



DEBATE PACK

Number CDP-0126, 29 June 2016

NHS England's Action Plan on Hearing Loss and the adult hearing service commissioning framework

On Thursday 30 June MPs will take part in a Westminster Hall debate on NHS England's [Action Plan on Hearing Loss](#) and the adult hearing service commissioning framework. This debate was scheduled by the Backbench Business Committee following a representation from Jim Fitzpatrick MP.

This debate pack includes recent press articles, Parliamentary material and links to further reading on audiology services.

[Watch Parliament TV: General debate on NHS England's Action Plan on Hearing Loss and the adult hearing service commissioning framework](#)

Alex Adcock
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The House of Commons Library prepares a briefing in hard copy and/or online for most non-legislative debates in the Chamber and Westminster Hall other than half-hour debates. Debate Packs are produced quickly after the announcement of parliamentary business. They are intended to provide a summary or overview of the issue being debated and identify relevant briefings and useful documents, including press and parliamentary material. More detailed briefing can be prepared for Members on request to the Library.

1. Summary

Hearing loss affects over 10 million adults and 45,000 children in the UK. This equates to 1 in 6 of the population. By 2031, it is estimated that 14.5 million people in the UK, approximately 1 in 5 of the population, will have a hearing loss.¹ The most common form of hearing loss is age-related, and the prevalence of deafness approximately doubles with every decade of life.²

The [NHS Choices website](#) provides some general information on the treatment of hearing loss:

The way hearing loss is treated depends on the cause and how severe it is.

In cases of sensorineural hearing loss, there are several options that may help to improve a person's ability to hear and communicate. These include:

digital hearing aids – which are available through the NHS

bone anchored implants – suitable for people who are unable to use hearing aids and for some levels of sensorineural hearing loss

middle ear implants – suitable for some people who are unable to use hearing aids

cochlear implants – for people who find hearing aids aren't powerful enough

lip reading and/or [sign language](#) – such as British Sign Language (BSL)

Conductive hearing loss is sometimes temporary and can be treated with medication or minor surgery, if necessary. However, more major surgery may be required to fix the ear drum or hearing bones. If conventional hearing aids don't work, there are also some implantable devices for this type of hearing loss, such as a Bone Anchored Hearing Aids (BAHAs).

In England local clinical commissioning groups (CCG) are responsible for commissioning the majority of audiology services (audiology is a specialism encompassing tinnitus and balance as well as hearing).

NHS England's [Action Plan on Hearing Loss](#), published in March 2015, sets out a case for action "to tackle the rising prevalence and personal, social and economic costs of uncorrected hearing loss and the variation in access and quality of services experienced by people with hearing loss." It proposes addressing this by promoting prevention of hearing loss and improving both the commissioning and integration of services.

The Action Plan sets out five key objectives including:

- Prevention
- Early diagnosis
- Integrated, patient centred management

¹ [Action on Hearing Loss, *Hearing Matters*, 2015](#)

² [The Chief Medical Officer's Report 2012](#)

- Ensuring those diagnosed do not need unscheduled care or become isolated
- Ability to partake in every-day activities including work.

The Action Plan stated that NHS England would work with partners to develop an overarching “Commissioning Framework for Hearing”. Further information on the development of the framework can be found from the [British Society of Audiology](#) (BSA) and the [British Academy of Audiology](#) (BAA). The BAA note they are currently working with other members of the Hearing Alliance to advise NHS England with regard to the writing of clinical service aspects of this commissioning framework:

Together with our Hearing Alliance partners we have been asked to provide input into pathways, outcomes/KPIs and service specifications for Paediatric and Adult hearing, Tinnitus and Balance. We have also been asked to provide examples of innovative pathways within Audiology demonstrating good practice.³

In 2015 Action on Hearing Loss published a report, [Hearing Matters](#), setting out actions the Government and NHS should take to improve the lives of people with hearing loss (this followed a report of the same name released in 2011). There have been a number of recent PQs about NHS audiology services and the communication needs of the hearing impaired, and these are set out later in this pack.

³ [BAA press release on NHS England Commissioning Framework, 22 February 2016](#)

2. Press articles

Telegraph, 14 February 2016

[Rationing of NHS hearing aids may fuel dementia epidemic](#)

Researchers say deafness forces the brain to work twice as hard to make up for the lack of sound

Health Service Journal, 3 November, 2015

[Staffordshire CCGs 'pause' hearing aid rationing consultation](#)

Guardian, 1 October 2015

[NHS to begin denying people hearing aids for first time](#)

North Staffordshire clinical commissioning group takes unprecedented step of refusing to give devices to mainly elderly patients with mild hearing loss

Health Service Journal, 18 September 2015

[More CCGs mull rationing hearing aids](#)

Health Service Journal, 29 July 2015

[NHS England will not stop hearing aid 'rationing' plan](#)

Guardian, 3 January 2015

[NHS accused of 'cruel' rationing of hearing aids](#)

3. Press releases

Action on Hearing Loss

[NHS hearing aid services are under threat](#)

People with hearing loss tell us that hearing aids are their lifeline; they are a highly cost-effective intervention with very clear clinical benefits. Hearing aids have been available on the NHS since 1948 and they are accepted to be the only viable treatment for people with adult-onset hearing loss. That is why we have been extremely concerned over recent months by proposals from a number of Clinical Commissioning Groups (CCGs) to make cuts to the provision of hearing aids – and why we have been campaigning hard to prevent these.

Vital hearing loss services under threat

Our new [Hearing Matters](#) report presents the most up to date facts and figures on deafness, tinnitus and hearing loss, and calls for hearing aids to remain free of charge on the NHS for everyone who needs them.

We are concerned that parts of the country may see major threats to provision.

Find out what we have been doing to fight proposed cuts in [North Staffordshire](#), [South Staffordshire](#), [Mid Essex](#), [South Norfolk](#), [Devon](#) and [Cornwall](#).

British Academy of Audiology

[NHS England Commissioning Framework](#)

February 22 2016

In March 2015, NHS England and DH published the Action Plan on Hearing Loss. In this report, further actions were highlighted in an attempt to take steps to make choice in hearing services work better for patients. NHS England and DH reported that time would be devoted to the development of a commissioning framework to provide commissioners with the best possible resource to shape services.

BAA are currently working with other members of the Hearing Alliance to advise NHS England with regard to the writing of clinical service aspects of this commissioning framework. Together with our Hearing Alliance partners we have been asked to provide input into pathways, outcomes/KPIs and service specifications for Paediatric and Adult hearing, Tinnitus and Balance. We have also been asked to provide examples of innovative pathways within Audiology demonstrating good practice.

NDCS are leading on Paediatrics with support from the BAA and Alliance members. The BTA are leading on tinnitus with clinical support being led by Michelle Booth, Vice President of the BAA, whose clinical expertise lies within the tinnitus field. The work on Adult hearing and

Balance is being led by Jagjit Sethi, President of the BAA and Rosemary Monk, BAA Board director for Service Quality, with input from BAA Board members, past and present, members from BSA special interest groups, charities, such as the Meniere's Society, and other BAA members who have specific relevant experience.

This is an important piece of work and we would like our members to be assured that BAA are working hard to provide NHS England with as much information as we can to ensure the resulting framework allows good quality audiology services, which meet the needs of people with hearing and balance disorders, to be commissioned in the future. As ever timelines are extremely tight with all information requiring submission by 3rd March 2016. We would like to thank all BAA members who have contributed their time and energy to this work: your efforts are greatly appreciated.

NHS England

[Healthcare leaders call for action on hearing loss](#)

23 March 2015

A new '[Action Plan on Hearing Loss](#)' to support services for deaf people and those with diminishing hearing has been produced by NHS England and the Department of Health.

The plan has been developed with a number of organisations including Public Health England, hearing loss charities and those whose hearing is directly affected.

Aimed at commissioners, Clinical Commissioning Groups, GPs and healthcare providers, the report identifies multiple health and social issues associated with hearing loss. It recommends ways that services for children, young people, working age and older adults living with hearing loss can be improved.

Hearing loss affects the development of language in children. It reduces chances of employment in adults and also increases the risk of other health problems such as mental health. Additionally, hearing loss and deafness reduces people's ability to care for their own and their families' long-term health conditions.

The report sets out five key objectives in the following areas:

1. Good prevention – for example reducing the numbers of young people and adults with noise induced hearing loss; including through immunisation and screening and utilising quality data to understand the social, financial and personal health advantages
2. Earlier diagnosis – for example improving outcomes for babies with hearing loss, increasing identification of the number of children and adults in at risk groups
3. Integrated services – for example reducing developmental and educational gaps due to childhood hearing loss and increasing

the number of children, young people and adults with a personalised care plan

4. Increased independence and ageing well – for example including access to technology including support by mobile or tele healthcare and improving access to wider health services from primary to end of life care
5. Good learning outcomes – for example including improving employment opportunities for young people and adults and reducing development and attainment gaps between deaf and hearing children

The direct cost to the NHS of managing hearing loss is estimated to cost up to £450 million a year. Clinical Commissioning Groups will continue to decide what is commissioned locally to address local hearing needs

Sir Bruce Keogh, Medical Director of NHS England, said: “This plan acknowledges and begins to address the growing problems of hearing loss which has significant economic, social and personal consequences including unemployment and feelings of isolation, exclusion and even depression.”

A hearing loss commissioning framework is also planned to ensure a more person centred and integrated approach and encourage best practice across hearing loss service commissioners.

Professor Sue Hill OBE, Chief Scientific Officer, said: “I was very pleased to lead the development of the Action Plan which represents a true partnership with all stakeholders and provides an excellent blueprint for bringing together a wide range of public organisations committed to improving services for children and adults with hearing loss. Hearing problems are a growing challenge with over 10 million people living with some form of hearing loss which impacts on their ability to fully participate in society which are addressed in this Plan.”

Brian Lamb OBE, Chair of the Hearing Loss and Deafness Alliance, said: “The impact of hearing loss on peoples overall health and well-being has been hugely underestimated until now. The Action Plan is a welcome and essential step to ensure that there is a more joined up approach across public services working with the hearing loss sector. We know that if people are supported to address their hearing loss early they will have better health and well-being leading to less pressure on health and social care services in the future. We have the technology and knowledge to address hearing loss; the Action Plan will help ensure we do so.”

Paul Breckell, Chief Executive of Action on Hearing Loss, said: “The Action Plan finally recognises hearing loss as a priority health issue, reflecting the scale of the condition that affects one in six people across the UK. We know that consistent, high-quality services are vital to ensure that people are able to seek advice from their GP, understand the impacts of, and best manage their hearing loss. We’re eager to ensure that the promised standards are developed as soon as possible, to avoid this much-anticipated Plan gathering dust on a shelf.”

4. Parliamentary coverage

4.1 PQs

[Sign Language](#)

Asked by: Fuller, Richard

To ask the Secretary of State for Work and Pensions, if his Department will bring forward legislative proposals to apply provisions equivalent to those of the British Sign Language (Scotland) Act 2015 to England.

Answering member: Justin Tomlinson

The Government currently has no plans to bring forward legislative proposals to apply provisions equivalent to those of the British Sign Language (Scotland) Act 2015 to England.

Last year the Minister for Disabled People published a written statement announcing that DWP would lead a Market Review of British Sign Language (BSL) interpreting provision, which would engage with Deaf people and stakeholder groups to examine opportunities that could strengthen and improve the market in the long term.

The Call for Evidence for this review opened in January 2016 and closed in March 2016. We received hundreds of comprehensive submissions of evidence, which we are currently analysing.

02 Jun 2016 | Written questions | 38138

[Hearing Impairment: Screening](#)

Asked by: Cooper, Rosie

To ask the Secretary of State for Health, if he will make it his policy to implement an adult hearing screening programme; and if he will recommend to the National Screening Committee that it undertakes a public health campaign on deafness and hearing loss.

Answering member: Alistair Burt

The UK National Screening Committee recommended in 2015 that screening for hearing loss in adults should not be offered because:

- although hearing loss in older adults is a serious public health problem the evidence is too limited to establish the type of screening test to be used, the severity of hearing loss to target, the age of the population to be screened and the frequency of screening;
- uncertainty on the effectiveness of the long term use of hearing aids and on the effectiveness of additional interventions aimed at improving the duration of hearing aid use; and
- the absence of randomised controlled trials of screening in the general population. Screening has not been shown to provide any hearing related improvement in quality of life in comparison to hearing loss identified in other ways.

There are currently no plans by Public Health England to run an awareness campaign on adult hearing loss.

21 Mar 2016 | Written questions | 31400

[Sign Language](#)

Asked by: Cooper, Rosie

To ask the Secretary of State for Business, Innovation and Skills, what assessment he has made of the effect of the devolution of skills policy to local authorities on the development of British Sign Language and sign language interpreting skills.

Answering member: Nick Boles

The Department for Business Innovation and Skills supports British Sign Language (BSL), lip reading and managing hearing loss provision in England through the Adult Education Budget. Providers receive funding for this provision as they do for all other courses.

In the academic year 2018/19, subject to readiness conditions being met, we intend to devolve the Adult Education Budget to certain Combined Authorities which have signed devolution deals[1]. In such areas, subject to necessary Orders being passed by Parliament, functions relating to the Adult Education Budget will transfer to the Combined Authority. The Combined Authority will assume responsibility for commissioning adult education provision, including in relation to BSL and sign language as it judges appropriate to meet local needs. Some providers, including Specialist Designated Institutions, are currently funded nationally. Their post-devolution funding arrangements will be confirmed in the coming months.

Skills provision in Scotland, Wales and Northern Ireland is a devolved matter and the assessment and adequacy of BSL provision is the responsibility of the devolved administrations.

[1] To date, deals have been agreed with: Sheffield City Region; Liverpool City Region; West Midlands; North East; Tees Valley; Greater Manchester; Greater Lincolnshire; East Anglia; West of England

30 Mar 2016 | Written questions | 31401

[Lip Reading: Education](#)

Asked by: Cooper, Rosie

To ask the Secretary of State for Health, what assessment he has made of the adequacy of the number of lipreading and managing hearing loss classes available; and if he will ask Public Health England to investigate the availability of such classes.

Answering member: Alistair Burt

The Department for Business, Innovation and Skills supports lipreading, British Sign Language (BSL) and managing hearing loss provision in England through the Adult Education Budget (AEB). Colleges and training providers have the freedom and flexibility to determine how they use their AEB, working with Local Enterprise Partnerships and local commissioners to determine the appropriate distribution of funding to best meet the needs of their local learners and businesses, this includes

both lip reading and BSL qualifications where there is a local need for these.

It is not Public Health England's role to investigate the availability of lip reading and managing hearing loss classes. The Department for Work and Pensions (DWP) is leading a review of the market for BSL and communication support for people who are deaf, deafblind or have a hearing loss. DWP is currently analysing the feedback received from a consultation on **Communications for people who are deaf or have hearing loss: market review** which ran from 4 January to 4 March.

15 Mar 2016 | Written questions | 30610

[Hearing Aids](#)

Asked by: Lord Hunt of Kings Heath

To ask Her Majesty's Government whether, in the light of research presented to the American Academy for the Advancement of Science concerning the impact of hearing loss on the development of dementia, they will instruct Clinical Commissioning Groups to stop restricting access to hearing aids.

Answering member: Lord Prior of Brampton

The Department does not issue advice to clinical commissioning groups (CCGs) on hearing aid provision. CCGs are responsible for the provision of conventional hearing aids for mild to moderate hearing loss within their local population. As with other services CCGs commission, they should take into consideration assessments of local need and any relevant clinical guidance from appropriate national bodies such as the National Institute for Health and Care Excellence.

14 Mar 2016 | Written questions | HL6519

[Hearing Impairment: Health Services](#)

Asked by: Fitzpatrick, Jim

To ask the Secretary of State for Health, which audiology services have applied for accreditation under the Improving Quality in Physiological Diagnostic Services programme.

Answering member: Alistair Burt

Specific data on which audiology services have applied for accreditation under the Improving Quality in Physiological Diagnostic Services (IQIPS) programme, which is managed by the Royal College of Physicians, are not available. According to the latest IQIPS report, published in October 2015, there are currently 183 audiology services registered with the programme. Further information is available at the following link:

www.iqips.org.uk

05 Feb 2016 | Written questions | 24688

[Hearing Aids](#)

Asked by: Shannon, Jim

To ask the Secretary of State for Health, when he expects transfer devices that enable people with single-sided deafness to hear sounds from their deaf ear in their other ear to be available through the NHS.

Answering member: Alistair Burt

The information requested on the number of people with single-sided deafness is not available in the format requested. However, the following table shows the number of patients admitted to hospital with a diagnosis of single-sided deafness in the last five years in England.

Year	2010 - 2011	2011 - 2012	2012 - 2013	2013 - 2014	2014 - 2015
Male	277	286	295	336	301
Female	299	279	310	336	332

This data may include the same person being admitted to hospital on more than one occasion and the data excludes diagnoses that were made outside of secondary care.

The Action Plan on Hearing Loss was jointly published in March 2015 by the Department and NHS England. It sets out the case for taking action on the rising prevalence and personal, social and economic costs of uncorrected hearing loss and the variation in access and quality of services experienced by people with hearing loss.

Transfer devices are available through the NHS. NHS England is developing commissioning guidance on the provision of hearing loss services, as part of its commitments in the Action Plan on Hearing Loss. The guidance will support clinical commissioning groups when making local decisions and help improve equality of access and patient experience.

14 Dec 2015 | Written questions | 19104

[Hearing Impaired: Screening](#)

Asked by: Shannon, Jim | **Party:** Democratic Unionist Party

To ask the Secretary of State for Health, if he will make it his policy for the NHS to screen all people over the age of 55 for hearing loss.

Answering member: Alistair Burt

The UK National Screening Committee (UK NSC) advises Ministers and the NHS in all four countries about all aspects of screening policy.

In 2009-10 the UK NSC recommended that routine screening for adult hearing loss should not be offered because of the lack of evidence to warrant a screening programme. In particular:

- it is not clear what the test should be;

- there is no agreed time or schedule for carrying out the testing;
- the acceptability of the test and in particular the treatment (hearing aids) is unclear; and
- there had been no randomised trials of screening.

As part of its routine evidence review process the UK NSC has just reviewed its recommendation on screening adults for hearing loss again. Ministers expect to receive a recommendation from the UK NSC shortly.

18 Dec 2015 | Written questions | 20093

[Hearing Aids](#)

Asked by: Fitzpatrick, Jim

To ask the Secretary of State for Health, what assessment his Department has made of the recommendations contained in the report from the Ear Foundation entitled Bending the Spend, published in October 2015; and if he will make a statement.

Answering member: Alistair Burt

The Department in conjunction with NHS England jointly published the Action Plan on Hearing Loss in March 2015. The Action Plan sets out the case for action to tackle the rising prevalence and personal, social and economic costs of uncorrected hearing loss and the variation in access and quality of service.

The areas highlighted within the Bending the Spend report concur with and further strengthen those in the Action Plan. This includes the need to assess strategies for the earlier identification and management of hearing loss and the development of commissioning guidance to underpin the Action Plan, which NHS England will co-produce with stakeholders such as the Ear Foundation.

A Cross System Oversight Group had its first meeting on 14 October 2015. This will not only review and monitor progress of the implementation of the Action Plan, but will also provide a forum for government departments, arm's length bodies and stakeholders within the hearing loss community to engage with each other to ensure connections are made and maintained across the system.

Membership of this group includes the Hearing Loss and Deafness Alliance of which the Ear Foundation is a member.

28 Oct 2015 | Written questions | 12559

[Hearing Aids](#)

Asked by: Shannon, Jim

To ask the Secretary of State for Health, what steps he is taking to ensure the availability of hearing aids.

Answering member: Alistair Burt

Clinical commissioning groups (CCGs) are responsible for the provision of conventional hearing aids for mild to moderate hearing loss within their local population. As with other services CCGs commission, they

should take into consideration assessments of local need and any relevant clinical guidance from appropriate national bodies such as the National Institute for Health and Care Excellence.

03 Jun 2015 | Written questions | 56

[Hearing Impairment](#)

Asked by: Reed, Mr Steve

To ask the Secretary of State for Health, how much the NHS has spent on audiology services in each of the last five years.

Answering member: Norman Lamb

Information on spend for audiology services and specific procedures for hearing problems are not available in the format requested. The following table provides NHS programme budgeting figures on 'problems of hearing' for the five year period 2008-09 to 2012-13, which is the latest available data.

Year	2008-09	2009-10	2010-11	2011-12	2012-13
Expenditure (£ billion)	0.42	0.50	0.45	0.46	0.46

More information about programme budgeting data can be found on the NHS England website at the following link:

<http://www.england.nhs.uk/resources/resources-for-ccgs/programme-budgeting/>

26 Mar 2015 | Written questions | 228770

[Hearing Impairment](#)

Asked by: Gwynne, Andrew

To ask the Secretary of State for Health, which primary mutual health services for deaf people have been commissioned by all clinical commissioning groups; and which such services have been commissioned by each such group.

Answering member: Norman Lamb

Information on which health services for deaf people have been commissioned by all clinical commissioning groups, and which such services have been commissioned by each group, is not held centrally.

11 Mar 2015 | Written questions | 226256

[Hearing Impairment](#)

Asked by: Gwynne, Andrew

To ask the Secretary of State for Health, if he will develop a national strategy for specialist health services for the deaf.

Answering member: Norman Lamb

Clinical commissioning groups (CCGs) are responsible for commissioning services for deaf and deafblind people with acquired

neurological impairments to meet the needs of their local populations. The CCG's decisions are based on clinical insight and knowledge of local healthcare needs.

To support this, the commissioning of accredited services is considered good practice and NHS England encourages it. Audiology services are making good progress towards accreditation. The Royal College of Physicians and the United Kingdom Accreditation Service are recording and monitoring the number of services that are registering for and working towards accreditation as well as those services that are achieving accreditation. The numbers in these categories is increasing.

The Improving Quality in Physiological Services programme is raising the profile of accreditation and quality assurance schemes for physiological diagnostic services. A mapping exercise is underway by NHS England to identify those services that are accredited or working towards accreditation.

11 Mar 2015 | Written questions | 226255

[Hearing Impairment](#)

Asked by: Godsiff, Mr Roger

To ask the Secretary of State for Health, what steps he is taking to ensure that people with hearing loss are able to access audiology service regardless of where they live.

Answering member: Norman Lamb

Local commissioners are responsible for the provision of audiology services with the exception of a small number of specialised services which are commissioned nationally by NHS England. Commissioners should take into consideration assessments of local need and any relevant clinical guidance, which may include guidance from appropriate national bodies such as the National Institute for Health and Care Excellence.

04 Feb 2015 | Written questions | 222489

4.2 Debates

[Health: Deaf People](#)

31 Mar 2014 | HL Deb | 753 cc820-836

[Hearing Loss in Adulthood](#)

12 Nov 2013 | 570 cc928-936

[Deaf People: Public Services](#)

24 Oct 2013 | 748 cc1258-1274

4.3 EDM

[HEARING LOSS](#)

That this House is aware that hearing loss is a serious health condition which can and often does have a significant adverse impact on people's health, wellbeing and quality of life, with at present an estimated 10 million people in the UK with such a health prognosis facing the risks of developing other conditions such as dementia or depression; recognises that NHS audiology services provide vital support for people who suffer hearing loss and related adverse conditions, allowing them to retain their independence, maintain relationships and stay in employment, giving them the essential support to help them cope; notes the World Health Organisation's predictions that by 2030 adult onset hearing loss will be in the top 10 disease burdens in the UK; acknowledges the forthcoming publication of the National Action Plan on Hearing Loss; but calls on the Government to request the NHS to commission NICE to prioritise the immediate development of a hearing loss clinical guideline to establish and maintain quality standards for patients suffering hearing loss.

04 Feb 2015 | 772 (session 2014-15)

Primary sponsor: Meale, Alan

5. Further reading

NHS England, [Action Plan on Hearing Loss](#), March 2015

Action on Hearing Loss, [Hearing Matters](#), 2015

Monitor, [NHS adult hearing services in England: exploring how choice is working for patients](#), March 2015

National Community Hearing Association (NCHA) and the British Society of Hearing Aid Audiologists (BSHAA),

[Commissioning to Meet Hearing Need and for Better Access, Outcomes, Quality and Choice](#)

[Community Based Adult Hearing Services](#)

[Guidance for Commissioners and Providers](#)

June 2014

Deloitte Access Economics, Action on Hearing Loss,

[Evaluation framework for hearing services in England](#),

January 2013

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