

Reducing the Postcode Lottery: Streamlining MRI Access for Infants with Permanent Childhood Hearing Impairment

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Problem

Prompt aetiological investigation of Permanent Childhood Hearing Impairment (PCHI) is crucial in informing early intervention, optimising patient outcomes, and reducing family anxiety.

Our audiology service covers seven London boroughs and 5 different local medical teams. **Significant disparities of several years** in the initiation of investigations in infants between these teams existed.

This delay is **critical** for time-sensitive tests like MRI as referral within 12 weeks enables "feed and wrap" imaging, **avoiding the need for sedation or anaesthesia**, and the **consequential years of delay**.

Solution

To address this disparity, we worked collaboratively with radiology and community paediatric colleagues and developed a novel, audiologist-initiated MRI referral pathway for infants diagnosed with PCHI.



Key actions taken to establish the pathway:

- Development of a non-medical referrer ordering policy for imaging investigations
- Completion of non-medical referrer (NMR) training and governance requirements
- Modification of referral rights on Trust electronic patient record (EPR)



Protocol for infant MRI referrals developed:

- ✓ Training requirements
- ✓ Inclusion / exclusion criteria
- ✓ Informed consent
- ✓ Administrative and eHR steps
- ✓ Managing results
- ✓ Onward referral and escalation pathways, including neurology

Outcome

The pathway launched in July 2025 and 8/10 infants diagnosed with PCHI have consented to MRI:



Average age of MRI referral:
6.1 weeks



Average age results received:
8.4 weeks



86% successfully completed under feed and wrap



29% returned clinically significant findings (absent/aplastic nerves)



0 incidents or referrals rejected as inappropriate

Conclusion



Audiologist-initiated MRI for infants newly diagnosed with PCHI is **safe and effective** in ensuring timely access to critical diagnostic investigations, irrespective of postcode.



Early referral to MRI under feed and wrap has a **high success rate** for completion of the procedure, and for identifying clinically significant findings