

To: FOI officers via email

October 2023

**Paediatric audiology services survey 2023**

This is a request for information under the Freedom of Information Act. Please confirm that you have received this request.

The National Deaf Children's Society works with public services to ensure deaf children get the support they need to thrive.

The information requested may relate to services which are held in more than one department e.g. ENT services. **As you remain legally accountable for these services, we still expect you to collate the information, rather than referring us on.**

**This is part of a UK-wide request, using a standardised format to ensure consistency. Please use the box at the end of this survey to provide any context or background to any of your answers.**

If the information cannot be provided in whole or in part, please justify all omissions by reference to the specific exemptions of the Act. We look forward to your response promptly but no later than 20 working days. Please email any enquiries to [Listenup@ndcs.org.uk](mailto:Listenup@ndcs.org.uk).

National Deaf Children's Society

## Questions for paediatric audiology services: 2023

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**Please only complete this survey if your service provides audiological services to children and young people. This may include diagnostic hearing assessments and monitoring of hearing, hearing aid provision, and ongoing audiological management of deaf children (and may include assessment and management of other audiological conditions). This may be hospital or community based.**

It is not necessary to complete this survey if your audiology service **only** provides hearing **screening**, e.g. newborn hearing screening or school screening and refers children on to other services for full assessment and hearing aid provision when necessary.  
Please base your answers on the service provided **as of 30 September 2023**.

### Section 1: About your service

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**Please answer the questions below based on the situation as of 30 September 2023.**

Please provide the following information:

Name of person completing survey	Avril Watson
Your role	Audiology Services Manager
Your email address	Avril.watson@southerntrust.hscni.net
Your telephone number	028 37560872
Name of your audiology service	Southern Health & Social Care Trust Audiology Services

If you are commissioned to provide an audiology service for another Health and Social Care Trust/s please provide details of all the Trusts that you provide services for below. **Please write names in full and expand acronyms.**

Not commissioned
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If you provide the services for another Trust/s, do these include diagnostic hearing assessments and hearing aid provision for children? Yes/no

If you would like to report separately for a service you deliver for another Trust, please contact us on [Listenup@ndcs.org.uk](mailto:Listenup@ndcs.org.uk) for an additional link.

Please complete the table below showing the locations where your Trust provides paediatric audiology services:

<b>Name of Health and Social Care Trust</b>	<b>Hospital or Clinic or site name</b>	<b>Address</b>	<b>Postcode</b>	<b>Is your service jointly delivered with an adult service? (for example, does the service share clinical staff/a reception/ waiting area/share a budget/ other?)</b>  <b>Please state which:</b>
SHSCT	Craigavon Area Hospital	68 Lurgan Road Portadown Co Armagh	BT63 5QQ	Adult services and Paediatric services share the same Staff, facilities, waiting area, reception, budget. All staff can have adult input but only the Staff with paediatric training are involved with Paediatric services.
SHSCT	South Tyrone Hospital	Carland Road Dungannon Co Tyrone	BT71 4AU	As above
SHSCT	Daisy Hill Hospital	5 Hospital Road Newry Co Down	BT35 8DR	As above

## Section 2: Your caseload

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1. How many deaf children are there within your case load?

	On 30 September 2023
Number of births per annum your service covers	4779 Births in SHSCT
Total number of children with permanent deafness (PCHI) on your caseload as of 30 September 2023 - see definition below *	Not available
- <b>Of this total, how many of the children with PCHI were identified via referral from the Newborn Hearing Screen from 1 October 2022 to 30 September 2023</b>	8
- <b>Of this total, how many of the children with PCHI were identified via other referral routes e.g. referral from GP, HV, school screen etc. from 1 October 2022 to 30 September 2023</b>	Not available

\* **PCHI** should include:

- All children who have a **permanent** sensorineural or permanent conductive deafness (unilateral or bilateral), at **all levels** from mild to profound.
- Those with permanent conductive deafness **to include** those children with a syndrome known to include permanent **conductive** deafness, such as microtia/atresia, middle ear malformation, or those who have had middle ear surgery such as mastoidectomy.
- **Please do NOT include children known to have Auditory Neuropathy Spectrum Disorder (ANSO) here as PCHI.**

2. What age group does your service cover? Select one.

<b>Age</b>	
0 - 16	
0 - 18	<b>Paediatric service is 0-18 years. Adult service is &gt;18 year. Services also include Special Needs patients.</b>
0 - 19 and also specific groups of young adults such as those with special educational needs	

### Section 3: What services do you provide?

Please answer the questions in this section based on the situation as of 30 September 2023.

3. What options do you have for assessing the hearing of complex/difficult to test children?

	Do you offer this option?	If yes, what specific training and protocols do you have for this option?
Specific clinics e.g. with longer clinic times/more experienced staff	Yes	Protocols in place for children with complex needs,/ASD. More experienced Staff only see these children.
Use of non-calibrated stimuli (e.g. non-calibrated, but band-pass filtered music)	No	
Sedated ABR	No	
ABR under anaesthetic	Yes	Staff have completed recognised specialist training and attend refresher training every 3 years as recommended
Other, please specify . ABR under natural sleep	If appropriate	As above

Comments- please use this space to provide any additional information.

4. What options are included in the current management pathway in your service for **temporary conductive** hearing loss?

	<b>Do you offer this option?</b>	<b>What alternative do you offer if a child is on the waiting list?</b>
Air conduction hearing aids	<b>Yes</b>	<b>X</b>
Bone conduction hearing aids	<b>Yes</b>	<b>X</b>
'Watch and wait'	<b>Yes</b>	<b>X</b>
Grommets	<b>Yes</b>	<b>Hearing Aids whilst waiting on grommet insertion</b>
Otovent	<b>Yes</b>	<b>X</b>
Other, please specify		<b>X</b>

5. Do you provide hearing aids for the following groups of children? If you do not provide hearing aids for these groups, please explain why.

Group of children	Do you provide hearing aids for this group?	If no, please explain why hearing instruments are not provided to this group or whether only provided in certain circumstances (for example, only moderate UHL or bilateral ANSD.)
Temporary conductive loss	Yes	
Unilateral loss	Yes if appropriate	
Mild loss	Yes	Watchful wait is applied as per NICE guidance or Hearing Aid use if speech delay and parental concern
Moderate loss	Yes	
ANSD	If appropriate	
Other, please specify		

## 6. What additional/'non-standard' paediatric services do you offer?

<b>Additional practice</b>	<b>Do you offer this service in-house?</b>	<b>If no, do you refer children elsewhere for this service?</b>	<b>Where are children referred to (i.e. type and name of service)?</b>
Wax removal performed by audiologists	No	Yes	ENT
Tinnitus assessment/management	Yes		Provided jointly with CAHMS Team
Hyperacusis assessment/management	Yes		Provided jointly with CAHMS Team
Fitting and support for implantable devices other than CIs (e.g. BAHAs, middle ear implants)	No	Yes	RBHSC regional Implant Centre
Paediatric vestibular service	No	Yes	ENT
Assessment/management of listening difficulties in the absence of peripheral hearing loss/APD	No	Yes	ENT
Other, please specify			

#### Section 4: Accessibility

Please answer the questions in this section based on the situation as of 30 September 2023.

7. Which of the following forms of communication are available to patients for making bookings and enquiries?

	<b>Do you offer this option?</b>	<b>What is your target service response time?</b>	<b>What is your actual service response time?</b>	<b>Is anything preventing you from reaching your target?</b>
Email	<b>Yes</b>	<b>48hours</b>	<b>24hours</b>	<b>No weekend cover</b>
Text message	<b>Yes</b>	<b>48hours</b>	<b>24hours</b>	<b>No weekend cover</b>
Web form	<b>No</b>			
Online diary/booking system	<b>No</b>			
Telephone	<b>Yes</b>	<b>48hours</b>	<b>24hours</b>	<b>No weekend cover</b>
British / Irish Sign Language	<b>Yes</b>	<b>48hours</b>	<b>24hours</b>	<b>No weekend cover</b>
Other, please specify				

8. What deaf awareness training does your staff have?

	<b>One off training</b>	<b>Regular updates</b>
<b>Audiologists</b>	Yes	Available
<b>Reception/administrative staff</b>	Yes	Available

### Section 5: Waiting times

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9. In the last year (1 October 2022 to 30 September 2023) how many days **on average** did patients wait for the following?

We understand that waiting times are difficult in every area at the moment and services are working hard to clear backlogs. Data provided will be analysed with these considerations in mind and will help us to understand where services may be struggling.

	<b>Number of days</b>
Referral to first diagnostic assessment from the newborn hearing screening pathway	17.5
Referral to first diagnostic assessment for those not referred from the newborn hearing screening pathway	58

If you would like to add any information about your service and the data provided on waiting times, please use the free text box below.

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## Section 6: Quality assurance and improvement

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10. What methods do you use for quality assurance and improvement? Select all that apply.

A local programme of audit against national quality standards	Yes
IQIPS accreditation	No
Internal peer review (ABR)	Yes
Internal peer review (behavioural testing)	No
Internal peer review (HA fitting)	No
External peer review (other than ABR- this will be asked below)	No
Case studies/journal clubs	No
Regional network to share best practice	No
Reporting all PCHIs on SMART 4 Hearing	Yes
Audit cycle	Yes
Peer competency checks	Yes
Patient/service user surveys/focus groups	No
Other, please specify	

11. Do you participate actively in external regional peer review for ABR? Yes

If yes, complete the table below. If no, please explain why -

Do you regularly submit traces of all hearing losses and a sample of discharge?	How do you act on the evidence you receive?	How many ABR testers are in your service?	How many of the ABR testers in your service actively take part in peer review?
Yes	Apply it to practice and learn for future cases	2 + 2Locum (previous employees)	4

### Section 7: Staffing and training

12. How many substantive **full-time equivalent (FTE)** qualified audiologists are in your service in total? **11.9 WTE band 5 and above**

13. How many **FTE clinical** staff does your **children's** audiology service have at the following levels as of 30 September 2023?

Please express part-time roles as a fraction of a full-time role e.g. one full time role and a part time role of three days would be 1.6 FTE. If a role is split between children's and adult's audiology services, please **assign (or estimate)** an FTE figure to the time spent working with **children**.

(We understand that staff may cover paediatric ENT clinics as well as audiology's own clinics, but we are interested in changes in staffing levels year on year.)

Level	Total number of substantive posts (FTE)	Of the total number of posts (FTE), how many are vacant?
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<b>Band 2</b>	0	
<b>Band 3</b>	0	
<b>Band 4</b>	3 in an assistive role only	0.6 vacant
<b>Band 5</b>	2 in an assistive role only	
<b>Band 6</b>	6	3 vacant, 2 Maternity Leave, 1.4 see school age children only via ENT
<b>Band 7</b>	4.5 Have Lead roles e.g Tinnitus, HA service, ERA, ENT	0.5 on Maternity Leave
<b>Band 8a</b>	1	
<b>Band 8b</b>	0	
<b>Band 8c</b>	0	
<b>Band 8d</b>	0	
<b>Band 9</b>	0	
<b>Doctor (e.g. paediatrician, AVP)</b>	0	

14. Has there been a reduction in the number or skill level of staff compared to last year? Yes

If no, please go to the next section.

If decreased, what are the reasons for this? Select all that apply.

Unable to recruit staff	Yes
Posts have been frozen or deleted	Converted to trainee posts due to recruitment difficulties
Staff leaving or reducing hours	Yes
Maternity leave or sick leave	Yes
Trust decision or cost improvement plan	no
No capacity to train new staff	Limited capacity
Other, please specify	

Please use this space to provide more information about your responses above.

**There are 3.0 WTE retirements planned for 2024 and 0.2 WTE x2 Locum Staff (previous retired employees)**

15. What steps have you taken to address any staffing issues? Please describe briefly.

**Offer training positions for trainee Audiologists**

### Section 8: Collaboration section

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Please answer the questions in this section based on the situation as of 30 September 2023.

16. Which children do you refer to the local specialist education service for deaf children in your area? Select all that apply.

	<b>Aided children Yes, we refer these</b>	<b>Unaided children Yes, we refer these</b>
Children with a severe/profound hearing loss	Yes	Yes
Children with a moderate sensorineural hearing loss	Yes	Yes
Children with a mild sensorineural hearing loss	Yes	Yes
Children with permanent or long-term conductive hearing loss	Yes	Yes
Children with temporary/fluctuating conductive hearing loss	Yes	If appropriate
Children with a hearing loss but who are <b>unaided</b>	Yes	Yes

Unilateral hearing loss	Yes	Yes
ANSD	Yes	Yes
Other		
Don't know		

We recognise that education referral criteria are outside the remit of audiology services, but we are grateful for your help collecting this useful information.

If other, please provide more details.

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17. Are you able to routinely refer directly to the following non-audiology/ external professionals?

	<b>Yes/no</b>	<b>Which children do you refer?</b>
Speech and language therapy	No	
ENT	Yes	As appropriate
Family support/social services	Yes	As appropriate
Safeguarding	Yes	As appropriate

Clinical psychology/CAMHS	Receive only	Report to when appropriate
Deaf CAMHS	Receive only	Receive only
Paediatrician/developmental assessment service	Yes	CMV
Other third sector/community organisations	Education – Sensory Support	As appropriate

Are there any other services you refer to/struggle to refer to? Please comment.

all that apply.

18. Which families do you routinely signpost to the National Deaf Children's Society? Select

	<b>Yes, we signpost these families</b>	<b>Routinely provide National Deaf Children's Society information</b>
Children with a severe/profound hearing loss	Yes	Yes
Children with a moderate sensorineural hearing loss	Yes	Yes
Children with a mild sensorineural hearing loss	Yes	Yes
Children with permanent or long-term conductive hearing loss	Yes	Yes
Children with temporary/fluctuating conductive hearing loss	If appropriate	If appropriate
Children with a hearing loss but who are <b>unaided</b>	Yes	Yes
Unilateral hearing loss	Yes	Yes

ANSD	Yes	Yes
Other		
Don't know		

19. When do you signpost families to the National Deaf Children's Society? Select all that apply.

	<b>Yes, we signpost at these times</b>
At diagnosis	Yes
Whenever a family has an issue that the National Deaf Children's Society may be able to support	Yes
At every appointment	No listed in all literature
Other	

### Section 9: Patient engagement

Please answer the questions in this section based on the situation as of 30 September 2023.

20. How do you prepare young people for transition to adult services? Select all that apply.

Start talking about the transition process from age 14	Yes
Completed a trust transition assessment/process	Yes
Provide information on the adult service for young people	Yes
Hold joint appointments with both paediatric and adult audiologist present (virtual or face to face)	Yes
Offer an appointment with the adult service before being discharged from the children's service	yes
Offer young person the opportunity to come into the clinic without parent/carer if appropriate	no
Hold transition event or clinic for young people	no
Visit local schools to offer sessions to share information with young people about deafness, independence and transition etc.	no
Other, please specify	

21. How many appointments were classed as Was not Brought (WNB) or Did Not Attend (DNA) in the period 1 October 2022 to 30 September 2023?

Please provide the total number of appointments offered in the period 1 October 2022 to 30 September 2023 (including all appointment types for children) **and** the WNB/DNA rate (%).

<b>Total number of appointments offered in the period 1 October 2022 to 30 September 2023 (all appointment types for children)</b>	<b>Percentage WNB/DNA</b>
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<b>2025 under age 4 years</b>	Approx.. 15%. Report drawn from new IT system and unable to be verified.
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22. Please indicate which strategies are used to reduce missed appointments. Select all that apply.

Partial booking	
Text reminders	To be introduced shortly with new system
Phone reminders	Yes
Other - please specify	
None	

### Section 10: Issues affecting service provision

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23. Are there any areas where demand has changed significantly in the last year?

	Has demand increased in this area?	Has demand decreased in this area?	What do you think has caused this?	What support would help you?
Routine pre-school assessments	yes	no	Increased school nursing referrals and backlog from	More accommodation + Staffing

			SLT and Paediatrics following Covid.	
Routine school aged assessments	yes	no	As above	More accommodation + Staffing
Children requiring complex assessment techniques/multiple appointments	yes	no	Backlog from other services e.g ASD assessments	More accommodation + Staffing
Children requiring sedated ABR/ABR under GA	yes	no	As above	More accommodation + Staffing
Children with listening difficulties in the presence of normal hearing	no	no		More accommodation + Staffing
Self-referrals	no	no		More accommodation + Staffing
Referrals from school screen	yes	no	As above	More accommodation + Staffing
Other, please specify				

24. We are keen to promote and share good practice. Is there any good practice or an innovative solution in your service that you would like to share with us?

We completed a 4 week Pilot in January 2023 as waiting times for children were increasing to close to a year. We prioritised this group of pre lingual children as the most at risk group to focus our resources. Completing the pilot resulted in earlier diagnosis and intervention for children who required it and reduced waiting time to within target time of 9-13 weeks.

25. Are there any challenges to your service?

Challenges you are experiencing now	Challenges you anticipate in the future
<p><b>ENT Demands are high which requires reallocation of our staff from Audiology to cover this service</b></p> <p><b>Long Term Staff Sickness and Maternity Covers not being filled</b></p> <p><b>Vacant staff posts no being filled</b></p> <p><b>Demand on staff training trainee Audiologist as no Audiology Degree course in NI</b></p> <p><b>Accommodation availability for testing to address waiting lists</b></p>	<p>ENT Demands are high which requires reallocation of our staff from Audiology to cover this service</p> <p>Vacant staff posts no being filled</p> <p>Demand on staff training trainee Audiologist as no Audiology Degree course in NI</p> <p>Accommodation availability for testing to address waiting lists</p>

26. Please use the box below to provide any context or clarification to any of your answers in this survey. Please also use this box if there is anything else you'd like to add.

If you have concerns about anything happening in your service that you'd like to speak to us about in confidence, please email [Listenup@ndcs.org.uk](mailto:Listenup@ndcs.org.uk) or contact our Helpline for specialist advice on: 0808 800 8880 or [helpline@ndcs.org.uk](mailto:helpline@ndcs.org.uk) .

**Many thanks for returning this survey. We are very grateful for your time.**