

**Freedom of Information Act Disclosure log  
- Reply Extract**

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**You asked**

Please see attached document.

**Attachments included:** Yes



To: FOI officers via email

11 May 2021

## Paediatric audiology services: 2021/22

### University Hospitals Plymouth NHS Trust

This is a request for information under the Freedom of Information Act. Please confirm that you have received this request.

The aim of these questions is to monitor staffing capacity and other indicators of a quality paediatric audiology service. We are told by decision-makers, such as Health Education England, that more evidence is needed before any changes will be made to improve the availability of staff. We know from previous research that recruiting and retaining staff with the appropriate expertise, is a problem, and we hope that annual monitoring of staffing will benefit audiology services, as well as deaf children and their families.

The information requested may relate to services which you commission from private companies or are held in more than one department e.g. ENT services. **As you remain legally accountable for these services we still expect you to collate the information, rather than referring us on.**

**This is part of a nationwide request, using a standardised format to ensure consistency. Please do not alter this form. Please use the box at the end of this survey to provide any context or background to any of your answers.**

**Please answer ALL the questions.** If the information cannot be provided in whole or in part, please justify all omissions by reference to the specific exemptions of the Act. We look forward to your response promptly but no later than 20 working days.

## Questions for paediatric audiology services: 2021/22

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**Please only complete this survey if your audiology service provides diagnostic hearing assessments AND hearing aid provision for children.** This may be hospital or community based. It is not necessary to complete this survey if your audiology service only provides hearing screening or assessments (such as primary tier, second tier or community services) and refers children on to other services for hearing aid provision when necessary.

Please base your answers on the support available as of 31 March 2021.

### Section 1: Your service

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**Please answer the questions below based on the situation as of 31 March 2021.**

1. Please provide the following information:

Your name:	Adam Beckman	
Your role:	Head of Audiology Services	
Your email address:	<a href="mailto:adam.beckman@nhs.net">adam.beckman@nhs.net</a>	
Your telephone number:	01752 430844	

Please give the name of your audiology service/s. If you provide services on behalf of another Trust/s please provide details of all the Trusts that you provide services for below. **Please write names in full and expand acronyms:**

Audiology Service  University Hospital Plymouth NHS Trust  No other NHS Trusts
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If you provide the services for another Trust/s, do these include diagnostic hearing assessments and hearing aid provision for children in any of these locations? Please put a cross next to the relevant answer.

- Yes
- No (go to question 2)

If you selected Yes, we understand that your responses to the questions below may differ for each Trust. Please contact us on [campaigns@ndcs.org.uk](mailto:campaigns@ndcs.org.uk) for an additional form/s.

2. We have included below, the locations where previously you, or a CCG for your area, have told us that paediatric audiology services are provided. Please complete the table by:
- Putting a tick (✓) or cross (✗) in the final column to let us know if the information is correct;
  - Please strike through information that is incorrect and add in any corrections in the relevant boxes;
  - Please add missing location details at the end of the table adding extra rows if necessary.

Name of NHS Trust or Provider	Hospital or Clinic or site name	Address	Postcode	Funding CCGs	Is your service jointly delivered with an adult service? (for example does the service share clinical staff/a reception or waiting area/share a budget?) Y/N	Is this information correct? Please (✓) or cross (✗).
University Hospitals Plymouth NHS Trust	Derriford Hospital	Derriford Road, Plymouth, Devon	PL6 8DH	NHS Devon and NHS Kernow	Y	✗
University Hospitals Plymouth NHS Trust	Ivybridge Health Centre	Station Road, Ivybridge, Devon	PL21 0AJ	NHS Devon	Y	✓ (note – service currently suspended)

University Hospitals Plymouth NHS Trust	Mount Gould Local Care Centre	200 Mount Gould Road, Plymouth, Devon	PL4 7PY	NHS Devon and NHS Kernow	Y	x
University Hospitals Plymouth NHS Trust	Plymouth Child Development Centre	Scott Business Park, Beacon Park Road, Plymouth	PL2 2PQ	NHS Devon and NHS Kernow	N	x
University Hospitals Plymouth NHS Trust	South Hams Hospital	Plymouth Road, Devon, Kingsbridge	TQ7 1AT	NHS Devon	Y	✓ (note – service currently suspended)
University Hospitals Plymouth NHS Trust	Tavistock Clinic	70 Plymouth Road, Tavistock, Devon, PL19 8BX	PL19 8BX	NHS Devon and NHS Kernow	Y	x (note – service currently suspended)

## Section 2: Waiting times

3. In the last quarter, (1 January – 31 March 2021) how many days on average did patients wait for the following?  
If you are not sure please estimate.

We understand that the waiting time data provided in this section will have been affected by the NHS response to the pandemic. We hope that by asking for data just from the last quarter that responses will be more consistent with the service's normal activity. However, we would expect there to be more variation than normal due to new factors such as guidance on surgical priorities, waiting lists from periods when services were reduced, or family circumstances preventing them from attending etc. Data provided will be analysed with these considerations in mind.

	<b>Referral to first assessment – KPI NH2 (newborn hearing screening pathway)</b>	<b>Referral to first assessment (older children post-newborn hearing screening)</b>	<b>Decision to fit hearing aids to time fitted for PCHI (both newborn hearing screening pathway and older children referred from other routes)</b>	<b>Routine follow-up hearing aid review for existing PCHI not including glue ear (wait beyond expected date, i.e. a child seen for their 3/12 follow up at 3 months would be 0 days, a child seen at 4 months for a 3/12 follow up would be 30 calendar days)</b>	<b>New earmoulds (working days from time notified of need)</b>	<b>Hearing aid repairs (working days from time notified of need)</b>	<b>Routine follow-up hearing tests for children with glue ear (wait beyond expected date, i.e. a child seen for their 3/12 follow up at 3 months would be 0 days, a child seen at 4 months for a 3/12 follow up would be 30 calendar days)</b>	<b>Grommet surgery for glue ear (RTT pathway)</b>
<b>Number of days</b>	<20	<40	<30	90	1-2	1-2	See comment	<18 weeks

If you would like to add any information about your service and the data provided on waiting times please use the free text box below.

**There has been significant variation, as noted, but apart from for patient choice we have been meeting the key waiting time targets for new assessments and new fittings. For follow-ups the average waiting time isn't meaningful, as it has varied so much. We currently have 48 children waiting past their planned see by date, but there is great variation how long this is as some are very overdue to parent choice**

### Section 3: Your policies

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Please answer the questions in this section based on the situation as of 31 March 2021. Please put a cross next to the relevant answer/s.

4. What options are included in the current management pathway in your service for temporary conductive hearing loss? Select all that apply:

Air conduction hearing aids	<input checked="" type="checkbox"/>
Bone conduction hearing aids	<input checked="" type="checkbox"/>
'Watch and wait'	<input checked="" type="checkbox"/>
Grommets	<input checked="" type="checkbox"/>
Otovent	<input checked="" type="checkbox"/>

Other, please specify:

5. Are there any groups of children that you don't currently provide hearing instruments for? Select all that apply:

Temporary conductive loss	<input type="checkbox"/>
Unilateral loss	<input type="checkbox"/>
Mild loss	<input type="checkbox"/>
Moderate loss	<input type="checkbox"/>

Auditory Neuropathy Spectrum Disorder (ANSD)	
Not applicable – we provide hearing instruments for all children	x

Other, please specify:

If you have selected any groups of children above, please explain why you don't provide hearing instruments for those groups.

**We can provide devices (“hearing aids”) with limited amplification for ANSD, and will do so if either education or the families will provide the necessary remote microphone system, but we don’t provide the whole system as it is not funded for health to provide “radio aids”**

6. Do you currently provide free batteries for children’s hearing aids? Please select one answer:

No, never	
Yes, always	x
Yes, with limitations	

If you have said Yes, with limitations, please specify what these limitations are:

7. Do you currently provide a choice of coloured or patterned moulds to children at no extra charge? Please select one answer:

No, never	
Yes, always	x
Yes, with limitations	

If you have said Yes, with limitations, please specify what these limitations are:

8. What types of appointments do you offer? Please select all that apply:

We offer extra appointments in school holidays	
We offer extended opening times (before 9 am and/or after 5pm)	X
We offer Saturday appointments	X
We deliver some services in schools	X *
We offer telephone or video appointments	x

\* This service is currently suspended, but is expected to restart in September

**Section 4: Your caseload**

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9. How many deaf children are there within your case load?

Permanent Childhood Hearing Impairment (PCHI) should include:

- All children who have a unilateral or bilateral sensori-neural or permanent conductive deafness, at all levels from mild to profound, using BSA/BATOD descriptors.
- Those with permanent conductive deafness to include those children with a syndrome known to include permanent conductive deafness, microtia/atresia, middle ear malformation, or those who have had middle ear surgery such as mastoidectomy. It also includes those children with glue ear who are not expected to 'grow out' of the condition before the age of 10 years, such as those born with a cleft palate, Down's syndrome, cystic fibrosis, or primary ciliary dyskinesia.
- **BUT NOT children known to have Auditory Neuropathy Spectrum Disorder (ANSD) as we are asking for those numbers separately.**

Temporary conductive deafness should include:

- children with glue ear who may have been fitted with hearing aids as an alternative to grommet surgery but who are expected to 'grow out' of the condition before the age of 10 years.

	<b>On 31 March 2021</b>
<b>Number of births per annum your service covers</b>	4500
<b>Age group your service covers (e.g. 0 – 18 years)</b>	0-19
<b>Number of children with PCHI - total</b>	250
<b>Number of children with PCHI referred to your service from the Newborn Hearing Screen</b>	This information is not held
<b>Total number of children with temporary deafness (and fitted with hearing aids)</b>	150
<b>Total number of children with ANSD</b>	This information is not held

## Section 5: Quality improvement

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Please put a cross next to the relevant answer/s.

10. Have you registered for (Improving Quality in Physiological Services) IQIPS this year? Please select one answer:

No	
Yes for adults audiology services	
Yes for children's audiology services	
Yes for both adults and children's audiology	x

11. Which of the below best describes your current status with regard to IQIPS for **children's audiology services**? Please select one answer:

Registered for the IQIPS process but dropped out after March 2019 ( <i>go to question 14</i> )	
Never registered for the IQIPS process ( <i>go to question 14</i> )	
Registered for the IQIPS process but have not had an onsite assessment ( <i>go to question 15</i> )	
Registered for the IQIPS process, had an onsite assessment but did not reach the required standard ( <i>go to question 15</i> )	
Gained accreditation with IQIPS - at least one site that sees children ( <i>go to next section 6: Staffing and training</i> )	x
Gained accreditation with IQIPS, completed 4 year audit cycle and re-accredited	
Gained accreditation with IQIPS, completed 4 year cycle and not re-accredited	

12. If you are not registered with IQIPS or have dropped out, what is the **main** reason? Please select **one** answer:

Lack of capacity (staffing)	
Think we won't reach the required standard	
No budget for it	
It's a tick box exercise	
It's too complicated	
Commissioners won't fund it	
Commissioners don't require it	

Trust Management haven't prioritised it	
It is not mandatory	

Other (please specify)

**\*\*\*\*Please move to section 6: Staffing and training. \*\*\*\***

13. If you are registered with IQIPS but have not progressed in the last year, what is the **main** reason? **Please select one answer:**

Lack of capacity (staffing)	
Think we won't reach the required standard	
No budget for it	
It's a tick box exercise	
It's too complicated	
Commissioners won't fund it	
Commissioners don't require it	
Trust Management haven't prioritised it	
It is not mandatory	
Not applicable – we have made progress with accreditation in the last year	

Other (please specify)

14. Has your service booked its onsite assessment with UKAS? Please select one answer:

No ( <i>go to question 18</i> )	
Yes	

If yes, what is the date of your onsite assessment:

MM/YYYY

15. If your service has not yet booked its online assessment with UKAS, what colour are you currently at on the UKAS traffic light system?

Please put a cross next to the relevant answer.

Red	
Amber	
Green	
Not using it	

## Section 6: Staffing and training

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16. How many full time equivalent staff does your **children's** audiology service have at the following levels as on 31 March 2021?

Please express part-time roles as a fraction of a full time role eg. 1 full time role and a part time role of 3 days would be 1.6 FTE.  
Alternatively, if a role is split between children's and adult's audiology services, please assign or estimate an FTE figure to the time spent working with children.

	31 March 2021				
Level	Permanent posts	Locum/ temporary posts	Vacant posts	Frozen posts	Apprentices
Band 1					
Band 2					
Band 3	0.4				
Band 4					0.2
Band 5	1.0				
Band 6	2.4				0.3
Band 7	3.3				
Band 8 a					

<b>Band 8b</b>	0.2				
<b>Band 8 c</b>					
<b>Band 8 d</b>					
<b>Band 9</b>					
<b>Doctor specialising in audiology (paediatrician, audiovestibular physician etc.)</b>					
<b>Other staff e.g. volunteers and students</b>					

**Please put a cross next to the relevant answer/s.**

17. If there has been a reduction in the number or skill level of staff compared to last year, what are the reasons for this?  
Please select all that apply.

We have been unable to recruit staff at higher bands – level 6 and above	
We have been unable to recruit staff at lower bands – level 5 and below	
Posts have been frozen	
Posts have been deleted	
Staff hours have been reduced – voluntarily or otherwise	

Other, please detail:

18. Are you aware of any planned changes to staffing in 2021/22?

- No
- Yes, please detail:

19. Thinking about permanent posts in the service as of 31 March 2021, what was the split of clinical and non-clinical sessions for audiology staff?

Level	Number of clinical sessions per week	Number of non-clinical sessions per week
Band 5	10	0
Band 6	9	1
Band 7	8	2
Band 8 a		
Band 8 b	1	1
Band 8 c		
Band 8 d		
Band 9		
Doctor specialising in audiology (paediatrician, audiovestibular physician etc.)		

20. Are all staff able to access the CPD necessary for their roles? Select all that apply:

Yes	x
No – because of financial constraints	
No – because training expenses are not covered e.g. travel to training	
No – because there isn't cover for clinical duties	

No – other [please detail]

## Section 7: Children's Hearing Services Working Groups

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Please answer the questions in this section based on the situation as of 31 March 2021. Please put a cross next to the relevant answer/s.

21. Does the Children's Hearing Services Working Group (CHSWG) in your area include at least one parent representative? Please select one answer:

Yes	x
No	
Don't know	
We don't have a CHSWG ( <i>go to the Section 8: Technology</i> )	

22. Does the CHSWG in your area produce a publically available annual report? Please select one answer:

Yes	
No	x
Don't know	

## Section 8: Technology

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23. As of 31 March 2021 which organisation provides the following technology:

**Please put a cross in the relevant boxes to select your answers.**

	The local authority	Your service	Jointly - the local authority and your service	Not provided by either your service or the local authority
Radio aids	x			
Remote microphones				x
Streamers				x

24. As of 31 March 2021 do you balance or pair streamers purchased by:

**Please put a cross in the relevant boxes to select your answers.**

	The local authority	Parents of the deaf child	We don't balance or pair devices unless we've provided them	Not provided by either your service or the local authority
FM systems	x	x		
Streamers	x	x		

25. Are there any plans to stop or significantly reduce the provision of hearing equipment or accessories for hearing equipment in 2021/22?

Please select one answer:

- No
- Yes – please tell us which equipment and why:

## Section 9: Patient engagement

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Please answer the questions in this section based on the situation as of 31 March 2021. Please put a cross next to the relevant answer/s.

26. In the past year, how have you prepared young people for transition to adult services? Please select all that apply.

Provide information on the adult service for young people	<input checked="" type="checkbox"/>
Offer an appointment with the adult service before being discharged from the children's service	<input type="checkbox"/>
Hold joint appointments with both paediatric and adult audiologist present	<input type="checkbox"/>
Visit local schools to offer sessions to share information with young people about deafness, independence and transition etc.	<input type="checkbox"/>
Hold transition event or clinic for young people	<input type="checkbox"/>
None of the above	<input type="checkbox"/>

Other please state:

**Written information on services for transition; Ready, Steady, Go; as on same site with same support facilities, with some staff seeing both children and adults, joint appointments not required.**

27. What was your service's most recent score in the family and friends test?

**>95% would recommend**

Date the score was recorded: MM/YYYY

**02/2020**

28. How many appointments were classed as 'Was not Brought (WNB)' or 'Did Not Attend (DNA)' in the 2020/21 financial year? Please provide the number of appointed classed as WNB or DNA and the total number of appointments offered in 2020/21 (including all appointment types for children).

<b>Number of appointments classed as WNB/DNA in 2020/21</b>	<b>Total number of appointments offered in 2020/21 (all appointment types for children)</b>
276	2873

## Section 10: Funding and commissioning

29. How is your funding provided? Please select all that apply.

As a block contract within ENT services?	
As a block contract within wider children's services?	
As a block contract for all children's audiology services?	
As a block contract for both child and adult audiology services?	x
As an individual tariff per child?	x

Other, please specify:

**Block contract funding, but with service line activity data underpinning value of the block contract**

30. If you run a joint paediatric and adult service, are your budgets shared? Please select one answer:

Our service is joint and budgets are shared	x
Our service is joint and budgets are not shared	
Our service is paediatric only	

31. Was your audiology service for deaf children commissioned differently in the 2020/21 financial year when compared to the 2019/20 financial year? (e.g. competitive tendering, any qualified provider, etc.)

- No
- Yes - please explain the changes and the impact this has had on your service and patients:

**Due to covid, all normal arrangements were suspended**

32. Is your audiology service being commissioned differently or reviewed in 2021/22? (e.g. competitive tendering, any qualified provider, etc.)

- No

Yes – please explain the changes you are expecting and the impact you expect this to have on your service and patients:

**Hybrid of block and service line, in line with new NHSE&I guidance. Not anticipated to have significant impact**

### **Section 11: Responding to the coronavirus pandemic**

33. Have your service introduced any new ways of working or changes in response to the coronavirus pandemic that you anticipate will be retained as the impact of the pandemic recedes? Please outline what these changes are (e.g. introduction of remote appointments, changes to care pathways, etc.).

**Increased remote follow-ups for hearing aid users**

### **Section 12: Other**

34. Please use the box below to provide any context or clarification to any of your answers in this survey. Please also use this box if there is anything else you'd like to add.