adherence to Evidence Based Medicine**” consultation is seeking feedback on plans to add a wide range of treatments to their Procedures of Limited Clinical Effectiveness (PoLCE) policy, and introduce new clinical thresholds which mean NHS treatments will only be available to people when their symptoms are more severe

(<http://www.enfieldccg.nhs.uk/Downloads/Listening-to-you/FINAL%20AEBM%20consultation%20document.pdf> ).

The CCG consultation is open between **1st March and 31st March 2017.**

**The CCG is incorrectly inferring that Stoke-on-Trent and South Norfolk CCGs have similar hearing aid commissioning policies in place.** So far only North Staffordshire CCG has implemented a restrictive policy and over 10 other CCGs considering cutting provision have instead listened to local views and professional groups and have come to understand the evidence about the impacts of not addressing mild hearing loss and the benefits and cost effectiveness of hearing aids.

The changes being proposed would be highly damaging and would have a devastating impact and leave many local residents unable to communicate in their day to day lives. Please help us to fight against the cuts by completing the CCG’s consultation survey and attending a consultation meeting.

**Please note that we are not acting on the CCG’s behalf and have not worked with them on either the proposals or the design of the consultation process.**

### ***Why is Action on Hearing Loss condemning the cuts?***

**Hearing loss affects over 11 million people in the UK.** With our ageing population, it is estimated that this number will increase to 15.6 million by 2035.

**Mild and moderate hearing loss are not minor conditions.** Over 60% of people over 70 have mild or moderate hearing loss, which can cause major issues. Without hearing aids, people with mild or moderate hearing loss find it difficult to communicate with others against even a low level of background noise. They are also at greater risk of developing other health problems.

**Hearing aids are the only viable treatment for people with hearing loss.** The evidence overwhelmingly shows that hearing aids improve quality of life for people with mild or moderate hearing loss.

**Without hearing aids, mild and moderate hearing loss can cause communication difficulties, social isolation and depression.** Also, there is now evidence of a link between hearing loss and dementia.

**The earlier patients receive hearing aids, the easier it is to adapt.** Most people's hearing deteriorates with age. Evidence shows that fitting hearing aids when people have mild or moderate hearing loss will increase their chance of benefitting from hearing aids if their hearing deteriorates further.

### **Who will the proposals affect?**

Enfield CCG is proposing to reduce access to adult hearing loss services, for adults over the age of 50 with age-related hearing loss through imposing the following criteria:

- If a hearing test shows a mild hearing loss (25-41 decibels), adults over 50 with age-related hearing loss will no longer be eligible for an NHS funded hearing aid\*
- If a hearing test shows a moderate hearing loss (41-55 decibels) patients will only receive an NHS hearing aid if they can demonstrate that their hearing loss is having a "functional impact" on daily life, which will be tested through an inappropriate questionnaire and will potentially leave many people with moderate hearing loss without hearing aids
- Although patients with mild to moderate hearing loss will be able to keep their hearing aids at the end of their three year pathway, at their reassessment, even if they have previously been eligible for NHS provision, unless they meet the new eligibility criteria they will no longer be eligible for NHS hearing aids
- A hearing loss of 56 decibels or more (severe or profound hearing loss) will continue to receive NHS funded hearing aids.

\*There are several circumstances in which this criteria will not apply (listed on pages 6 and 7 of the [Final AEBM consultation document](#)), eg patients with dementia, a learning disability or sudden onset hearing loss, but potentially hundreds of people would miss out on NHS hearing aids each year.

## ***Giving your feedback***

The CCG is offering the chance for those wishing to give feedback on proposals to fill in a survey and attend local consultation events.

### **Consultation survey**

There are no questions directly relevant to proposals to make cuts to NHS hearing aid provision. Below we have run through the most relevant questions and provided some information that may help you respond.

#### **1. Do you understand the reasons that Enfield CCG is adding these treatments to the Procedures of Limited Clinical Effectiveness (PoLCE) policy? \***

We **do not** understand the reasons why Enfield CCG is adding the provision of hearing aids for mild and moderate hearing loss to the Procedures of Limited Clinical Effectiveness (PoLCE) policy. There is significant and robust evidence which clearly demonstrates serious impacts of not addressing mild and moderate hearing loss, the benefits and cost-effectiveness of hearing aids, and the benefits of fitting hearing aids when a person's hearing loss is mild or moderate rather than waiting until their hearing loss is more severe. The CCG needs to look at this evidence before considering adding restricted access to hearing aids to the Procedures of Limited Clinical Effectiveness policy. Action on Hearing Loss *Hearing Matters* report outlines the evidence base – you may like to highlight this to the CCG, stating the importance of the CCG examining the evidence base and your reasons for disagreeing with

their proposal to add hearing aids for mild and moderate hearing loss to the Procedures of Limited Clinical Effectiveness policy.

### **3. Do you feel the proposed criteria for the procedures that could be added to the PoLCE policy are fair? \***

We **do not** think that the proposed criteria are fair. Mild and moderate hearing loss are not minor conditions and these proposals would have a serious impact on the lives of local people. We know that over 70% of over-70-year-olds and over 40% of over-50-year-olds have some kind of hearing loss, and evidence shows that denying access to treatment would impact their ability to communicate, maintain relationships with family and friends, manage their health and wellbeing and remain in work. Restricting access to hearing aids will place people at greater risk of developing other health conditions, including depression and dementia. In response to this question you may like to outline how you or someone you know would be affected if you could no longer access NHS hearing aids, particularly if you/ they have mild or moderate hearing loss.

### **12. Do you have any alternative ideas about how we could best manage our limited resources to improve the health of our local population?**

Evidence shows that hearing aids are cost effective and result in significant benefits for the level of investment. Hearing aids provided through the NHS are particularly cost effective. It costs the NHS under £400 for all of a person's appointments, two hearing aids and repairs for three years. In contrast, it costs £3,000 on average to purchase a set of hearing aids privately, which is beyond the savings of 55% UK households. Not being able to access hearing aids impacts on someone's ability to communicate, maintain relationships with family and friends, gain and keep employment, manage other health conditions and maintain their health and wellbeing. Evidence also demonstrates that hearing aids prevent or delay the need for more costly health and social care interventions, so the CCG would best be able to manage its limited resources by continuing to provide less costly interventions such as hearing aids for mild and moderate hearing loss.

### **13. Please use this space to add any other comments about this consultation, including your views on the equality impact assessment.**

You might like to explain again here your views on the CCG's proposals to restrict access hearing aids or other treatments listed, and the impact the changes would have on you.

#### **Submitting your responses**

Please ensure your consultation response reaches the CCG before **31 March**.

You can complete the questionnaire online at:

<http://www.smartsurvey.co.uk/s/Adherencetoevidencebasedmedicine/>

Or you can print the questionnaire by downloading the **FINAL AEBM consultation document** from this page, and freepost it back to the CCG (there is a label to cut out and stick on the envelope on page 14) - <http://www.enfieldccg.nhs.uk/adherence-to-evidence-based-medicine.htm>

You are required to fill in all questions of the survey – we recommend you respond 'not sure' to any multiple choice questions you do not want to give an opinion on, and write 'no comment' in text boxes you do not want to comment in.

Please email [campaigns@hearingloss.org.uk](mailto:campaigns@hearingloss.org.uk) or see [www.actiononhearingloss.org.uk/hearingaidcuts](http://www.actiononhearingloss.org.uk/hearingaidcuts) for more info.

**Consultation meetings:**

The CCG have also organised some public meetings where you can hear more about the proposals and share your views, details of the next meeting are below:

***Thursday 30 March 2017 2pm-4pm*** – *Community House, 311 Fore Street, Edmonton N9 0PZ. Hosted by Enfield Voluntary Action*

If you plan to attend and are particularly interested in the section of the consultation about hearing aids, please email [campaigns@hearingloss.org.uk](mailto:campaigns@hearingloss.org.uk)