

**Engagement Report for Clinical Commissioning Policies**

<b>Unique Reference Number</b>	D09X02
<b>Policy Title</b>	Bone conducting hearing implants (BCHIs) for hearing loss (all ages)
<b>Accountable Commissioner</b>	Jacquie Kemp
<b>Clinical Reference Group</b>	Specialised Ear Surgery
Which stakeholders were contacted to be involved in policy development?	<p>All CRG members and registered stakeholders</p> <p>Action on Hearing Loss</p> <p>Cochlear Ltd.</p> <p>Envoy Medical</p> <p>MED-EL</p> <p>Medtronic</p> <p>National Deaf Children Society (NDCS)</p> <p>Oticon Medical</p> <p>Otologics</p> <p>RNID</p> <p>Sonitus Medical</p> <p>The Ear Foundation</p>
Identify the relevant Royal College or Professional Society to the policy and indicate how they have been involved	Representatives of relevant Royal College or Professional Societies were contacted for Stakeholder Testing as part of the CRG.
Which stakeholders have actually been involved?	All of the key stakeholders listed above were invited to comment.

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<p>Explain reason if there is any difference from previous question</p>	<p>Not applicable.</p>
<p>Identify any particular stakeholder organisations that may be key to the policy development that you have approached that have yet to be engaged. Indicate why?</p>	<p>None.</p>
<p>How have the stakeholders been involved? What engagement methods have been used?</p>	<p>The draft policy proposition and evidence review was circulated to the full membership of the CRG and registered stakeholders for one week of their views, both to establish whether any amendments to the policy are required, and to understand from their perspective what the key questions to ask at consultation might be.</p> <p>Seven responses were received - two from CRG members and five from registered stakeholders. Both CRG members and stakeholders identified additional evidence for consideration by the Policy Working Group. One stakeholder requested that, in light of this, the period of public consultation be extended without specifying the amount required. None of the other stakeholders commented on the consultation duration.</p> <p>Two stakeholders noted that the policy proposition appears biased towards specific devices and manufacturers, with stakeholders requesting the policy be amended to remove device bias.</p> <p><u>The remaining responses are summarised as follows:</u></p> <ol style="list-style-type: none"> <li>1. One stakeholder requested the policy be updated to include an additional indication; otitis externa.</li> <li>2. Two stakeholders questioned the appropriate role of ACHAs in the treatment pathway, stating that other devices may be more appropriate as first lines treatment.</li> <li>3. Furthermore, one stakeholder requested the following changes be made to the policy:             <ul style="list-style-type: none"> <li>- Patient pathway be updated to clarify the type of trial device to be used.</li> <li>- Definitions be updated to redefine the unilateral hearing loss group to cover only SSD.</li> <li>- MDT to consider voice of patient.</li> </ul> </li> <li>4. Stakeholders further requested clarity on the caseloads required by centres in order to maintain service.</li> <li>5. Several stakeholders suggested that the policy use a voluntary BCHI registry to audit treatment outcomes.</li> <li>6. Stakeholders and CRG members noted the policy omits Percutaneous devices which make-up the majority of devices for the proposed indications.</li> </ol>

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<p>What has happened or changed as a result of their input?</p>	<p>The Policy Working Group (PWG) considered the responses about additional evidence and have recommended that the identified papers be reviewed. Due to policy development timelines, the PWG recommended this review be conducted during the period of public consultation.</p> <p>The PWG disagreed with stakeholders that the policy is biased towards a specific device or manufacturer, adding a note in the policy proposition to clarify this.</p> <p><u>The PWG responses to the remaining comments are as follows:</u></p> <ul style="list-style-type: none"> <li>- In response to (1) the PWG noted that otitis externa is included in the policy proposition.</li> <li>- In response to (2) the PWG noted that it is UK clinical practice to use ACHAs as first-line treatment.</li> <li>- In response to (3) the PWG agreed and updated the policy clarifying which device should be used in trial. However, the PWG felt the definitions and MDT role and scope is appropriate.</li> <li>- In response to (4) the PWG points to the service specification for further detail on requirements.</li> <li>- In response to (5) the PWG disagreed saying this registry does not fit the requirements of a service.</li> <li>- In response to (6) the PWG points to the additional evidence that will be undertaken during public consultation</li> </ul> <p>Additional stakeholders were identified and will be contacted during stakeholder testing.</p>
<p>How are stakeholders being kept informed of progress with policy development as a result of their input?</p>	<p>This engagement report, along with the updated policy proposition will be circulated as part of the public consultation. Stakeholders will be notified and invited to comment further.</p>
<p>What level of wider public consultation is recommended by the CRG for the NPOC Board to agree as a result of stakeholder involvement? (see Appendix One)</p>	<p>Public consultation for a period of 30 days as supported by stakeholders.</p>