

THE PRESIDENT'S PAGE

Alison Walsh BAA President 2014/15

Norths Staffordshire CCG

Despite much opposition and against all the evidence provided by BAA along with members of the Hearing Loss Alliance and many other groups to the North Staffordshire CCG, and despite the decision being rejected by the three scrutiny groups it went to, the new commissioning contract comes into force tomorrow. BAA has worked tirelessly alongside its partners to try to prevent these cuts being carried through.

Many patients will suffer as a result of this misguided decision and I feel the comments of one of the local audiologists sums up how everyone will be feeling. *“It will be very difficult for patients to accept (if they don't fit the criteria) that they are no longer eligible for hearing aids. Likewise it will be hard and demoralising for our staff to, in effect, 'withdraw care' from patients. We won't physically be taking the hearing aids off the patient. We have agreed that the hearing aid will be reprogrammed to the up to date hearing test. However, we will have to take away the battery book to protect our budget and inform the patient that they are no longer eligible to receive any further aftercare. For example, if their hearing aid were to malfunction, we could not replace it. Very sad times.”*

I do not feel I have to add anything to this as every member of BAA and every audiologist in the UK will understand how these members will be feeling. This is going to affect the people most vulnerable in our society, remove the ability to communicate for many hundreds of people and common sense alone tells us that will add to the cost of healthcare going forward. I hope that Dr Shapley and the other members of the North Staffordshire CCG never require our services, although they probably can afford to pay for private care which is out of reach for most of the people their decision will effect!

I will be putting forward the following motion at conference and encourage you all, even if not attending conference to vote for it through Horizon or just send BAA an email pledging support.

“We call on NHS England to intervene and overturn North Staffordshire CCG's hearing aid cuts, which are against professional opinion and clinical evidence, and will leave

thousands of local people less able to communicate.”

Kind regards

Alison

[January Update 2015](#)

There has been quite a lot of activity in January and still plenty to do. I attended the Commission on Hearing Loss meeting, chaired by Baroness Greengross on 13th January. Monitor presented findings from their recent survey re AQP. The report is due for publication late January, early February and BAA will be responding to the findings when the document is available.

There was good news from NEW Devon in that their original proposal to not routinely fund a second hearing aid had been withdrawn and there will now be consultation with professionals through local Clinical Pathway Group. Let us hope that common sense prevails.

Action on hearing loss published their latest research on 26th January 2015 Under Pressure: NHS audiology across the UK (www.actiononhearingloss.org.uk/underpressure). The information was collected from Freedom of Information requests issued to every NHS Adult audiology service in the country. Out of the 155 departments contacted in England, Scotland, Wales and Northern Ireland 140 responded. The publication reveals that the NHS is already struggling to cope with reduced staff numbers, there is evidence of restricted access to hearing aids and patients are facing longer waiting times with reduced length of appointment times. A fifth (19%) of NHS hearing loss services reported being aware of further budget cuts in the next 12 months. Two in five NHS audiology departments (41%) are cutting core services due to reduced budgets or increased demand. These actions affect hundreds of thousands of people across the UK and BAA will continue to work with AOHL and other members of the Audiology community to raise our concerns.

Their findings show that it is vital that there is proper investment in audiology services and that **quality standards are in place and enforced, to provide evidence-based guidance to providers and commissioners**. AOHL are calling for NICE to prioritise the development of the quality standard on hearing loss.

Please help by taking action

(www.actiononhearingloss.org.uk/underpressure) to protect the

future of hearing loss services, and forwarding this link to your teams and supporters. For people in England, this link will ask people to write to their MP to push for the NICE quality standard. In Scotland, Northern Ireland and Wales, it leads to different actions based on the findings of the research.

The Hearing Loss action Plan is also due to be published by NHS England over the next few weeks and the BAA Board will be responding to it on your behalf.

Copies of our responses to all publications will be posted on the website.

Training update – We will have completed the assessment methods document for HSST by the end of the month and then await the result of the EOI currently in process as to where the academic provision will be. The National School of Healthcare Science are currently evaluating the expressions of interest from Higher Education Institutions and the result of this will be available in the near future.

We are always looking for volunteers to support the work we do and I would encourage anyone who is interested in becoming a volunteer with BAA, and benefitting from the experiences you will have, to get in touch with the board BAA@Fitwise.co.uk

[Christmas Message from Alison Walsh to all members](#)

This year the BAA can be proud of what we have achieved.

We had an amazing conference in Bournemouth, which saw many national and international speakers deliver an excellent programme and the exhibition was the best yet.

The final OSFA's for the first STP cohort were successfully completed, which was a fantastic achievement in a short timescale for all involved in Education and Training.

The Scope of Practice and Commissioning guide were published and BAA have worked closely with RCCP, ACS, HCPC, AHCS and NSHCS and many other organisations to ensure registration routes and training are appropriate.

2014 has also been a challenging year on many levels, with the CCG's taking centre stage for creating excess workload.

Unfortunately we are ending the year on a similar theme with many CCG's looking at how to reduce their costs and seemingly seeing audiology as an easy target.

We all understand that savings have to be made but not at the cost of the future for many of the patients we support.

No doubt the fight for high quality hearing care for all our patients will go on and you can be sure that BAA alongside our partners in the hearing alliance will continue to support our patients, and your, best interest.

These things all show how important it is to have a strong professional body and none of this work could be achieved by BAA without its members.

We need to encourage more audiologists to join BAA so that we can continue to move forward with a strong voice as an autonomous profession.

The BAA Board and I would like to wish all its members a very

Merry Christmas and a Happy, Healthy and Peaceful New Year.

Alison Walsh

President British Academy of Audiology

[Will Brassington 2014/13](#)

BAA Presidents Blog Will Brassington 23rd October 2014

Following the lull of activity during the summer the last few weeks have no doubt been a return to normal duties with a bang for most of us. Following our meetings with North Staffs CCG in July the commissioners finally announced they would be meeting with their local health scrutiny committees in a move to seek approval of a formal consultation regarding decommissioning hearing aids for patients with Mild to Moderate Age related Hearing loss in North Staffordshire. I am delighted to report that each of the meetings resulted in the committees voting against the CCG proposals, thus making it very clear to the CCG that their proposals were inappropriate. Whilst this does not prevent the CCG proceeding to consultation any such moves to progress this would be far more difficult without the support of the local health scrutiny committees and I therefore see this as a very positive in the opposition campaign by BAA and our collaborating colleagues. The meeting was open for the public to attend however the public were not allowed to contribute to the meeting. Further information and updates on this will follow in due course.

In September the BAA board met to for the penultimate board meeting of my presidency. I'm pleased to report significant progress continues with the boards' strategic aims this year and the board have worked hard over the last few weeks to provide me an overview of their activities that will be summarised in our Annual Report to be published at Conference in November. Unfortunately for two of our board members Laura Booth (Education and Training Rep) and Holly Thomas (Student Rep) new roles outside the BAA have resulted in them having to stand down from their respective BAA positions. I would like to personally thank Laura and Holly for the hard work undertaken

whilst on the board and wish them good luck on the future. To ensure continuity the board have co-opted 2 new members and I welcome to the board Harriet Crooke to lead on education and training and Laura Finegold to lead as Student Representative until November 2014 when the new BAA board will be announced at the BAA annual general meeting in Bournemouth.

We all witnessed a historical event last month as Scotland voted against independence. Regardless of ones individual views on this and the outcome, the whole process has made many UK residents reflect and consider the impact of such proposals. A yes vote would have raised many questions for BAA and our Scottish members that thankfully we don't need to think about. What we must however consider and ensure is Audiology in Scotland and indeed the other home countries of Wales and Northern Ireland are continually supported by the BAA. We have progressed well with engagement of our home countries and this month ran our first Northern Ireland (NI) Heads of Service day in Belfast. With a number of priority action points being highlighted I see this as a major step forward and the beginning of progress in tackling the challenges our colleagues in NI face delivering high quality Audiology Services.

At the beginning of the month I attended UCL to address the new MSc students on their first day, it's always a pleasure to meet new students, many of whom will make a significant impact in the profession in future years. The confusing issue for many students and qualified staff at present remains the issues around registration. Whilst the RCCP holds the bulk of registrants from the profession on its voluntary register and continues to lobby for statutory registration for all clinical physiologists, statutory registration as a Clinical Scientist remains through the the registration body of choice for Academy of Healthcare Science (AHCS). The AHCS has now opened up the equivalence programme enabling Audiologists with the appropriate qualifications and knowledge base to gain STP equivalence and register as Clinical Scientists. This is welcomed by the BAA and I would encourage Audiologists to visit the AHCS website and read further on this.

The last few weeks have been hectic, I have spent many late nights preparing the Annual Report, the votes have been counted and the new board will be announced at the AGM on the 20th

November 2014, final amendments are being made to the conference programme handbook and I now just have some final preparations to undertake in readiness for conference. Finally I should mention the launch last week of the Ear Foundations Report: the Real Cost of Hearing loss. I was delighted to be asked to present at their conference in Westminster and to later attend the launch of the report in the Houses of Parliament. This report addresses the financial impact of not managing hearing loss in contrast to the usual reports that discuss the cost of managing conditions such as hearing loss. This approach is much welcomed by the BAA and we look forward to continued work with the Ear foundation in the future. To access the report please visit www.earfoundation.org.uk

BAA Presidents Blog Will Brassington 28th August 2014

Hello and welcome to any new readers of my blog. I try and provide readers with a brief update at least monthly on matters relating to the BAA and in particular my whereabouts and activities as BAA president.

Aside from my holidays, which took me to the Sunny island of Majorca there has been no other travel for me this month. So on returning refreshed from 2 weeks relaxation I have had little in-terms of official BAA engagements or meetings to attend.

Early this month we held a meeting to finalise the BAA - Audiology Scope of Practice Document . This document will soon be published and will provide formal guidance and a framework on which to base our practice. We hope this will help clinicians when facing the pressures of cost improvement programmes and service re-design, its imperative our profession is not devalued and Audiologists are not de-skilled and we feel this document will affirm the roles of clinicians at different levels.

Much of my work this month and the work of the BAA has been behind the scenes as we take advantage of the absence of meeting during the summer period.

I recently reported on the news that North Staffs CCG were to announce plans to decommission the provision of hearing aids for patients with mild to moderate age related hearing loss. Since then BAA in collaboration with our colleagues from BSA, the third and independent sector met again with North Staffs CCG to challenge the initial evidence being presented by the commissioners on which they were planning to make a formal proposal. Our collaborative objective was to produce a non biased, evidence based argument to the CCG that demonstrates the importance of Hearing Aid Provision in this patient group and the wider implications of withdrawal of these services thus making them reconsider developing this into a formal proposal. I thank in particular Alison Walsh our Vice President and Professor Mark Lutman, past president of the BAA for their contribution to the most recent meeting where its fair to say we presented the strongest possible case to oppose these proposals. Further announcement from North Staffs CCG is imminent and I will keep you informed of progress on this subject.

This month saw the first of the STP OSFA examinations, this concept of OSFA's as a means of examination and assessment of competence of students has been daunting for both students and examiners. This model historically followed and adopted by our medical colleagues is one that has presented us all with a new challenge. Whilst the results of the examinations are yet to be published the examinations were undertaken effectively on the day and the exam board will now be able to reflect on the new system to make further improvements for the future. The BAA are always looking for future examiners so if you're interested in becoming involved please contact us via our email address.

As I noted earlier there have been many developments behind the scenes as we prepare for conference and work continues in our many committees, I note there has been a lack of "behind the scenes" updates recently but this has now been addressed so do look out for our regular updates from the committees of the board. We do continue to work on developing our commissioning guidance for Audiology Services and also our Shared care guidance from the service quality committee. These documents

are time consuming and resource intensive but we recognize the importance of them to you our members.

We have also set a date of the 6th October 2014 for a meeting to be held in Northern Ireland. So for our Ireland based members do save the date! This meeting will attempt to bring together Heads of Service and Senior Clinicians from Northern Ireland for an educational and productive meeting to address some of the challenges facing Audiology at present,

A further positive development last month was the receipt of formal notification that I had been voted on to the Academy of Health Care Science Board and will therefore be one of two representatives on the board for Physiological Sciences. Having an Audiologist on this board is of significant benefit to our profession as representing the views of other professions is always challenging and whilst I remain on the AHCS board, BAA members can be assured the profession of Audiology will command a strong voice within healthcare science.

Finally as president of the BAA and a member of the Audiology community for 25 years I was very saddened to hear the news on the 19th August 2014 that Lawrence Werth, the CEO of PC Werth Ltd had passed away following a battle with cancer. During my career in Audiology Lawrence and his late father Peter the founder of PC Werth who passed away in 2003 have always been considered a household name in our profession and Lawrence, like his father will be sorely missed not only by his family and friends but also by his many colleagues from the world of Audiology. His legacy will of course continue and we understand his wish and indeed mandate for PC Werth Ltd was to carry on without him, to make a positive contribution to the Audiology, education and Communication industries. All who met and knew Lawrence would agree he certainly did this during his lifetime, his positive contribution to the profession and his affable personality will be greatly missed. On behalf of the BAA Board and all our members our condolences go out to Lawrence's family and friends.

BAA Presidents Blog Will Brassington 19th July 2014

The last few weeks have been extremely hectic for the BAA and for me as your President. When taking on this role I was well aware of many of the challenges my predecessors had encountered and often wondered what the big challenge would be for me during this year. This year has thus far already been extremely busy. The board continue to work hard to achieve the objectives we set ourselves in outlining our strategy at the beginning of the year. The education and training team have been particularly busy recently as the 1st STP students prepare to undertake their final OSFAs significant work has been done by BAA and the School of Healthcare Science in order to ensure the OSFAs deliver clinicians who are safe and competent to practice. Work on service quality continues and the BAA will soon be in a position to deliver its Audiology Scope of Practice Document, a document that will outline our professional standards and support members in a similar way to what BMA guidelines support medics. Some of you will have seen the recently published- Commissioning guidance for Adult Hearing Services in the community, written by BSHAA and the NCHA. It will come as no surprise to many of our members this is not a document the BAA support. As a board we have reviewed this and have concerns regarding the document. It would be inappropriate for the BAA to openly criticise this document however there is a clear need to respond. As a board we are currently working on a response, Adam Beckman our past president is leading this work and we expect this to be complete within the next 4-6 weeks. In addition I continue to work towards building better relationships with our colleagues in the independent sector and will be meeting to discuss this further in early August. So the big challenge appeared to land on my doorstep several weeks ago when North Staffs CCG announced a public engagement exercise related to plans to decommission hearing aid provision for patients with mild to moderate hearing loss. Since then the BAA has been heavily involved alongside colleagues from BSA and AOHL in leading a programme of opposition to these proposals. Rather ironically the public engagement meetings were held within days of the launch of the ILC commission on hearing loss in the House of Lords. This report which I authored with other commissioners and the ILC and which was produced from collating oral and written evidence from leading experts nationally could not be any further from the proposals being set out in North Staffs. Clearly I and the BAA board condemn the actions being taken at present in North Staffs, of course it is difficult for commissioners

who have to save money but the financial savings here are short term. The long term impact of these proposals on society, physical and mental health and the economy will far outweigh any short term financial benefits, ethically I would go as far as to say the proposal to take away an adults ability to communicate is nothing short of inhumane and as a professional body we will respond in the strongest manner. Working in collaboration with aforementioned partners our aim is to challenge the evidence via which the CCG have developed these proposals and ensure they are provided with the best and most appropriate evidence in order for them to come to the right decision. We will meet with the CCG on the 23rd July after which they will announce whether or not they plan to proceed to a formal consultation on these proposals. We will continue to work on publicising these issues as widely as possible, I hope some of you saw the feature on BBC breakfast news recently (TV puts 10 pounds on you!!) and I will continue to push for more media attention on these issues over the forthcoming months.

So, aside from these concerns it's always good to hear of the positive things going on - I spoke at two conferences recently; Audiology Cymru and the BAA student conference. Both were exceptionally well organised and attended and it was inspiring for me to see so many new and old faces in attendance. Each of the conferences was rich in content and demonstrated that despite the challenges we face the profession of Audiology continues to grow from strength to strength. Each year we educate more professional clinicians and the level of education and expertise with the new degree programmes continues to rise. New graduates have many more opportunities to work in both the public and private sector and we must work hard to ensure the graduates we spend so much time supporting recognise the importance of a long term career plan over short term financial rewards.

Many of us will now be preparing for summer holidays and as the holidays approach with my BAA hat on I'm always aware of the fast approaching deadlines. For those of you holidaying in the UK this year, if planning a trip to Dorset you will be close to this years BAA conference venue. In November we will hold our annual conference at the Bournemouth International Centre. Our conference team led by Michelle Booth have been working extremely hard and the programme leads Priya and Cherilee have developed a very exciting and inspiring scientific programme for 2014. The deadline for abstract submissions is later this week, we are also seeking votes for our awards; do you work with an

exceptional audiologist or within a team that has achieved something special? Then why not consider putting them forward for a BAA award? At this point in the year we also have to consider the future of the BAA. The BAA board are of course elected BAA members, those keen to make a difference on the profession. For me being a member of the board is both a privilege and an honour. It is hugely rewarding and provides you with many opportunities to develop your knowledge and skills as a professional. This year a number of positions will become vacant and we will open elections over the next few weeks. Being a member of the board is not reserved for Senior Heads of Service, we are looking for professional, knowledgeable individuals who can inspire others and are looking to make a difference in the profession. If that's you we'd be delighted to hear from you now. So as I prepare for the holidays I hope you all have a great summer, do keep an eye on our social media pages and the website as we endeavour to keep you updated on all the issues at North Staffs.
Happy Holidays!!
Will.

BAA Presidents Blog Will Brassington 9th June 2014

5-6-14

As another month passes, its time to reflect again on activities undertaken over the last few weeks.

Significant work has been undertaken behind the scenes as the BAA board and I have been working in response to membership queries and queries from within the profession. Providing professional leadership, advice and guidance to members and key stakeholders in Audiology is integral to the role of the BAA and we receive a significant number of queries and questions weekly that I hope you find are answered in a timely and professional manner. We continue to work with BUPA in assisting them set up their Audiologists Network, helping ensure Audiologists providing care through BUPA are both highly skilled and actively engage in their profession by maintaining membership of the BAA. As we are all too often made aware, the increasing culture of blame in society has led to increased requests for the BAA to provide professional indemnity insurance. A project to investigate the

feasibility of this initially led by our past president Gareth Smith and more recently led by our board secretary Vinaya Manchaiah has been challenging. Whilst the BAA could provide professional indemnity insurance at a significantly reduced rate this would unfortunately require all members to participate, thus effectively increasing membership fees. Whilst this may be of benefit to some members, for many this would be of significant detriment and this is therefore not a viable option at present. As a board we would be keen to seek members views on this and will survey membership opinion in the future. During the course of our review we did identify that a number of Unions provide professional indemnity insurance as part of their membership. The BAA would therefore encourage union members to check with their unions what level of cover they offer as for some members this may just negate the need for premium professional indemnity insurance.

Specialist ear surgery and more specifically Cochlear Implants and Bone Anchored Hearing Aids, has become integral to the role of many Audiologists in the UK. As finances in the NHS become more stretched there has never been a more important time to make our voices heard to ensure commissioners recognise the importance of commissioning such interventions in the future. The specialist commissioning review group led by Mr Andrew Reid(Consultant Surgeon/Clinical Director- BCH) has begun working on a commissioning framework for these treatments, the BAA remain an active stakeholder in this group and will continue to voice the opinions of the profession to ensure they are embedded in this document in the future. I will keep you informed of progress in this area.

For many of us in England , Scotland and Wales a visit to Northern Ireland (NI) is psychologically like taking a trip abroad. The small stretch of water separating Northern Ireland from the rest of the UK is often seen as a barrier to travel, which is odd given the relatively low cost of return airfare between Birmingham and Belfast (I paid just £52.00 at peak times) and the short journey time(less than 45 min flight time). With budget airlines flying in and out of Belfast International and City airports there really is no excuse not to visit NI and I was delighted to visit for the first time this month and take the opportunity to address our colleagues and members. Our members in NI face many of the same challenges as the rest of us in the UK, however the lack of training programmes in NI places additional pressures on a services as they face the challenge of

recruitment and retention of staff. Over the next few months the BAA plan to provide further support to NI , helping to engage and develop staff and heads of service to help meet some of the current challenges they face.

Travel seems to be a common occurrence at present, usually this amounts to being sat on a train but occasionally the role of BAA president takes us further afield. Last week as far as Jordan, as I was invited as a guest of the newly formed Arab Advanced Academy of Audiology(4A) to the 2nd Arab Hearing Health conference at the dead sea. The 4A represents 18 Arab countries with healthcare systems and economies as diverse as anywhere you can think of on the planet. The 4A are keen to work together with the BAA on addressing and meeting the Audiological challenges of the future. In a shrinking world I see this as a great opportunity for the BAA to both support and learn from our overseas colleagues and I was delighted to sign a non-binding memorandum of understanding pledging our support to joint working with the 4A in the future.

In my previous blog I mentioned the commission on hearing loss, chaired in the House of Lords by Baroness Greengross. This commission that aims to address some of the primary issues and challenges related to the future management of hearing loss progressed today with the first of the evidence sessions from experts within the field. Today we heard evidence from a number of experts within the field including Dr Huw Cooper (Past President of BAA). As a commissioner we will collate evidence on this subject matter during a course of evidence sessions and commissioners meetings over the next few weeks. The evidence and commission will then be launched in the House of Lords on the 7th July. I will of course keep you updated on the progress.

Finally I would like to take the opportunity to congratulate Professor Adrian Davies OBE who was awarded the Aram Glorig prize during the World Congress of Audiology for his lifetime contribution to public health research concerning hearing and communication. Adrian is well known to many of us in the field of Audiology and I'm sure those of you who know him will agree there are very few people whom are so committed to the profession. As a professional I feel we are genuinely honoured and extremely fortunate to have people like Adrian amongst the ranks, his service and support to UK and Global Audiology is unprecedented and for

that I would like to express a personal thanks and congratulations from the BAA.

BAA Presidents Blog- Will Brassington 7th May 2014

The last few weeks have been relatively quiet with much fewer meetings than normal due to the easter break and numerous bank holidays we have no doubt all enjoyed.

I attended the alliance meeting a few weeks ago. This meeting, attended by key representatives from across all sectors of the profession continues to develop and operates as a forum to share and discuss opinions relating to current issues within Audiology and Hearing Care. The alliance group is currently working on a number of key tasks including lobbying for the publication of a hearing action plan and lobbying for a comprehensive review of the outcomes of AQP in Hearing Services. The work output of the alliance is limited by resource however the benefits and value of bringing together individuals from so many different sectors cannot be underestimated.

Recently I was extremely pleased to announce the launch of the BAA Annual Conference in Bournemouth, which will take place on the 20th and 21st November 2014. The scientific programme this year has been developed by Priya Singh and Cherilee Rutherford from the UCL Ear Institute, working alongside Michelle Booth our P&C board director and Jennifer Laidler from Fitwise management. The programme based around the conference theme- “ Todays Vision – Tomorrows Reality” is set to deliver inspirational, innovative and interesting presentations that will enable attendees to take their learned knowledge and put this into practice on their return to the workplace. Building on the success of previous events we hope to take conference to another level this year, so I hope to see you all in Bournemouth. For more information and registration for the conference please visit- www.eventsforce.net/baaconference2014

The second of our five annual board meetings took place last

week. Given the amount of work undertaken by the Board Leads and their respective committees getting through all business matters is always a challenge. As a very brief bullet point summary the board and committees have recently been focusing work in the following areas-

- Publication of the BAA -Audiology scope of practice document
- Opportunities and implications of providing medical malpractice insurance
- Financial investment options for the BAA
- Quality Assurance- NHSP, Direct Referral and Shared Care Guidance
- Educational support- BAA Input to the STP Programme and Practical Exams
- Feasibility of introducing the CSci Award in Audiology
- Delivery of the Student and main BAA conferences 2014 and planning for 2015/16
- Audiology Supplies Group – Evaluation Process
- Developing links and improving communications with home countries including developing and expanding opportunities for CPD
- Maintaining position as primary advisory organisation for UK Audiology matters.

There are of course too many areas to cover in a blog but members should be aware, minutes of previous board meetings once ratified are always posted on the BAA website. In order to keep you upto date with what is going on currently we continually use the website news section, magazine and other forms of communication such as social media- Facebook, Twitter etc.. In addition the BAA board and Regional Representatives are always happy to respond to questions posed from membership so please feel free to contact us at any time.

Behind the scenes there is a huge amount of work currently going on. The board and I are currently working on reviewing some commissioning guidance from our colleagues in the independent sector. We are continuing to work with BUPA on their new Audiologists Network, we continue to work on the GENERATE

project and also supporting the development of guidance around Specialist Ear Surgery and Implantable Devices. We are working closely with the RCCP and the AHCS regarding registration issues and next month will meet to address ongoing concerns of RCCP members and the RCCP who continue to lobby for statutory regulation of clinical physiologists.

The role of BAA President is one that is demanding yet very rewarding, one of the perks of the role is being invited to meetings etc in places that we don't commonly get invited to. I was recently invited by Baroness Sally Greengross , cross-bench peer and Chief Executive of the International Longevity Centre UK , to be part of a Commission on Hearing Loss to be held at the House of Lords. As part of this commission we will draw on ideas , evidence and information to shape our thinking about the challenges posed by hearing loss. There will be an initial scoping paper produced, two oral evidence sessions held with subject matter experts and commissioners in the House of Lords, a call for written evidence and the production of a final report prepared by the ILC-UK bringing together all the findings and agreed future priorities for action. As the primary representative for the public sector I see this as another positive opportunity to work with colleagues across the other sectors to work towards evidence based solutions to meet the challenges of dealing with hearing loss in the future.

BAA Presidents Blog- Will Brassington 2-04-2014

Reflecting on the last two weeks I have a huge amount to cover. I attended a very productive meeting known as the "GENERATE" project earlier this month. The GENERATE Project is a national research priority setting exercise for Ear, Nose and Throat (ENT) Surgery, Hearing and Balance Services. It is designed to develop a clinical and health services research agenda with the stakeholders involved in the design, funding, practice, delivery and utilisation of ENT, hearing and balance services. This means that patients and their carers will have an equal voice with healthcare professionals and academics, and that service commissioners, managers and industry leaders will be asked for their views. The initial meeting agreed the aims and objectives and the terms of reference of the group. This all inclusive approach to prioritising

the research agenda in the field is was welcomed by all as a productive method of driving the most appropriate research for the future. The BAA is integral to this project and I'll keep you informed of progress.

Juggling commitments with the day job are a constant challenge for the BAA President, fortunately some overlap, one of which is my involvement in the East Midlands Clinical Senate Assembly. Clinical Senates have been established as a source of independent strategic and guidance to commissioners and other stakeholders to assist them to make the best decisions about healthcare for the populations they represent. There are 12 Clinical senates across England, each has a Senate Council and a much larger Senate Assembly, a multi-professional forum that provides the Council with ready access to experts from a broad range of health professions. Future decisions on healthcare in your areas with undoubtedly be shaped and influenced by decisions and advice provided by the Senates and it is therefore imperative there are Audiologist representatives within your local Senate as without this you and your service may be lacking that essential voice when it matters most. My understanding is the Senates are keen to recruit clinicians from within the field. This is not a big commitment but could have a huge impact so I urge you to get involved. For more information visit- <http://www.england.nhs.uk/ourwork/part-rel/cs/>

Interviews are always interesting, especially when interviewing for Band 5 positions, I had a day of interviews and interviewed 9 candidates recently. Given the significant changes in the education and training of Audiologists over the last few years and the fact we are now just seeing the first output from the PTP programmes I was encouraged by the quality of the interviewees. This is testament to the hard work put in by the workforce in supporting the students through the new educational programmes. What was initially seen as a programme unfit to deliver the future workforce when first presented to the profession has following significant input and influence from BAA into restructuring the programmes and curriculum resulted in a Practitioner Training Programme that is now producing a new enthusiastic workforce that will meet the needs of Audiology services in the future.

The disappointing news that Public Health England had made the decision to withdraw funding to support Quality Assurance (QA) of the Newborn hearing Screening Program (NHSP) from 31st March 14, reducing the QA to just address the screening element of NHSP has been an issue of great concern to me as President of

the BAA. With so much work having been put into the QA of early diagnostics and habilitation over the years we are at risk of losing this at a critical point where we are all aware of the need for improving the equity of care delivered in Paediatric Audiology. It is essential there is transition of this work, but without funding this won't happen. I have produced an overview of our concerns which you will find on the Web in the news section and subsequently raised my concerns with the Chief Scientific Officer with whom I will be meeting formally to discuss further in due course.

Last week I was privileged to be sponsored to attend and present at the American Academy of Audiology Conference. Although as you would expect everything is on a grander scale in the US there are many parallels that can be drawn to UK Audiology. The Veterans Association (VA) is often compared to the NHS and they too face increasing pressures to improve efficiency as demands increase and costs escalate. It costs a reported \$100,000 and takes 8 years to qualify as an Audiologist in the US and there is now much discussion about utilising different skill mix within the workforce. Technology is advancing at its fastest rate ever, our profession is changing and we cannot afford to stand still, we need to capitalise on the opportunities to work in different ways utilising the technology of smart phones, new techniques in ear scanning and smarter, even personal patient centred data management to ensure we are able to continue providing our patients with the best and most appropriate care.

Flying back into the UK on Sunday I barely had time to see the family before setting off early on Monday for the Chief Scientific Officers (CSO) conference in London. This 2 day free to attend conference aimed purely at Healthcare Scientists addressed not just the challenges we face in Healthcare Science but also the fantastic work and developments that are taking place within all healthcare science professions and the opportunities we have for to influence and shape the future. Without question the National Health Service faces its biggest ever challenge. The growth of investment that has averaged over 4% per annum since the NHS was formed and over the last decade reached levels of nearer 10% per annum has in recent years been reduced dramatically to less than 1%. The NHS is no longer receiving the level of funding it did in the past and with if things don't change it faces a £30 billion shortfall in the future. With increasing demand on our services as professionals we have to take the lead on innovating change within the profession and this is change on a much greater scale than we have considered before. The delivery of healthcare globally is

going to go through radical change

“there is no service better equipped to meet this challenge and deliver this change than the NHS” (Sir Bruce Keogh- NHS Medical Director)

As Audiologists I believe there is no profession better equipped to meet the challenges ahead but we must take advantage of every opportunity to innovate and introduce change as if we don't our profession will be left behind.

Finally this week the Audiology Supplies Group , now operating under the umbrella of the BAA will evaluate the many new products and provide the scientific advice to NHSP Supply Chain regarding suitability for the new contracts. An exciting time and we look forward to the results!

BAA Presidents Blog Will Brassington 18-03-2014

March has been another interesting and busy month. |At the beginning of the month we hosted the third annual BAA Heads of Service day. Chaired and organised by Alison Walsh our current Vice President , this free to attend event was held in Birmingham this year and covered a range of important topics beginning with current and future work of the BAA then discussing a range of topics including value based healthcare, modern loop technology, IQIPS, MSC and Paediatric Audiology Networks. BAA are grateful to all our industry sponsors for supporting the event and also providing a great exhibition this year facilitating the opportunity for further discussion and those all important networking opportunities. Copies of the slides from all presentations are now available on the website for our members.

Last week I had a busy day in London beginning with a meeting with our colleagues from BSHAA. Discussion were interesting and productive, its important the BAA understands the issues within the independent sector and take the opportunities to work in collaboration where appropriate. This year our Service Quality committee will work closely with BSHAA on a number of BAA documents that will be enhanced with their input and will of course ensure production of documents that are reflective of the needs of the UK Audiology workforce.

Following this meeting I headed up to AOHL to meet Chris Wood and Roger Wicks. The purpose of the meeting was to discuss our individual strategies and how we may support one another in achieving these. As key stakeholders in UK Audiology we of course share some common ground and many of the key strategic aims of AOHL sounded very familiar and reflect many of the strategic aims of BAA. On meeting the team I found the new leadership to be refreshing, more focused on patient needs and a positive step forward for an organisation that in recent years faced a backlash from many of our members who clearly felt AOHL needed to reevaluate its principles and purpose. The AOHL strategy for 2014 can be found on their website www.actiononhearingloss.org.uk/

Later that day I took a dash back to Euston to meet Harjit Sandhu, from the newly formed National Community Hearing Association (NCHA). I was keen to meet Harjit to find out more about this organisation that has been formed to represent providers of community based hearing services. Currently the organisation represents the UK's large independent hearing care organisations. As the BAA president I have some concerns regarding the information on their website that I believe is potentially misleading for the public. I have however been assured this is not intentional and the NCHA are keen to work closely with the BAA and our members. The organisation is not in any way exclusive to the independent sector, NHS providers are welcome to join and any concerns or comments we have will be taken on board and where appropriate information will be amended to ensure it accurately reflects the position of all community providers. The NCHA is of course in its infancy and the BAA will need to keep in close dialogue over the forthcoming months. For further information re the NCHA you can see their website www.thencha.com/

Finally this week the BAA were saddened to hear the news that the ex Labour MP Tony Benn had passed away. Putting political preference aside Tony Benn had been an inspiration voice and great supporter of the BAA, NHS Audiology and the Hearing Impaired. He was the guest speaker when the BAA was founded in 2004 and was considered a great friend of the BAA. He will no doubt be sorely missed and our condolences go out to his family and friends at this sad time.

BAA Presidents Blog- Will Brassington 26-02-2014

Another busy few weeks have passed and I wonder where the time has gone! I had a very interesting few days in Durham speaking on the SATC leadership program earlier this month, this was a great opportunity to speak to both senior and junior staff about some of the challenges and opportunities we face in the profession in the future. It was great to meet some of the leaders of the future, offer advice and support their development. All too often we become so involved with the whirlwind of activity around us we forget to take the opportunity to see the obvious, it important to take the time to stand back, identify the problems and then get involved in resolving them.

I have had a lot of reading to do this month, the Higher Specialist Scientist Training Programme (HSST) curriculum has been developed and submitted to the Royal College of Physicians (RCP) in line with the current Modernising Scientific Careers plan. This 179 page document developed by a group of key stakeholders including BAA will facilitate the training of this new level scientist within the profession and on agreement from RCP should be ready for new trainees to commence the programme later this year. Having read through and provided feedback on this, as BAA President I fully endorse this excellent work on behalf of the BAA Board and congratulate the authors responsible for this comprehensive and quality document.

The last few months have also been a consultation period for the Academy of Healthcare Science (AHCS) Proposed Standards for Register of Healthcare Science Practitioners. The proposal to open a further register has been open for us all to consult on and BAA have submitted a clear response to this which can be found on the website expressing our support of the RCCP response and our concerns regarding the potential introduction of a further register for scientific professionals in Audiology leading to even further confusion for the general public.

The appalling weather we have had over the last few weeks unfortunately led to the cancellation of the planned workshop on Paediatric Networks, this work has sparked much discussion within the profession. I should assure members that the early pilot work is still in its infancy as those involved try and develop regional consensus on how these will operate in the future.

Further work has been going on behind the scenes as we prepare for the Heads of Service Meeting in Birmingham , this will be the 3rd Annual meeting to support managers and leaders from the profession and I look forward to a productive meeting next week. This week I have been working on the Specialist Surgery Strategy as we at BAA feed into the development of guidance around implantable devices in the future. This work is essential to ensure the highest quality service provision is maintained in the future and services develop strategically to ensure a patients are managed effectively and efficiently by experienced and competent multidisciplinary teams.

I managed to get a week away last week during half term and hence have been playing catch up since, prioritising work is always a challenge and I regularly find myself burning the midnight oil responding to emails regarding BAA business. So with so many emails to pick up on I'll sign off for now and will endeavor to keep you up to date with progress over the next few weeks.

BAA Presidents Blog- Will Brassington 7-02-2014

Presidents Blog 6/2/ 2014

The last few weeks have been pretty busy for me and the board. We had the first board meeting of the year shortly followed by our first annual review with Fitwise the BAAs management company. I'm pleased to report over the last 12 months the relationship with Fitwise has grown from strength to strength as they have begun to understand the needs of our organisation and of you, our members. The success of last year's annual conference and the improvements we have observed in the management and organisation of this and other events delivered by BAA are directly related to the approach Fitwise have taken to support our organisation and this should be viewed by all as a positive step forward in the future. Over the next 12 months we will invest further to improve benefits to membership and Fitwise will be providing further support to the improve such things as the BAA magazine, the support to the higher training scheme and the delivery of conference and other BAA events throughout the year. I have been spending a significant amount of time behind the scenes working on plans and vision for Quality Assurance in the future. With so many changes afoot within Public Health England it's essential we as a professional body voice our opinions and drive the quality agenda to ensure the services we provide are

delivered safely and effectively in the future. There is a significant amount of work to be done in a very short time and I hope to be able to share more with you on this in the near future.

This month will be another busy one as we at BAA prepare our final comments on the AHCS Standards for Register of Healthcare Science Professionals. This consultation ends on the 28th February if individuals wish to comment. The BAA has drafted a response which will be published in due course and highlights our concerns regarding the issues of having 4 different registers for non-medical staff working in Audiology.

The draft HSST curriculum for Audiological Science has recently been published and circulated to key professional bodies, medical royal colleges, specialist societies and patient groups for review. The BAA has been integral to the development of this 170 page document which will form a key part of the training and education of senior scientists within our profession in the future. I see the introduction of these newly educated scientists as a huge step change in the profession and one that has the potential to push boundaries in clinical practice for patients with co-morbidities that have not been seen before in our profession.

I have a lot to read over the next week, and a lot planned with further trips to London to meet our colleagues from BSHAA and also meet regarding the early Paediatric Networks Development. I will feedback on these of course to keep you up to speed on progress but for now it's time to sign off again.

BAA Presidents Blog- Will Brassington 14-1-2014

Good afternoon all, I'm back on the train from London following a very constructive meeting with the NHSP team to identify opportunities and mechanisms by which BAA can support the delivery of high quality diagnostics and habilitation of babies who have failed the newborn hearing screen. This work is very much in its infancy at present but to give you a flavour of the topic of conversation and the direction of travel, we are exploring ways in which BAA can support the NHSP in improving and sustaining quality beyond the point of screening. As a professional body it's important that we work hard to ensure quality is embedded in everything we do. Change here is inevitable, but with good planning and hard work I envisage the BAA input to be a positive step forward for the future. Work in this area will continue over the

forthcoming months and following the meeting today we aim to release a joint position statement over the next few weeks that will communicate our plans to membership and key stakeholders. Look out for this in future communications.

On another topic in the current climate where competition for referrals is more commonplace than ever before how do patients get to hear about your services? Here's a tip for the day. Use your search engine to visit the NHS Choices website. At the top right of the page you can review "Services near you". Click on this, scroll to the bottom of the list and go to "all directories". From here you will see an A-Z list where you will be able to locate "hearing aid services". If you click on this it will prompt you to enter your postcode. I guarantee the majority of you will find your NHS Audiology Service is not listed but many of the independent providers are. This is placing you at a distinct disadvantage especially if competing through AQP as patients may be unaware of you and your team. Fortunately this is easy to rectify, if you contact your communications team and make them aware of this, they should be able to register your services on this website- A simple step with a potential big impact, make sure you check today!

BAA Presidents Blog- Will Brassington 10-01-2014

Hello and a warm welcome and happy new year to you all. I appreciate this blog is somewhat overdue and assure you I will be more frequent in my communications throughout the course of the year. My first month as president has been as one may imagine, something of a whirlwind. Getting to grips with all the new contacts, setting up introductory meetings and the numerous articles one has to write as a new President were the focus of my attention in the first month, up until Christmas and it is only as we enter 2014 with a fresh mind I feel I can now begin to focus on the task in hand.

My diary is already over populated and this reflects the plans and workload ahead. Behind the scenes I have been working with numerous members of the board as we begin actioning the 2014 objectives set at our annual strategy day following the November conference. As the new board settles in and we prepare for our

first meeting of 2014 activity is rapidly gaining momentum as we finalise the programme for the annual Heads of Service meeting and assemble a new team to develop the academic programme for our 2014 conference in Bournemouth.

With significant changes afoot within the Academy of Healthcare Science (AHCS) and the ongoing work of RCCP in lobbying for registration change I hope all members of BAA will have taken the opportunity for their voice to be heard and responded to both the AHCS Consultation around equivalence and the short BAA questionnaire around Chartered Scientist (CSci) registration.

Today I attended the IDA “think tank” meeting in London, this was of 3 Global seminars run by the IDA institute to identify- A Global Vision for Hearing Healthcare in 2020. The meeting was attended by representatives of all sectors within the profession and was both constructive and productive in identifying the vision for the future. It was refreshing and rewarding for all to work in collaboration without any sense of defensiveness and with a primary goal of providing the best quality care for patients. Whilst on a small scale I believe this was a huge step forward and will undoubtedly help set agendas for collaborative work in the future. With a number of meetings planned in London over the forthcoming weeks I will no doubt have a lot to talk about over the next few weeks, I will endeavour to keep you up to date on my work, but for now will sign off , I have a train to catch!

BAA Presidents Blog- Will Brassington 27-11-13

First and foremost I will take the opportunity to introduce myself as the new president of BAA and say how delighted and honoured I am to have been elected to this role following a growing list of predecessors whom have done a fantastic job of leading the academy over the last 10 years.

Although only a week has passed since our hugely successful conference in Manchester and since my term of office began changes are afoot and I have had to hit the ground running in order to meet the heavy demands of this role. The timeliness of my trusts CQC visit this week could not have been worse for me but no-one ever said this would be easy!

Following my first official address to membership during the closing remarks of the conference, my first official address to the new BAA board was on Wednesday when taking responsibility for chairing and facilitating the BAA board strategy meeting . After an

intense few days at conference the board worked extremely hard all day on Wednesday to produce a solid strategy plan to ensure the BAA continues to grow and develop on its strengths whilst addressing issues for improvement that have been raised by our members and stakeholders. The strategy will provide clear direction and focus for the board and its committees, helping us to ensure we stay on track and continually satisfy the requirements of our members over the next 12 months and beyond.

Since the strategy day I have spent a significant amount of time reading and addressing e-mails , planning my diary over the next 12 months and beginning to make contact with the endless list of people whom will no doubt become key contacts over the next 12 months. This in itself is a major task and despite having spent nearly 25 years in practice and being a visible member of the profession I am making new contacts on a daily basis at present. As I write this blog , no doubt my first of many I sit on the pendolino train from London Euston to my home town. A journey that will be no doubt be a regular one over the next twelve months. The pace of this train is in many ways reflective of the pace of change in our profession at present . We all find it difficult to keep up at times, it can be disorientating but I hope the BAA can support you and I aim to keep you well informed over the term of my presidency. The purpose of my visit to the capital today was to represent BAA at the Academy for Healthcare Science (AHCS) Council meeting. This was enlightening and of great interest as the AHCS continues to evolve and plans were proposed for a new structure to the organisation. BAA will of course push to remain integral to the new structure and ensure Audiology is a key stakeholder from physiological sciences. I was also encouraged to hear about the progression of the work being undertaken around STP equivalence and see this as a major step forward for those seeking HCPC registration in the future whom have not been trained through the STP route.

So thus far an interesting and very busy week , no doubt a sign of things to come!

Adam Beckman BAA President 2012-2013

President's Blog 9th November 2013

There's a lot of conversation now about conference. People worrying about what to wear for the party. Talking about the speakers and topics – what they're looking forward to, and how they wish they could be in two places at once. I'm looking forward to pretty much all of it, to be honest. Although I still haven't got everything ready (by quite a long way).

One thing we will have at conference is our first ever Annual Report. This will let our members, and others, know what we have been doing for the last year. It will be available for all attendees, we will be sending a copy to every department, and it will be available on-line via our website. I want to thank everyone who has helped to get this ready – some of whom have done things at very short notice. It really is appreciated.

We will have quite a few things that we're launching in one way or another at conference, but I am very aware that only a fairly small proportion of our members can attend each year. We will therefore make sure everything will be made available via the website, mailings and email for those of you who can't come. And for those who can be there – see you in Manchester.

In 10 days I will be handing over to Will Brassington as the new President, and this will therefore be my last blog. I have found it a useful way to help keep track of, and reflect on, what I've been doing on your behalf. We've had an average of around 50-60 hits per week, so I guess some of you have been reading my ramblings. Because a blog is personal in nature (well, that's how they are to me), it has mainly been about my activities and actions. This does not reflect the work of the BAA and its teams. None of what I've done in the last year would have meant anything, or been in any way possible, without Will, Gareth, Jagjit, Vinay, Jonathan, Sue, Sarah, Michelle, Neil, Holly, Laura, Alison, Barbara, Paul and Gordon. Nor would what they have done worked without the chairs and members of their teams: Service Quality Committee; Audiology Supplies Group; Education, Training and CPD team; CAC/HTS team; student and trainee team; regional groups representatives; publicity and communications team; conference team; and our representatives to other bodies. Thank you all for your work over the last year.

It's for each President to decide how best to communicate with our membership and I don't know how Will is planning to do things. But from me, it's goodbye and thank you.

President's Blog 1st November 2013

Well, it's now the 1st of November, with only slightly more than a fortnight until conference, and the AGM. It's dawning on me quite how much I still need to prepare for in that period – better get cracking. I'm probably not alone in that. Many of the board, along with many other people, have presentations to finalise, workshops to fine tune, posters to get printed.... And of course for our exhibitors there is all the work for their stands, demonstrations and educational work. And the conference team at the BAA are probably a little busy too! The whole thing is a huge enterprise, requiring phenomenal effort from so many people. But with the variety of exhibitors we have, and nearly 500 people signed up already, I am sure that this, our 10th annual conference, will be as good as they come.

If you haven't yet registered, it's not too late. We hope to see as many of you as possible there.

This is a special day for me as it's my older daughter's 12th birthday. Whilst I'm working, there are preparations going on all around me. Cake being decorated, house being cleaned and tidied, food being prepared. At some stage, I will stop and join in, but I need to get further down my "to do" list before I can afford to take a break.

President's Blog 26th October 2013

So last week I talked about the Ear Foundation's adult hearing conference. To prove that I can put my money where my mouth is, as a result of what I learned there I referred two people to our local implant centre last week. I am sure that both will do better with implants than with anything I can provide in the way of hearing aids, and having heard directly from successful users I was in a much better position to talk about the likely benefits available with modern technology.

Last week I also chaired the HABUK meeting, which we held in Birmingham for a change. As always, this meeting was extremely useful. Having representatives from the BSA, BATOD, NDCS, BAAP and the BAA (please see my previous blog on this group if you don't know all these acronyms) meant that we had some really

good information exchange – especially around paediatrics. How many people are aware of the changes coming in how education, social care and health are going to have to really, truly work together to meet the needs of children? Statements are going to be replaced, and the new system will have true, enforceable commitments required from all parties. Whilst this isn't due to start for what seems like ages (late 2014), it will be with us in no time. I've asked my colleagues from education and the NDCS if we can have an article for our magazine explaining this, so hopefully we will all be better informed soon.

That was the last HABUK meeting I'll be attending as president of the BAA. And with less than a month to go before the AGM, all voting members of the BAA received ballot papers for the vacancies on the Board. We have three excellent candidates, which is great for the organisation. I would urge every one of you to vote for your preferred two. A good turnout at the election will ensure a proper democratic mandate for the board to continue to act on behalf of our members. Use your vote – it counts.

President's Blog 16th October 2013

So, it's been another busy couple of days, and I'm sitting on yet another train on my way home – or at least I will be if it actually leaves the station.....

Yesterday, I had the great pleasure of attending the Ear Foundation's conference on adult hearing. This was a timely reminder that there are important developments and needs for the deaf and hard of hearing beyond AQP and beyond children. It was an absolutely packed day, with some world class speakers limited to 15 minutes (or even 10 in some cases), and no time for questions – but there was at least time for discussion over lunch and tea. The day was largely divided into two. In the morning, topics ranged from the link between hearing loss and dementia, the demographic changes we all know are coming and their link on hearing and communication, and the case for adult hearing screening. I've written about this last one before, and now really is the time to help push this agenda forward. Please visit www.hearingscreening.org.uk and follow the simple-to-use system to write to your MP about this.

The afternoon focused on cochlear implants. Throughout the day, we heard from individuals who had been implanted and the life-changing effect of this, and we also heard from people with severe losses who had not been accepted for implant, and the struggles that they have. The UK falls far behind other countries in rates of adult implantation – it's estimated that only 5% of adults who meet the audiological criteria actually get one. Hearing about how well they do now, we need to do better as a nation on this. And we as audiologists need to do our part – referring people sooner. Of course, I think that on the whole we need better training about this. Those of us who don't work in implant services are often too removed from those who do. We aren't well enough informed about both referral criteria and about the current outcomes, so that we aren't able to properly inform our patients. This will need to change if we are to properly meet the needs of our patients. And this (the needs of our patients and the unmet need for cochlear implants) is the subject of a report that was launched yesterday, and which will hopefully be the subject of an adjournment debate in parliament. Hopefully, this report will be available on the Ear Foundation website soon (if it isn't already). We'll keep you informed about it.

My train's moving now. Signal problems mean that it's going to be diverted, and will be at least an hour late. But I'm on a train, I have power, I have a DVD, a good book and a seat. So all will be well, even if I will be very late for dinner.

President's Blog 8th October 2013

Loop, loop. That's what the hearing aid and cochlear implant users would undoubtedly want me to say.

I'm on my way back from the 3rd international loop conference in Eastbourne, hosted by HearingLink. And it really was an eye opener. My presentation, from a professional perspective, was a little dry, and in retrospect simply preaching to the converted. Or more like trying to teach my grandmother to suck eggs. I was talking about why loops are important, but I was talking to people who experience this in their lives every day. And it was eye-opening, humbling, and to be honest at times made me feel quite

uncomfortable.

The stories from users were the same, whatever continent the delegates were from. And there were a couple of themes. Firstly, how fantastic the quality of sound a well-installed loop gives – with the sound directly into their ear, with no background noise, no loss of clarity and no interference. More than one person admitted to crying openly the first time they experienced this. And secondly, how long it took so many of them before they were even aware that loops existed. “My audiologist never mentioned it”, “it wasn’t activated”, “why didn’t she fit me with a hearing aid with a loop?” were the sort of comments and statements coming from all four corners of the world – including here in the UK.

There were also presentations from professionals, explaining why loops are so important to provide a good signal-to-noise ratio in places where a hearing aid microphone simply can not do the job. And from loop manufacturers and suppliers explaining how the problems of loops from 30 years ago (interference, irregular field strength, no easy way to test them) have been overcome. And from service providers (such as Asda) explaining why it’s good business to have working loops and trained staff.

Audiologists are seen as key within this – we’re the ones who fit the aids and counsel our patients. The challenge given to me, quite clearly, by the deaf and hearing impaired population was this. What am I, as President of the BAA, going to do about it? There is clearly an exaggerated view of my influence and power – I can’t change the practice of every audiologist in the country (any more than I can change Department of Health policy....). But I can start with this blog, and this message. If you routinely provide the loop, explain how it works and demonstrate it, then well done. You are doing the right thing, and are undoubtedly giving people the opportunity to participate in a wide variety of situations in which a hearing aid alone is of very limited use (and there is some remarkable data about this that’s going to be published in Ear and Hearing – hopefully next month). If you don’t, you should. Spend a minute less on your REM, and spend that time explaining what the T does – it’ll provide far more benefit in the long run, and you’ll have a far more satisfied user.

President's Blog 5th October 2013

Today, a group of us had a teleconference to consider signing the contract with the venue for our annual conference in 2017! This sounds like a very long time in the future, and with all the changes going on it's impossible to predict the state of play four years from now. The dilemma is – we can get a really good deal by booking this far ahead, which means we can keep costs for delegates down. But we can't really know for sure what conference will be like then. Will we still have the fantastic support of our exhibitors and sponsors? Will we still have a conference with 500 delegates? Will the conference team of 2017 want a two day conference? These are the sort of decisions we have to deal with now and then, and sometimes we need to take a leap of faith. I won't spoil things by saying what we decided - it's just the process that's so challenging!

Tomorrow I head to Eastbourne for the 3rd International Loop conference. This is a 2 day event on Sunday and Monday, but it will take me a long time to get there so have to head off Saturday lunch time.

I believe that loops remain a really important way for hearing aid users to access hearing in a variety of situations, and have written for HearingLink on this previously:

<http://www.hearinglink.org/hearingaids/loops?>

I know a lot of audiologists who recommend its use, but also a lot who don't routinely, and that does sadden me – especially for people with a moderate or greater loss. Loops provide access in large buildings (churches, theatres, lecture rooms) where the sound from the person speaking simply won't get to the hearing aid, and in many of these places the loop works and is on. People just need to know how to access it on their hearing aid.

One of the things that's been difficult about being President is not spending as much time with my family as I would like – and going away on a Saturday for a conference is the sort of thing that can seem hard. But then I remember all the people we serve who are in the forces, the merchant navy or any of the others who have to travel so much more, and for so much longer, than I do – and it reminds me how fortunate I really am..

President's Blog 27th September 2013

I can't believe it's been 2 weeks since I last wrote a blog. If anyone out there missed these, sorry!

So what's been going on in the world of the BAA? Conference is a big area, of course. There is a full preview of this in the latest edition of magazine - which you should have just received. The early-bird registration is about to end, so do log on and get your place booked now, if you haven't already. The board are getting very excited – and you will be able to see us a lot. Moderating sessions, on the BAA stand and also at the AGM. These are your chances to feed back to us whatever you want to, and to hold us to account for the year, so do take them. Particularly, do come to the AGM, ask questions, and hear about what we've been doing. I attended the AAA AGM in April. It was a huge affair – 1000s of people came. It was very “American” – I doubt many people would want to hear a BAA choir perform the national anthem (whereas the equivalent went down a storm over there). So we won't be copying their style. But these things are important, so do come.

The education team have been busy, too. Things are apparently falling into place for the STP assessments – or OFSAs, as they're called (and no – I can't remember what that acronym stands for). I want to thank Laura Booth, Alison Walsh and numerous members of the education team for everything they've done to make sure these are fit for purpose. There will be another Behind the Scenes email next week which I am sure will update you more on what has been going on.

I've been working on some stuff that doesn't make interesting reading – so I won't bother you about it until it's done.... So that's about all for now.

President's Blog 12th September 2013

So, this week I attended two really important meetings. On Monday it was the BAA Board, and today was the next meeting working towards the new paediatric audiology system.

The board meeting was really productive. As always, we covered a lot of ground – the papers for the meeting were really, really long

this time (144 pages) – but that did include the new Quality Standards Transition from Paediatric to Adult Audiology Services, developed in Scotland. It was extremely helpful to have these. We agreed a number of items, some of which I'll cover here – the full minutes will be posted on the members area of the website once they're agreed. We intend to develop a new category of membership for corporate members. The details of this are now being finalised, and it will be launched at conference. We also agreed a new policy for travel and subsistence, which we will also launch at conference.

One other item I'll mention here is the next Head of Service (England) Day. The heads of service in both Wales and Scotland have standing meetings that are very effective. There are similar meetings for many of the regions in England. However, an overall meeting across England is much larger than any of these, and needs more infrastructure and support. We have therefore decided to continue to run this as BAA event, and will again be holding this in the new year. We will use the feedback we got from the last meeting in February to try to ensure that we meet the needs of this group. We also agreed to explore supporting a heads of service meeting in Northern Ireland. Whilst a much smaller group, we think there may well be scope to offer something there, and will look at this in more detail with Barbara, our Northern Ireland representative.

Today's meeting on paediatric hearing services (for England) was really productive. What is clear is that there is no appetite or intention to close down small services serving local communities – nor to recommend that they be taken over by their neighbours. Instead, the aim will be to have these working in real networks – which learn from each other, support each other, and are properly accountable to the populations they serve. This will not be a quick change, but it will be a significant change in the end – both in culture and in the standards that all services will be expected to deliver (not just a percentage of them). There will be two sessions at BAA conference on this – one presentation and one workshop – so this is a great opportunity for you to find out more and to influence how things are developing.

Now, as I settle down for the rest of my journey home, it's time to relax, watch a video and eat some crisps (not a healthy option, I know, but sometimes these things just have to be done...)

President's Blog 8th September 2013

Last week I said my next blog would probably be after our board meeting, but that seems like a bit of a long gap, so here's a quick update.

I've had an admin today – which feels like the calm before the storm. A lot of travel coming up over the next couple of months. So I've been spending the time to try to get ahead on various things.

In a month, there's the 3rd International Loop Conference, which is being hosted in the UK this time, by HearingLink and The Ear Foundation. Details of this will be being posted on our website. I have had the pleasure of being invited to speak at that. Because it's aimed at the public as well as professionals, the conference runs over a Sunday-Monday – so although it may be too late to book time off clinics, it's not too late to attend at least one day. I've now submitted my abstract, some quotes and other bits for that – on the deadline day!

I also had a really useful conversation with Gordon McHardy, our Scottish representative to the BAA Board. Our latest membership survey (and thanks to everyone who completed it) showed that the general satisfaction with the BAA is lower in Scotland than anywhere else in the UK. Some of that may not be surprising. We are conscious that there is often an English-centric bias to our work. Partly this is because England is just larger – more people and more of our membership. Partly it's because some of the changes going on in the NHS and education in England require greater input from the professional body. Also the Scottish Heads of Service and National Audiology Manager have a direct line and voice into government, a role that the BAA has to try to parallel in some fashion in England. But there is also, possibly, an element of perception rather than fact in this as well. We really want to represent, and work on behalf of, all our members. We now have a plan so that hopefully those in Scotland will start to see a bit more of what the BAA does north of the border, and we will be working to try to better meet those needs.

Well, that's about all for today. I will provide a further update next

week.

President's Blog August 29th 2013

I want to take this opportunity to talk about something slightly different – the BAA Podcasts. I listen to quite a lot of podcasts – on the train, when I'm walking (which I've recently started to do more of), and also when I'm failing to sleep. There's a lot of interesting stuff out there – and now the BAA has joined in.

One of our press and communications team – Mike Lynch – is behind this. We now have two excellent items you can download. The first consists of interviews with Harvey Dillon, talking about long term outcomes of deaf children and Robert Sweetow, talking about fractal sounds in the management of tinnitus. The second features Doug Beck talking about retaining spatial cues (with Oticon hearing aids) and Helen Pryce talking about managing hearing loss in residential care homes. All four features are really excellent, and it's a great way to hear about some of the latest developments and thoughts from some of the leaders in our field. I'd highly recommend them both. They can be accessed via the BAA website here:

[{CCM:BASE_URL}/membersarea/memberspodcasts/](#)

or direct from iTunes here:

<http://itunes.apple.com/gb/podcast/baapodcast/id541936344>

It's a week and a half before our next Board meeting – so my next update will probably be after that.

President's Blog 22nd August 2013

So definitely back to normal now – writing my blog on The Golden Hind – the 18.03 from Paddington to Plymouth. It's sad when you know the names of the individual trains!

Today, we met with BSHAA. This is the third time we've met, to look at common ground and where we can work together. They are fairly free and unstructured meetings, but I think some

interesting work may come out of this in time. Particularly, we all agreed that the lack of guidance for commissioners on adult hearing, on tinnitus and on balance leaves things very open to huge local variation. This is an area that we may well do some additional work on in the future.

I say “we” because Will Brassington, Vice President, also came. Scarily, it won't be that long before my term as President is over and Will comes into the position. We've started working on things so that when he takes over at our AGM in November, he is ready to hit the ground running, as they say. The year goes really quickly, and as we get towards autumn and preparations for the AGM get underway, we need to be sure that we're ready and that there is no gap in the work of the BAA.

Well, that's about it for now – just a short update for a change. Now it's time to eat my tea.

President's Blog 18th August 2013

As I mentioned at the end of my previous blog, I've been away on holiday – but the work of the BAA hasn't stopped. There were several things that happened in late July/early August, and I would like to thank the board and other team members for dealing with a number of issues while I was away. In particular, there was an issue regarding accreditation of a course in the Republic of Ireland. I can't say too much about it, but I would like to note our formal response to this, drawn up by Will Brassington, Vice President, in consultation with our education and accreditation and our communications leads.

<http://www.baaudiology.org/index.php?cid=148>

I had the pleasure of two weeks in Orlando. Mainly, I was visiting theme parks – Disney and Universal. But I also spent a day visiting a variety of audiology elements in Tampa, Florida. I spent some time at the University, visiting the communication disorders unit where they teach both audiology and speech and language pathology. It was really good to see the set-up there, and also to reflect on how many similarities there are with how we work in the UK, despite all of the differences in how education and healthcare are both provided and funded. They have a separate really interesting new research unit, that has everything from petri dishes

at one end to human psychoacoustics at the other, with some animal experimentation in the middle. This provides the chance for some really innovative work. And I finally also visited a separate Veteran's Affairs hearing and balance centre a couple of miles from the university. They have a great set-up there, and I have to admit I came away somewhat jealous. But it was really good to see how much care the military try to take for people who have suffered hearing loss, tinnitus and balance problems from their service. I was made extremely welcome there by everyone I met, and hope one day to be able to return the hospitality I received.

After that, it was just a case of testing my own vestibular system on a variety of roller coasters and other rides. Now that I'm back, and have more or less recovered from my jet lag, it's business as usual, and as always I'll aim to keep you informed of what's going on.

President's Blog 24th July 2013

So, today I was at the latest meeting of the Hearing Loss Alliance. We were very pleased to have at this meeting a senior person from the Department of Health (England) who is currently on secondment to NHS England. One of his roles is to try to get the hearing loss strategy published. I've written about this before. It is a cross government document relating to hearing loss and what is needed to help people with hearing loss in all areas – from health and social care through to employment and transport. The document will provide a framework for this, actions to be carried out and commitments to carry out these actions. This strategy was understandably delayed with all the structural changes in the department of health. We hope that it will be published in the autumn, and all the organisations will be expecting to get some progress reports as it progresses.

These meetings are really important. With the whole sector around hearing being represented – patient groups, professionals and even the hearing aid manufacturers – it is possible to ensure that hearing loss remains high on the political agenda.

I also had the opportunity to have a one-to-one meeting with the Chief Executive of Action on Hearing Loss. This was essentially an information exchange. He is relatively new in post and needed

some background on the BAA. But it was also a chance to discuss their long-term strategy, which was published recently, and provide the professionals' perspective on it. It was really good to be able to have this time, and I found it very productive.

As I sit on the train home, recovering from the heat of the rush hour tube, I can gaze out of the window at the bright sunshine and think of the holidays. And I will be on holiday for a couple of weeks, so won't be blogging again until the middle of August. If you're also fortunate enough to be getting away, I hope you enjoy your break and are able to come back to work refreshed. If not, I hope you manage to enjoy some of this fantastic summer weather we're getting.

President's Blog 19th July 2013

Now that summer is really here, it can be hard to maintain focus on everything when really we would probably all like to be at a barbecue, on the beach or finding some other way to enjoy the rare, prolonged warm spell. This may be why it's again been a fortnight since I wrote a blog. So what have it going on in the world of the BAA?

First of all, conference is going full steam ahead. Our exhibition spaces have nearly all been taken already, which is excellent news. We have also received over 80 abstracts for papers. I suspect that this is a record. It shows how far we are advancing, and is particularly a reflection on our Higher Education Institutes and how their work over the last years has been transforming audiology professionals. The programme overall looks great, and I am so looking forward to it already. It is also a very special conference, being the BAAs 10th. I know that the team – both the volunteers from our conference team and the staff at Fitwise – have been working extremely hard to get it to the position it is in, and planning the birthday party theme (which I hope will make it a highlight in everyone's social calendar). They have also worked really hard to maintain and improve the extremely high levels we have come to expect within a very tight budget, so that prices can be kept down. Hopefully, we will see many of you there. I know that many departments can not release too many people at the same time, but with a two day conference the effect on capacity is less than the three day format, which should help on that front.

The other thing to think about is the coming elections to the BAA Board. We have recently sent an email to all our members about the roles on the BAA Board, and nomination forms will be coming out soon. Do please think about standing. Personally, I have found that my time working for the BAA has been incredibly rewarding, and I am sure that all the other current board members have felt the same. Although at times there can be too much to do, I have always found the people around the table fantastic to work with.

President's Blog 5th July 2013

Well, recently I haven't been blogging quite as frequently as normal for one reason or another, so I'm making up for it with two in a week.

On Tuesday I attended (and spoke at) the South West Every Deaf Child Matters conference, a joint event between the NDCS and the Exeter Royal Academy for Deaf Education. I really had two hats on – both as President of the BAA and as a head of audiology in the area – so was able to provide both some national and very local perspectives on things. This conference was aimed at health, education and social care, and to me it worked really well for a number of reasons.

First of all, the programme had aspects around all three of these areas. Secondly, health was by far the smallest part of the programme, and that was a really useful reminder of what's important to deaf children and their families. We provide the identification, diagnosis, hearing aids and a few other bits and pieces. But we only see the children and their families in small bits. It is their education (and social care, when it works) with whom they interact far more frequently, and which play a much larger role in their daily lives. Of course, it's vital that we do our work well, but as a proportion of the service that's needed it's a relatively small one. Thirdly, there was a really strong presence of parents there as partners in this work. Again, really important. I think I took more notes than I do at many audiology meetings, as there was so much beyond what I deal with day-to-day. Particularly, there was a lot of focus on the changes in statutory requirements coming in under the new education and social care legislation. This will have a huge impact on education for children and young people with special educational needs, at a time of great financial difficulty (if

you think it's challenging in health, local authorities have had huge cuts and will continue to have further ones year on year). Seeing and hearing how our colleagues are rising to these challenges, and trying to grasp the opportunities that the new framework will bring to improve lives for deaf and hard of hearing children, was quite inspiring at times.

The whole event really focused everyone's minds on working together around the child, with their needs and interests at the centre of what we do. I try to keep realistic about what I bring away from meetings. There's nothing worse than getting all enthusiastic to make huge changes, then to lose all the impetus in the daily grind. But I do have one or two actions that I will definitely be working on. And top of these is more events with multiple professionals, and with parents/patients.

President's Blog 1st July 2013

Today was the BAA Board meeting. These are very long days (for a meeting) – 10.30 until 4 doesn't sound too long, but many board members set out long before breakfast to get to the meeting, and don't get home until late. I know my journey (on the 5.53 train, home again at 9.30p.m. if it's not delayed) is nowhere near the longest.

So what did we talk about this time?

There were several "discussion points" that took up a chunk of the day, highlights of which were: the 2014 conference budget; the results of our membership survey, what it shows us and how we can respond to key items; our sponsorship policy; and our response to the campaign for adult hearing screening. And as if that isn't exciting enough, we also discussed a cost-effective solution for a photograph (and related documents) library and the expenses policy (and rates) for all the volunteers who put so much into ensuring the BAA meets its objectives. This last may sound trivial, but remunerating our volunteers for their travel and subsistence fairly, ensuring that they can stay in a reasonable and safe hotel if they need to do an overnight stay, whilst managing our resources (your money) efficiently is really important to us.

We also received written reports from each board director (total 94 pages, including the membership survey results), and spent time on discussion points and policy questions for each work area – from the Audiology Supplies Group (which tests hearing aids and other technology on behalf of NHS Supply Chain) to the student and trainee team. I won't reveal any decisions here – the board members who weren't able to be there really need to be able to see these before they go into the public domain – but overall I think it was a really productive day. And I want to thank all the board today for their contributions.

Unfortunately, again we over-ran – although only by 12 minutes. I blame the slow lifts at Charing Cross Hospital (where we met) as it made the lunch break longer than planned:) But thanks again to Ruth Thomsen and Julie Wilkins for sourcing us a free room in London to meet.

Tomorrow, I am speaking at an entirely different event – South West Every Deaf Child Matters – in both my capacity as President of the BAA and as Head of Audiology for Plymouth Hospitals NHS Trust. I don't know how the day will go yet (of course), but I may well do another blog straight after.

President's Blog 25th June 2013

I failed to write a blog last week – I think this is the first full week I've missed, so apologies to anyone who has been waiting for this with baited breath....

Last Friday I had the great pleasure of attending the second BAA Student Conference, held at Aston University. This was a fantastic event, so first I must congratulate Holly Thomas and all of the student and trainee team who worked so hard on it. I am sure that the feedback will be excellent from the participants. And there were a wide range of participants, with over 100 delegates representing the full range of audiology professionals in training – from those doing foundation degrees through to PhD students.

There was a wide variety of topics, and I don't want to just write a list, but presentations and workshops were: education in

audiology; the STP rotations; consideration for deaf-blind people; submitting papers for conferences; interview techniques; AQP in the NHS and private sectors; and ethical volunteering. And I have to make a special mention of Nas, a BSc student from the Manchester course, who had asked to do a presentation on cultural awareness in audiology. Not only did she do exceptionally well, but this is an area that is really close to my heart. And whilst it was great to hear her talk, it did sadden me how little progress we have made as a country, and maybe as a profession, in this area in the last 25 years. We heard about a deaf newborn not being properly aided for a long period because the audiologists and teacher of the deaf couldn't negotiate the cultural barriers of an immigrant family. In 2013 we should be doing better at this, and it would be great if people could submit papers to our conference showing how they have succeeded in this area. We obviously still have a lot to learn. But it was obvious from the students I met that the next generation are keen to learn, and will bring great enthusiasm and knowledge to us as they graduate and start working.

This was the second student conference, and already the team are planning the third, aiming to make it even bigger and better. This is fantastic, and wholeheartedly supported by the BAA Board. And as always these events would not take place were it not for the support of the sponsors and exhibitors – both financial, and in this case giving the students a taste of the fantastic exhibition we have at our annual conference.

President's Blog 7th June 2013

So it's time to reflect on a pretty busy couple of days. Yesterday, I had the pleasure of chairing another HABUK meeting. This is the body for professional bodies in hearing and balance, which also has voluntary sector and other interested parties as observer members. We are kindly hosted by the BSA – who both provide a separate space on their website and most importantly provide the secretariat. Part of the time is information exchange, so that each body is kept up to date with what is going on. But we also take action in areas that require a joint voice. One of these is continuing to push the Department of Health for England to evaluate the outcomes of AQP. This is on their agenda, but really feels too long in the distance at the moment. All the members believe that the

cost and quality outcomes need to be evaluated now, as decision-making about commissioning is taken in the new CCGs.

I then had the good fortune to be invited to an event at the House of Commons. This was to launch a campaign “Hearing Screening for Life”, which aims to get adult hearing screening (probably at 65 years). Many professionals may immediately be concerned about “floodgates”, and clearly any impact on existing capacity, and how to deal with this properly, would need to be part of any plans. The BAA board will need to discuss this carefully (now that it is in the public domain) to produce a response to this call from the professional body. But really, we all know that many people wait far too long to seek help, or are blocked in their attempts to get help by their GP. So screening really would improve things for many people, in so many ways. One of the exiting things about this campaign is that it being backed by charities from the wider arena – Age UK, Carers UK, Dementia UK and others. So it takes adult hearing loss out of the deafness “niche”, and places it where it belongs as part of the wider communication and health needs of people trying to lead their lives and age well. Politically, the campaign is being lead by Stephen Lloyd MP, and he has a tremendous drive to make this a reality.

Finally, I met with the AHCS today about registration at the graduate level. This was really, from their perspective, a fact-finding meeting, as they are just starting down the road for this. It’s clear that they have a long way to go in getting ready to be able to hold a register, but are keen to meet the needs of professionals from across the healthcare sciences. It will be, as they say, and interesting time.....

President's Blog 31st May 2013

At last the sun seems to be out. It's been half term this week, but this year I have been at work whilst others have the break. I managed to get away last year for the week, so it's only fair.....

This week has been one mainly of preparation. I've written (mainly) my opening remarks for the BAA student conference on 14th June. I've been sent the attendance list for this, and it's great to see so many people coming from a wide range of courses from foundation degrees through to PhDs. Registration is still open, so do come

along if you can.

I have also started thinking about what I am going to say at the South West Every Deaf Child Matters conference. This is a multi-disciplinary conference for education, social care and health, aimed at "high level" people, and I am delighted that I am speaking. My topic is "what's happening to specialist health services". I think I'm mainly going to be saying "we don't really know yet" but with more words. The situation isn't actually confusing, just very complicated. And still I development. But it's a really good platform to explain to other sectors what is happening.

I have been working on registration matters, but I wrote about that last week, so won't go on about it again. And I've been working on some other things which fall into the "I can't talk about it" category. Next week, I will be chairing the next HAB UK meeting, meeting with the AHCS (so I will talk about registration again after that). I am also going to be attending an event in Parliament, but I don't think I can talk about that yet, either. I will write about it next week:) Well, that's all for now. Next week's blog will come to you from the 19.03 from Paddington.

President's Blog 23rd May 2013

So, I'm sitting on yet another train on my way home from the Academy for Healthcare Science (ACHS) Council meeting. The AHCS has the aim of providing one voice for all healthcare sciences, so being able to speak for a large number of people with commensurate strength.

It has an aim of inspiring people to work in healthcare science, utilizing their knowledge and creativity, and rapidly diffusing scientific knowledge and innovations, which are very laudable but a bit nebulous. It does have some very specific and concrete roles, which include: accrediting the education programmes under MSC; able to act as a body to provide HCPC registration as a clinical scientist for people completing the STP and developing equivalence for registration; advising (Departments of Health across the UK) and other decision makers; and developing voluntary registers for areas where there currently I none (which is the case for quite a few specialisms within healthcare science).

The AHCS was created with DH (England) money, and this is still

its primary source of income. One element of discussion is that, to properly represent our wider community, it must be seen to be independent, which includes developing income streams other than English government. This will take time – it's a new organisation, but it is clear that that's where it wants to go. At the same time, some of its functions cross over with those of existing bodies – either professional bodies in general (which create its Council) and with other organisations such as the RCCP. How these potential conflicts will be resolved to the benefit of the healthcare science community – and our members, which is what we're concerned about here - will be one of the key areas “behind the scenes” over the next few years. We will keep you informed of this as things develop, and are always very conscious of trying to ensure that you, our members, interests and needs are properly represented.

I'm also writing the latest bit for the Behind the Scenes monthly mailing. This will be pretty short this month, as I really just want people to read my blog (I get bored saying the same thing over and over again). I hope you are finding these useful, and I'm sure our conference, publicity and communications team would appreciate some feedback from you about this.

President's Blog 21st May 2013

On 14th June 2014 there is the second BAA student conference, to be held at Aston University. All the details are available via the events section of our website. I'm delighted to be giving the opening remarks for this, and am busy trying to work out what to say for 15 minutes that will inspire the next generation of audiologists in this extremely turbulent time. Answers on a postcard, please.....

On the same day, there is the annual Audiology Cymru meeting – this year in Llandudno. It's a great shame that these are on the same day, as personally I would have liked to attend both (the student conference got their invitation in first), and I am sure I'm not alone in this. We will have to make sure that this is better coordinated in future. Although Audiology Cymru is not a BAA event, it is clearly very important to many of our members. I'm very pleased that Sue Falkingham, one of our board directors, will be presenting there on key issues around education and registration that are of great significance to most of us wherever we are in the

UK.

As well as the BAA, I am also a member of the BSA (although I don't have the time to be a very active one at the moment). People sometimes wonder why both. To me it's fairly clear. The BAA is here to ensure we have a profession of audiologists – we accredit courses, provide a framework for CPD, provide higher training and our annual conference, inform our members of what is going on, work to try to ensure quality standards are fit for purpose, and represent our members to a diverse group of what are nebulously called decision makers. The BSA ensures that we have the theoretical tools to do our job – producing protocols and guidance on procedures and providing the IJA. On that note, the BSA is consulting on some updated guidance – “Hearing assessment in general practice, schools and health clinics: guidelines for professionals who are not qualified audiologists”. I would urge everyone to have a look at this and respond – only by taking part can we ensure that the guidance we are working to is what we as a profession need. The new guidance is at :

http://www.thebsa.org.uk/index.php?option=com_content&view=category&layout=blog&id=7&Itemid=16

I have several meetings coming up: two with the Academy of Healthcare Sciences – their Council (at which I represent the profession of audiology) and a meeting to develop the standards for their voluntary register; also Hearing and Balance UK (the umbrella body for professional bodies in hearing and balance). As always, I'll update everyone about these through the blog. In the meantime, time to do some other work.....

President's Blog 10th May 2013

I've had a fairly quiet week for the BAA this week. With the bizarre sight of some sun over the bank holiday weekend, for a couple of days I did no work at all. And as we appear to have reverted to winter, I'm very glad that I took that time out. But today it was back to it.

So what's new in the world of audiology? The latest edition of the magazine arrived yesterday, and I want to thank the editorial team and all the contributors for an excellent edition. It's got a good selection of articles – research, education, service development and the work of the BAA – none of them too long or overwhelming. I am sure it will provide knowledge, ideas and inspiration to many

of us.

At pretty much exactly half way through the BAA year, I've started working on our annual report. The BAA has not produced one of these before, and as board we agreed that it's about time we did! This will be for the BAA year – November-November – but if I don't make a start on it now the deadline will creep up on me. I've been reading annual reports from other organisations to get a bit of inspiration, and trying to plan out how we will structure ours. If you happen to know of any that you think are a good read, then I'd be really happy to be sent links, copies etc. The aim of a report is to lay out what we set out to do, what we actually achieved and what we plan to do next. I would hope that this will allow both our members and other interested parties to see all the work of the BAA in one place. But it also has to be readable or there's no point.

Apart from that, I've been catching up on a load of emails, and trying to make sure that nothing slips through so we're able to continue to provide a high quality service to our members and continue to represent you effectively.

Well, that's all for this week.

President's Blog 29th April 2013

So today was the BAA Board meeting, which we held in London – thanks to Julie Wilkins and Ruth Thomsen at Charing Cross for organising a room for us even though they're no longer on the board. These meetings are long. We start at 10.30, and are meant to finish at 4. And at least half the board were up before 5 a.m. to get there on time. Unfortunately, we over-ran by 30 minutes. I thought I was doing a reasonable job of chairing but then it all ran away from me. I feel as if I might get the hang of it by the time my term as President finishes.

So what fills all that time? We have an extensive action list (there were over 50 items) from previous meetings that we cross off as they are completed, update as they change and so forth. This ensures that as a board we and our teams are doing the jobs we've set out to do. We then spent some time discussing conference. Not the detail of this year's – which is out (please have a look at the fabulous conference website which is now open for registration, awards nomination and abstract submission), but the plans for 2014-2018. We have now agreed in principal venues for

the next 5 conferences, which we'll announce soon. Other topics included: the confusing picture around registration with the new processes under the Academy of Healthcare Sciences - we'll be sending an update on this soon; our finances; and the further developments under the MSC programme.

I was particularly pleased to welcome Barbara Gregg and Paul Bruins to their first meetings as the Northern Ireland and Welsh representatives respectively, and to receive a detailed report from Gordon McHardy, our Scottish representative. We were able to gain a really useful update on the state of play in each of these countries, and have come away with some actions identified to help our colleagues in Northern Ireland in some of their struggles. I was pleased to hear about the Quality Assurance programmes and visits in all three countries, to get an update on students numbers for Swansea University and read how education in Scotland is developing. I am sure that with this new impetus we will be able to start having more of an effect for our members across the whole of the UK.

Now I can relax on the train home. A video tonight – three episodes of The Sopranos back-to-back. I'm trying to identify some new management techniques.....

President's Blog 27th April 2013

It's been more than a week since I updated my blog, which just goes to show how fast time can fly when you're busy. It's actually been my day job that's been really hectic recently. And then the sun actually came out, so I went to the beach with the family instead of doing this on Saturday – long, long overdue....(the beach, not the blog!)

So what have I been up to? Well, I'm now sitting on the train after a day of three meetings. This morning was Barry Downes, President of BSHAA. We had a really useful and wide ranging discussion. It's obvious that we (as individuals and also representing our organisations) have a lot of common ground, as I think I've mentioned before. We both passionately believe that timely hearing intervention is a way to reduce the impact of other health and life events, as it supports communication,

independence, and social inclusion. We both believe in the importance of a well trained workforce. And we are both positive people, who can see the opportunities for both the independent sector and NHS providers in the changes taking place at the moment, as well as seeing the challenges. Of course, we have areas of disagreement too, and I wouldn't wish to understate these, but it's essential in the current climate (and really in all climates) that professionals working in the same area are able to work together at the right times.

It was then time for the Hearing Alliance. This is a network (for want of a better term) of any organisation interested in hearing loss, from the big national charities to small local ones, professional bodies and the hearing aid manufacturers. The aim is that in key strategic areas we should be able to speak with one voice, maximising the influence on decision-makers. This model has been very successful in vision and dementia, and we believe that two years in it's beginning to bear fruit in hearing. Our main topic was the Department of Health hearing loss strategy, which I've mentioned before. This has unfortunately been delayed. It's understandable, given both the huge changes in the DH, and also because there is a need to get the strategy signed off by several other departments. But it is frustrating. What we have done is start to agree a plan on how to use this when it comes out, how to publicise it to people, and also agreed a Plan B if the DH document is delayed beyond reason.

Finally, I took the opportunity to catch up with Hearing Link. Not a lot to report, but if you fancy sky diving or trekking to Peru then do consider using this as a way to raise money for them. They aren't the biggest charity in the hearing world, but the work they do is excellent, and they'd love to hear from you.

Well, that's enough for now. Now it's just the four hour train journey home....

Presidents Blog 17th April 2013
President's Blog

Well, I didn't manage to get another blog done whilst at the AAA. Sorry.... But I have at least had a chance now to reflect on it.

I think I got across just how impressive it is – the scale, how professionally done and so on. But on thinking back, it actually makes me realise just how good our own conference is, too. So we only have 3 sessions running in parallel, and one manufacturer track at the same time, instead of 10 and 5. But I can only go to one thing at a time anyway! And the quality of speakers we get, along with the breadth of international contributors, is every bit as good, if not better, to scale. And yes, the stands at the BAA aren't as big – but it's just as easy to get quality time with someone who really knows what they're talking about, because there are fewer of us attending, as well.

The parties are another matter. These were huge, free to attend and great fun. Not to say that the parties at the BAA aren't fun, but the manufacturers don't generally book out a whole venue, get live bands, and provide food and drink for 1500 people all night. But then, we don't spend as much on hearing aids, either. In fact, we get the best hearing aid prices in the world, with high technology devices at tiny margins for the manufacturers. So they don't have huge profits to spend on us – and they do support our conference where it really matters. And if it came to a choice between a big party once a year or really good, low cost hearing aids free at the point of contact, I know what I would go for every single day for the rest of my life.

Speaking of conference, the BAA should be open for registration next week. It's been a bit delayed, with getting the budget (and therefore the price) right, working with our new admin team. But the programme so far looks fantastic, the support materials will be great, and I'm sure it will once again be the event of the year for UK audiology. I'm already excited about it, even though it's more than 6 months away!

Presidents Blog 4th April 2013

Well, I'm half way through the AAA now, and so far it's been a fabulous experience. The talks I've been to were:

How to verify wireless streaming CROS and related devices
Digital "FM" (the outcomes surpass adaptive FM by a long way)
A summary of all the research papers in hearing aids from 2012 - a

fantastic and amusing whistle-stop tour

The new skull base simulator for measuring the output of bone anchored devices - which looks great

Tele audiology - how newborn diagnostic testing in California is being done from 160 miles away - amazing use of technology

The AAA general assembly - which has given me some ideas for our AGM - but I don't think we'd really go for it opening with a choir of audiologists singing the national anthem:)

I should also say that at the BAA conference people grumble about the early bird slots at 8.00 a.m. Here the early slots are at 7.00, and key invited speakers are on at 8 - to pretty full rooms. So hats off to dedicated American audiologists.

I also spent some time in the exhibition - which is just huge. I was on one of the stands and decided to visit another one. After a 20 minute walk, I realised I was still seeing the same manufacturer! (slight exaggeration for poetic license, but you get the idea...) Some great technology coming our way soon.

GN have looked after me well - I certainly haven't gone hungry, and the UK team made sure I met people when I needed to. Thanks again to them.

The 8 hour time difference is a challenge. I've managed to FaceTime my children after breakfast here - just before their bedtime! The benefits of modern technology.

Well, time to go to the next thing. I'll try to do one more blog from here before I go.

President's Blog 1st April 2013

Well, I'm now starting my journey to the AAA. Train, tube, train, plane.... It's going to be a long journey, but I'm absolutely sure it will be worth it.

I should start by thanking Deb Carson, president of the AAA for inviting me, and GNOtometrics who have kindly sponsored my travel and done the majority of the organising for me.

I've not much to report so far, but in my preparation there are a few really impressive things which I hope the BAA can learn from - although I don't think we have the resources to copy these directly. Firstly, the programme book isn't published on paper - you can

either download the PDF or download the e-book. I now have the entire programme on my phone, as a book, so it's really portable and also much more searchable. They also have an app, which allows you to download the slides from presentations and then take notes on your phone or tablet. I already have all the posters downloaded, so I can look at them all on the flight. This looks like a fantastic way of doing things. Of course, the AAA is approximately 10 times the size of our conference, so I'm not sure that we'll be doing the same, but I'm sure when I come back I'll be full of ideas to annoy and bug our conference team with:)
Well, that's all for now. Next stop the USA!

President's Blog 25th March 2013

Last week I said that our response to the paediatric hearing services work so far would be distributed to the membership, and it came out via email at the end of the week. It is also on our website, in the [news section](#).

Speaking of the website, we are nearly ready to go with the new version. For a short period, this means that you won't be able to update your personal details or the CPD section. We'll keep you informed of the dates around this.

On Monday, I went to the latest meeting of the Department of Health (England) Audiology Advisory Group. One of the key things that will come out of this is a strategy for hearing loss and deafness. The detail of this is unfortunately confidential at the moment (their rules) – as soon as it is in the public domain we will share it with you. The aim of this strategy is to guide not just the health side of things but also areas relating to deafness and hearing loss that come under the jurisdiction of other government departments, such as the Department for Work and Pensions, which has responsibility for disability. It is unlikely to have any immediate impact, but could really underpin developments over a period of years. It is really heartening that in these periods of great change people are still truly committed to the long term view. We hope that this is signed off by all the relevant departments in the very near future.

I can't write this week without a mention of the weather. Since my

history lessons when I was around 12, I have known that the worst winter weather of the last century was in March/April 1947. But seeing snow like we've had after spring officially started is still really surprising. Down here in Plymouth we haven't had the snow, but I am sure it's been extremely difficult for many of you. Getting into work, managing the commitments of work when schools close (leaving childcare up the spout), cancellations as patients (sensibly) choose not to travel, while waiting time targets don't go away.... It's a challenge for which I empathise. I do hope, though, that you have also had the chance to enjoy it – there's nothing like a few snowballs or making a snowman to make me feel like a small child again)

President's Blog 17th March 2013

Writing a weekly (more-or-less) blog makes me really conscious of the passing of time. I am now a third of the way through my presidency. When I wrote last week it felt spring-like. Today, as I huddle in my cold house watching the sleet out of the window (and think of my poor wife, who is out running at the moment) I wonder if this is a role that will take place entirely in winter:)

Last week I wrote about paediatric services. The BAAs response to the work on this has been received, and will be sent electronically to all our members and put on the website. It may not be as easy to follow as I might like without the original document to see, but I think it does show how we are representing our members, and their patients, in these discussions.

This week we all got our membership renewal letters. Unfortunately, it didn't go out as we would have liked (not on headed paper, for a start). This was a basic misunderstanding between our new administrative company and ourselves. We did say that we expected some teething problems when we changed provider, and if this is the worst that happens we'll have got off lightly, I suspect. We will be sending out replacements with proper and professional headings, and the second mailing will be underwritten by Fitwise and not come out of your membership fees. I know that some of the work the BAA does is not obvious, and does not have immediate and obvious benefit to us personally. But without a BAA, here are just a few of the areas that would suffer. Education: it's BAA members who, with other stakeholders, accredit courses (BSc and MSc) to assure we have an

appropriately skilled and qualified workforce; without the work of this team it would be much harder to ensure that future audiologists were fit for purpose. CPD: the BAA provides the tools to manage our CPD – web-based system, accrediting of courses, audit of CPD activity - that is essential for our registration with either the RCCP or HCPC. Regional groups: it's BAA members who host regular regional meetings with educational, business and professional components – free of charge to members. Conference: the largest audiology conference and exhibition in the UK, with a mix of academic, professional and manufacturer presentations and workshops. We also provide a strong voice for professional audiologists to government, other decision-makers, the voluntary sector and others.

All of this is only possible because we are the professional body, with a large membership and active, committed members. I honestly believe that without this membership, and therefore a BAA, the chances of maintaining and improving standards of audiologists and therefore patient care would be seriously impaired in the long run.

President's Blog 10th March 2013

Another week of working for the BAA without a meeting. I have been working on a number of things. The one many people will be most interested in, I suspect, is the on-going development of systems for paediatric audiology. The BAA has been developing a response to the work so far. Once the board has agreed the wording, we'll post this on the website. As well as reflecting the views of the board, I hope it will reflect the comments from many of our members - for example on the facebook and twitter conversation that's been going around.

This is, and will remain, a very sensitive issue. People are providing care across the country at the moment, doing their best to provide high quality services to infants and children. These changes feel unsettling and threatening to many of us – personally in terms of our own practice, organisationally (especially where we have responsibility for staff) and for the patients whom we serve. I don't see an easy answer to this – change is always difficult. Is it necessary? I think so. We have to find a way of doing more, better and with less resources. The population is increasing, we have

more and more varied interventions available, and the pot of money is going to shrink in real terms for years to come. What we need to focus on is keeping the needs of the patient at the centre and heart of everything, and making sure that we don't throw out the baby with the bathwater – which I believe is always a risk in any major change.

On a separate note, I was asked to check the CPD section of the new website this week. There are a few teething problems, but it appears almost ready to go. We'll keep you informed of progress in this. Thanks again to Sue Falkingham for her efforts in keeping this moving. And finally, I had a quick chat with Mel Gregory about a few things, and she told me that she and Paul James are making good progress on the conference programme. I know our conference and publicity team are keen to get something out to the membership soon, so watch this space.

Well, as it's mother's day, I really ought to be doing something other than writing the BAA President's blog, so I'm going to sign off for now, before I get in serious trouble with the family.....

President's Blog 1st march 2013

Apology – in my haste last week, I had accidentally stated that the tragedy we are all aware of happened in North Staffs, when it was of course mid Staffs. I have corrected this below, and am extremely sorry if I inadvertently upset anyone.

This has been the first week for nearly two months when I haven't travelled to a meeting on behalf of the BAA. Whilst I generally get a lot of work done on the train (it's amazing how much you can do in 3.5 hours when you aren't being interrupted), this has been a provided a much-needed opportunity. I've had the chance to catch up on a bit of writing and admin, and also to reflect on a few things – sparked by recent conversations.

One thing I've been thinking about is the NHS Constitution, which you can find here:

<http://www.nhs.uk/choiceintheNHS/Rightsandpledges/NHSConstitution/Documents/nhs-constitution-interactive-version-march-2012.pdf>

At two recent meetings, it's been asked who there has read the NHS Constitution, and on both occasions I've been the only person to raise my hand. It may not be on the top of most people's reading list, but I would urge people to at least read the first

section – which is in effect the summary. “Why?” I hear a thousand overworked audiologists cry out (as if 1000 people were reading this.....). Well, in the new world, the NHS isn’t a single organisation, as we all know. In these days of multiple providers, this document lays out clearly what the NHS is and stands for. It also describes the rights and responsibilities of patients, staff and employers – across any form of organisation (NHS, third sector or independent sector) that is working to provide NHS services to patients. It sets the framework in which we should all be working. And it describes both rights (which are enshrined in legislation) and pledges (things which the NHS will strive to deliver). On having another look at it, I can’t help but think that if everyone had been working to it’s principles, the tragedy of mid Staffs (and maybe some other Trusts) would never have taken place, and we wouldn’t now be dealing with the consequences of this and the Francis Report.

So do have a look at this. It’s a much easier read than you might expect from the title!

And now it’s nearly the weekend. And instead of going to London for a meeting, I’m off for a family birthday party. Might be nearly as much fun!

President’s Blog 21st February 2013

On Tuesday, I attended the second workshop (in London) on the future of paediatric audiology services. The first was the day before in Nottingham. There has been a lot of conversation – in the social media, in departments and in the pub – about this. People appear to be very afraid that there’s going to be some top-down reorganisation to the detriment of patients. The first thing to say is that this is not the intention.

At the workshop, there was a room full of professionals from various backgrounds – mainly audiologists and physicians, but also teachers of the deaf, speech and language therapists and even an ENT surgeon – who all agreed that we need to improve what we are doing. Whilst the driver for this is specialist commissioning – and I’ve written before about this – the room on both days agreed that we should be considering the whole of children’s hearing and balance services – not just the element that will be separately commissioned (which is essentially for bilateral

permanent childhood hearing impairment – moderate or greater). And this is an opportunity to really set the agenda, in the new world in which services really will have to be focused on and centred round the patient. Given the culture we've been working in for so long, it can be difficult to believe that over the next few years the provision of health (and social care and education) really is going to change – but if it doesn't, then the future is pretty bleak. We have to seize this chance to do things better, whilst really understanding that there is no more money.

So, back to children's hearing aid provision. If we think of the child at the centre, what is it we are trying to achieve? We want to ensure that hearing impairment does not prevent confident and safe communication – and then everything else follows. Better educational outcomes, better social and emotional development, and less cost for society as a whole in the long run. To achieve this, it's naïve to believe that 146 services in England can all provide the highest quality children's hearing services. Whilst seeing more children alone isn't enough, not seeing enough of any condition prevents people from being experts, and deaf infants deserve and require expert care. But we won't change our services effectively with some top down reorganisation. The future is one of networks. In networks people work together, supporting and challenging each other to improve quality and outcomes. And in networks there is no "centre" – there are nodes. This means that general care, specialist care and super-specialist care all inter-relate, all around the needs of the individual patient. This may sound a bit nebulous, and in a couple of paragraphs it's hard to explain how the future might look. So a bit of background reading for everyone.... And then to the million dollar question – if 146 separate services is too many, what is the right number? This is something that I think will develop somewhat organically. We need to consider the birth rate to get "critical mass", and we also need to consider the geography and communication links in each area – focused on the patients, not the service providers. So we don't have a magic number. And we don't need one (yet). What we do need is a commitment to change our services to reach a common goal – and we all need to understand what that goal is.

President's Blog 18th February 2013

On Monday we held the second meeting aimed at Heads of

Service for England. This was again very popular – and I'm grateful to Oticon, Phonak, Siemens and Starkey whose sponsorship enabled us to hold this free for members. England is much larger than the other countries in the UK, and has no national structure or grouping, so this is an important event to support services and some networking in times of great change.

We had a number of excellent speakers, covering topics including AQP, IQIPS, paediatric services and personal health budgets. The talks from these will all be posted shortly on the BAA website. I had the pleasure of presenting the BAA perspective on some of the changes, and it was interesting quite how nervous I was in advance of talking to a room full of my peers, compared with many of the other talks I've given in the last few years. I'll have to wait for the feedback to see if this showed.

We also had a great hour from Matt Smith, who is from a consultancy providing leadership training for Nottingham University Hospitals at the moment. Whilst not the first leadership training I've had, I found it really effective and thought-provoking. I was at an all day leadership meeting the next day within my own Trust, and found myself looking at it all in a different way – keeping in mind the elements from the day before. It's not often that one hour's training changes one's approach, but I feel that I got probably 2 key messages. One – know who your “customer” is and focus on them. Two – be very clear about what your “mission” is and focus everything on that. It's probably worth a full article in the magazine, if anyone else who was there feels up to the challenge!

My base has been really busy recently. We signed our AQP contract this week after a lot of local negotiation, are getting things in place for the changes in newborn hearing screening commissioning, and a hundred and one other things. So I've not done quite as much for the BAA in the evenings as I normally do.

It's half term in Plymouth this week. I've booked the whole week off – which will enable me to spend some time with my children and also to catch up on a whole load of BAA emails that have built up. So if you're waiting for a reply to something, expect it any day now.

President's Blog 8th February 2013

This week I spent 3 days in Durham at the Middlesbrough School of Audiology's course on leadership and service development. Or, as those of us who speak on it call it – "Anne's course". This was the fourth time it has run, and the third time I've been involved (I missed last year as I was away). This is an opportunity for audiologists to learn from people who really are doing it on a day-to-day basis. So who is it for?

As Ruth Thomsen spelled out really well, the future of the NHS is going to be one of distributed leadership. What does that mean? It means that everyone will be a leader some of the time – and then be a follower when someone else takes a lead in the area they're strong in. One example often used is geese flying south for the winter. One is at the front of the "V", leading the way. But after a while it drops back, and another one takes over. We're not geese (well, most if us aren't). But if you see something that you think you can do to make things better, you can take a lead on that and make a difference. I'm not the best person to think of how to improve our hearing aid repair clinics – but our senior assistant who does it every day may well be. Our senior audiologist who's responsible for training will take the lead as our department switches over from the traditional BSc to the PTP. And so on. And following the publication of the Francis review, the need for clinical leadership at all levels of the NHS has never been made so clear.

The course has evolved year on year, to reflect the changing times and the growing and developing knowledge of the speakers - and to reflect the feedback from the students each year. This year's programme can be seen here, so you can get a flavour of who's there. Getting funding for training can be tough, especially in the current climate, so start planning now for 2014!

<http://www.southtees.nhs.uk/wp-content/uploads/PROGRAMME-flyer-SATC-Feb-13.pdf>

As well as that, I've been working on the curriculum for the HSST, which I spoke about the other week, and doing some work for HABUK, which we'll publish once it's been signed off by all the bodies involved. And now it's time for the weekend!

President's Blog 31st January 2013

Today, I was at the meeting of Hearing and Balance UK (HABUK). This is the group of all professional bodies involved in hearing and

balance – including BAA, BSA, BSHAA, BAPA, BAAP, BAO-HNS, BATOD, BAEA and RCSLT. That's a lot of acronyms, and your homework is to go to the BSA website and look up all of those that you don't recognise. The BSA kindly hosts this group, and provides administrative support – without which it could not exist. It also has a number of observer members, including patient and government bodies – also listed on the HABUK part of the BSA website. The chair rotates between the full member organisations, and at the moment it's the BAAs turn.

There are some key actions that come from HABUK where we think that the voice of the professional bodies combined carries real weight. But the meetings are at least partly simply information exchange. Some people question the value of this, and that's understandable in the modern world where every minute has to be justified and we all have targets to meet. However, I think it provides an invaluable forum. It's very rare that we have the opportunity to find out what's going on at a national level, and the implications locally (based on the experiences and knowledge of the individuals present), especially in related fields that aren't audiology – such as in education and speech and language therapy. This knowledge helps us to ensure that strategically we have a joined up view, or can see where on the ground all the talk of joined up working isn't supported – due to either local or national barriers. We can also find out about developments and best practice that each body wishes to highlight. It's very hard to quantify the benefit of this, but I'm sure it makes my role, and that of the BAA, more effective, and the majority of people who attend say the same. We meet three times a year, and I think those three days are a good use of my time – although it is yet another late train home.....

President's Blog 27th January 2013

Last Monday we held our second full board meeting since the AGM in November. The Board meets 5 times a year, which isn't very often when we're trying to run a body with so many different strands, but as we travel from all over the UK, and give our time voluntarily, any more wouldn't be possible.

Unfortunately, several people were seriously affected by the snow and weren't able to travel to the meeting. This was particularly a

shame for those who missed what would have been their first one. We managed to get some people in by Skype and Facetime, but for a full day meeting this was slightly limiting and hard work for everyone.

The board agenda is always very full, but we dedicated a good hour and a half to conference 2013. We were joined by Paul James, who has joined Mel Gregory to work on the scientific programme. We used the feedback from conference 2012 to help us plan to improve on what was already a highly successful event, and I think we are all already really excited about what will be coming. This year, Sarah Hodgson and the conference team will be supported by our new administrative service provider – Fitwise – and we think that this will also help us to develop and innovate.

There's so much going on within each team at the moment that it's hard to do it all justice in a blog. But our magazine and newsletter will have updates from each work area on a regular basis, so you'll be kept up-to-date with everything the BAA is doing.

Since my last blog, we have completed the handover of our admin services to Fitwise. From the outside it all appeared very smooth, which is a testament to a lot of hard work from a lot of people. Please use the new address and phone number – noted on the website and that will be on all our documentation very soon. The email address has transferred over, and of course any post sent to the old address will be forwarded.

For a number of reasons, we are having to redevelop the website again. This is a great disappointment, as so much went into this, but is an unintended consequence of the change in admin support. Work on the new website is well underway, and it should be launched soon. I particularly want to thank Sue Falkingham for her incredible efforts in coordinating this twice now.

Well, that's enough for today. On to maths homework....

President's Blog 21st January 2013

What a busy few days. A lot to write about, so bear with me....

On Tuesday morning, I met with BSHAA (the British Society of Hearing Aid Audiologists) to explore common ground and common areas of interest and concern. We discussed AQP, and it was

really heartening to hear their view that high street hearing aid audiologists should be referring on complex cases, and their concern that high quality and properly accountable services are available for them to refer into when people need them. This means services properly commissioned, with an adequate tariff, and with clear referral routes that minimise the risk of patients not getting into the right place at the right time. This has been one of the BAAs key concerns, and having common ground here can only be beneficial.

That afternoon, I represented the BAA at the Audiology Advisory Group – a Department of Health (England) body that brings together professional bodies, patient representatives and civil servants, all under the Chief Scientific Officer’s remit, to advise on all matters audiology. Three areas were of particular interest. We started discussing the next tender for hearing aids. This is due for summer 2014, and the process starts now. NHS Supply Chain are keen to ensure wide involvement in the early stages of this, to get the specification right, so that we can continue to have high quality aids at a low cost, and to gain the benefits of innovation for our patients. A key part of this will be the Audiology Supplies Group, now hosted by the BAA, which evaluates all of the technology tendered. The members do this vital work largely in their own time, and the whole audiology community is constantly indebted to them. We also talked about a DH strategy document for hearing. This has been “in development” for some time, but has to be completed very soon as that whole part of DH will cease to exist shortly with the changes in Whitehall and the new NHS Commissioning Board. This document will be an important lever for discussion with the new commissioners and with other government departments. We hope that it will be up to the job. Thirdly, the NDCS brought draft documentation forward for the development of Education, Health and Care Plans. This is a key development in the way that services for children and young people with long term conditions (such as PCHI) will be managed in the long term. It looks really exciting – but a lot of work!

Today, I represented the BAA at a conference hosted by the Hearing Alliance and the UK Council on Deafness (UKCOD) on the health reforms and their impact on services for the deaf and hard of hearing. The BAA also had a stand there, staffed by two board members – Sarah Hodgson and Alison Walsh. There were a variety of speakers from patient representative groups,

professional groups, third sector providers and DH. There was far too much to go into here, but what was again really heartening was that there was so much common ground, so much determination to improve services, and a willingness to use the opportunities of the new structures to try to improve things from the start. There were two areas that will be of direct benefit to services soon. Hearing Link will be trialing their patient experience questionnaire soon. Once this is published, it will really enable patients to make an informed choice of as many services as possible use the same questionnaire. Equally, Action on Hearing Loss have published their framework for assessing outcomes. This covers 17 core elements of service provision. Again, if all providers (NHS, social enterprise and independent sector) publish the same data, then people will be able to make really informed choices about who is providing quality services. All of the presentations, and transcripts of them, will be available on the UKCOD website in the next few days – do have a look.

Well, that's more than enough for now. Time to relax on the train home.

President's Blog 13th January 2013

It's amazing how quickly time flies. This is meant to be a weekly update, but it's been nearly 2 weeks since I last wrote something! So what have I been up to on behalf of the BAA?

The post-holiday period has become quite busy again – as I'm sure it has for all of you, too. The most time-consuming area has been around the Higher Specialist Scientific Training programme. This represents the highest end of the Modernising Scientific Careers pathway, and I have been involved in a working group chaired by Huw Cooper in developing the curriculum for this. The training programme will be work-based for 5 years (minimum), and be underpinned by a doctoral level academic course. The draft curriculum is being produced by a variety of people from scientific and medical audiology, and is being supported by the Royal College of Physicians. It's really challenging – the first intake should be 2013, so we're looking at what consultant level clinical scientists completing the course in 2018 and onwards will need to be able to do. But it's also really exciting, as the opportunities for our profession to take a greater lead clinically and managerially will develop even further in the next decades from this work.

So much for the long-term side of things. The immediate change is that on 14th January the company providing our administrative, financial and event support will be changing. This change represents the end of a lengthy process (more than a year) of developing the tender, seeking suitable partners and managing the handover. A huge amount of work has gone in from Will Brassington, Gareth Smith, Sue Falkingham and especially Pauline Beesley to get us where we are. Whilst I have no doubt that there will be some teething problems, we believe that Fitwise will help us to develop the BAA in all areas over the next few years.

All of that, and I managed to go ice skating in the outdoor rink in Plymouth with the family today, to take advantage of the sunny winter weather.

President's Blog 3rd January 2013

I hope everyone had a very happy holiday period, and you are all ready to face the new year with any hangovers now long gone.

I managed to spend some time with my family, and was also part of the skeleton crew in my department. I find it good for the soul to cover the ENT clinic and do the hearing aid repairs sometimes – and it also keeps me grounded as to what's really going on in my service.

It's been a quiet couple of weeks, but I have been working on my presentation for the Hearing Alliance/UK Council on Deafness conference on the Health Reforms. This is a high profile political event, and I am delighted to be able to represent the BAA there. We will also have a stand there, staffed by a couple of board members and with a display and handouts of all our wonderful publications that our pubs and comms team have been producing with our other teams.

Look out for our monthly "Behind the Scenes" mail that will be coming to you in a couple of days – that will let you know what all the other tams and board members have been doing on your behalf. If you don't get this, then contact our admin team to get you details updated on the system – but not quite yet! Our administrative service will be being handed over to our new

provider in less than two weeks. We will use all our usual methods to keep you informed as this happens. We hope it will go very smoothly, but we are planning in case of problems, especially with the data transfer. It's all far more complicated than you might imagine.

President's Blog 18th December 2012

I've been re-watching the West Wing from the beginning in the evenings recently. It's incredibly well scripted, and also teaches you everything you need to know about US politics. The other night, it was an episode called "six meetings before lunch". I haven't managed that, but as I was travelling to London today for a meeting at the Department of Health, I did manage to organise another one on the same day to make best use of my time.

At lunch time, I met with Hearing Link and one of the main manufacturers of loops (there were meant to be two, but one had trouble with the trains, unfortunately). There were two topics of conversation. Firstly, Hearing Link are working on a tool to measure the patient experience. It's based on lots of things that are already out there, but is going through a rigorous process to ensure that it is valid. The aim is that it will provide heads of service direct patient feedback about their service, and will cover all of the key questions needed for the patient experience elements of accreditation and QRT. Personally, I hope that in due course data from this will be published, so that people can make an informed choice about their provider under AQP with information other than just whether or not the parking is free and what the waiting time is for an appointment! Secondly, there is a lot of work going on around loop systems. Whilst there are some exciting developments with Bluetooth and wifi connectivity, at the moment the loop remains the best way to enable people to access a lot auditory information – such as in churches, theatres, cinemas and halls. There are also a lot of options around to help with TVs, phones, reception desks and the like. As providers, and as users, we could do a lot more to ensure that these are available, working properly, and that people with hearing aids know how to use them.

I also met with several people at Department of Health looking at specialist commissioning of audiology services for England. There is consultation out at the moment on the Manual of services – please visit it

here: <http://www.commissioningboard.nhs.uk/ourwork/d-com/spec->

[serv/consult/](#)

We will be posting our position statement on it any day now. There is lots of good news about this. It is an opportunity for services to be properly funded and reconfigured to best meet the needs of children and adults with highly complex needs. There also appears to be consensus that the transition will be done in a sensible time frame, so that there is little risk of short-term destabilisation of existing service provision. This is an area that we will be working on hard over the next few months, to try to ensure that our profession and our patients are properly represented.

Next Tuesday is Christmas Day. It's quite possible that I won't post another blog before then, so I wish you all the very best over the festive period, and hope that you manage to get at least a couple of days' break.

President's Blog 13th December 2012

This week, we've been working on a few things. Laura Booth, one of our joint directors for education, accreditation and CPD, has been writing a piece that shows how the BAA has influenced (for the better) all the education and training routes for audiology under MSC. Although the PTP needs some work, I'm confident that the people coming out of it will be able to become excellent audiologists. They may need more support in some areas when they first graduate, but the BAA has developed a preceptorship programme to help departments and new graduates in this. This is being piloted at the moment, and all being well will be available for general across the UK soon.

We've also been working on a position statement for the BAAs position on specialist commissioning, which will affect services in England. The essence of this is that some audiological services (implantable devices, paediatric hearing aid provision) will be commissioned separately, by the national NHS Commissioning Board (CB) (and it's Area Teams), not by the local Clinical Commissioning Groups. This is going to be the case for a host of services which are low incidence and high cost. There are a number of potential benefits for patients and services if this is done properly, and we want to work with DH, the CB and all the key stakeholders to make sure this is done as well as possible.

Locally, across England, AQP is beginning to start. We know that

this is on the top of people's minds at the moment – with all of the day-to-day and long term changes that this will bring. In the near future (once the information becomes public) we will try to get a co-ordinated picture of what is going on where with this. Watch this space for more information.

President's Blog 4th December 2012

Sorry this is late. I actually spent the weekend building flat pack furniture and moving things around the house. You don't realize how much time you devote to the BAA stuff until you actually have to do something with your family, and find out that there really are only 24 hours in the day.

The week before last, I said I'd be able to update you on issues around the AHCS following my meeting with them. Well, the best laid plans and all that.... Some of you may have noticed the floods we've been having, and there were no trains running from Plymouth to London, so I missed the meeting. Once we have minutes from it, I'll let you know what I missed.

I was also going to meet with Hearing Link on the same day about some things they're working on, and that too had to be postponed. But they did ask how to engage with audiologists about adding the loop, and it set me to thinking. Patient groups are campaigning hard to get loops installed and working properly in places such as churches, village halls, banks and so forth. We spend lots of time counseling patients about "realistic expectations" in difficult listening environments. So why don't we activate the loop and tell people how to use it? Data logging may indicate only using that programme for 2% of the time, but if that's a 2 hour meeting that the user otherwise wouldn't be able to engage in then it's most definitely worthwhile. I don't have the answer, but I think it's something we should all be asking ourselves every time we fit an aid.

President's Blog 25th November 2012

It's hard to believe how quickly it's going. I'm already coming up to two weeks in, which means that I've only got 50 weeks to go. So what have I been up to?

First of all, I've been doing a lot of writing – to try to keep people informed. A piece for Hear Here and another for the Magazine, as well as the blog, of course. I've also been setting up a variety of meetings, and doing a lot of reading. Next week is the Council meeting for the Academy of Healthcare Sciences. This is a really important area. Elsewhere on the website is some information about where we are so far in terms of registration: [Professional Issues \[Members\]](#)

This is all a bit of a moveable feast, and as we find out more around exactly where both the AHCS and the RCCP are going, we will keep you up to date through the website and the monthly Behind the Scenes emails. On that note, if you aren't receiving these, do remember to check your details on the members area of the website. If we have your correct email address, you have a chance of winning a prize in our quarterly draw, and you'll receive regular emails about a range of areas of interest.

I'll be able to update you more after the meeting on the 28th.

Well, back to Sunday fun with the family.

[President's Blog 14th November 2012](#)

Well, what a conference! Thanks so much to Sarah, Christine, Amr, Mel and all the team. Everything about the event and programme worked so well. I received so many compliments, but all I had to do was turn up and swan around.....

I don't want to pick out any specific highlights, and I'm sure that the next edition of the BAA Magazine will have a full review, with lots of photos. But on a personal note I want to say "sorry" to all my friends in audiology who I didn't manage to spend much time with at this year's event. I often think that conference is like a wedding. With so many people that you know, you get so few minutes for each one! And one of the downsides of the two day version is fewer minutes – and this year there were so many more people!

Now the serious business begins, and I will try to keep people up to date through the blog, newsletter, magazine, behind the scenes, and maybe one or two other ways as things develop further. We had our first meeting of the board the day after conference, which was given over to review our strategy. We spent a lot of the time really trying to focus on what the BAA is for, not just today but in the years to come. This was a remarkably difficult task! We are involved in so many things, and mean something different to so many of our members. But the board were clear that our goal is to ensure high quality services delivered by professional audiologists. The other thing that was clear is just how much there is to do. As the year goes on, I'll try to keep you up to speed with developments and progress, but for now it's time to stop typing and relax.

Gareth Smith President of BAA (2011-2012) BLOG

24th August 2012

Little quiet for the last couple of weeks, some sporting event in London was distracting people! Of course we have been beavering away amongst all this excitement. The BAA are currently working on 2 professional standards documents we hope to launch at conference this year. Whilst the time scale is extremely tight, everyone is pitching in to try to have these available for November. In other news, today I've meet with Adrian Davies and Alan Tolbet (BSHAA) to discuss IQIPs. The thrust of the conversation related to the need to demonstrate 'value for money' and effectiveness of Iqips to improve services. Adrian is going to consider methods to both evaluate AQP, and separately the IQIPs programmes. Following this meeting I headed over to Featherstone Street to meet with the Hearing And Deafness Alliance Funders. This group, consisting of BAA, BSHAA, BHAMA and Action on Hearing Loss meet to consider the future of the Alliance, and how it fits with existing groups. AoHL have been tasked to look at the figures and

see what can be achieved in the next 12 months whilst we review the policy direction.

28th July 2012

First meeting of the Academy for Healthcare Science Council this week, Chaired by Sir Duncan Nichol. BAA have a full seat at this table, along with approximately 25 other professional bodies. The academy covers the whole UK, and looks to be the leading voice for healthcare scientists, with an aim to present a unified voice, similar to the BMA or RCN (bit with the trade union aspect). The Academy will be looking to hold voluntary registers for bands 2-4, the PTP register, have access to the clinical scientist HPC register, and eventually regulate HSST registers. Work has already begun, albeit in the early stage for much work including a good scientific practice guide. Further details about the AHCS will appear on the BAA website in due course.

3rd July 2012

The Board of Directors meeting was held yesterday in London. Items of note include work on a scope of practice, AQP, registration and conference. All board directors continue to work with their teams on the overall strategic direction of the Profession as well as tackling the ad-hoc queries that occur. A set of KPIs for board have been agreed, and will be made available, along with the annual plan, in the next few months.

Today I attended the inaugural Student conference, held at De Montford University, Leicester. The student and trainee team has brought together a range of speakers to cover topics pertinent to students and recent graduates. The topics included AQP (you can see the reoccurring theme!) with viewpoints from a traditional NHS service and a private perspective, employability, STP and the current education perspective. The event was well attended, and the BAA Student Team have provided an excellent learning opportunity for student members.

With regards to AQP, it is interesting the commonality between concerns raised by the private sector and those raised by current providers. These concerns often overlap and areas where we would be more effect together should be explored.

11th June 2012

Monday this week is 'BAA admin day' for me so the board of directors have been hit by a 'e-mail flurry' to keep them busy. The main focus of today's activity has been to review AoHLs current draft of its 'adult audiology service outcome framework' and provide constructive feedback on behalf on BAA. This work is being undertaken by an outside agency on behalf of AoHL and is looking at assessing service outcomes.

As mentioned in the last blog, DH are looking at a directory of experts, this is something the board have discussed for sometime as being useful. A pilot form has been sent around the board today, the next stage will be to send it to committee members and then general BAA members in the near future.

Following the HAB UK Meeting an action for me was to write a letter to highlight to commissioners the complexities of adult audiology services, and the interaction between the AQP portion of activity and the wider scope of activity. This builds on the work already undertaken by BAA. The letter has now gone to HABUKK members for sign off.

June 1st 2012

So this is the first in a new series of blogs from the BAA President. The aim is to give short snippets of information, often in an informal format, and very often written on a train on the way home from a meeting! I hope this will give a little insight into the work of BAA on behalf of members, and will complement the other information formats provided by BAA.

On tuesday this week I attended a meeting in Westminster, arranged by Sue Hill and attended by healthcare science professionals. The group met with Dr Kathy McClean who is heading up the NHS Transition programme. The meeting focused on how, in the English NHS, professional bodies will be heard. This is in a background of local commissioning, where DH

will have little direct decision making. The Academy for Healthcare Science (AHCS) is emerging as the point of contact to speak on behalf of healthcare scientists at a national level.

Today I attended Hearing and Balance UK (HAB UK), which brings together professional bodies and the 3rd sector. The meeting is an excellent forum to exchange common issues, and to find common ground. An action list, based around audiology services for children and AQP has been taken forward. NDCS and Hearing Link have been tasked to produce guidance for audiologists faced with completing DLA and/or statement of need forms. BAA is now Chairing this group, with Adam Beckman our representative to the organisation.

Feb. 2012

Well, here we are two months into the Boards year, and not a minute has been wasted by the Directors. Time has been well spent galvanising the teams of volunteers that work on our behalf, recruiting new members to work within the teams, and saying fond farewells to others who decided to concentrate on other projects but have dedicated so much time and effort on behalf of BAA members.

New board members have thrown themselves into the roles, and already plans are emerging to deliver the BAA's strategic goals. As these plans are formalised we will ensure they are shared with the members. To help with communication, and to reduce costs we would urge all members to ensure the BAA admin team has your up-to-date e-mail address. Once the next section of the new BAA website is launched these simple updates can be done on-line. Look out for your new log-in details over the next few months.

There are a few key developments in audiology over the last few months we need to draw special attention to.

The Improving Quality in Physiological Science (IQIPS) has now been launched for England. This programme will provide service accreditation and is vital for services hoping to tender

under the AQP programme. Services can register now for information at <http://www.rcplondon.ac.uk/projects/IQIPS> . In light of the **Modernising Scientific Careers (MSC)**, Practitioner Training Programme (PTP) and Scientist Training Programme (STP), there is currently much discussion around registration for both groups. Registration points effects all four countries, and clearly these registration changes may affect the existing workforce. BAA is working with its registration partners, RCCP and ACS, to look at the current registration requirements and the amendments which maybe required to accommodate the MSC output whilst maintaining high standards.

For adult rehabilitation services, Action on Hearing Loss (AoHL) has recently launched its 'locate and rate' service. This online tool has a similar feel to 'Trip advisor', where patients can rate the quality of the services they attend. For the tool to be truly useful to potential patients it will require lots of existing patient's reviews and a robust editing system from AoHL. We look forward to seeing how this initiative unfolds.

BAA Members can now keep up-to-date with developments in a variety of ways thanks to our communication team. The regular magazine will continue but under a new team, Hear Here is a great source of information, members can subscribe to our facebook, Twitter and LinkedIn accounts for the latest news, views and discussions and of course the new-look BAA website which will have its 'members only' area launched imminently.

As the Board prepares for its next meeting at the end of January, I'm sure we will have much more to update you on after that.

Presidents Blog December 2011

Our new President is Gareth Smith with Adam Beckman as Vice President and Ruth Thomsen as immediate past president. This team will hopefully guide the professional body through what looks like another turbulent year.

The Adult Hearing AQP Implementation pack (for commissioners) is now in its final stages and final comments have been submitted. The commissioning support guide has been circulated to various stakeholders for feedback. A few areas have found out if they have been chosen as an AQP service. Others are still waiting. BAA has requested details of outcome from Department of Health as soon as they can be shared.

Sad farewells to old board members: Amanda Barton, Phil Holt, Maire Doran and Amanda Casey, whilst we welcome Vinaya Manchiaiah, Amr El Refaie and Laura Booth onto board.