

Improving the BCHI Pathway

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Background

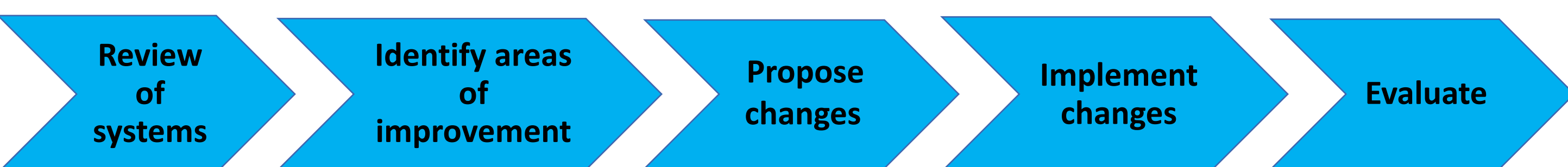
- The Countess of Chester is a well-established regional BCHI Centre in the Northwest of England, serving parts of Lancashire, Merseyside, Cheshire, and North Wales. Over time, the service has evolved to encompass all types of BCHI, except cochlear implants.
- As part of the continuous improvement strategy, the Trust aims to create a culture of continuous improvement at the Countess where our people come to work to do their work and improve their work. This strategy is built on lean methodology, which helps us to identify the least wasteful way to provide better, safer healthcare to ensure what we do adds value.
- With an expanding product portfolio and evolving patient requirements, alongside the general challenges facing the NHS, we recognised that this provided an excellent opportunity to undertake an improvement project to review the current patient pathways to ensure that they delivered safe, kind and effective care for all patients as part of their BCHI journey.

Aims and objectives

The aim of the pathway review was to jointly consider all aspects of the delivery of the BCHI service as an Audiology and ENT Service. The objective was to process map the current pathway, identifying processes which worked well and those which required improvement. The overarching principle was to ensure that patients received cohesive, timely and effective care as they moved through the BCHI pathway.



Methods

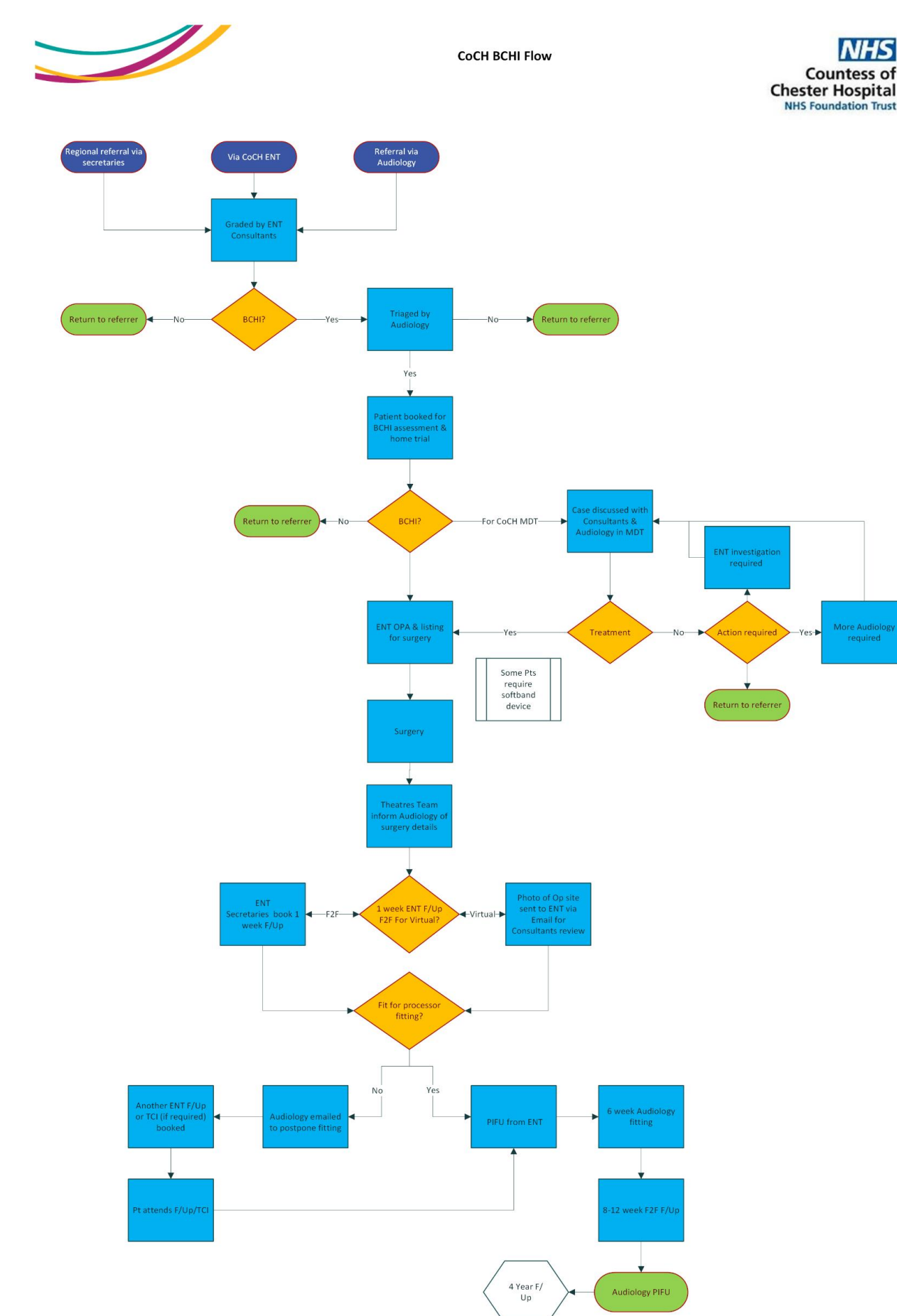


Methods used to review systems and identify areas of improvement

- Audit
- Collaborative discussion
- Pathway dissection
- Process mapping
- SWOT analysis
- Lean leadership principles



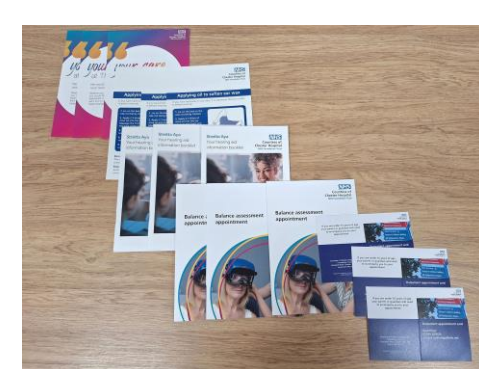
As a team we decided to initially focus on two key areas and consider changes which could positively impact them.



1. BCHI Awareness

Patient Awareness – proposed changes

- Design and create a concise booklet to explain the process and options to patients.
- Design and create a post surgery leaflet to be provided to patients after their surgery.



Staff awareness (internally and externally)

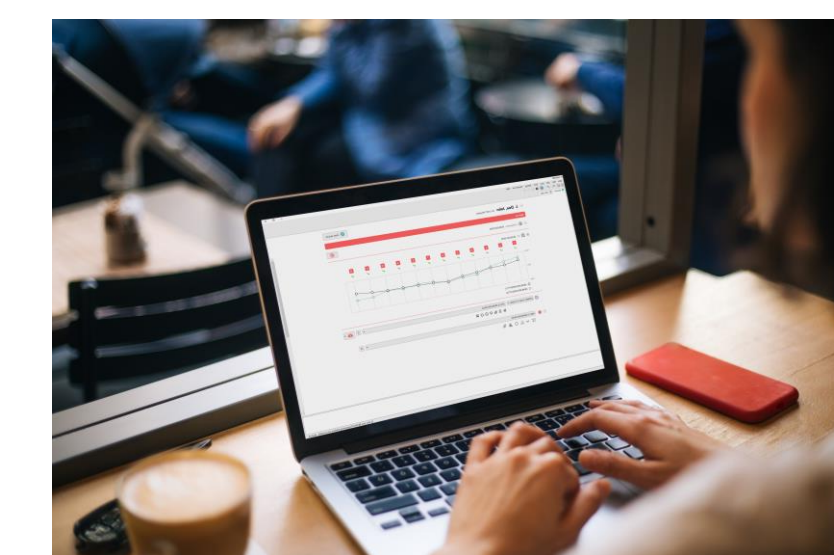
- **Internal training was completed for all ENT junior doctors**
To ensure an understanding of the full product portfolio and referral criteria in accordance with NHS England commissioning guidelines.
- **Internal training for the audiology team**
To update on the new products and to support clinician's in identifying patients who may benefit from an IAD as an appropriate solution. This training will take place annually to ensure all clinicians are aware of new developments and comfortable with the pathway.
- **BCHI Mailing**
Has been distributed to all our referral departments highlighting the changes that have taken place in recent months. This includes the expansion of products available, the introduction of new initiatives for the benefit of patients and the streamlining of processes.
- **External Engagement Event**
This will cover all devices on offer and the referral criteria for BCHI as well as case studies and the required information to be sent with the referral.



2. Number of visits within the BCHI Pathway

By focussing on various key elements of the pathway we have found we are able to reduce the number of attendances at the hospital, leading to more efficient care and shorter waiting times.

- **Changes to communication with ENT**
Patients can email images of abutment/surgery site for issues to be addressed more speedily.
- **Direct to recipient repairs**
Patients no longer need to attend clinic if their processor is faulty resulting in less downtime for the patient.
- **Remote care**
Adjustments will soon be available via the patient's phone resulting in reduced need to attend clinic.
- **Joint clinics**
Joined up care for post home trial and ENT consent appointments reducing visits needed to the Hospital. The patients will be separated into two categories routine and complex. Based on the history, audiometry and referral details. Routine patients will be booked on the joint pathway automatically.



Summary

When we embarked on the project we did not envisage the number of changes which could be implemented and therefore the timeframes associated with the implementation have been elongated. We had hoped to be able to bring you final audit information on the success of the changes but unfortunately we are not quite at this stage. Once all the initiatives have been implemented the results will be audited and further review of the results will be completed. We are already seeing positive outcomes from those changes which have been applied and look forward to continuing to work jointly on this improvement project.

References

- Clinical Commissioning Policy : Bone Conduction Implants (9BCHIs) for Hearing loss (all ages) 2016
- Service Specification, Bone Conduction Hearing Implant and Middle Ear Implant Service (all ages) April 2024.
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