

# IN THEIR OWN WORDS

## INSIGHTS AND IDEAS FROM ADULT HEARING SERVICE PATIENTS

**Franki Oliver – Audiology Manager, RNID**  
**BAA Heads of Service Meeting 12/07/24**



# RNID TEAM



*Crystal Rolfe*  
*Director of Strategy*



*Lydia O'Connor*  
*Health Programme Lead*



*Lola Russell*  
*Programme Lead*



*Hannah Semeraro*  
*Insight & Evidence Lead*



*Franki Oliver*  
*Audiology Manager*



*Richard McKearney*  
*Audiology Adviser*



*Alastair Moore*  
*Technology Lead*

**Our expertise covers  
audiology, technology, and  
health policy**

# WHY?

- *Our communities were sharing concerns*
- *Simultaneous challenges facing audiology*
- *National interest in audiology*
- *How could technology/innovation improve adult hearing aid pathway?*

**From July to September 2023, we ran an online survey to understand more about people's experiences of the adult hearing pathway and to explore potential areas for innovation**



# AIMS

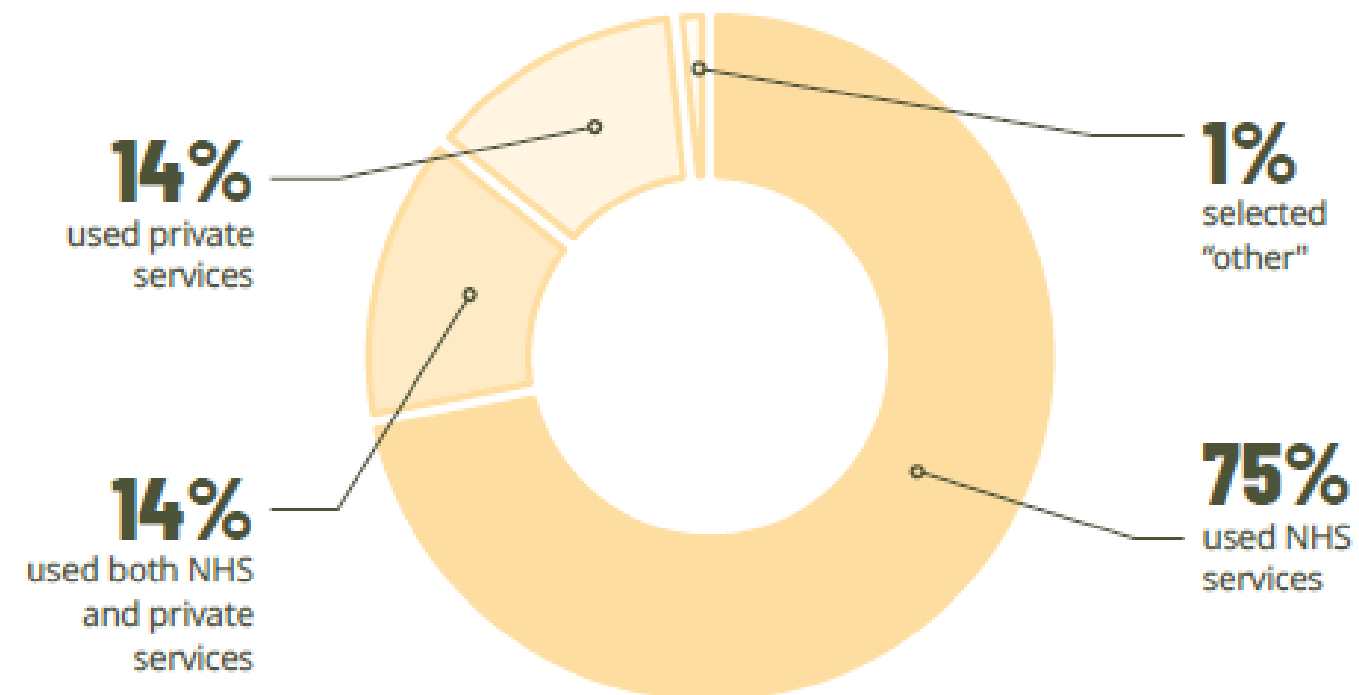
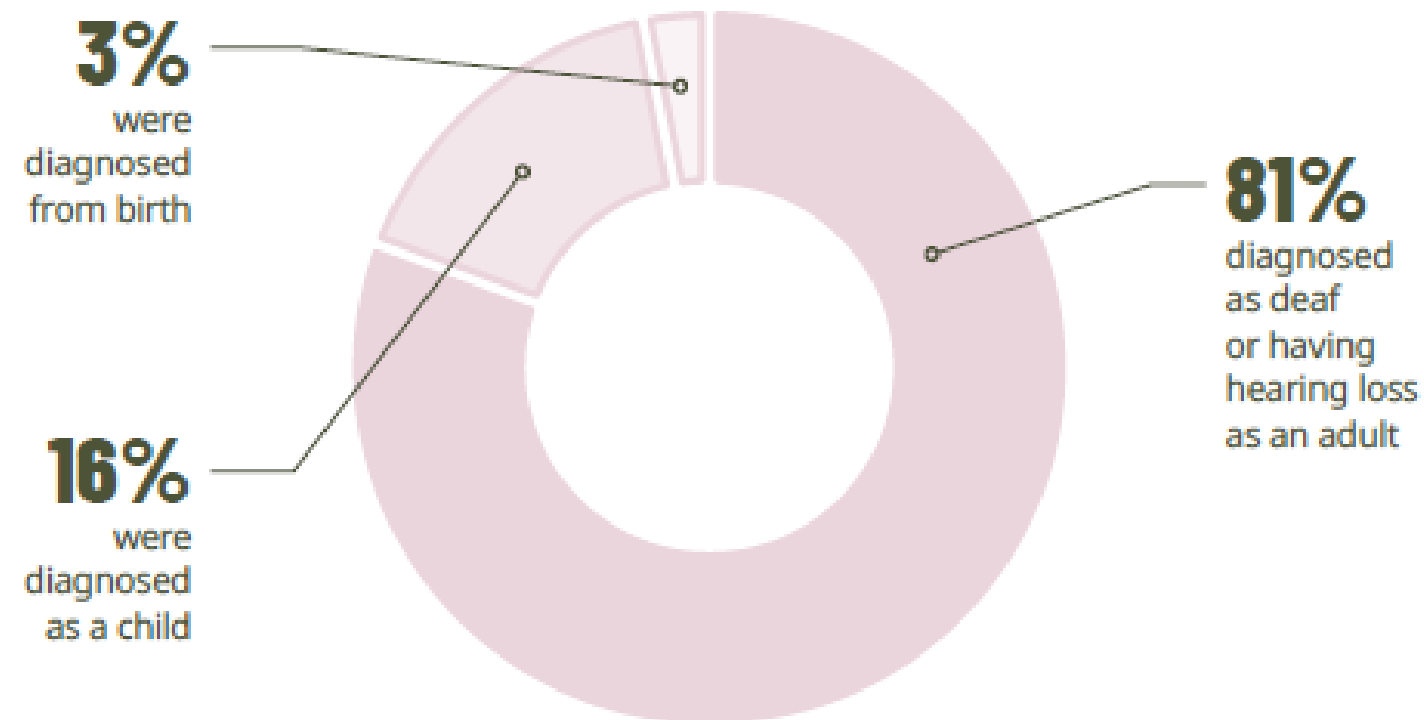
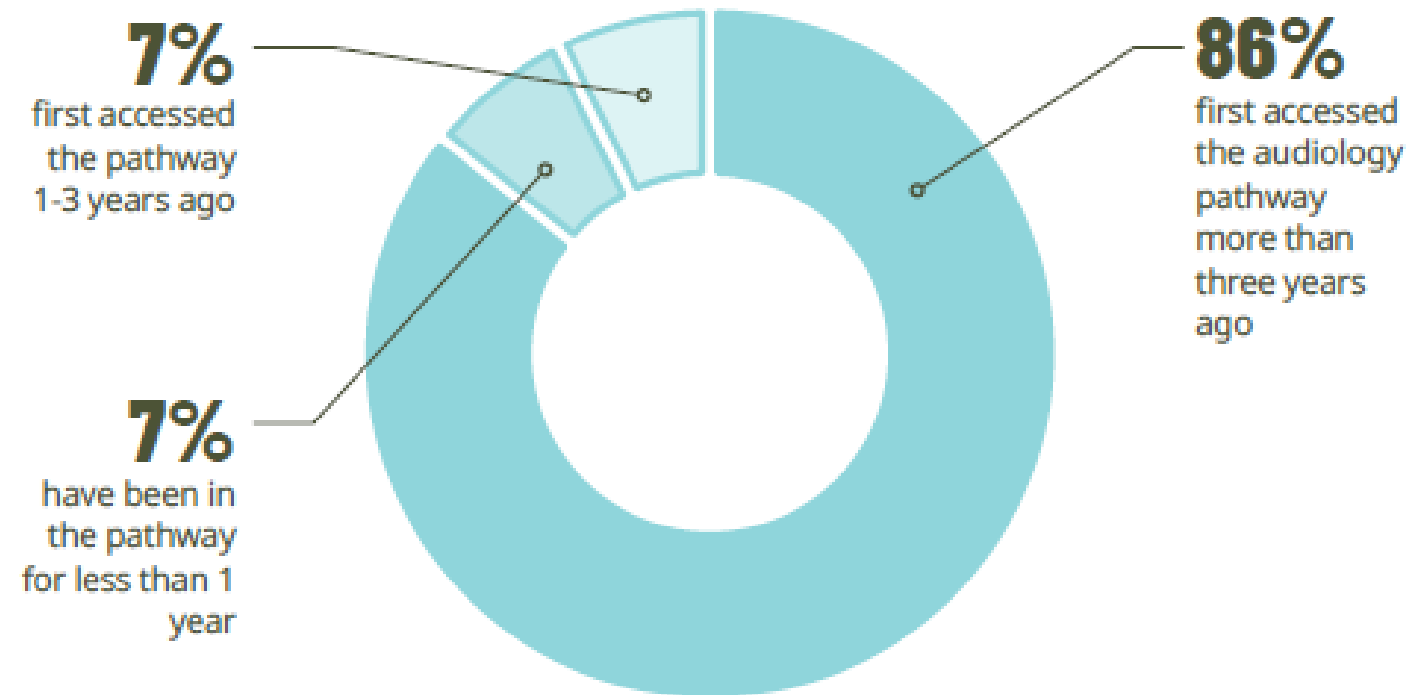
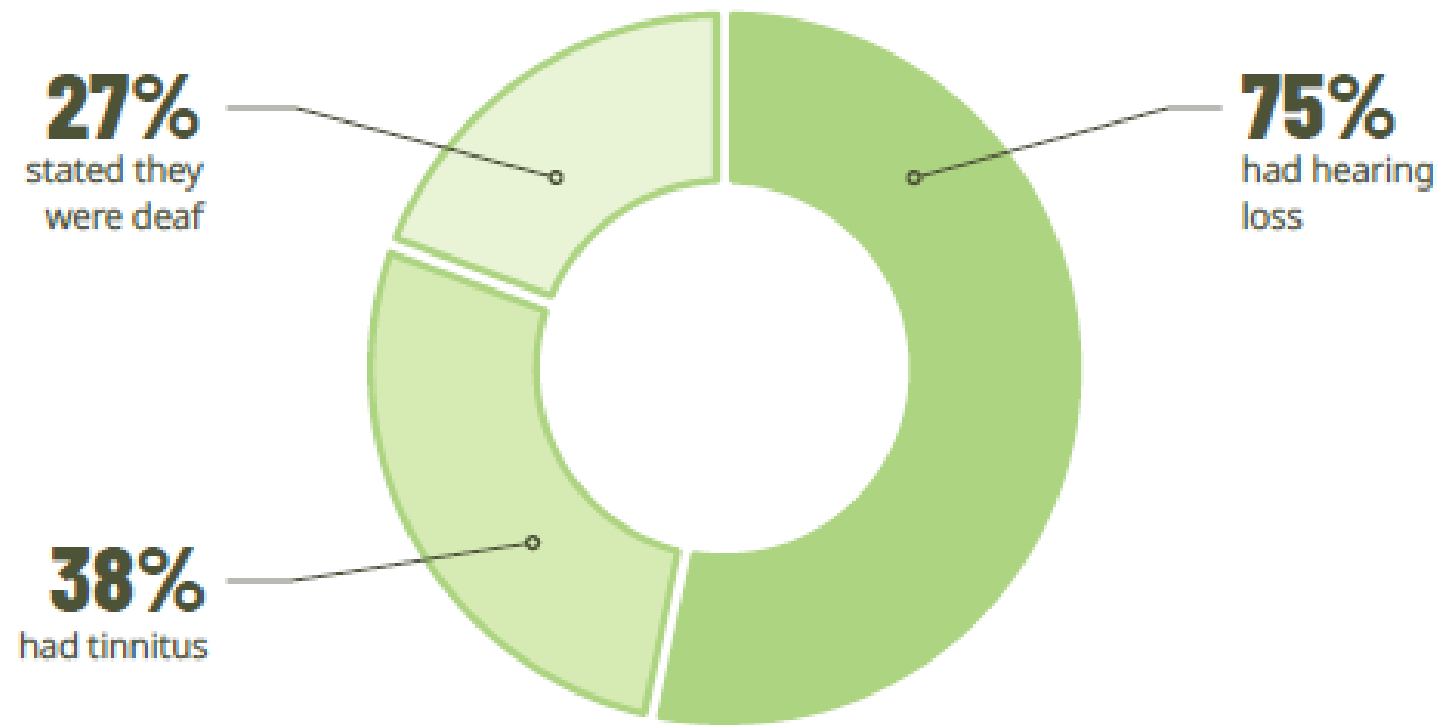
*Understand the needs of our communities who access audiology*

*What is important to them right now?*

*How do people want to experience audiology in the future?*

# PROFILE OF RESPONDENTS

Responses from 1,204 people across the UK





**NEW AND  
EXPERIENCED  
PATIENTS  
WERE SPLIT**

## WHAT DID WE ASK?

- *Referral process*
- *Diagnosis*
- *Shared decision making*
- *Hearing aid fitting*
- *Ongoing support*
- *Information provision*
- *Interacting with audiology*
- *Accessibility of communication*
- *Hearing device features*
- *Ideas for improving services*
- *Ideas for the future of audiology*

# KEY CHALLENGES

*Inaccessible communication*

*Confusing referral process*

*Limited appointments available*

*Not feeling informed about available assistive technology*

*Not feeling informed about available hearing devices*

*Limited support to adapt to hearing devices*



# POSITIVE FINDINGS

*Referral to audiology: most people report they could get an initial referral easily*

*Diagnosis: most people agree the audiologist clearly explained the results of their hearing test and treatment options.*

*Initial hearing aid fitting: most people recall being given information about how to use hearing devices and put them in*

*Ongoing support: most people agree that they have time to ask questions in appointments*



# IDEAS FOR IMPROVEMENT

## *Service Models*

*Remote online support options*

*Flexible drop-in clinics*

## *Service Accessibility*

*Accessible communications and waiting rooms*

*Local community support*

*Access to ear wax removal*

## *Technology & Patient Empowerment*

*Trying hearing devices in a more natural environment*

*Hearing devices that automatically tune themselves to your needs*

# IMPROVEMENT IN PRACTICE: CHIME

*Initial referral – Exploring self-referral, care home visits, building relationships with nurses to provide timely in-patient care*

*Information provision – Pre-appointment information sheets with hearing aid information sent to all patients. Increased in person support offered for some patients through ATO led rehab clinics with more time to ask questions*

*Service access – Increased walk-in “interim review” clinics*

*Communication needs – Deaf awareness training carried out with all staff*

*Remote support – already offered but reinforced with staff that this is sometimes a preference. Training with administrative team to not automatically offer face to face appointments. Protocol changed to encourage clinicians to install hearing aid app at fitting*

# NEXT STEPS

- *Share and promote the findings of In Their Own Words*
- *Work with key stakeholders to ensure the patient voice is considered in decision making*
- *Influence on our key priorities*
- *Explore innovation within the hearing aid pathway*
- *Gather evidence from our communities*



# WE NEED YOUR HELP

*RNID is keen to learn more about the challenges audiology services face and ideas for service improvement. As well as examples of where this has worked well.*

*Tell us about your experience or ideas by contacting:  
[franki.oliver@rnid.org.uk](mailto:franki.oliver@rnid.org.uk) or [lola.russell@rnid.org.uk](mailto:lola.russell@rnid.org.uk)*

**RN**  
**I:D** | Supporting people  
who are deaf, have  
hearing loss or tinnitus

# THANK YOU!

*RNID is the trading name of The Royal National Institute for Deaf People.  
A registered charity in England and Wales (207720) and Scotland (SC038926).*

