Virtual Drop-in Support Clinic for Hearing Aid Patients



Susannah Goggins, Principal Clinical Scientist, Audiology, BCUHB

Contact: susannah.goggins@wales.nhs.uk

Project Background:

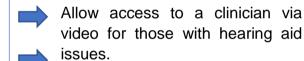
Within the Audiology service, there is a need for timely access to support for hearing aid patients due to patient reliance on hearing devices.

For some, conversing over the telephone can be difficult, so we offer a variety of ways patients can contact us.

As a service, we have been using the Attend Anywhere video call platform for some scheduled care appointments (booked in advance), but not as a method for patients to access support when needed.

Project Aims/Objectives:

To investigate the use of an Attend Anywhere Waiting Room for a 'drop-in' virtual clinic, attended by a clinician, during advertised opening times.



Ability to see the patient on screen, potentially helping with fault finding and practical elements such as correct ear mould insertion and re-tubing.

Encouraging self-management of hearing aids, providing timely support, and preventing some patients from needing to attend the hospital or converse on the telephone.

Project Approach:

- Engaged with service leads and clinicians to plan 'drop-in' video clinics
- Patients shown letter, information /instructions for informal feedback.
- Training pack devised for staff.
- 300 patients contacted by letter over 4 month period (sent in batches of 100) advising of new clinic/way of accessing service.
- Clinics held from May to end of Aug 22 at advertised times

Project Outcome(s):

- 300 patients contacted with instructions about the video 'dropin' repair/support clinic
- 0 patients used the service in the 4 month time period

Average age of those contacted: 73.9 years old (range 18-93).

The first 100 patients who were contacted by letter were looked at in more detail:

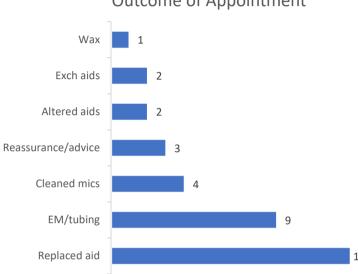
 34 of these accessed the service for support in the time period that the video 'drop-in clinics were running. These attended the service for the following reasons:

Reason for Contact

were also collated:

Outcome of Appointment

The outcomes of the appointment for support



This would suggest that for some patients, a video drop-in could have been of benefit, e.g. for reassurance/advice, instructions on cleaning microphones and potentially instructions on retubing.

Some of these could have been done via video, rather than needing a face-to-face appointment.

However, patients did not try to contact the department via video.

Feedback 2 lost aid 2 EM/tubing issues 8

 A further 22 contacted the service to request more batteries or tubing

 The remaining 44 had no contact with the service during that time period

Of the 34 that accessed the service for support during the 4 month time period, a group of 20 were contacted to complete a questionnaire.

- · All reported their preferred method of contact with the service was by phone
- 70% were aware they could contact the service by email
- 60% were aware the service had a website with information and instructions for patients
- All reported they received the video drop-in clinic letter
- All reported they did not try the service and they prefer to see someone in person
- All patients reported they were hoping the open access repair/support clinic (face-to-face) would reopen soon and 20% also stated they were hoping the volunteer drop-in community clinics would reopen soon (both closed during Covid-19 pandemic)

Key Conclusions:

Faulty aid/not

hearing well

Results indicated that this hearing aid patient group did not benefit from a video 'drop-in' hearing aid support clinic.

Patients chose not to contact the department this way and reported to prefer face-to-face support.

This would suggest it would not be worthwhile offering this service as a means of accessing support for Audiology hearing aid patients.

Next Steps:

The results will be shared with the wider team and other Audiology services in Wales.

During external audit against the Quality Standards for Adult Hearing Rehabilitation Services, results will be used in discussions around current methods of communication offered to patients.

Bevan Exemplar | Cohort 7