

# **Report on the 2021 National Audit of Quality Standards for Children's Audiology (Wales)**

## **Introduction and Purpose of this document:**

To provide an overview to the Aneurin Bevan University Health Board on the performance of the Children's Audiology service when audited against the Quality Standards for Children's Audiology (Wales) version 2. All health boards are expected to participate in audit against these standards, which are included in the annual National Clinical Audit and Outcomes Review Plan, Ref: [nhs-wales-national-clinical-audit-and-outcome-review-plan-annual-rolling-programme-2019-2020.pdf](https://www.nhs.uk/clinicalaudit/auditandoutcomesreviewplan/annualrollingprogramme2019-2020.pdf)

Outcomes from the audit can be used to help assure service quality and safety of audiology services. They can also be used to measure and help drive forward improvements in the quality and safety of services.

## **Background**

Quality Standards for Children's Audiology (Wales) have been in place since endorsement by the Minister for Health and Social Services in 2010. In 2015, the Quality Standards for Children's Audiology was rewritten in light of improvements in the field and feedback after previous audits.

The standards reflect the patient pathways and an outline document can be viewed at: <https://gov.wales/sites/default/files/publications/2019-10/quality-standards-for-childrens-hearing-services.pdf>

Between October and November 2021 all Children's Audiology Services in Wales were audited using the new version 2 of the Quality Standards for Children's Audiology (2016).

The target for the 2021 audit was 85% in each individual standard and an overall target of 90%.

## **Outcome for Aneurin Bevan University Health Board - Children's Audiology service 2021**

The Aneurin Bevan University Health Board Children's Audiology Service **met the overall target of 90%**.

The service **met the 85% target in eight out of nine individual** standards. It did not meet the 85% target in Standard 1: Accessing the Service.

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4 out of 86 individual criteria were identified as **very low scoring** as outlined below;

- Speed of access for routine referrals against 6 week target – long wait times for routine referrals
- Speed of access for review/ follow-up appointments – delay to planned reviews
- Speed of access for hearing aid earmould replacement against a 2 day target
- Routine review schedule for children with hearing aids – not meeting planned review schedule

Individual criteria where **good practice was commended** include;

- 'Drive-through' clinics were used for OAE screening and hearing aid repair/replacement where possible during the COVID-19 pandemic. This reduced foot-fall in hospital/clinic sites and increased capacity by minimising the amount of disinfection needed between patients.
- Community Lead paediatric audiologist worked hard to reduce waiting times prior to COVID-19, with a robust triaging system and communication with Health Visitors with regards to appropriate reasons for referral to Audiology and specific concerns regarding hearing loss. Despite the increase in waiting times, this is ongoing, with a plan to prepare a presentation for Health Visitors.

For comparison, in 2018, the service **met the 80% target in all nine individual standards** and **met the overall target of 85%**.

**Concluding remarks from the audit team:**

The day ran smoothly considering this is the first time the audits have been done virtually. Anne and the team presented very clear evidence to support each standard and there were no real ambiguities. Unfortunately, the COVID-19 pandemic has had a significant impact on waiting times, with the routine wait for community appointments increasing from 12-16 weeks pre-pandemic, to 18 months currently. Succession planning will need to be considered for Dr Veronica Hickson, Medical Lead for Children's Audiology in advance of her planning for retirement.

**Response from Head of Service:**

The Audit team were fair and thorough and the resultant score reflects the ABUHB team's self-assessment of the service, with minor changes agreed on the day of the audit.

Lower scoring areas are centred on waiting times which have increased significantly compared to pre-Covid, and an application has been made for recovery funding to address this problem.

There is a SPIN (Special Interest Module) in Audiovestibular medicine due to start under the auspices of RCPCH. South East Wales will hopefully be at the forefront and become a Pilot area in the next few months. During previous planned sick leave for the Medical Lead the ABUHB consultant paediatricians did see newly diagnosed Babies with a hearing loss, and are aware of the need for succession planning.

The Children's Audiology Quality Standards Audit continues to be an extremely useful tool in improving and developing services in ABUHB.

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Detailed scoring and improvement actions will be available at the request of the Head of Service/paediatric audiology medical lead.

If there are further queries relating to the above please do not hesitate to contact me.

Further communication with regard to the next round of paediatric audiology service audits, will be circulated to Heads of Services/paediatric audiology medical leads following consideration by the Audiology Standing Specialist Advisory Group, and the Welsh Government.

The final All-Wales report for 2021 will be disseminated, including to Audiology Heads of Services, Paediatric Audiology Medical Leads and the Director of National Deaf Children's Society Cymru following ratification by the Welsh Government.

Report prepared by Hayley Mills – Audit Coordinator 2021,

Date: 31<sup>st</sup> March 2022