



Caring for older people with hearing loss

A framework for change



Foreword

Hearing Loss currently affects more than 11 million people in the UK. It is a growing issue – by 2035, 15.6 million people in the UK will have hearing loss. The average age of a hospital patient is now over 80, and more than 90% of people aged over 80 have hearing loss.

Having worked in the NHS for more than 20 years before joining Action on Hearing Loss, I am embarrassed to admit that in my NHS experience, both as a commissioner and provider, hearing loss is a hidden issue. So I would like to thank the Department of Health for funding this project and allowing us time to work on some targeted good practice that can be spread at pace and scale across all hospitals in the UK.

As there are many competing priorities and frameworks for change, why is this report so important? Firstly, prevalence – both hearing loss and an ageing population are growing issues. And because older people make the most use of the NHS, the actions recommended in this report have the potential to make a very significant difference to managing older people's hearing loss. Secondly, we have ensured that we only make practical and affordable suggestions for improvement.

Finally, communication is at the heart of compassionate, safe and effective care. If every hospital takes steps to identify and act upon hearing loss, the impact will be immense.

**Louise Pritchard, Executive Director of Services,
Action on Hearing Loss**



**More than
70% of 70
year olds are
affected by
hearing loss,
rising to 90%
of over 80
year olds.**

About the Nursing Practice Project

The Nursing Practice Project, delivered by Action on Hearing Loss in partnership with the Heart of England NHS Foundation Trust, was funded by the Department of Health's Innovation, Excellence and Strategic Development Fund for two years (2012–2014), under the theme 'delivering better health and care outcomes and the priority of promoting early intervention approaches'.

It is vital that people with hearing loss have the same access to healthcare services as people who are hearing, yet it is well documented that this is not the case.ⁱ This inequality reduces the quality of care that patients with hearing loss receive – and there are significant costs to the NHS associated with this.ⁱⁱ

The Nursing Practice Project was born out of the growing need to identify where cost-effective changes could be made to improve the quality of care of older people with hearing loss in a hospital setting.

A key outcome of the project was the development of good practice recommendations and a Hearing Loss framework containing resources to help all NHS Hospital Trusts make practical, easy-to-implement, cost-effective changes that are proven to empower staff and improve patient experience.



It is estimated that only two-fifths of people who need hearing aids have them

Why focus on older people with hearing loss?

Hearing loss is widespread, affecting one in six of the UK population – around 11 million people.

There are a number of reasons why people experience hearing loss, but age-related damage to the cochlea is the single biggest cause. More than **70%** of 70 year olds are affected by hearing loss, rising to **90%** of over 80 year olds. With an ageing population, the prevalence of hearing loss is set to increase by approximately **14%** every 10 years.

Evidence from The King's Fund identifies that the average age of hospital patients is over 80.ⁱⁱⁱ Approximately one in three patients admitted to hospital is likely to be over the age of 70^v and face communication difficulties. It is very likely that older people with hearing loss also have one or more other long-term conditions linked to the ageing process.

It is estimated that only two-fifths of people who need hearing aids have them, and it takes 10 years, on average, for people with hearing loss to seek help.

Project aims

The aim of the Nursing Practice Project was to identify key areas in a hospital setting where changes could be made in order to:

- enable the identification and management of hearing loss in older patients
- improve communication between staff and patients
- support patients in the self-management of their hearing loss.

“Patients really value the fact that you are aware of their hearing loss.”

Healthcare Assistant, ECAU, Heartlands Hospital

The project was conducted in an Elderly Care Assessment Unit (ECAU) at Heartlands Hospital, Birmingham, and consisted of:

- a **baseline assessment**, to identify issues relating to hearing loss and older people in a hospital setting and establish a benchmark position from which to measure outcomes from the project
- a **pilot of interventions**, to test possible solutions for identified issues
- the development of **good practice recommendations** and a **framework** of resources, based on the findings from the pilot, which all NHS Hospital Trusts can use to ensure people with hearing loss receive high-quality care.

While the pilot was carried out in a hospital ward setting, the recommendations and framework can be readily applied in a number of hospital settings and are also relevant in wider health and social care provision, for example:

- Accident and emergency (A & E)
- Pre-Admission assessments and outpatients
- Physiotherapy
- Occupational therapy
- Day hospital
- Community services
- Mental health services
- Learning disability
- Ambulance services
- Care homes/nursing homes
- Primary care – general practice, pharmacy, optometry, dental services.



71% of patients questioned stated that they did not fully understand what staff were saying

Baseline assessment

In order to identify the current policies, procedures and practices at the ECAU at Heartlands Hospital, staff and patient questionnaires were developed and distributed on the ward throughout October and November 2012.

Twenty staff and 33 patient questionnaires were completed, mainly from the ECAU. A series of focus groups with staff were also conducted to obtain additional, subjective information.

Patients were asked questions about a range of issues relating to hearing loss and their ability to communicate with healthcare staff, including:

- if they have difficulty understanding doctors, nurses and other healthcare staff
- if they wear hearing aids – and, if so, how often and if staff are aware
- if they are involved in decision-making regarding their care
- whether they would be willing to have their hearing checked while in hospital, if they do not have a diagnosed hearing loss.

Staff were asked questions about issues relating to hearing loss management in the hospital setting, including:

- their ability to identify when a patient may have a hearing loss
- if they experience communication issues with patients, which are suspected to be due to hearing loss
- the steps they take to communicate effectively with patients
- how they record or report suspected or identified hearing loss
- what communication equipment is available on the ward
- if there are any processes for repairing hearing aids and keeping them safe on wards.

Summary of baseline assessment findings

The baseline assessment identified that issues with hearing loss and communication were common on the wards, that staff acknowledged that improvement was needed, and that there was a pressing need for NHS Hospital Trusts to improve the identification of hearing loss among older patients and to support them while in hospital.

Hearing and communication

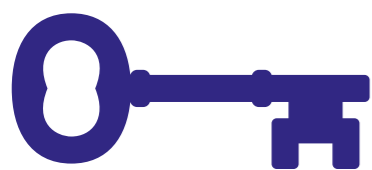
- More than half (**58%**) of patients who completed the questionnaire stated they had some difficulty in hearing staff while in hospital.
- **71%** of patients questioned stated that they did not fully understand what staff were saying and **43%** felt that they were not fully involved in decision-making regarding their care.
- All staff questioned stated they experienced communication difficulties with patients, possibly due to hearing loss.

Hearing checks

- Although hearing checks are not normal practice on hospital wards, **82%** of patients who completed the questionnaire said they were willing to have their hearing checked while in hospital.

Hearing aids and other solutions

- In verbal discussions with patients on the ECAU, several admitted that they had not brought their hearing aids with them to hospital because of concerns that they would be lost or would be an inconvenience.
- **27%** of patients who completed the questionnaire wore hearing aids and 89% of these people wore their aids all or most of the time.
- **70%** of staff who completed the questionnaire had limited knowledge of what communication equipment was available on the ward to help them communicate more effectively with patients.
- **35%** of staff questioned highlighted the importance of storage devices for hearing aids, to reduce the number lost or misplaced on the wards.



Key findings:

With a hearing loss pathway established, a number of staff verbally fed back that they were more aware of how they could support patients to self-manage their hearing loss.

A number of relatives of patients on the ECAU expressed, both verbally and in writing, their thanks to staff for the attention and support given to their relative's hearing loss while they were on the ECAU.

Pilot of interventions

A two-month pilot of interventions was then conducted on the ECAU, during September and October 2013, to test out ideas for improving the care of older people with hearing loss in light of the findings of the baseline assessment.

Following completion of the pilot, staff, patients and relatives were interviewed and asked to rate and discuss their views of the changes implemented.

Recognising hearing loss and support for patients

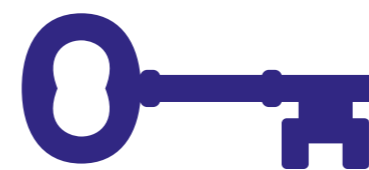
Establishing a hearing loss pathway

A hearing loss pathway was introduced on the ECAU to ensure staff knew what steps to take to support patients with hearing loss and to enable them to refer patients to audiology services or an ear, nose and throat (ENT) department, as appropriate.

The pathway is detailed on the website at:

www.actiononhearingloss.org.uk/hearing-loss-pathway

It aims to set out, in very broad terms, the processes and protocols staff need to follow to ensure they are able to recognise hearing loss in patients, communicate effectively and take further action as required. It was included in staff training and put on the wall of the ward for all staff to see.



Key findings:

The training was well received by staff, who found it extremely useful, particularly the practical, hands-on elements – for example, re-tubing moulds, changing hearing aid batteries and fitting hearing aids.

Post-training evaluation forms revealed that 87.5% of staff felt that the training was 'very useful' and 100% stated that the content was 'very relevant'. Staff differed in their views as to whether the training should be delivered on the ward (25%) or elsewhere (25%), and all agreed that dedicated time was needed for the training.

Training for staff

Staff from the ECAU attended a 2-3 hour workshop on understanding hearing loss and basic hearing aid maintenance. The workshop gave staff an overview of:

- how the ear works
- types of hearing loss and its impact
- tinnitus
- hearing aids and basic troubleshooting
- communication tips.

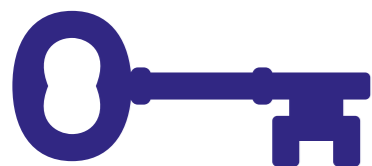
The workshop also advised staff on how to screen patients for hearing loss using the Siemens HearCheck screener, use communication equipment such as the Sonido personal listener, and ensure that appropriate referrals are made, if hearing loss is suspected.



Siemens HearCheck screener



Sonido personal listener



Key findings:

Staff reported that the HearCheck screener was simple, quick and effective to use and that patients on the ECAU have been tested and appropriate referrals made. Staff on the ECAU are hoping to screen all patients on arrival to the unit, or at discharge if there has not been time during their stay. Potential challenges to using the screener include staff capacity on the wards, staff confidence in using the device, and ensuring that using the screener becomes embedded in ward practices.

Equipment used

Siemens HearCheck screener

The Siemens HearCheck screener was used in the pilot, as it is the only known small, hand-held screening device suitable for screening patients for hearing loss in a hospital environment.

Online hearing tests and mobile apps are also available from various sources; however, these may be more difficult to access in a hospital environment.

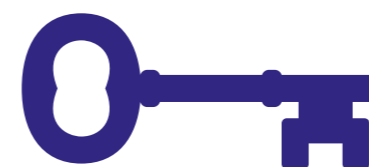
Sonido personal listener

The Sonido personal listener was used in the pilot because it is a cost-effective, powerful listener, which is easy to clean and has both tone and volume control. The Sonido also has a loop-listening facility, which means it can be used to test hearing loop systems.

Please note: other personal listeners are available from Action on Hearing Loss and other suppliers.

Screening patients for possible hearing loss

A Siemens HearCheck screener was used to assess patients' hearing when hearing loss was suspected. The screener enables a patient to be screened for possible hearing loss in under two minutes, and referrals can be made to audiology services or an ENT department, as appropriate. It is a hand-held, hygienic, easy-to-use device and can be used in a variety of health and social care settings.



Key findings:

Verbal feedback from staff was that using the personal listener made a huge difference to their ability to converse with patients.

Patients using the listener were able to give consent for treatment, which they were previously unable to do – for example, a patient on the ECAU was able to give consent and undertake physiotherapy exercises after the Sonido personal listener was used, resulting in an earlier discharge from the ward.

Several patients were observed becoming emotional when using the listener, due to the difference it made to their ability to hear.

A number of relatives enquired about how they could purchase the listener, after seeing it used by their family member on the ward.

“The personal listener is being used regularly – one patient can't hear at all without it.”

Nurse, Heartlands Hospital

Improving communication

Providing a personal listener to patients with hearing loss

Sonido personal listeners were made available to the ECAU for patients who were struggling to hear, irrespective of whether they had an identified hearing loss. The Sonido personal listener enhances the volume and clarity of conversations, while reducing background noise, and is ideal for health and social care environments. It can be used by patients with or without hearing aids.

Providing hearing aid maintenance kits

Following the workshop, a hearing aid maintenance kit was provided on the wards for staff to use with support from the Nursing Practice Project Manager. The kit allowed staff to clean, change batteries and re-tube hearing aids on the ward and included information and advice in the form of the Action on Hearing Loss information leaflet Adjusting to your hearing aids.

Reducing the number of lost hearing aids

Introducing hearing aid storage boxes

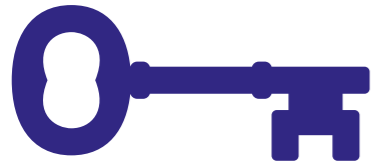
Hearing aid storage boxes were made available to the ECAU for patients with hearing aids, to help keep hearing aids safe. Hearing aids are a common sight on hospital wards, particularly on elderly care wards, and due to their small size, they can be easily misplaced or lost. This can lead to distress and isolation for patients as they are unable to communicate effectively. Wards are responsible for covering the financial cost of lost hearing aids and this can be costly, particularly if private hearing aids are lost.

The plastic storage boxes that were piloted meet infection control requirements and can be cleaned and retained by the ward for continued use or taken home by patients. The colour pink was recommended by Consultant Geriatricians, as it is vibrant and highly visible, and tends to stand out against neutral everyday colours.

Appropriate hearing aid storage boxes can be sourced at minimal cost comparative to the cost a ward may face in compensating for lost hearing aids (this can be in the region of £1,500-£2,000).

“I use the hearing aid maintenance kit on a weekly basis to change patients’ hearing aid batteries.”

Occupational Therapist,
ECAU, Heartlands Hospital



Key findings:

To exemplify the need: in one afternoon on the ECAU, five patients had their hearing aids re-tubed and six patients had new batteries put in their hearing aids. Staff have commented on how useful it is to have batteries and tubing available on the ward, and have received good verbal feedback from patients and relatives about this. One nurse commented that it has really helped with patients taking their medication, as communication between staff and patients has improved.

Positive interventions

The findings from the pilot have been extremely positive in terms of the impact of the solutions and the potential to improve the identification and management of hearing loss, and the support that staff are able to offer to older patients.

Trust-wide awareness, support and commitment is crucial for change to be embedded, and this pilot has proven that there is both a need for these solutions and positive outcomes from them.

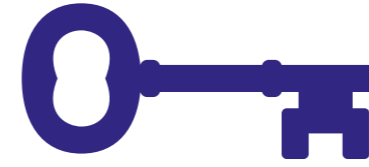
Unsurprisingly, there were challenges faced during the pilot, which all Trusts may encounter. For example, it was difficult to ensure all staff on ECAU attended the training, given that the ward needed adequate staffing at all times. To help overcome this challenge, staff suggested that the training should be delivered as a study day, either ward-based or as part of induction training, to ensure that as many staff as possible are able to attend.

Another challenge was that staff are very busy on the ECAU and, at first, this impacted on their capacity to adopt all of the reports recommendations, all of the time. However, staff who have completed the training and seen the benefits of the recommendations now follow them as standard.

Since the pilot, ECAU staff are more aware of the impact of hearing loss, are able to recognise it, communicate more effectively with greater confidence, and ensure further action is taken as required.

Good practice recommendations

While the focus of the pilot was a hospital ward setting, the recommendations subsequently developed can be readily applied in a number of hospital settings, for patients of all ages with



Key findings:

No hearing aids were lost on the ECAU ward due to the use of storage boxes.

Staff reported finding the storage boxes extremely useful – they kept hearing aids safe, stored hearing aid batteries, and helped to identify patients with hearing loss. Half of staff thought that the box should be freestanding, which gives patients choice as to where it is kept, while the other half thought it should be secured to a patient’s locker. Patients reported liking the storage boxes and many chose to take them home with them.

hearing loss. They are also relevant in wider health and social care provision, such as community, mental health, intermediate and long-term care environments

1. Implement a **hearing loss pathway** to steer staff along the best course of action for older patients with hearing loss – you can tailor the pathway to make it work for your Trust.
2. Ensure **training** in recognising and understanding hearing loss, communication tips and basic hearing aid maintenance is provided to staff.
3. Provide staff with access to a **hearing loss support kit**, which includes a **hearing aid maintenance kit**, so hearing aids can be maintained and repaired on wards.
4. **Screen patients for hearing loss** using the Siemens HearCheck screener, when hearing loss is suspected, and ensure appropriate referrals are made.
5. **Improve communication** between staff and patients by following communication tips and providing patients, who are struggling to hear, with a Sonido personal listener, if appropriate.
6. **Ensure hearing difficulties are recorded** in patient notes and communication care plans, and that they are raised at handover.
7. Make **hearing aid storage boxes** available to patients with hearing aids, to help keep hearing aids safe on hospital wards.
8. Appoint **Hearing Loss Champions** to:
 - a. liaise between clinical staff, audiology services and Action on Hearing Loss or other local charities
 - b. pass on information from training sessions to other staff
 - c. ensure equipment and kits are working and re-stocked as required
 - d. champion the cause to make sure older people with hearing loss are given the best support possible.

“The pilot has really raised awareness of hearing services for the elderly, in particular the personal listener and hearing aid maintenance kit. Elderly patients will be able to make informed decisions on their care, based on the ability to be able to hear and communicate effectively with staff.”

Senior Charge Nurse, ECAU,
Heartlands Hospital

The **Hearing Loss Framework for Trusts** is designed to help NHS Hospital Trusts follow these recommendations and ensure that older people with hearing loss have access to high-quality, safe care and the best possible patient experience – where communication is recognised as core to maintaining dignity.

The framework can be accessed online at:
www.actionhearingloss.org.uk/nurses

The benefits of implementing good practice

Greater efficiency:

- The number of hearing aids lost on wards will be reduced, improving patient well-being, encouraging patients to bring their hearing aids into hospital, and reducing financial claims faced by wards for lost aids.
- Staff and patients will be able to communicate with each other more effectively.
- There will be reduced stays in hospital, and fewer delays in treatment and in obtaining consent due to ineffective communication – this will save money and increase bed availability.
- Having ward staff maintain and repair hearing aids will reduce pressure on audiology departments, as there will be less demand for audiologists to visit wards to repair hearing aids and change batteries.

Improved quality of care, safety and patient experience:

- Increased identification and recognition of hearing loss in patients, enabling hearing loss to be managed and communication needs to be addressed.
- Improved communication between patients and staff, which means:
- Improved engagement about the patient's treatment for other conditions
- Increased confidentiality between patients and staff
- Patients are better able to give informed consent and participate in treatment
- Increased social interaction – for example, through improved communication.
- Improved rehabilitation, due to:
 - more effective use of medication for patients, as staff are better able to explain and discuss its importance and proper use
 - increased ability to benefit from physiotherapy and occupational therapy, and so on, as patients are better able to participate in their treatment.
- Patients will be transferred to the most appropriate setting:
 - improved communication and understanding when patients are moved within and from hospital.
- Improved use of hearing aids and access to hearing aid support while in hospital:
 - improved management/reduction in losses of patients' hearing aids.

Prevention:

- Effective communication will reduce the risk of misdiagnosis – for example, between dementia and hearing loss:
 - there is evidence of a strong link between hearing loss and dementia, highlighting the need for the early diagnosis and management of both conditions.
- Screening patients for hearing loss, and encouraging them to take action early, will help to prevent the significant personal, economic and social costs of hearing loss.

Employer duties:

- Following the recommendations will help NHS Hospital Trusts meet the requirements of the Equality Act 2010 (the Disability Discrimination Act in Northern Ireland):
 - there is a clear legal requirement to provide access to health services for people with hearing loss. The Equality Act 2010 (the Disability Discrimination Act in Northern Ireland) requires service providers to make reasonable adjustments to ensure their services are accessible for people with disabilities, and that they must anticipate and promote these adjustments rather than make them on a responsive basis.
- The recommendations and framework also support:
 - NHS England's Accessible Information Standard
 - NHS Business Plan, 'Next Steps on the NHS Five Year Forward View' and its objective of promoting equality and reducing health inequalities

Recommendations for other groups

People with hearing loss should...

- Seek to access communication support appropriate to their needs
- Make enquiries regarding the hospital's complaints process if satisfactory changes are not made to support their communication needs.

Health sectors across England, Scotland, Wales and Northern Ireland should...

- Meet their legal obligations to ensure their healthcare services are fully accessible to patients with hearing loss. They should also meet their public sector equality duties by promoting equality of opportunity for people with hearing loss
- Follow NICE guidance and audiology quality standards, promote examples of good practice, and include questions about communication and management of hearing loss in patient satisfaction surveys
- Follow the Accessible Information Standard and other NHS accessibility guidance to ensure communication needs of patients with hearing loss are shared between services, so that staff can anticipate patients' needs and make reasonable adjustments.

UK governments should...

- Support and promote the framework
- Make commitments to ensure that inequalities in access to health services for people with hearing loss are tackled.

Clinical Commissioning Groups, Health and Wellbeing Boards and Local Authorities should...

- Plan to improve access to health services for people with hearing loss, as part of their Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies.

Professional associations, including the Royal College of Nursing, the Royal College of Surgeons, the Royal College of Practitioners, the British Medical Association and other medical royal colleges, should...

- Support and disseminate the framework
- Improve guidance to ensure better access and communication for people with hearing loss
- Ensure that the identification and management of hearing loss and good practice around communication are included as part of staff training, including continuing professional development, training conferences, and other ongoing training.

Hearing Loss Framework

The Hearing Loss Framework for Trusts provides guidance and resources to help Trusts make the practical, easy-to-implement, cost-effective changes that are proven to empower staff and improve patient experience. It includes templates, checklists and hearing aid support guides that you can download and print for use on your ward.

The framework is designed in line with NHS England's commitment to put patients at the heart of everything it does, ensuring patient and public involvement within the NHS and

promoting equality and equity to improve health outcomes for all.

Some Trusts are already doing work to improve the care of older people with hearing loss – for example, delivering deaf awareness and hearing aid support training through e-learning programmes – this framework can complement these initiatives.

You can access the downloadable framework resources online at:

www.actionhearingloss.org.uk/nurses

Supporting patients who are profoundly deaf

While the focus of the framework is older people who are likely to be identified as being 'hard of hearing', rather than people who are profoundly deaf, it must be noted that NHS Trusts have a duty to provide patients who are profoundly deaf with communication support – for example, a British Sign Language interpreter. This must be delivered by a communication professional registered with The National Registers of Communication Professionals working with Deaf and Deafblind People (NRCPD).

For further information and details of registered professionals, please visit **www.nrcpd.org.uk**

You can book communication support through Action on Hearing Loss – see page p.18 for contact details.

Further information

Action on Hearing Loss Information Line

To find out more about the Nursing Practice Project and all aspects of the Hearing Loss Framework, contact the Action on Hearing Loss Information Line:

Action on Hearing Loss Information Line,
9 Bakewell Road (c/o RNIB), Orton Southgate,
Peterborough, PE2 6XU

Telephone: 0808 808 0123 (freephone)
Textphone: 0808 808 9000 (freephone)
SMS: 0780 0000 360
Email: information@hearingloss.org.uk
Twitter page: @HearinglossIL

The Information Line can also provide you with useful guidance on a wide range of issues related to hearing loss and tinnitus. Alternatively, you can access our information leaflets and factsheets from:

www.actiononhearingloss.org.uk/publications

Action on Hearing Loss Access Solutions

To book communication support through Action on Hearing Loss, please contact:

Access Solutions (choose from a range of communication professionals: British Sign Language interpreters, notetakers, speech-to-text reporters, lipspeakers)

Telephone: 0845 685 8000
Textphone: 0845 685 8001
Email: communication.services@hearingloss.org.uk

Key policy documents

Access to Health, Action on Hearing Loss, 2016.

Government, the NHS, GPs and other health care services must take action to meet the requirements of equality legislation and standards for accessible information and communication, to ensure people with hearing loss can access health care without barriers.

Access the policy statement at:
actiononhearingloss.org.uk/health-social-care

Hearing Matters, Action on Hearing Loss, 2015.

Hearing Loss is major public health issue that affects more than 11 million people across the UK. Read our report, which outlines updated evidence demonstrating the link between hearing loss and mental health.

Access the report at:
actiononhearingloss.org.uk/hearingmatters

Good Practice? Why people who are deaf or have hearing loss are still not getting accessible information from their GP, Action on Hearing Loss, 2018.

This report presents the findings of survey research exploring the experiences of people who are deaf or have hearing loss when visiting GP practices. The report also includes practical recommendations for GPs and other NHS providers on the simple things they can do to improve the accessibility of their services for people who are deaf or have hearing loss.

Access the report at:
www.actiononhearingloss.org.uk/goodpractice

Joining Up: Why people with hearing loss or deafness would benefit from an integrated response to long-term conditions, Action on Hearing Loss, 2013

This joint report by Action on Hearing Loss and the Deafness, Cognition and Language Research

Centre looks at the issues around providing health and social care services to people who have hearing loss or who are deaf and also have long-term conditions. There are an estimated 15 million people in the UK with long-term conditions – conditions that can be managed but not cured, such as hearing loss, diabetes, sight loss, cardiovascular disease and dementia. The report outlines the relationship between long-term conditions, hearing loss and deafness and, in particular, the strong link between hearing loss and dementia.

Access the report at:
actiononhearingloss.org.uk/joiningup

Action Plan on Hearing Loss

The Department of Health and NHS England's Action Plan on Hearing Loss states that urgent action is needed to tackle the growing prevalence and impact of hearing loss and to reduce unwarranted variations in service quality and provision. The Action Plan states that NHS commissioners and local authorities should assess the hearing needs of local populations, improve the quality of hearing services and ensure hearing loss is taken into account as part of plans and strategies for other long-term conditions. The Action Plan also lists "improved access to wider health services" as a key area for quality improvement.

To find out more, please visit:
www.england.nhs.uk/wp-content/uploads/2015/03/act-plan-hearing-loss-upd.pdf

Hearing Loss in Adults guideline

This NICE guideline highlights the importance of ensuring hearing loss is diagnosed as early as possible; recommends that people with diagnosed and suspected dementia should be referred for a hearing assessment; and calls for everyone whose hearing loss affects their communication to be offered hearing aids.

To find out more, please visit:
www.nice.org.uk/ng98

Accessible Information Standard

In England, all providers of NHS or publicly funded adult social care services must meet the legal requirements of NHS England's Accessible Information Standard.

The Standard sets out clear guidance on what you must do to make your services accessible to people with disabilities and sensory loss. This includes the needs of parents, guardians or carers. The Standard establishes a consistent approach to make sure people with disabilities and sensory loss really understand the information you give them – and can participate fully in discussions about their treatment and care.

Further information is available at:
www.england.nhs.uk/ourwork/accessibleinfo/

And also at:
actiononhearingloss.org.uk/Accessible-Information-Standard

Endnotes

i **Access all Areas?** A report into the experiences of people with hearing loss when accessing healthcare, Ringham, L, Action on Hearing Loss, London, 2013. Available at: actiononhearingloss.org.uk/Access-All-Areas

ii RNID, *A Simple Cure*, London, 2004

iii *The care of frail older people with complex needs: time for a revolution*, Cornwell, J, The King's Fund, 2012.

iv Statistics from the Heart of England NHS Foundation Trust

v *Cost benefit analysis of hearing screening for older people*, RNID/London Economics, London, 2010

Appendices

Appendix i

You can tailor the following questionnaires for your Trust, to undertake your own research and enable you to measure the impact of any interventions piloted to address hearing loss issues.

Nursing Practice Project – Questionnaire for Patients

Questionnaire

1. Do you have difficulty hearing the doctors, nurses and other healthcare staff in the hospital?

Yes No Sometimes

2. Do you have a hearing aid(s)?

Yes No

2a. If yes, did you buy the hearing aid(s) or receive them free of charge?

3. If yes to question 2, how often do you wear your hearing aid(s)?

Always Sometimes Rarely Never

4. If you answered 'rarely' or 'never' to the question above, please explain why.

5. If you do wear a hearing aid(s) or have a hearing loss, are the hospital staff aware of this?

Yes No Not sure

6. If you do wear a hearing aid(s) would you welcome advice and information on making the best use of your hearing aid(s)?

Yes No Possibly

7. Do you understand why you are in hospital?

Yes No Not sure

8. How well do you understand what the doctors/nurses tell you?

Very well Fairly well/Partly Not well at all

9. Are you involved in decision-making regarding your care? For example, about what you want to happen?

Yes Partly No

10. Do you feel that you interact well socially with people on the ward, for example, staff, other patients and visitors, or do you feel that you are missing out, possibly because of a hearing problem?

Yes No Not sure

11. If you do not have a diagnosed hearing loss, would you be willing to have your hearing status checked whilst in hospital?

Yes No Possibly

End of questionnaire

Nursing Practice Project – Questionnaire for staff working with older people

Questionnaire

1. Do you feel that you are able to identify when a patient may have a hearing loss?

Yes No

If yes, please write down some of the possible indicators below:

2. Do you experience communication issues with patients which you suspect are related to their hearing loss? Please tick as appropriate

Yes, often Yes, sometimes No

3. If a patient is having difficulty hearing you do you take steps to help them understand you?

a. If yes, please give examples of the steps that you take

b. If no, are you aware of ways in which communication could be improved on the wards for people with hearing loss (please give details)?

4. If hearing loss is identified or suspected, is this recorded in some way?

a. If yes, how?

b. If no, how, when and who would be best to record/report it?

5. Equipment is available that can make it easier for people with hearing loss to communicate. Please identify below any equipment that you are aware of and whether it is available for use on the wards:

	Aware of:		Available on ward:		
	Yes	No	Yes	No	Not sure
Hearing aids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Portable loops (for use with hearing aid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal listeners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amplifiers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amplified telephones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV with subtitles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Any other equipment? Please detail here:

6. If a patient does wear a hearing aid, do you know what to do if it doesn't appear to be working?

Yes No Not sure

If yes, please give examples of what you would do:

7. Do you have any useful tips to ensure hearing aids are not lost on wards?

Please briefly describe your role, for example, Nurse, Healthcare Assistant, Administrative, Managerial?

End of questionnaire

Appendix ii

Suspected hearing loss referral letter

Date: _____

Patient name: _____

Date of birth: _____

Postal address: _____

NHS number: _____

Dear Colleague,

This patient has had their hearing screened during a stay in hospital.

The result indicates that they have a hearing loss.

Advice for GPs

- recommended investigation: Otoscopy for outer and middle ear pathology
- refer to NICE Hearing Loss in Adults Guideline and the British Academy of Audiology Guidelines for Direct Referral Guidance for GPs (2016) before referring to audiology services

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**

Contact our free, confidential Information Line:

Telephone 0808 808 0123

Textphone 0808 808 9000

SMS 0780 000 0360

(standard text message rates apply)

Email informationline@hearingloss.org.uk

Join us

 Action on Hearing Loss

 @ActionOnHearing