



# Supporting older people with hearing loss in care settings

A guide for managers and staff



This guide has been produced to help staff working in longer-term care settings provide high-quality care and support to older people with hearing loss. It is written for care home managers, and the accompanying information sheets are for both managers and their staff.

Throughout the guide, we use the term ‘care home’ to cover all types of care settings for older people, including nursing, residential, dementia and extra care.

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### Disclaimer

This guide and the accompanying information sheets (the ‘Guide’) are for information only. Action on Hearing Loss does not endorse any products mentioned in this Guide. Information in this Guide is not medical advice and you should not rely on it as such. If anyone requires medical advice, you should consider referring them to their GP or other medical professional. So far as permissible by law, Action on Hearing Loss does not accept any liability for any actions you or anyone else may take, or fail to take, on the basis of the information contained in this Guide.



“The Hear to Care project has helped by developing staff understanding of the importance of identifying hearing impairments in our customers and referring them to the audiology services.

“For those customers who already have hearing aids, staff have an increased knowledge of the importance of cleaning the hearing aid and how this can be done by taking the tubing apart, which a lot of staff did not know they could do.

“The services we already had included one customer having a conversation listener that staff use to communicate with her. We are looking at hopefully installing a loop system and purchasing another conversation listener.

“Overall, improved communication between staff and customers has been beneficial, with staff picking up on hearing problems a little faster and making referrals.”

**Julie, Care Home Manager**

## Introduction

Hearing loss is a major public health issue. It affects more than 11 million people across the UK – that’s one in six of us.

The most common type of hearing loss is called ‘presbycusis’ or ‘age-related hearing loss’, which develops gradually with age:

- Around **71%** of people aged over 70 have some kind of hearing loss.
- It’s estimated that **75%** of people in a care home have hearing loss – and that this will increase to **80%** by 2032.

Our 2012 research report [A World of Silence](#) showed how if the hearing loss of care home residents is identified and managed effectively, there is a real chance of improving their quality of life, by reducing loneliness and social isolation, and by improving their overall health and wellbeing.

Following on from this, between September 2014 and December 2017, our **Hear to Care** project piloted and tested changes that can be made to improve the diagnosis and management of hearing loss among care home residents.

As a result of the project’s findings, we have produced this guide and a range of easy-to-use information sheets, to support care home managers and staff to:

- identify and check for hearing loss
- improve hearing aid use and management
- meet communication needs
- provide assistive listening devices
- identify and manage other ear problems, such as tinnitus and ear-wax blockages
- appoint Hearing Loss Champions.

All of the publications listed in the guide are available from our Information Line and website: [actiononhearingloss.org.uk/publications](http://actiononhearingloss.org.uk/publications) You can find out more about the Hear to Care project on [page 18](#).



## The need to support older people with hearing loss

If people are not supported to manage their hearing loss effectively, it can lead to:

- communication difficulties
- social isolation and loneliness
- anger and frustration
- low confidence, especially in social settings.

Hearing loss also increases the risk or impact of various other long-term conditions, and many health conditions are associated with ageing and so are likely to occur alongside hearing loss.

Our 2015 report [Hearing Matters](#) highlights that hearing loss:

- doubles the risk of developing depression
- increases the risk of anxiety and other mental health issues
- increases the risk of developing dementia
- is linked to cardiovascular disease, stroke and obesity
- may be linked to sight loss and more frequent falls.

As detailed in *Hearing Matters*, there is evidence that the use of hearing aids may help to reduce the risk of developing dementia, depression, anxiety and other mental health issues.

It's important to be aware that hearing loss can sometimes be misdiagnosed as dementia, or can make the symptoms of dementia appear worse.

Diagnosing and managing hearing loss, and taking a person's hearing loss into account when diagnosing and managing other conditions, are therefore essential to ensure good communication and care.



“We piloted the provision and use of handheld hearing screeners in care homes. In one care home, we met Geoff, aged 90, who felt his hearing had deteriorated; his wife, Margaret, was also keen for his hearing to be checked.

“We easily checked Geoff’s hearing with a handheld hearing screener, the results of which suggested hearing loss, and advised him what steps he could take next. Geoff was seen by his doctor, who treated an ear-wax blockage and referred him to the audiology department of his local hospital for further tests.

“After a full hearing assessment by audiology, Geoff now has hearing aids and can hear better. This encouraged Margaret to get her hearing tested, and now she uses hearing aids too.”

**Hear to Care**  
project worker

## Identifying and checking for hearing loss

Age-related hearing loss can often go unnoticed for some time, as its signs can be misunderstood. For example, if a resident is unresponsive or confused, this may be identified as a sign of dementia or a mental health condition, rather than hearing loss.

A delayed diagnosis of hearing loss has significant and negative consequences for a person’s health and wellbeing, and hearing aids are most effective when fitted early.

There is potential benefit to offering hearing checks to all of your residents on arrival to the care home, and thereafter every 12 months.

If the hearing check suggests hearing loss, refer the resident to their GP and make sure that all relevant staff members are aware that the resident is having hearing problems. You can also assist the resident to complete the form **How to support me with hearing loss**, and file this in their care plan.



To find out how to check for hearing loss, see the information sheet **Checking for hearing loss and next steps**.

## Improving hearing aid use and management

Many people with hearing loss find hearing aids very helpful. But it can take time for people to adjust to their hearing aids, and it’s important that your residents get the necessary support to get the most out of them.

Hearing aids need to be cleaned daily, and the batteries need changing weekly. We recommend that you complete a **Hearing aid care plan** for each resident who uses hearing aids, to record information about their hearing aids and what maintenance is required. You should file this with the resident’s care plan.



“When a care home resident in her 90s was having problems with her hearing aids, it was clear to see the tubing on both aids needed replacing as it was blocked and brittle, preventing the hearing aids from working as they should.”

“Due to mobility issues, the lady wasn’t able to get out to a local hearing aid support service. We contacted the lady’s audiology department, which arranged for a volunteer to visit the care home. The volunteer took the aids back to audiology, re-tubed and checked the aids, and returned them on the same day.”

**Hear to Care  
project worker**

Please note that your residents are eligible for a hearing re-assessment and, if required, new hearing aids from the NHS every three years.

Remember, hearing aids can only do so much and do not restore a person’s hearing fully. Look to see if assistive listening devices, such as a conversation listener or hearing loop system, could benefit your residents ([see page 8](#)).

**i** Find out more about maintaining hearing aids in the information sheets ***Looking after open-fit hearing aids*** and ***Looking after standard-fit hearing aids***.

## Meeting residents’ communication needs

Hearing loss can have a big impact on a person’s ability to communicate, and, therefore, their quality of life. Under the Equality Act 2010 (and the Disability Discrimination Act 1995 in Northern Ireland), people have the right to expect reasonable adjustments to be made if they face substantial difficulties accessing social care services due to their deafness or hearing loss. So it’s important to make sure that your residents’ communication needs are met.

In England, ensuring older people with hearing loss get the right support to communicate well and understand information is also a legal requirement under the Accessible Information Standard. Visit [actiononhearingloss.org.uk/how-we-help/health-and-social-care-professionals](https://actiononhearingloss.org.uk/how-we-help/health-and-social-care-professionals) to find out more.

As well as providing suitable assistive listening devices, there are some simple things that you can do to aid effective communication with residents with hearing loss: making lipreading easier, using body language and making small changes to the physical environment.



- Reducing background noise in communal areas can improve the acoustics. For example, tablecloths on tables, soft furnishings and acoustic panels all help to absorb sound. Rubber caps on the legs of tables and chairs can also help. Turn off the TV if nobody is watching it, or turn on the subtitles.
- If there are communal lounges, make sure there are quiet, well-lit areas so that people can talk and lipread without the distraction of background noise.
- Make sure staff members can access the information sheet ***Communicating well with residents who have hearing loss***.
- Make the information sheet ***Supporting residents with hearing loss - tips for family members*** available for family members and friends of people with hearing loss.
- Some older people who are profoundly deaf may require communication support, such as a qualified British Sign Language (BSL) interpreter. Older people who use BSL may need support to remain active members of the Deaf community.

## Providing assistive listening devices

Assistive listening devices can help people with hearing loss hear more clearly over background noise. They work by amplifying sound from a specific source – such as someone speaking or the TV – and sending it straight to the ears.

There's a range of assistive listening devices available, for use with or without hearing aids. Such products can play a big part in improving communication between staff and residents, particularly if hearing aids alone are ineffective or if the resident is unable to use hearing aids for some reason.

Please note that assistive listening devices produce high sound levels and so should always be used with care. When using a device, your residents should start with a low volume and gradually increase it to a comfortable level.

### Find the right devices for your residents

Action on Hearing Loss sells a range of assistive listening devices.

Shop online at [actiononhearingloss.org.uk/shop](https://actiononhearingloss.org.uk/shop) or contact our Customer Service Advisers, who can recommend suitable equipment to meet the needs of your residents: call **0333 014 4525** or email [solutions@hearingloss.org.uk](mailto:solutions@hearingloss.org.uk)



Conversation listener

## Conversation listeners

Conversation listeners (sometimes called ‘personal listeners’) are small, portable devices that pick up speech and amplify it. They can help people with hearing loss to hear speech when there’s background noise.

People who don’t use hearing aids can use a listener with either headphones, earphones or a stethoset headset, which is suitable for people with up to a severe hearing loss.

Some conversation listeners can link up to hearing aids and cochlear implants on the hearing loop setting when used with an ‘intermediary device’, such as a neckloop, which is worn around the neck, or ear hooks, which fit over the ears. Some advanced conversation listeners connect to compatible hearing aids and cochlear implants directly, or with the addition of a hearing aid shoe.

## TV listeners

TV listeners let people listen to the TV at a volume they are comfortable with, independently of the TV loudspeaker. Some can also be used with radio and music systems. They may have a number of features, including tone control and left/right volume balance.

All TV listeners are wireless. They come with either a neckloop (for hearing aid users) or a stethoset headset (for people who don’t use hearing aids).

## Hearing loop systems

Hearing loop systems can help people with hearing loss to hear sound from a specific source more clearly over background noise. They consist of an amplifier and a wire cable (loop) that’s laid around the edge of the room in a loop. The electric current in the loop produces a magnetic field that sends sound from an audio source, such as a microphone or TV, directly to hearing aids or cochlear implants switched to the loop setting.



“During a coffee morning we held at a care home, as part of the Hear to Care project, we met a lady whose mother, Mary, could not get out of bed. Mary is 102 and was struggling to hear staff and communicate. We provided Mary with a conversation listener to try. A month later, Mary’s daughter emailed to say her mother was using the listener and could hear staff really well again.”

**Hear to Care project worker**



“I tried the Sonido personal listener with one of our ladies, as she often sits close to the radio and listens to music. She rarely interacts with staff or other residents, so I thought I would see if the listener helped. I set up the listener and radio and went into the bathroom; when I returned to the bedroom, she was dancing and singing away to Elvis. The Sonido helped her to enjoy the music – she loves Elvis.”

#### Care home worker

### Need help paying for equipment?

Local authority social services may be able to provide equipment or help to pay for it. To find out more, ask the resident's audiologist for advice on equipment or contact the local authority social services team.

People who don't have hearing aids or a cochlear implant can use a loop listening device (some conversation listeners have a loop-listening feature).

Consider whether your residents with hearing aids would benefit from a hearing loop system in communal areas.

**i** To find out more about these assistive listening devices, visit [actiononhearingloss.org.uk/live-well/products-and-technology](https://actiononhearingloss.org.uk/live-well/products-and-technology)

## Managing tinnitus

Tinnitus is the sensation of hearing sound in one ear, both ears or in the head, when there's no external sound. It is usually described as a ringing, hissing, buzzing, roaring or humming sound.

Tinnitus is common, affecting 10–14% of adults in the UK. Some people with tinnitus find it has a severe impact on their life, causing or worsening: anxiety, hearing difficulties, sleep problems, concentration difficulties and depression.

If tinnitus is undiagnosed, refer the resident to their GP initially; it may be that their tinnitus is caused by a temporary problem that the GP can treat, such as an ear infection. If this is not the case, the GP should refer the individual to the audiology or ear, nose and throat (ENT) department of the local hospital for further tests.

There's not yet a cure for tinnitus, but there's a range of specialist products and therapies that can help people to manage it. This includes tinnitus relaxers and small devices that fit in or behind the ear, all of which generate sounds to distract people from paying attention to their tinnitus. Tinnitus counselling and relaxation exercises may also help. The resident's audiology department will be able to advise what's suitable for them.

**i** To find out more about tinnitus, visit [actiononhearingloss.org.uk/tinnitus](https://actiononhearingloss.org.uk/tinnitus)



## Managing ear wax

Ear wax is a normal, oily substance that protects the skin of the ear canal, keeping ears clean and healthy. Ear wax usually works its way out by itself, but sometimes too much wax can build up and block the ears.

A resident may need ear wax removing if:

- they have hearing loss, tinnitus, earache or vertigo (a sensation of spinning)
- the wax is blocking the ear canal, preventing a doctor or nurse from examining it or taking an impression for a hearing aid earmould
- they use hearing aids and the wax is affecting how they work by blocking the tubing or causing the hearing aid to whistle.

If you think a resident may have an ear-wax blockage, they need to see their GP. Their GP may prescribe ear drops to loosen the wax, which may make it fall out itself – if not, the resident needs to see their GP again for further treatment.

If you think that the tubing of a resident's hearing aid is blocked, contact their audiology provider.

 To find out more about ear-wax blockages, visit [actiononhearingloss.org.uk/ear-wax](https://actiononhearingloss.org.uk/ear-wax)

## Appointing Hearing Loss Champions

To support residents with hearing loss, consider appointing two or more staff members as 'Hearing Loss Champions'. The Champions should undergo training to update their skills and knowledge of hearing loss and hearing aids. Local deaf organisations or Action on Hearing Loss may be able to deliver this training, depending on what's available in your area – please contact our Information Line to find out more ([see back page](#) for contact details).



“Found this training very interesting, would love to become a champion as this is vital for communication and to help [residents] maintain a level of hearing.”

“Very informative and practical.”

“I think the training was excellent and extremely relevant to the work we do.”

#### Care home workers

Trained Hearing Loss Champions can:

- raise awareness of hearing loss and train other staff members in hearing aid maintenance
- support other staff members with issues related to hearing loss and hearing aids
- take responsibility for ensuring this guide, information sheets and forms, other useful information, and any equipment that may be available – such as hearing screeners and assistive listening devices – are accessible for all staff
- be the link between your care home and your local audiology department, by supporting other staff to make referrals and talking to the audiology team directly.

## Meeting the requirements of the CQC Inspection Framework

The Care Quality Commission (CQC) is responsible for inspecting care homes in England. Below are some examples of how the key question areas within the CQC’s Inspection Framework might apply to older people with hearing loss.

We have signposted to the information sheets and forms that accompany this guide, and other relevant information. All of the publications listed are available from our Information Line and website: [actiononhearingloss.org.uk/publications](http://actiononhearingloss.org.uk/publications)

### Key question area: Safe

- Older people with hearing loss may need support to participate fully in risk assessments and discussions about their care, treatment and medicines. For example, care home staff should follow simple communication tips.

- Research shows that hearing loss can increase the risk of falls and make it more difficult for older people with sight loss to navigate the care home environment.
- Assistive equipment such as flashing smoke alarms and vibrating pagers or pads can also help people with hearing loss live safely and independently in care homes.

 See the information sheet ***Communicating well with residents who have hearing loss.***

### Key question area: Effective

- NHS England's Accessible Information Standard states that care homes should have a process in place for asking people with disabilities and sensory loss what support they need to communicate well and make sure that appropriate support is provided.
- NICE guidance and quality standards also state that care staff should record hearing loss in care plans and also have good knowledge of hearing loss, hearing aids and the role of the GP in referring people for a hearing assessment.
- The provision of care should be supported by regular staff training and staff champions should be appointed to raise awareness of the needs of older people with hearing loss.
- When hearing loss is suspected, protocols should be in place to make sure older people who may have difficulty travelling to appointments are able to get a hearing assessment and access support to use their hearing aids.
- Soft furnishings should be used to reduce the level of background noise in communal areas and hearing loop systems should be available for people who use hearing aids.

 Use the forms **Hearing aid care plan** and **How to support me with hearing loss.**



### Key question area: Caring

- Older people may view hearing loss as an inevitable part of the ageing process and hearing loss may be difficult to diagnose if people have communication and memory problems due to dementia or other long-term conditions. Care staff have an important role to play in encouraging older people to seek help for their hearing loss.
- Care home staff should follow simple communication tips and also make sure communication support such as BSL (British Sign Language) interpreters are available to residents who communicate using BSL.

**i** See the information sheet ***Checking for hearing loss and next steps***.

### Key question area: Responsive

- Regular hearing tests should be carried out to ensure hearing loss is identified and appropriately managed at the earliest opportunity.
- People who use hearing aids may require day-to-day support to get the most out of them. For example, this could include hearing aid cleaning or replacement of batteries and tubing.
- Care home staff need to be aware of the different ways people with hearing loss wish to communicate and make sure these needs are recorded and met, in line with NHS England's Accessible Information Standard.
- People with hearing loss should be able to give feedback and share their views about the quality of care in ways that are accessible to them.
- People with hearing loss are more likely to experience emotional distress, loneliness and reduced social engagement. Supporting residents to address and manage their hearing loss will be hugely beneficial.



- People who use BSL may be at risk of loneliness and a deterioration in health and wellbeing if they cannot communicate in a meaningful way with other people. The care home should establish links with Deaf clubs and other organisations to help people who use BSL maintain their cultural ties and help them stay in contact with family and friends; for example, by using Skype or Facetime.

**i** See the information sheets *Looking after standard-fit hearing aids* and *Looking after open-fit hearing aids*, and use the form **How to support me with hearing loss**.

### Key question area: Well-led

- The care home should publish an 'Accessible Communication' policy, which sets out what support is available to help people with disabilities and sensory loss access their services, in line with the requirements of the Accessible Information Standard. Performance against this policy should also be regularly monitored.
- The care home should actively work with people with hearing loss and local community groups (such as hearing loss and Deaf clubs) to help people express their views. This includes the provision of reasonable adjustments, such as an accessible alternative to the telephone or support to help people communicate face-to-face.
- The care home should also establish a good working relationship with GPs and local audiology services to ensure older people with suspected hearing loss are referred promptly for a hearing assessment and are able to access ongoing support to get the most out of their hearing aids.

**i** You can find out more about the [Accessible Information Standard](https://www.accessibleinformationstandard.org.uk/) at [england.nhs.uk/ourwork/accessibleinfo](https://www.accessibleinformationstandard.org.uk/england.nhs.uk/ourwork/accessibleinfo)

## Further information and support

### Action on Hearing Loss

A range of easy-to-use **information sheets** accompany this guide:

- *Checking for hearing loss and next steps*
- *Communicating well with residents who have hearing loss*
- *Looking after open-fit hearing aids*
- *Looking after standard-fit hearing aids*
- *Supporting residents with hearing loss – tips for family members.*

There are also easy-to-use **forms** for you to complete with residents with hearing loss in order to capture information about what support they need to manage their hearing loss:

- How to support me with hearing loss
- Hearing aid care plan.

We recommend you make these Action on Hearing Loss resources available in your care home for staff members to use. You can download them from [actiononhearingloss.org.uk/publications](https://actiononhearingloss.org.uk/publications) under 'Resources for health and social care professionals'.

We also provide a wide range of expert information on deafness, tinnitus and hearing loss – and what can help. Visit [actiononhearingloss.org.uk](https://actiononhearingloss.org.uk) or contact our **Information Line** or **Tinnitus Helpline** for free information and support:

### Information Line

Telephone: **0808 808 0123**

SMS: **0780 000 0360** (standard text message rates apply)

Email: [information@hearingloss.org.uk](mailto:information@hearingloss.org.uk)

## Tinnitus Helpline

Telephone: **0808 808 6666**

SMS: **0780 000 0360** (standard text message rates apply)

Email: [tinnitus.helpline@hearingloss.org.uk](mailto:tinnitus.helpline@hearingloss.org.uk)

## Hearing aid drop-in services

Action on Hearing Loss runs hearing aid drop-in services across the UK. We provide basic hearing aid maintenance (such as re-tubing), batteries, information and guidance at our many drop-ins. Our Community Support Officers and volunteers run the drop-ins, often referred to as 'Hear to Help'. Many are funded by local audiology services. You can find more information at [actiononhearingloss.org.uk/how-we-help/support-and-care/hearing-aid-clinics](https://actiononhearingloss.org.uk/how-we-help/support-and-care/hearing-aid-clinics)

## Audiology

A resident's audiology provider will be able to provide information, advice and support, and some may be able to provide a home visit for eligible residents. Check with the resident's audiology provider or their GP.

For residents who use NHS hearing aids, new earmoulds, tubing, filters and batteries are free, as are replacements if a hearing aid stops working properly or if a different type is needed because of hearing changes. Some NHS providers carry out free repairs to damaged hearing aids, others charge for lost or damaged hearing aids.

If aids are bought privately, there may be a charge for repairs and replacement tubing and filters, as well as a charge for lost or damaged hearing aids.

## About Action on Hearing Loss

Action on Hearing Loss (formerly RNID) is the largest UK charity helping people who are confronting deafness, tinnitus and hearing loss. We enable them to take control of their lives and remove the barriers in their way.

In parts of the UK, we provide hearing loss information and support to older people in the community, including to those in care settings.

We would like to thank the Department of Health's Innovation, Excellence and Strategic Development Fund for funding this project and guide.

We would like to thank the people who shared their stories or experiences in this guide – please note, names have been changed to protect the privacy of individuals. We would also like to thank the care homes involved in the project.

### About the Hear to Care project

In September 2014, Action on Hearing Loss secured funding from the Department of Health's Innovation, Excellence and Strategic Development Fund for a three-year project: **Hear to Care - improving long-term care and support for older people with hearing loss in care settings**. The project has worked with mainstream longer-term care settings to pilot and test changes or improvements that can be made to improve the diagnosis and management of hearing loss among residents.

More than 110 staff were trained across seven different care homes on understanding hearing loss and hearing aid maintenance. Handheld screeners, conversation listeners and hearing aid maintenance products were provided for care home staff members to use when supporting residents with hearing loss. Feedback from the project highlighted that staff valued the training and communication has since improved between staff and residents, with staff identifying hearing loss more quickly and making appropriate referrals.

If you have any questions, please contact our Information Line ([see back page](#) for contact details).



**Action on Hearing Loss** (formerly RNID) is the largest UK charity helping people who are confronting deafness, tinnitus and hearing loss.

We give support and care, develop technology and treatments, and campaign for equality.

We rely on donations to continue our vital work.

To find out more, visit **[actiononhearingloss.org.uk](http://actiononhearingloss.org.uk)**

### **Contact our free, confidential Information Line:**

Telephone 0808 808 0123

Textphone 0808 808 9000

SMS 0780 000 0360

(standard text message rates apply)

Email [information@hearingloss.org.uk](mailto:information@hearingloss.org.uk)

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