University College London Hospitals
NHS Foundation Trust

uclh

Initial conversation with patients and family

Dr Ying Guo

Head of Audiology

April 2025

Outline

- CI Criteria
- Background & Scenario
- Role of Audiologists
- Initial Conversation Components
- Questions from patients
- Key messages

Audiological Criteria

New NICE Guidance 2019 (TA566)

Now:

- Any 2 thresholds ≥ 80dB in each ear
- 0.5, 1, 2, 3, 4kHz

A little bit of myself

From Auditory Implant Service Manager (CI mentor)
To Head of Audiology (CI champion side)

Scenario

Paper in 2019, 36% CI referral discussion did not occur (17%-50%).

Paper in 2024, Of 6,482 patients meets the criteria, 35.7% were informed they were eligible for an implant, but **only 9.7%** were referred for assessment.

Severe Hearing Loss: An estimated 1.2 million adults in the UK

Roles of Audiologists

Identify candidates through audiological assessments

Open to referral conversation

Given support groups/information

Initial Conversation- Feelings

Nervous	Rejections	Doubt
Repetition	Questioned	uncertainty
Honest	Open	Empathy

Initial Conversation

- Sensitive approach
- open conversation
- Understanding the patient's journey
- Balancing honesty and hope
- Simplifying complexity
- Fear of overwhelming the patient
- Respecting diversity
- Personal Reflection

Questions from patients

- Will I be able to hear music again?
- Will I be able to discriminate between speech sounds?
- Am I too old to have the surgery done?
- Will this be better than conventional hearing aids?
- Will I get one or two cochlear implants?
- Surgery sounds scary. What could go wrong?

Questions from parents/families

- When will speech improve?
- What if the implant doesn't work?
- How long until our child starts talking?
- How are you feeling about moving forward?

Key Messages

- Increase Staffing
  - Overseas recruitment, apprenticeships, and financial incentives.
- Improve Accessibility
  - Implement BSL as a communication option and regular training updates.
- Reduce Waiting Times
  - Increase capacity, streamline processes, and improve referral pathways.
- Enhance Quality Assurance
  - Encourage participation in IQIPS and other quality assurance methods.
- Support Service Provision
  - Standardize service provision and improve management of temporary deafness.