

# **Northern Ireland Audiology Services Patient Survey 2018**

## **Executive Summary**

**A Survey of Audiology Patient  
Experience up to five years following  
the fitting of a Hearing Aid**

## Aims and objectives

The aim of this patient survey is to evaluate user experience, post aid fitting and assess the outcome as part of Adult Audiology Quality Standards.

The objectives were agreed as:

The Health and Social Care Board and Action on Hearing Loss to carry out a third survey of the post aid fitting experience of 500 established Audiology Users who had a hearing aid fitted during the period October 2013 to September 2017.

## Methodology

Each Trust selected a total of 100 patients split across all of their sites who had been service users between 18 months and 52 months. 25 patients were identified in four twelve month consecutive periods.

The questionnaires were issued to the sample group with a covering letter (see Appendix 2) in early February 2018 with a deadline for response by the beginning of March 2018.

The Group aimed to achieve a 40% response rate to enable a robust analysis. The survey achieved a very high rate of return of 41% (207 responses).

## Acknowledgements

This report was commissioned by the Health and Social Care Board and carried out by Action on Hearing Loss.

We would like to thank the Heads of Service and Audiology staff in each of the 5 Health and Social Care Trusts for their cooperation and support in delivering this survey. We would also like to thank every service user who took the time to complete the survey.

## Summary of findings

The overall response from patients on their experience of Audiology services was a very positive one.

It is evident from the results of this survey, that Audiology service users in Northern Ireland highly rate the service they receive from their local Audiology clinics and are very satisfied with the engagement with staff.

**“Everyone along the way from doctor to fitting was so helpful – wonderful to have such caring people.”**

The majority of people returning questionnaires were aged over 65 with an increasing number of people aged over 80 responding to the survey. This may indicate that more older people are using Audiology services, which reflects the ageing demographic of the population.

Almost all patients who returned the questionnaire were white, with a very small number not providing information on their ethnicity.

A third of patients reported mobility problems.

While most people use the telephone to contact Audiology services there is evidence of an increasing preference for other means of access, such as email, SMS and post.

Almost all respondents confirmed that they were aware of how to contact their local Audiology service.

The majority of patients find their local Audiology clinic to be in a convenient location, and easily located onsite, with a small number of patients not being aware of a change of location of Audiology services in Omagh, following the relocation to Omagh Hospital and Primary Care Complex

Almost all patients found their experience at reception and in the waiting area to be positive.

In advance of their appointment, Audiology Quality Standards recommend that patients are provided with information about what to expect at their appointment, and how to request communication support if required. Almost half of patients said they did not receive this information.

In terms of information provided to patient at their appointment, the majority of patients said they were given the results of their assessment, knew what was happening at each appointment, were informed about inserting and wearing their aid and how to clean and maintain it.

**“When tested for hearing aid everything explained clearly and the same when I received the hearing aid.”**

Less people said they were informed about the different settings on their hearing aids than in the last survey. This may relate to improvements in technology, which does not require patients to change the settings themselves.

The majority of patients said they were informed about how to change a battery and order replacement batteries.

A relatively small number of people (63 out of 207) said they had experienced problems with their hearing aid, common issues being buzzing and squealing noises, issues with the tubing and the aid being uncomfortable to wear.

**“I find it difficult as the tubing keeps coming out, and I find it uncomfortable, I have a lot of problems with wax in my ears”**

The majority of patients wear their hearing aids for at least 4 hours every day, and said they felt their ability to communicate and to socialise had improved, demonstrating that the majority of patients are getting significant benefit from their aid.

**“A very good service, I could not cope without my hearing aid. It changed my life and my wife’s life too!”**

The survey found that there have been improvements since the last survey in 2014. More patients reported that they received information relating to common problems, wax management and ear care and the need to change tubing regularly - suggesting that the recommendations from the last survey have largely been acted upon by Audiology services. The majority of patients said they received the information they felt they needed to use their hearing aid properly.

There are areas where further work is required. Two thirds of patients said they were not provided with an Individual Management Plan, which is a requirement of Audiology Quality Standards.

A third of patients said they were not given information on changing the tubing regularly, wax management and ear care, how to get a broken hearing aid repaired, or common problems they might face in using their hearing aid.

**“At your initial appointment for the hearing aid you are given a lot of information that would probably be more useful after you’ve had the hearing aids for a month”**

While the majority of patients said they were satisfied with the aftercare they received, a quarter of respondents said they would like further support, which is an increased number from the last survey.

While more people than in the last survey said they were aware of other organisations which could provide support, the numbers are low (22%). Yet just over half of patients said they were told about other sources of information and help. Three quarters said they did not know where to go to access specialist equipment

## **Conclusions**

It is clear from the survey responses that Audiology patients highly rate the quality of service they receive at their local clinic and find staff to be professional, caring and helpful.

The results show that Audiology service users are ageing, which reflects the ageing demographic and has implications for workforce planning in the future.

Almost all respondents were white, which gives rise to the question of why more people from ethnic minority communities are not represented in the survey.

One third of respondent have mobility issues. The vast majority of people have stated that they find the location of their Audiology clinic to be convenient.

Most respondents said they were not given an Individual Management Plan. Feedback from Audiologists suggests that this is because such plans are discussed verbally but not given to the patient in a hard copy format.

While the provision of information to patients has improved in the last 4 years, there remain issues on which patients do not feel informed, in particular:

- how often an ear mould should be changed, if appropriate
- how to change the tubing
- different settings on their hearing aid, if appropriate
- wax management and ear care
- how to fix common hearing aid problems

Feedback from Audiologists in the 5 Health and Social Care Trusts suggests that they do provide this type of information verbally to patients during their appointment. However, the survey suggests some patients are not responding to information provided in this way.

In relation to information and signposting to other sources of support, information and equipment, many patients said they were not aware of where to find other sources of help or specialist equipment. This suggests that the way this information is provided is not always effective.

## Recommendations

### Before the appointment

Audiology services should ensure that all patients are provided with written information in advance of their appointment, clearly stating what the process involves and how to book communication support, if required

### During the appointment

Audiology services should provide information to patients, in an accessible and timely way, about:

- how often an ear mould should be changed, if appropriate
- how to change the tubing
- different settings on their hearing aid, if appropriate
- wax management and ear care
- how to fix common hearing aid problems

Individual Management Plans should be offered to patients in a hard copy format.

### After the appointment

Audiology services should provide information to patients, in an accessible and timely way, about other organisations and services that can provide information, support and specialist equipment.

It is recommended that a patient information pack should include information on Sensory Support Services, voluntary organisations and details of repair clinics, to be sent out to patients 2 months after the appointment.

As per the Quality Standards, Audiology services should offer patients a follow up appointment 3 months after fitting, to include a review of their Individual Management Plan.

A review appointment should be offered to all patients every 3 years.

### **General**

Audiology departments should consider introducing and promoting an SMS service for patients contacting the department.

Information in minority languages should be made available.

Audiology service providers should seek funding for a domiciliary service for patients with mobility problems.

The frequency of the patient experience survey should be changed to take place every 2 years.

