

60 Great Clarendon Street, Oxford OX2 6AX

Councillor Jane Hanna, Chair, Oxon Joint Health Overview and Scrutiny Committee
County Hall, New Road, Oxford OX1 1ND

11 November 2021

Dear Councillor Hanna,

New community audiology Any Qualified Provider (AQP) contract

On behalf of Keep our NHS Public, Oxfordshire I am writing to urge Oxfordshire JHOSC to consider referring the issue of the new community audiology Any Qualified Provider (AQP) contract to the Secretary of State for Health on the grounds that:

- The transfer of NHS provided ear wax removal services from GPs to an AQP service constitutes a significant change of service, and for some patients an actual cut in service. We believe that OCCG's argument that it does not amount to a change or cut because it was not previously commissioned by them is spurious. As the Healthwatch report and our own report (Preventable hearing Loss in Oxfordshire, March 2021) show, this amounts to a very real change/cut for many patients locally who had previously received a satisfactory service from their GP.
- The AQP service fails to meet NICE Guidance on ear wax removal ([Quality Standard 185](#) 2019) which states: "Adults with earwax that is contributing to hearing loss or other symptoms, or preventing ear examination or ear canal impressions being taken, have earwax removed in primary care or community ear care services" and makes no reference to age.
- The CCG failed to consult the public about its proposals and also failed to provide the relevant information for JHOSC to carry out their scrutiny function.
- The option to commission a locally enhanced GP service was not taken up by the CCG despite the findings of the Healthwatch report, which demonstrated the value patients placed on the previously provided GP service.
- By restricting the AQP service to some people over 55 the service is discriminatory on grounds of age. We do not accept that OCCG's argument that hearing loss in people under 55 is "not a straightforward condition" (and therefore requires referral to secondary care rather than ear wax removal services) applies to all under 55s with hearing loss. We believe there are significant numbers whose loss is due to wax build up and who should be included in the new service.
- The AQP service fails to meet the needs of people whose hearing loss is due simply to ear wax build up whatever their age, forcing them to pay for private treatment. This is discriminatory on grounds of income, and against the principles of the NHS.

I would re-iterate that our view is that ear wax removal should be included in the GP General Medical Services Contract and should be fully funded to take account of staff recruitment, training and acquisition of micro-suction equipment.

Yours sincerely

Bill MacKeith
Secretary, Oxon Keep Our NHS Public