

# Influencing Commissioning Decisions

**An NHS perspective**

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Head of Audiology**

# 2010-11 ...“how can we help?”

**NHS reform on the horizon**  
**Main PCT concern?**  
**Demand management**

**What can we do?**

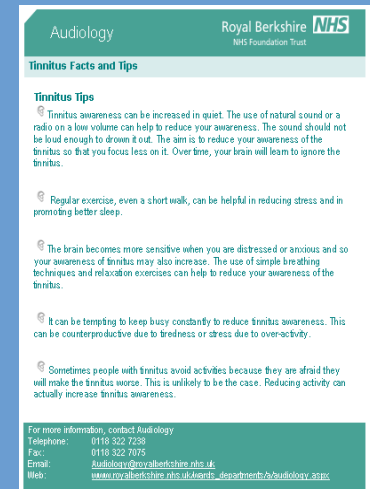
**A&F, screening clinics, Hearcheck**

**Patient / GP education – Epley / DH refreshers, patient self-help for GP surgeries (tinnitus / hg tactics)**


**Result:**

**Good relationship with Commissioner**

**Key message: the Commissioner likes talking about demand management**



The screenshot shows a webpage from Royal Berkshire NHS Foundation Trust. The page is titled 'Audiology' and 'Tinnitus Facts and Tips'. It contains several tips for managing tinnitus, such as using natural sound or a radio to reduce awareness, regular exercise, and avoiding stress. Contact information for Audiology is provided at the bottom.

**Audiology** Royal Berkshire   
NHS Foundation Trust

**Tinnitus Facts and Tips**

**Tinnitus Tips**

- 1 Tinnitus awareness can be increased in quiet. The use of natural sound or a radio on a low volume can help to reduce your awareness. The sound should not be loud enough to drown it out. The aim is to reduce your awareness of the tinnitus so that you focus less on it. Over time, your brain will learn to ignore the tinnitus.
- 2 Regular exercise, even a short walk, can be helpful in reducing stress and in promoting better sleep.
- 3 The brain becomes more sensitive when you are distressed or anxious and so your awareness of tinnitus may also increase. The use of simple breathing techniques and relaxation exercises can help to reduce your awareness of the tinnitus.
- 4 It can be tempting to keep busy constantly to reduce tinnitus awareness. This can be counterproductive due to tiredness or stress due to over-activity.
- 5 Sometimes people with tinnitus avoid activities because they are afraid they will make the tinnitus worse. This is unlikely to be the case. Reducing activity can actually increase tinnitus awareness.

For more information, contact Audiology  
Telephone: 0118 322 7238  
Fax: 0118 322 7035  
Email: [Audiology@royalberkshire.nhs.uk](mailto:Audiology@royalberkshire.nhs.uk)  
Web: [www.royalberkshire.nhs.uk/About\\_us/Departments/2/Audiology.aspx](http://www.royalberkshire.nhs.uk/About_us/Departments/2/Audiology.aspx)

# 2011: Problem 1...trouble from the GP Lead

**GP Lead wants to look at threshold rationing of HAs**

**Action:**

Audit 200 pts

**Method:**

200 consecutive assessments

Hosp #

DOB

PTA

GHABP score

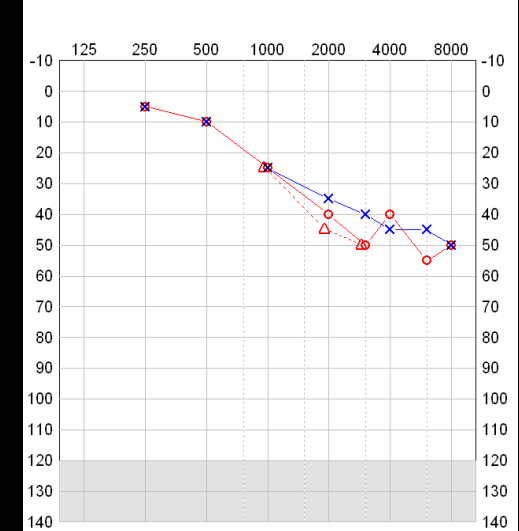
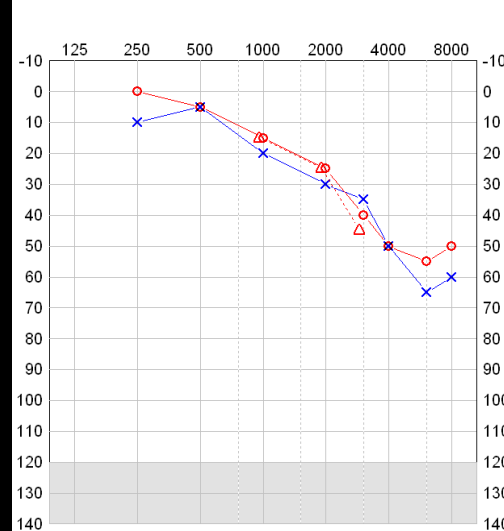
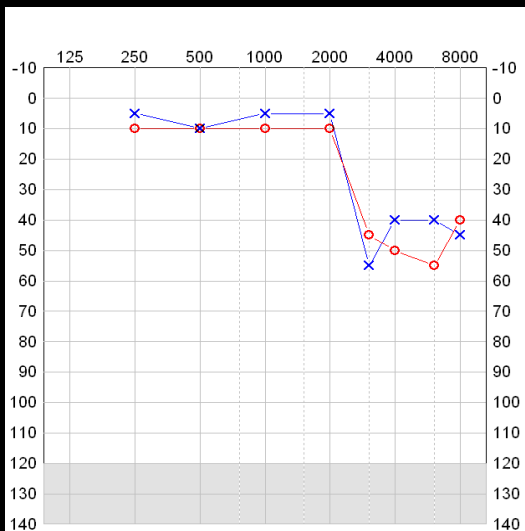
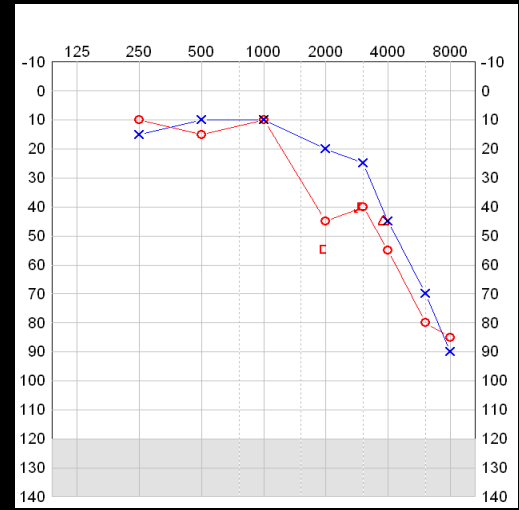
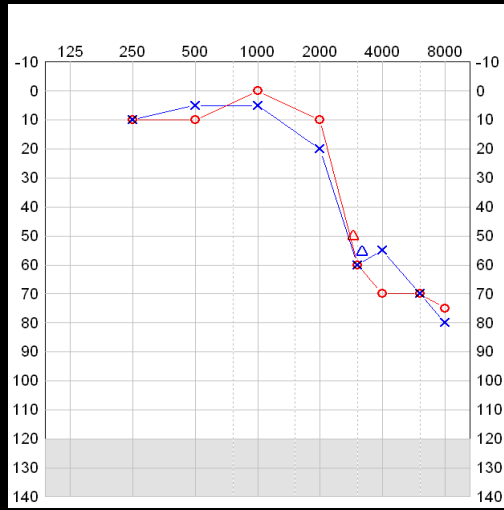
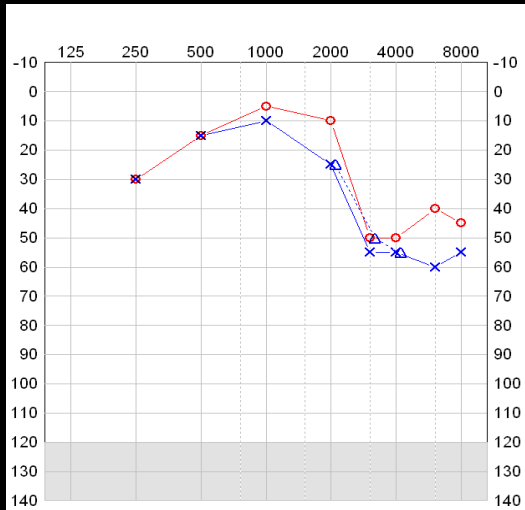
Tinnitus?

Balance?

Referral Q?

Management?





# 2011-2: Problem 2 ...AQP dawning

## Action:

Worked with commissioner to draw up AQP spec

Used the 200 pt audit to emphasise AQP-Acute conversion rate

## Result:

Failed to stop AQP

Failed to communicate complexity of patients / Acute conversion rate

But favourable AQP contract

**Key message: you can have an impact  
(but it definitely helps if you have a receptive  
audience)**

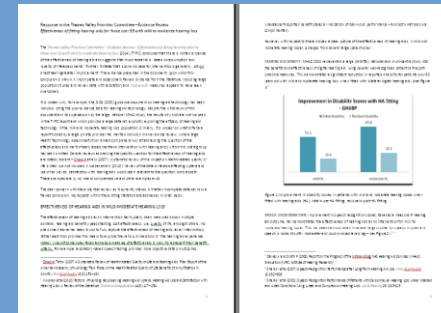
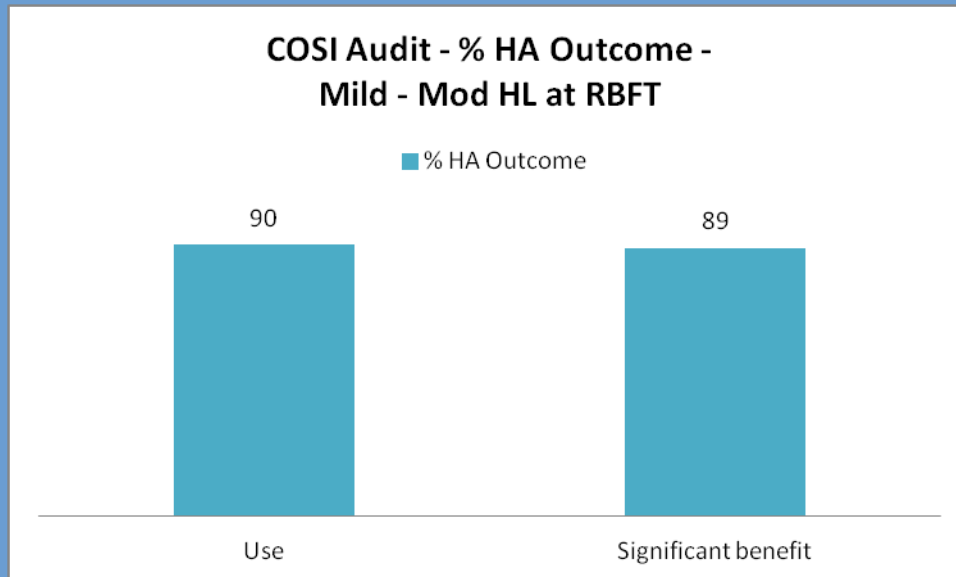


# 2014: Problem 3 ...rationing looms

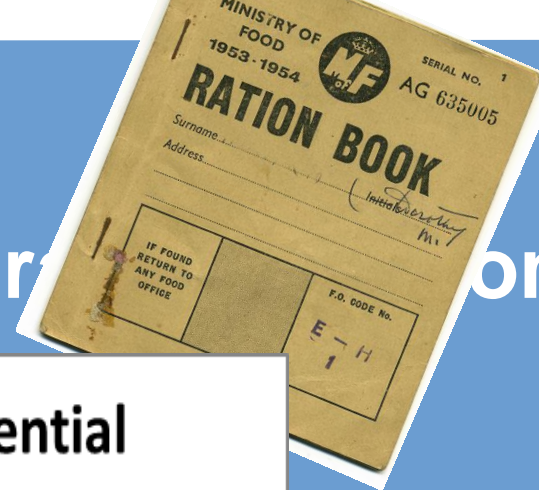
Invitation to Priorities Committee – defend mild / moderates

## Action:

We asked – does anyone else have this problem?  
Evidenced-based paper produced using literature base  
Local audit data: COSI outcome data



**Result:**  
No rationing on thresholds



# 2014/5: Problem 4 ...more r...oms

Invite

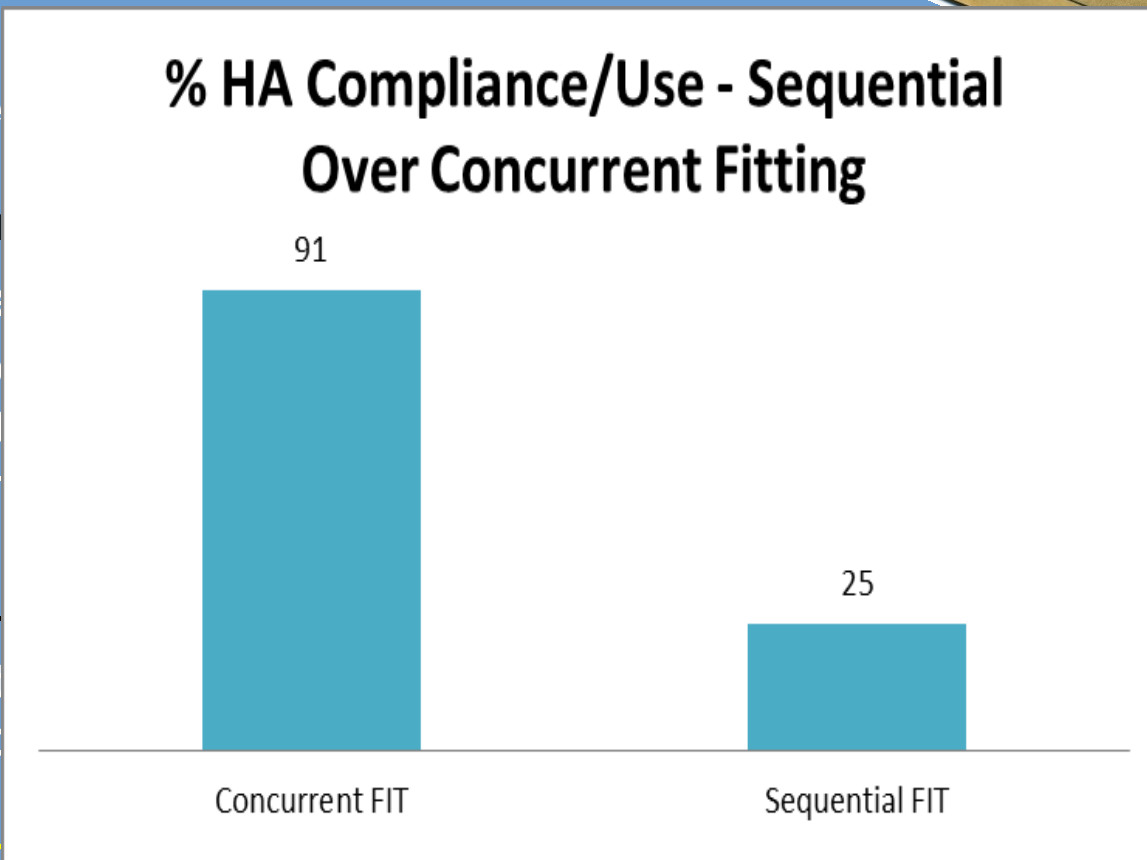
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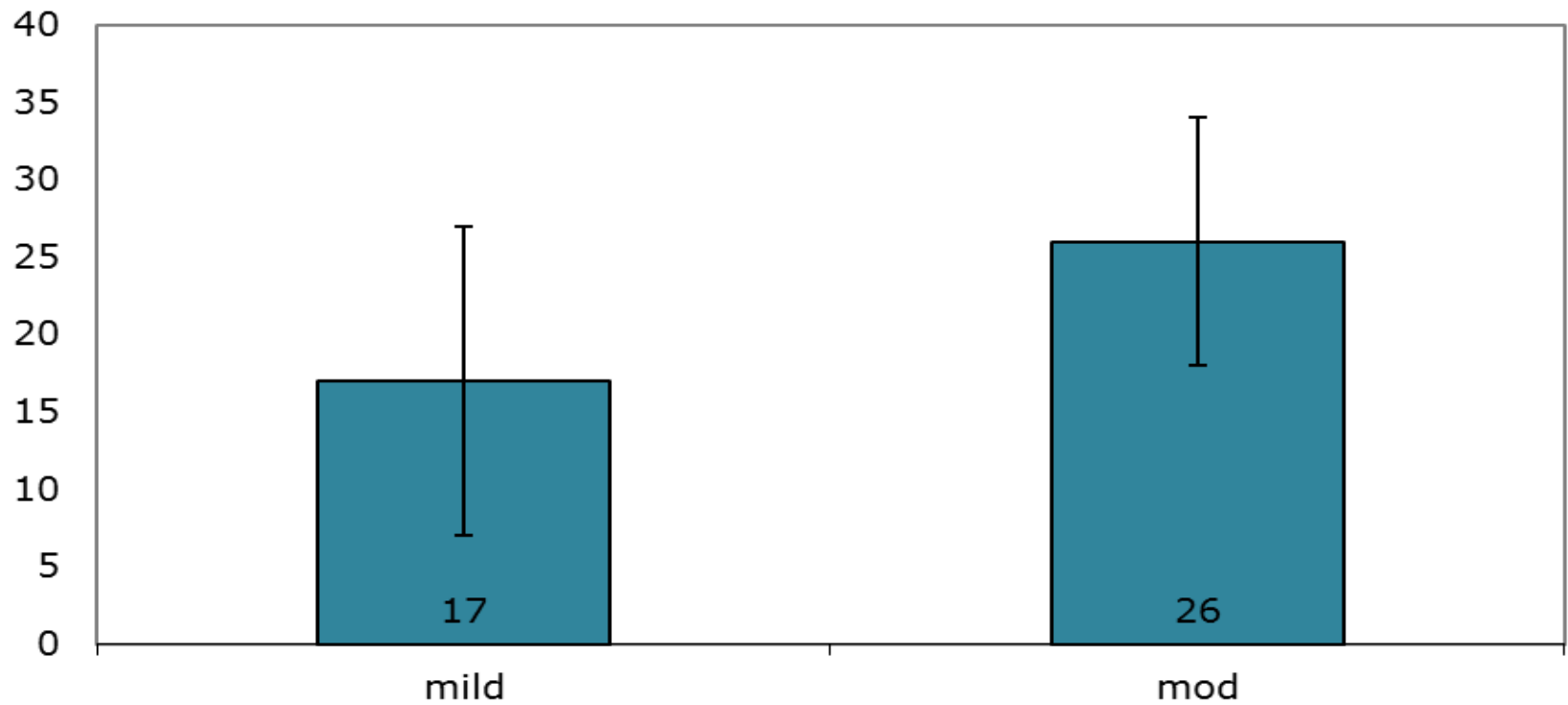
## % HA Compliance/Use - Sequential Over Concurrent Fitting



? Resources?  
sequential fitting

Key message: ...local audit data, can provide a powerful tool

### HHIE-S Score as a function of HTL







# Final thoughts

## **Power of small local audit to evidence points**

Talk with Commissioner/ GP Lead if possible. Approach with ideas of demand management as always keen to hear

## **Opportunity exists to develop broader networks**

Sharing of information and experience (happy to forward data or evidence papers to provide a framework to anyone interested)

**Is dependent on a receptive audience but should have positivity in that small efforts can go a long way**