

AQP routine hearing for 55+ years process

Pre-referral

- Person identifies problems with hearing and decides to visit GP for further discussion.
- Person contacts provider directly for complimentary hearing screening (ears are checked by audiologist) or individual is seen as part of an optical pathway.
- Provider may send signposting letter to the persons GP indicating hearing aid referral may be warranted.
- Person requests change in audiology provider following 3-year review appointment.

Referrals

Step 1: Referral requirements

- Ensure both ears are free from wax and clearly document normal appearance of the ear drum.
- Ensure no contraindications for referral in to the AQP routine hearing service are present (consider referral to ENT either routinely or under 2-week rule. If red flags present, discuss with ENT SHO the same day).
- Discussion with person regarding whether they want to be referred for audiology assessment, the likely intervention being the provision of hearing aids and discuss whether they will wear them if provided.
- Is a domiciliary assessment necessary? Does individual have mobility issues, learning disabilities or complex dementia?

Step 2: Referral management

- Referral to be made via the e-referral service to either RMS or DRSS.
- Paper referrals and referrals made direct to providers will be rejected and the provider will not be paid for activity following this route.

Step 3: Choice of AQP audiology providers

- Specsavers, Scrivens, Alistair Kinsey, University Plymouth Hospital Trust, Northern Devon District Hospital and The Outside Clinic
- All providers offer domiciliary provision (if deemed necessary by GP practice on referral).

First appointment

Person is seen by AQP audiology provider

Assessment
No hearing loss identified.

No hearing aids provided and discharged back to GP with outcome letter.

Contra-indications for AQP referral indicated. Referral made to specialist audiology or ENT.

Assessment
Fitting of hearing aids.

3-year pathway includes hearing aids, maintenance and consumables. Automatic recall for follow-up at 10 weeks. Lost or replacement hearing aids (separate tariff applies).

Provider contacts person after 3 years and review appointment offered a review appointment.

Review

3-year review (face to face, phone or letter)

No change in provider
GP referral is not necessary and the provider should take the following steps.

Provider can continue to see person on an aftercare only arrangement until such time as aids become unserviceable or hearing needs change (aftercare tariff available).

Outcome of the review letter to be sent to GP for information only. Where new hearing aid pathway is started, this must be clinical justified and therefore an audiogram must accompany the outcome letter to GP.

Provider change request
New referral required by GP. Letter to GP from current provider needed to facilitate request.

Heading need change
Can current hearing aids be reprogrammed?

Yes

No

New 3-year pathway can commence.