



# **Tees Valley Non- complex Adult Hearing Services Review**

## **A South Tees Focus**

October 2022

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## **Introduction**

NHS Tees Valley Clinical Commissioning Group (TVCCG), which later became part of NHS North East and North Cumbria Integrated Care Board (NENC ICB), began a period of Patient Engagement in May 2022 to review non-complex, age-related adult hearing services across the Tees Valley (Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees).

These services are provided for people usually aged over 55 years who have a hearing need that can be met by a service often delivered in their community.

## **Methodology**

### **Survey**

Our role was to promote the digital survey provided by TVCCG for which they were responsible for collating and analysing these responses. This can be found in their final report [here](#).

We disseminated the digital survey widely across our contacts and partnerships and Community Champions, requesting that this be promoted and shared through their own networks targeting people and services with the following demographics across South Tees:

- Age 55+
- Sensory loss
- People living with dementia
- Carers etc.

We were tasked with the responsibility for supporting the completion of paper surveys within our local communities and facilitating two focus groups, one in each local authority area across South Tees.

Through our contacts and Community Champions we were invited to attend the following groups to achieve this:

- Age UK Marske Social Group
- Holey Molies, Skelton
- Age UK, Guisborough
- Dementia Dance, Acklam
- The Sensory Support Drop-In Clinic, Middlesbrough

In addition, we worked with partner agencies across South Tees where we provided paper copies of the survey, and collected them on completion.

## Areas for Consideration

Feedback highlighted that the paper survey was difficult to complete for a variety of reasons:

- As this service area covered the whole of Tees Valley, when printed all delivery areas were automatically included which resulted in the survey feeling longer than it was when completing the digital option.
- During the process it was clear that some patients had used the service several years ago therefore could not remember specific details of their experience.

## Focus Groups

In addition to this we hosted two focus groups, one in Middlesbrough and another in Redcar & Cleveland.

- Visually Impaired Group, Redcar
- Woodside Dementia Hub, Middlesbrough

During these sessions, we used a simplified version of the survey to guide conversations. We found we needed to adapt our questions to meet people's needs and circumstances.

TVCCG will use all of this information to review existing Non-Complex Adult Hearing Services and inform future commissioning and service specifications.

## Findings

The following are key themes from our focus group engagement.

### Location and Provider Choice

Most participants had opted to use Specsavers as their preferred provider. This was across both Redcar & Cleveland and Middlesbrough. The reasons most people had chosen Specsavers was due to the proximity to their home and transport links.

### Accessibility to Appointments

#### Issue

There was a lot of confusion regarding which branch they initially need to contact in order to book an appointment at the patients chosen location.

#### Recommendation for consideration

This requires better promotion including the reasons for this e.g. the diary is held in a central location, or at least an offer from the other locations to ring the main branch to do this on behalf of the patient.

*“To make an appointment at Specsavers Redcar you need to book through Middlesbrough. I have difficulty in using the phone due to hearing loss, even with hearing aids”.*

#### Issue

The majority of people we spoke to who were ‘house-bound’, had a registered disability or mobility issues weren’t offered or were unaware of the home-visit appointments.

#### Recommendation for consideration

This requires better promotion and needs to be included in the first assessment of all patients.

*“Anyone who is blind and hard of hearing or deaf is really struggling. It would be helpful to be offered a home visit to do the procedure”.*

*“We weren’t aware there was a home visiting service and had never been offered this option”.*

*“I am in my 90’s and have difficulty cleaning my hearing aids. I live in sheltered accommodation as I have serious health issues so access to the community is limited. I struggle to get to a branch of Specsavers and I haven’t been made aware of home visits”.*

## Issue

We received a lot of feedback regarding confusion about how this NHS service can be accessed and if there is a cost associated with this. Some attendees thought you needed to be referred by your GP and others had accessed the service themselves.

## Recommendation for consideration

Promotion of this free service, and what is included is required in a variety of ways with consideration that many of the patients are not digitally included.

*“Myself and others have the perception that patients must be referred to the service by their GP. Given the difficulty in seeing a GP some of my friends have resorted to sourcing their own hearing aids”.*

*“There is a lack of awareness that hearing assessments and hearing aids were available on the NHS and many people thought that they had to pay for hearing aids privately. This is compounded by adverts in the printed press and household leaflet drops for private hearing aids”.*

*“I bought my own hearing aids at a cost of £1000. When I was asked if I would consider using the NHS service, I assumed that since I had bought my own, I would not be eligible”.*

*“I was fed up with waiting to get an appointment to see my GP so bought my own hearing aids on-line for £39”.*

## Quality of NHS hearing aids offered

### Issue

As you can see from the feedback below, the aids that are offered through this don't seem to be fit for purpose. Patients highlighted the following to evidence this and many ended up purchasing this piece of equipment privately, which seems to defeat the purpose of these aids to improve people's hearing being provided free of charge on the NHS:

- Not suitable for people who wear glasses.
- Continually heard classical music.
- Too flimsy and easily broken.
- Does not fit all ear shapes.
- Wind interference and background noise.

## Recommendation for consideration

Consider options for providing a range of different hearing aids to suit the needs of a variety of individuals.

*“I would rate the service at a level 5. I don’t blame the staff because they are very polite and try to help, but I blame the system and the equipment. The hearing aids on offer via the NHS service are not very good. They don’t suit everyone, they are not good for people wearing glasses (having the aid wire and the glasses arm across the top of the ear), they don’t remain effective and are not very robust.”*

*“I have had three hearing aids since Christmas. I use Specsavers in Guisborough but it’s annoying that I cannot ring them directly. The first hearing aid continually played classical music. I complained that it must be faulty but didn’t feel like I was taken seriously or believed. I was issued a second one and the same thing happened. It was only when I threatened to go elsewhere did they then provide different aids which resolved the problem”.*

*“I have been registered blind for many years and had previously been fitted with moulded hearing aids for non-complex hearing loss. I didn’t want the NHS standard hearing aids because I feel that they were too flimsy and would soon be broken or lost. I was told they are unable to provide new moulds but will try to update her existing aids. I think different models should be provided on the NHS because the standard aids are not suitable for everyone”.*

*“I have a problem with getting a mould for my left ear and have been advised by the NHS that I cannot use an NHS hearing aid, so had to pay privately. However, this is still not working, and I don’t know where to go next for support”.*

*“I used to have hearing aids years ago but could not get used to them. Wind interference would annoy me, so eventually I handed them back”.*

## Communication - Accessible Information Standards

### Issue

During the focus groups a lot of discussion took place around the lack of reasonable adjustments regarding the preferred way patients required communication from this service.

From 1 August 2016 onwards, all organisations that provide NHS care and/or publicly funded adult social care are legally required to follow the Accessible Information Standard. The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.

## Recommendation for consideration

The need to work within these standards should be part of the initial service specification when any organisation applies to deliver this service through the commissioning process. Perhaps it should be an outcome that requires evidence as part of the contract monitoring process.

*“Telephone calls are difficult for me with hearing loss so making appointments can be challenging by telephone. Whereas online appointments were great for some, but not for those who are not digitally connected”.*

*“No consideration has ever been made for me when accessing appointments for my hearing loss as I have sight loss too”*

*“People talk too quickly so slowing down gives me time to process what is being said. Where sight and hearing loss is concerned, I can’t see expressions or word formation so communication can be very difficult.”*

## Aftercare

### Issue

Feedback highlighted that patients don’t have any problems acquiring replacement batteries for their hearing aids. However, when there is a more complex problem that requires support or action, it doesn’t appear to be as easy to resolve.

### Recommendation for consideration

At the point of hearing aids being issued, maybe there needs to be clear information regarding what to expect from aftercare and how to access this element of the service.

*“It is easy to get replacement batteries. I pick them up from Specsavers in Middlesbrough”.*

*“I can just walk in and get new supply (of batteries from Redcar Specsavers)”.*

*“It is difficult to get hearing aids repaired. I visited Guisborough Specsavers asking them to repair my hearing aids as they were whistling. Initially they said they couldn’t but after ‘begging’ them to help, they tried, and this temporarily worked. However, by the evening, the aids were back to whistling. They contacted Stockton to help with the repair but over a year later, I still have the problem”.*

*“I cannot clean the tube on my hearing aid and was given a wire to clean it. This is not cleaning the tube sufficiently and I have had no further support to help with this”.*



## Ear wax removal

### Issue

Many of our focus group attendees highlighted the problem they were having with accessing ear wax removal treatment. The comments below demonstrate that this is a common problem that is sometimes required prior to their appointments. Some people informed us that they can have this done at their GP surgery and others can't which is confusing.

### Recommendation for consideration

Provide information to the Adult Hearing service deliverers which GP surgeries offer ear wax removal services across South Tees so they can inform their patients. In addition to this, ensure that the service provider has a list of external providers who can offer this, and the cost of this so patients can make an informed choice.

Could this be an additional offer that Adult Hearing service providers could be commissioned to deliver as part of their NHS contractual arrangements?

*“There seems to be a problem with ear syringing. If you can't get your ears cleared before your appointment, they have to turn you away, to come back once they are done.”*

*“Myself and other members of the Osteoporosis Group queried ear wax removal as some of us had been told by their GP that they didn't do this. If our GP didn't offer this, we thought that private ear wax removal providers was our only option”.*

## HWST Information and Signposting

### Issue

We were contacted by a local lady wanting help and support to submit feedback to Specsavers through their complaints and comments process.

We looked at their website and this option was not visible. We contacted Specsavers through their Facebook page requesting more information about how patients are able to submit feedback and if there was anyone we could speak to. We were asked to provide more information which we were not in a position to. After two days, we eventually received a response with a link to their Customer Service 'Contact Us' page which we shared with the lady.

### Recommendation for consideration

Ensure that all commissioned services have the complaints/comments option visible on their website with clear timescales for response so patients know what to expect and what the process is.

## **Conclusion and summary**

In general, the feedback we received demonstrated that patients were happy with the service they received. However, if a patient requires reasonable adjustments or a slightly different approach to respond to their needs, to enable access to the service then this has a negative impact their experience.

These are included in the summary of recommendations below which have all been highlighted throughout this report.

### **1. Improved promotion and awareness raising for this service offer to include the following:**

- How patients can access the service, for example GP or self-referral.
- The service is free, what patients can expect and what is provided.
- Which branch of Specsavers patients need to ring to book an appointment and support from staff outside of this branch to ring and make a booking on the patients' behalf.
- There is a home visiting offer.
- What is included in the aftercare aspect of the service with clear guidance on how this process works.

### **2. Identification at the initial appointment booking stage, whether a patient requires a home visit service.**

### **3. Consider options for providing a range of different hearing aids to suit the needs of a variety of individuals.**

### **4. Include the Accessible Information Standards as essential within the service specification and monitor this as part of the contract monitoring process.**

### **5. Provide information to the Adult Hearing service deliverer which GP surgeries offer ear wax removal and a list of external providers who can offer this, and the cost of this so patients can make an informed choice.**

### **6. Consider if ear wax removal could be offered by Adult Hearing service providers as part of their contract.**

### **7. Ensure that all commissioned services clearly have their complaints and comments process visible on their website with clear timescales for response so patients know what to expect and what the process is.**

At the time this piece of work was carried out it was on behalf of the Tees Valley Clinical Commissioning Group (TVCCG). They will ensure that the feedback given within this report will inform future service specifications used within their relevant commissioning process.

## Next Steps

"The ICB (formerly known as NHS Tees Valley Clinical Commissioning Group at the time this activity took place) is currently developing how this engagement will influence the service specification in their next round of commissioning which we will share separately and publish on our websites next to this published report."

## Acknowledgements

HWST would like to thank the following for their support in this piece of work and engagement

- The numerous individuals and organisations that shared the survey across their networks:

Aapna | Age UK | Alzheimer's Society | Carers Together | Community Ventures Middlesbrough Ltd | Dementia Action Teesside | MenCave | Middlesbrough Voluntary Development Agency | MIND | Public Health / Drop-in Sensory Clinic Middlesbrough | Redcar & Cleveland Ladies with Cancer Group | Redcar and Cleveland Voluntary Development Agency | Redcar Visually Impaired Group | Senses Wellbeing Centre | South Tees Carers Forum | South Tees Hospitals NHS Foundation Trust - PALS | St. Hilda's Church | Staying Put Agency | Teesside University | The Hope Foundation | The Shed Redcar | University of the Third Age | The Exchange Middlesbrough | Woodside Resource Centre.

- All those individuals who completed surveys.

## Special thanks to

**Those that supported our Focus Group work:**

Age UK | Dementia Action Teesside | Marske Social Group | Public Health - Sensory Support Clinic | Redcar VIP Group | Woodside Resource Centre

**Our HWST Community Champions:**

Jamie Grant | Jane Cousins | Jo Newton | Karen Winspear | Louise Wheatley | Rachael Gault | Ross Newton | Sarah James.

Please note that this report has been produced based on the feedback we received during this focussed piece of engagement from the local people who provided responses and context based on their own experiences.

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# healthwatch

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