



University of Southampton Auditory Implant Service (USAIS) provides services to hearing impaired patients in the South of England. This report is for the period ending 31 March 2014. USAIS receives referrals for assessment for consideration of cochlear implants, bone anchored hearing aids, bone conduction and middle ear implants from Audiology and ENT specialists.



Cochlear implant referrals

150



Children wearing their cochlear implant often

100%

Patients who would be extremely likely to recommend the service

90%

Patient details

Referrals

97% of referrals for Cochlear Implant Assessment were acknowledged within 5 working days. 94% of patients referred for a cochlear implant assessment were offered an appointment within 6 weeks. USAIS is working towards 100% for both measurements. Failures to meet the target occurred during the first quarter of the year.





Referrals and Transfers to Bone Anchored Hearing Aid (BAHA) programme



Discharges

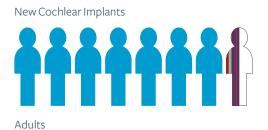
49 patients referred for cochlear implant assessment were discharged prior to cochlear implantation in 2013/4. The reasons for discharge were: 23 of the patients were audiologically not within NICE TAG 166; 2 patients had difficulty attending appointments and 16 patients decided not to proceed for reasons including investigating alternative treatment and concerns regarding surgery.

Transferred patients

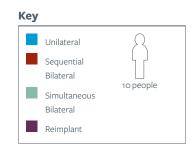
During the year 2013/4, 13 patients were transferred into USAIS who had already been implanted with a cochlear implant prior to referral. 5 patients transferred from USAIS to other implant centres and 7 patients died.

Pathway from team decision to operation

USAIS monitors the 18 week care pathway from the date of the multidisciplinary team decision that the patient would benefit from a cochlear implant. After taking account for "stop the clock" events such as delay for additional treatment, due to patient preference, or for funding approval, 100% of the CI referrals were implanted within the 18 week care pathway specified. The average time from Team Decision (or fit for surgery/patient preference) to implant was 4 weeks.



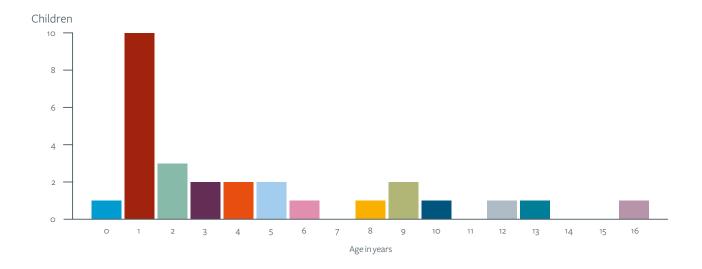


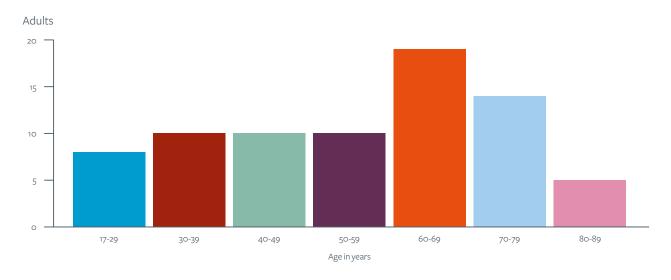




Age at Implant

USAIS treats patients of all ages. As the graph below shows, patients of all ages received implants during the year 2013/4. It should be noted that most children are implanted in their second year and most adults are implanted between 60 and 69 years of age.





Failures, Re-implantations and Non-users

In the year 2013/4, 3 patients from USAIS had their cochlear implants removed due to device problems and all were subsequently re-implanted in the same ear. In addition 1 patient had their device removed for medical reasons. There was one revision of a device. There are 24 patients who are no longer able to make use of their cochlear implants who have not had their implants removed.

Patients with Cochlear Implants

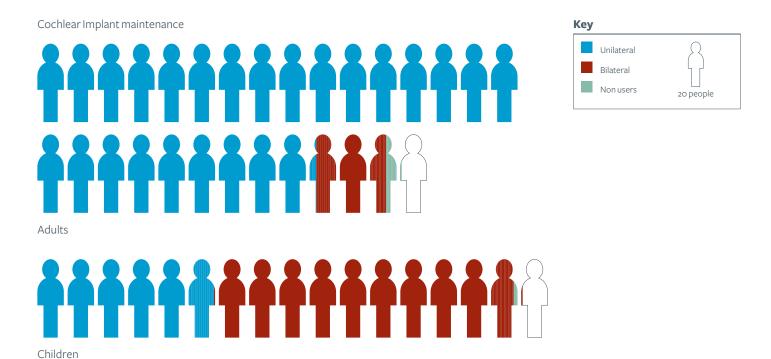
Patients with cochlear implants need access to a maintenance programme. Patients have regular reviews to ensure that the cochlear implants are continuing to function optimally.

Contralateral Implants

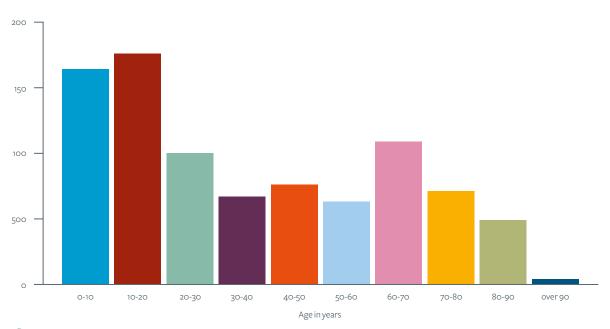
In total, 5 children that had already been implanted previously had contralateral implants to enable hearing in both ears.

Upgrades

USAIS has a policy of upgrading processors every five years (if there is a new model available). Over the past year USAIS has been able to upgrade 92 patients with the latest technology available for their implant.



Age of Cochlear Implant users

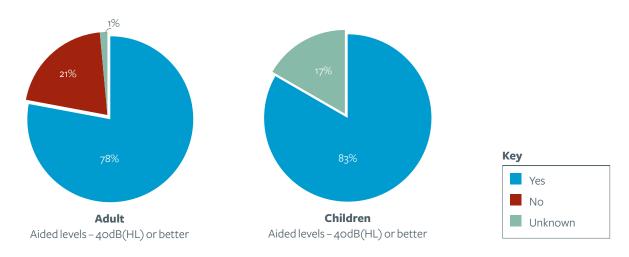


Key Service Outcomes

The outcomes of Cochlear Implant patients are measured at the 12 month review. The following graphs represent the outcomes.

Listening

More than 80% of all patients to have thresholds of 40 dBHL or better in implanted ears. USAIS met this target for children but for the adults some were not achieving this. Those that did not achieve this level were either congenitally deaf, had other special needs or in the case of one patient, a failing device which will be explanted and reimplanted.

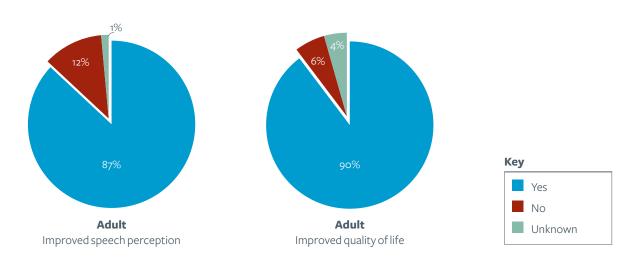


Improvement in Speech Perception and Quality of Life

It is expected that cochlear implants will help with speech perception and lead to improved quality of life.

All of the children (n=18) had an improvement in their listening and use of speech but many are too young for formal testing.

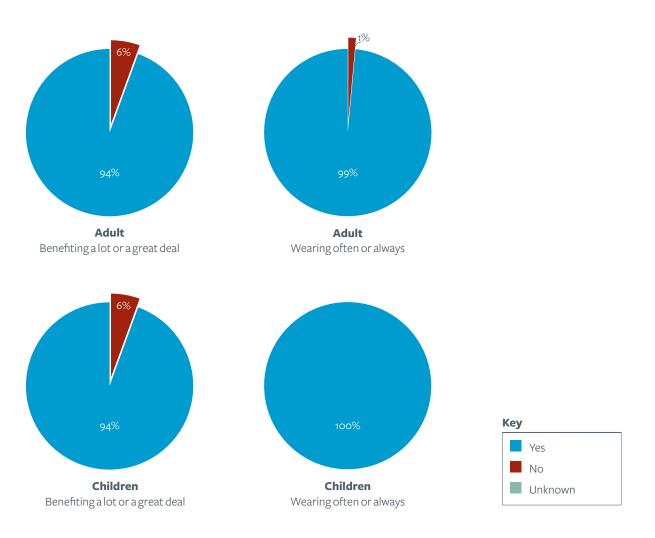
The adults that did not show benefit were unable to carry out the test because it was not suitable for their language ability because English was not their first language; they were congenitally deaf or had additional special needs. In the experience of USAIS it can take up to 3 years before a congenitally deaf adult reaches their full auditory potential.





User Satisfaction and Benefit

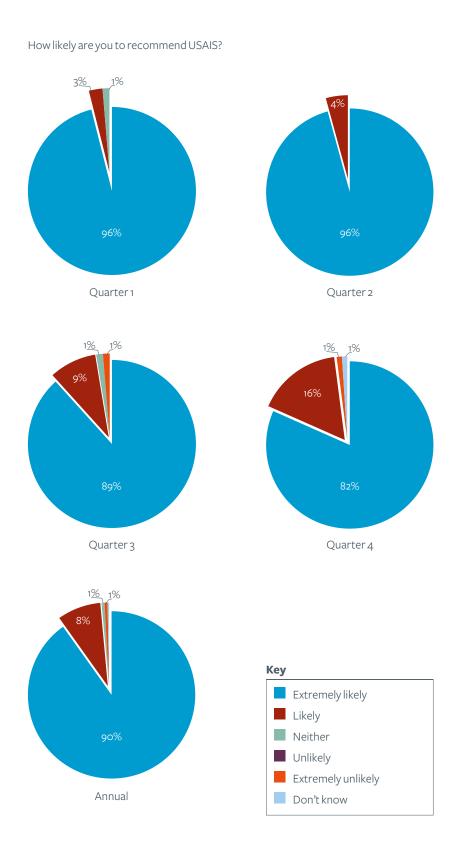
For this Key Service Outcome the standard was 90%. As can be seen below USAIS met this target.



Audits

Patient Survey

Patients attending a review at USAIS are asked to complete a patient survey to enable USAIS to review the quality of the service provided. The Friends and Family Test was initially used and the results are shown below. 90% of the patients attending for review would be extremely likely to recommend USAIS to their family and friends.

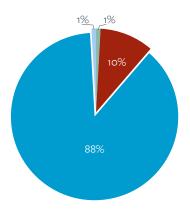




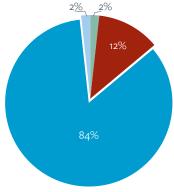
 $This is a visual \ representation of all \ the \ comments \ received \ on \ the \ patient \ survey. \ The \ larger \ a \ word \ appears, the \ more \ that \ word \ was \ used \ in \ the \ comments.$

Additional Questions

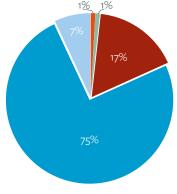
 $In \, quarter \, 4 \, some \, additional \, questions \, were \, asked \, giving \, USAIS \, further \, feedback \, about \, the \, service \, provided.$



Do the Auditory Implant Service staff treat you with dignity and respect?



Do the Auditory Implant Service staff work well together?



Are you involved in decisions about your care/your child's care?



Summary

Data presented in this report show a high level of service provision and user satisfaction. USAIS continues to work to exceed required standards and develop the service to optimise benefit to patients and their families.

Contact us

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