

1st August 2011

Dear Colleague,

Please find attached the "Roles in Audiology" document which has been produced by the Audiology Services Advisory Group.

The document is self-explanatory and will assist you in the operational management and delivery of Audiology services within NHS Scotland.

Any questions or comments should be directed to Angela Bonomy, National Audiology Manager at angela.bonomy@lanarkshire.scot.nhs.uk.

Dr John Irwin Audiovestibular Physician Chair – Audiology Services Advisory Group



Audiology Services Advisory Group Roles in Audiology July 2011

<u>Introduction</u>

Development of "Roles in Audiology" was originally prompted by the advent of the Associate Healthcare Scientist role and the arrival of Modernising Scientific Careers (MSC).

It is designed to be used as a reference tool and was driven by service rather than profession requirements: its use will, hopefully, result in safe and effective use of staff at all career stages. For ease of use, the "key differentials" of each Career Stage have been highlighted.

The document complements the Audiology Quality Standards and the Healthcare Science Action Plan "Safe, Accurate and Effective". The Quality Standards can be found at:

www.scotland.gov.uk/Publications/2009/04/27115807/0 and www.scotland.gov.uk/Publications/2009/04/27115728/0

Thanks are due to various Members of the Audiology Services Advisory Group Sub-Group and the Audiology Heads of Service Group who contributed to the document.

Roles

	Career stage 1/2/3	Career stage 4	Career stage 5	Career stage 6	Career stage 7	Career stage 8
	Senior/Assistant Healthcare Scientist	Associate Healthcare Scientist	Healthcare Scientist Practitioner	Specialist Healthcare Scientist	Advanced Healthcare Scientist	Consultant/ Principal Healthcare Scientist
1 st Contact	•••	•••	•••	•••	••	••
Assessment		•••	•••	•••	••••	••••
Diagnostics		•	•••	••••	••••	••••
IMP	•	••	•••	••••	••••	••••
Fitting		••• *	••• *	••••	••••	•••
Review/Support	••	••	•••	••••	••••	••••
Paediatrics	•	•	••	•••	••••	••••
Balance			•	••	••••	••••
Tinnitus			•	•••	••••	••••
Patients with Complex Needs			•	•••	••••	••••
ENT Clinics		•••	•••	••		
Repairs	••••	••	••	•		
Quality	••••	••••	••••	••••	••••	••••
Safety	•••	•••	•••	•••	••••	••••
Research	•	•	••	•••	••••	••••
Management					•••	••••
Leadership		•	••	••••	••••	••••
Communication	•••	•••	••••	••••	••••	••••
Supervision			•	••••	••••	•••
Aural Rehabilitation		·	•••	•••	••••	••••
Strategic Development	•	•	••	•••	•••	••••
Training	•	•	•	••••	••••	•••
National Input				••	••••	••••
Audit	•	•	••	•••	••••	••••

Multi-Agency	••	•••	•••	•••	•••
Working				_	

^{*} Although a significant part of the role, there are limitations on the type of patient who can be seen by this role.

Key:

- ---- major part of role
- significant part of role
- - part of role
- limited part of role/assisting

Blank - not part of role

Key Differentials

Career Stage 1	Close supervision
	Limited number of protocol-driven tasks
Career Stage 2	Less immediate supervision
	May be undertaking a qualification
	Undertakes additional patient contact, e.g. telephone reviews/questionnaires
Career Stage 3	Indirect supervision
	Undertakes routine, basic but important work procedures e.g. repair clinics
	May assist in basic training of new staff
	Undertakes impression taking
	Undertakes screening
Career Stage 4	Indirect supervision
	 Undertakes limited adult hearing aid work: direct referral within strict criteria and fitting of hearing aids to patients aged 18+ with no complex needs
	Undertakes ENT clinic work: patients aged 7+
	 Undertakes reviews of patients aged 18+ with no complex needs
Career Stage 5	Indirect supervision is required as necessary
	Provides an entry level for graduates to start role development
	 Performs a wider range of complex clinical or technical procedures than Career Stages 1-4
	Is accountable for his/her own actions
	 Undertakes hearing aid work within a wider remit than the Associate Healthcare Scientist: direct referral for any presenting complaint
	Undertakes non-routine work
	 Develops and implements Individual Management Plans (IMPs) for a wider range of patients than Career Stages 1-4
	Undertakes a range of diagnostic assessments
	 Undertakes hearing aid reviews on patients aged 12+ without complex needs
	Eligibility for the Higher Training Scheme commences
Career Stage 6	Has autonomous clinical responsibility for specialist patient care
	Sees patients with complex needs
	Has a depth of clinical knowledge
	Undertakes all hearing aid work unsupervised
	Undertakes non-routine clinical procedures
	Participates in the delivery of specialist Audiology services
	Undertakes highly specialist tasks under supervision
	Conducts audit and research and analyses consequent data
	Provides advisory guidance to colleagues
	Supervises Associate Healthcare Scientists and Healthcare Science Practitioners
	Acts as a point of referral for colleagues
Career Stage 7	Depth of specialist clinical knowledge
	 Recognised specialist within a specific area of Audiology, e.g. balance, tinnitus, paediatrics, learning disabilities, rehabilitation
	Point of referral for colleagues

	•	Supervisor for Specialist Healthcare Scientists
	•	Management responsibility
	•	Undertakes research
Career Stage 8	•	Provides leadership across Audiology and/or wider Healthcare Science disciplines
	•	Undertakes a line management role within Audiology and/or wider Healthcare Science disciplines
	•	Provides clinical leadership within Audiology
	•	Ensures high levels of professional competence within the Department
	•	Has budgetary responsibility for the Department
	•	Ensures clinical requirements are met
	•	Shapes and implements Audiology/Healthcare Science policies at local and national level
	•	Undertakes local/regional/national Audiology service development
	•	Initiates and develops the research agenda
	•	Has responsibility for compliance with local operational policies

Assistant Healthcare Scientist.

An Assistant HCS in Audiology performs protocol-limited tasks under the supervision and direction of more senior staff.

Key Differentials

- Close supervision
- Limited number of protocol-driven tasks

Knowledge, training and experience	Assistant Healthcare Scientist jobs require knowledge of a limited number of procedures, where jobholders are likely to be undergoing induction and training for higher stage posts.
Responsibilities for policy and service development implementation	Assistant Healthcare Scientist jobs follow policies and procedures in their own work area; jobholders may comment on proposed changes.
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Responsibilities for research and development	Assistant Healthcare Scientist jobholders can undertake surveys or audits in the course of their own work, and may occasionally participate in research and development, clinical trials or testing of equipment.
Freedom to act	Assistant Healthcare Scientist jobs at the first stage of the Career Framework generally work under close supervision and within well established procedures and practices.

Tasks

The Assistant Healthcare Scientist in Audiology in NHS Scotland is expected to be able to undertake the tasks outlined below, which should not be exceeded:

Repair Clinics

Patients aged 7 and over can be seen by an Assistant Healthcare Scientist within the repair clinic setting (in paediatric-only departments, children of any age can be seen by an Assistant Healthcare Scientist within the repair clinic setting). All tasks must be related to the patient's current hearing aid and hearing status.

- Like-for-like replacement
- Hearing aid test box use
- Tubing

Referral to an Associate Healthcare Scientist is required for hearing aid adjustment. Referral to an Advanced Healthcare Scientist is required for Paediatric Audiology. Referral to a Specialist Healthcare Scientist is required in the following circumstances: sudden hearing loss; onset of tinnitus/dizziness; infection; sudden change in hearing status.

Administration

- Appointment making
- Stock control
- Letters
- Postal repairs
- Reception cover
- Room set up and stocking

• Department hygiene

Assisting the Advanced/Specialist Healthcare Scientist in undertaking Advanced Audiological Assessments

Local training is required and there is no minimum age limit.

Individual Management Plans (IMPs)

A basic IMP can be developed in consultation with patients and relevant others, based on individual patient needs and wishes and accepted good practice.

Assistant Healthcare Scientist.

An Assistant Healthcare Scientist in Audiology performs protocol-limited tasks under the supervision and direction of more senior staff.

Key Differentials

- Less immediate supervision
- May be undertaking a qualification
- Undertakes additional patient contact, e.g. telephone reviews/questionnaires

Knowledge, training and experience	Assistant Healthcare Scientist jobs require knowledge and understanding of basic tasks and procedures; jobholders may be undertaking further training to achieve, or have obtained, a relevant NVQ award or equivalent qualifications/awards.
Responsibilities for policy and service development implementation	Assistant Healthcare Scientist jobs follow policies and procedures in their own work area; jobholders may comment on proposed changes.
Responsibilities for research and development	Assistant Healthcare Scientist jobholders can undertake surveys or audits in the course of their own work, and may occasionally participate in research and development, clinical trials or testing of equipment.
Freedom to act	Assistant Healthcare Scientist jobs at stage 2 may operate under less immediate supervision than those at stage 1.

Tasks

The Assistant Healthcare Scientist in Audiology in NHS Scotland is expected to be able to undertake the tasks outlined below, which should not be exceeded:

Repair Clinics

Patients aged 7 and over can be seen by an Assistant Healthcare Scientist within the repair clinic setting (in paediatric-only departments, children of any age can be seen by an Assistant Healthcare Scientist within the repair clinic setting). All tasks must be related to the patient's current hearing aid and hearing status.

- Like-for-like replacement
- Hearing aid test box use
- Tubina

Referral to an Associate Healthcare Scientist is required for hearing aid adjustment. Referral to an Advanced Healthcare Scientist is required for Paediatric Audiology. Referral to a Specialist Healthcare Scientist is required in the following circumstances: sudden hearing loss; onset of tinnitus/dizziness; infection; sudden change in hearing status.

Administration

- Appointment making
- Stock control
- Letters

- Postal repairs
- Reception cover
- Room set up and stocking
- Department hygiene

Assisting the Advanced/Specialist Healthcare Scientist in undertaking Advanced Audiological Assessments

Local training is required and there is no minimum age limit.

Individual Management Plans (IMPs)

A basic IMP can be developed in consultation with patients and relevant others, based on individual patient needs and wishes and accepted good practice.

Telephone Reviews (pre or post appointment)

Patients must be aged 18 and over and local training is required.

Senior Assistant Healthcare Scientist.

A Senior Assistant Healthcare Scientist in Audiology performs a range of protocoldriven tasks under indirect supervision by a Specialist Healthcare Scientist. Senior Assistants may assist in training new staff and look after equipment used by others.

Key Differentials

- Indirect supervision
- Undertakes routine, basic but important work procedures e.g. repair clinics
- May assist in basic training of new staff
- Undertakes impression taking
- Undertakes screening

Knowledge, training and experience	Senior Assistant Healthcare Scientist jobs require understanding of a range of routine and non-routine duties, plus a basic level of theoretical knowledge. A Certificate in Higher Education in Hearing Aid Audiology is compulsory. Local training is required as appropriate.
Responsibilities for policy and service development implementation	Senior Assistant Healthcare Scientist jobs follow policies and procedures in their own work area; jobholders may comment on proposed changes.
Responsibilities for research and development	Senior Assistant Healthcare Scientist jobholders can undertake surveys or audits in the course of their own work, and may occasionally participate in research and development, clinical trials or testing of equipment.
Freedom to act	Senior Assistant Healthcare Scientist jobs will follow set procedures for their area of work, with advice generally being available from more experienced staff.

Tasks

The Senior Assistant Healthcare Scientist in Audiology in NHS Scotland is expected to be able to undertake the tasks outlined below, which should not be exceeded:

Repair Clinics

Patients aged 7 and over can be seen by a Senior Assistant Healthcare Scientist within the repair clinic setting (in paediatric-only departments, children of any age can be seen by a Senior Assistant Healthcare Scientist within the repair clinic setting). All tasks must be related to the patient's current hearing aid and hearing status.

- Like-for-like replacement
- Hearing aid test box use
- Impression taking (see below)
- Tubing

Referral to an Associate Healthcare Scientist is required for hearing aid adjustment. Referral to an Advanced Healthcare Scientist is required for Paediatric Audiology.

Referral to a Specialist Healthcare Scientist is required in the following circumstances: sudden hearing loss; onset of tinnitus/dizziness; infection; sudden change in hearing status.

Impression Taking

Patients must be aged 7 and over and any contraindications must be referred to a Specialist Practitioner.

In paediatric-only departments, patients must be aged 5 and over and be established users.

Earmould Fittings

Patients must be aged 7 and over and any contraindications must be referred to a Specialist Practitioner.

Administration

- Appointment making
- Stock control
- Letters
- Postal repairs
- Reception cover
- Room set up and stocking
- Department hygiene

Telephone Reviews (pre or post appointment)

Patients must be aged 18 and over and local training is required.

Screening

Training is required to the recognised professional standard.

Assisting the Advanced/Specialist Healthcare Scientist in undertaking Advanced Audiological Assessments

Local training is required and there is no minimum age limit.

Individual Management Plans (IMPs)

A basic IMP can be developed in consultation with patients and relevant others, based on individual patient needs and wishes and accepted good practice.

Associate Healthcare Scientist.

An Associate Healthcare Scientist in Audiology generally performs a wider range of clinical or technical procedures than those in Career Stages 1, 2 or 3.

The Associate HCS in Audiology is expected, as part of an integrated team, to undertake protocol-driven tasks under indirect supervision by a Specialist Healthcare Scientist.

Key Differentials

- Indirect supervision
- Undertakes limited adult hearing aid work: direct referral within strict criteria and fitting of hearing aids to patients aged 18+ with no complex needs
- Undertakes ENT clinic work: patients aged 7+
- Undertakes reviews of patients aged 18+ with no complex needs

Associate Healthcare Scientist jobs require a greater understanding of non-routine work procedures and intermediate theoretical knowledge. A Diploma in Higher Education in Hearing Aid Audiology or Foundation Degree is compulsory. A Registered Hearing Aid Dispenser/Audiologist may work as an Associate HCS. Registration with the Health Professions Council (HPC) is required.
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Associate Healthcare Scientist jobs may be
involved in the implementation of policies and in
proposing changes for their own work area.
Associate Healthcare Scientist jobs may
undertake research and development, clinical
trials or equipment testing or adaptation.
Associate Healthcare Scientist jobs will follow set procedures for their area of work, with advice generally being available from more experienced staff.

Overall Responsibilities

The Associate Healthcare Scientist in Audiology in NHS Scotland is expected to be able to undertake the tasks of the Senior Assistant Healthcare Scientist plus tasks that are specific to the Associate role and should not be exceeded:

Specific roles will include:

Direct Referral

Adult direct referral patients must fit the Audiology Services Advisory Group (ASAG) Direct Referral Guidance (Appendix A) and be aged 18 and over.

Referral, when appropriate, should be to a Specialist Healthcare Scientist or ENT.

ENT Clinics

Patients must be aged 7 and over and procedures must be carried out to BSA

Standards.

Multi-Agency Working

Patients must be aged 18 and over and referral should be made in line with local protocols and the Individual Management Plan (see below).

Fitting Hearing Aids to Patients with no Complex Needs

Patients must be aged 18 and over.

Hearing Aid Verification

Patients must be aged 18 and over.

Hearing Aid Reviews

Patients must be aged 18 and over and have no complex needs. Recognised outcome measures must be used as appropriate.

Individual Management Plans (IMPs)

The development of the IMP should include a **limited** range of investigations, procedures or processes in consultation with patients and relevant others, based on individual patient needs and wishes and accepted good practice.

The IMP should be monitored and progress reported, reviewing the need for further intervention as appropriate.

Auditory Rehabilitation

Basic listening and questioning skills.

Information giving.

Signposting.

Repair Clinics

In addition to the tasks above (see p6), Associates can undertake adjustment of hearing aids (with the exception of paediatric hearing aids).

Impression Taking

As Senior Assistant HCS.

Earmould Fittings

As Senior Assistant HCS.

Administration

As Senior Assistant HCS.

Telephone Reviews (pre or post appointment)

As Senior Assistant HCS.

Screening

As Senior Assistant HCS.

Assisting the Advanced/Specialist Practitioner in Undertaking Advanced Audiological Assessments

As Senior Assistant HCS.

Healthcare Scientist Practitioner.

A Healthcare Scientist Practitioner in Audiology performs a range of complex clinical or technical procedures and is accountable for his/her own actions and for the actions of those they direct and/or supervise.

Supervision, as required, must be provided by a Specialist or Advanced Healthcare Scientist.

Within the role of the Practitioner, further skill development is possible and expected with a view to further advancement.

Key Differentials

- Indirect supervision is required as necessary
- Provides an entry level for graduates to start role development
- Performs a wider range of complex clinical or technical procedures than Career Stages 1-4
- Is accountable for his/her own actions
- Undertakes hearing aid work within a wider remit than the Associate Healthcare Scientist: direct referral for any presenting complaint
- Undertakes non-routine work
- Develops and implements Individual Management Plans (IMPs) for a wider range of patients than Career Stages 1-4
- Undertakes a range of diagnostic assessments
- Undertakes hearing aid reviews on patients aged 12+ without complex needs
- Eligibility for the Higher Training Scheme commences

Knowledge, training and experience	Qualified Healthcare Scientist Practitioners in Audiology will operate with a knowledge base at honours degree level (BSc Audiology); the GDip Audiology; PGDip in Audiology or equivalent. The Practitioner takes responsibility for the maintenance and updating of his/her knowledge and skills. Registration with the Health Professions Council (HPC) or Registration Council for Clinical Physiologists (RCCP) is required. Eligibility for access to the Higher Training Scheme commences at Career Stage 5.
Responsibilities for policy and service development	The Healthcare Scientist Practitioner will undertake audits and consequent service development to improve the quality of service provided.
Responsibilities for research and development	The Healthcare Scientist Practitioner must be aware of relevant advances in knowledge and practice, interpreting research and applying it to practice.

Healthcare Scientist Practitioner jobs will involve working independently, following agreed policies and procedures for their area. They will plan, organize and prioritise their own work activities, practices and tasks.

Overall Responsibilities

The Healthcare Scientist Practitioner in Audiology in NHS Scotland takes responsibility for the investigation and management of patients referred to the Audiology department, within defined structures of supervision and governance. As part of an integrated team, the Practitioner may perform investigations and contribute to the management of patients who are under the clinical responsibility of another member of the team.

The Practitioner takes responsibility for the quality assurance and audit of outcomes of his/her own work and work carried out under his/her supervision.

The Practitioner is also expected to be able to undertake the tasks of the Associate Healthcare Scientist and the Senior Assistant Healthcare Scientist (outlined above).

Specific roles will include:

Individual Management Plan (IMP) Development

The development of the IMP should include a range of investigations, procedures or processes in consultation with patients and relevant others, based on individual patient needs and wishes and accepted good practice.

The IMP should be monitored and progress reported, reviewing the need for further intervention as appropriate.

Diagnostic Assessments

A range of clinical investigations, procedures or processes can be performed to deliver patient care according to the agreed IMP. These investigations, procedures or processes must also be interpreted and reported to the patient and others involved in his/her care.

The following may be undertaken: diagnostic tympanometry; diagnostic reflexes; reflex decay; diagnostic OAEs; speech audiometry.

Communication

Clinical advice and information must be provided to healthcare and other professionals, patients and their carers to support effective assessment, diagnosis, management and treatment of patients.

Direct Referral

Presenting complaint can be of any complaint of hearing loss and may be associated with mild/moderate bilateral tinnitus.

Practitioners must refer on as appropriate or manage patient care with the support of a senior colleague.

ENT Clinics

As Associate HCS.

Multi-Agency Working

The need for referral to other agencies or specialists must be recognised and referral, as appropriate, made.

Referral should be made in line with local protocols and the IMP (see above).

Fitting Hearing Aids to Patients

Patients must be aged 18 and over and aids (including bone conduction aids) may be fitted to patients with complex needs (at the discretion of the supervising Specialist/Advanced Healthcare Scientist).

In paediatric-only departments, the Healthcare Scientist Practitioner can assist in hearing aid fittings as appropriate.

Hearing Aid Verification

As Associate HCS.

Hearing Aid Reviews

Reviews can be undertaken on patients aged 12 and over without complex needs. Recognised outcome measures must be used as appropriate.

Hearing Aid Adjustments

Patients must be aged 18 and over.

In paediatric-only departments, children of any age can be seen by the Healthcare Scientist Practitioner with supervision.

Auditory Rehabilitation

As Associate Healthcare Scientist.

In addition, the Healthcare Scientist Practitioner undertakes goal setting with the patient and provides orientation to any rehabilitation information.

Repair Clinics

As Associate HCS.

Impression Taking

As Associate HCS.

Earmould Fittings

As Associate HCS.

Administration

As Associate HCS.

Telephone Reviews (pre or post appointment)

As Associate HCS.

Screening

As Associate HCS.

Specialist Healthcare Scientist.

A Specialist Healthcare Scientist in Audiology performs a highly complex clinical, scientific or technical role, which normally involves working directly with patients, and/or supervises a team.

A Specialist Healthcare Scientist has a higher degree of autonomy and responsibility than Practitioners.

Supervision, when required or requested, must be provided by an Advanced/Principal Healthcare Scientist.

The Specialist Healthcare Scientist is expected to engage in lifelong learning.

Key Differentials

- Has autonomous clinical responsibility for specialist patient care
- Sees patients with complex needs
- Has a depth of clinical knowledge
- Undertakes all hearing aid work unsupervised
- Undertakes non-routine clinical procedures
- Participates in the delivery of specialist Audiology services
- Undertakes highly specialist tasks under supervision
- Conducts audit and research and analyses consequent data
- Provides advisory guidance to colleagues
- Supervises Associate Healthcare Scientists and Healthcare Science Practitioners
- · Acts as a point of referral for colleagues

Knowledge, training and experience	Specialist Healthcare Scientists will have a BSc Audiology; MSc Audiology; GDip Audiology; PGDip Audiology or equivalent. A Specialist Scientist will have clinical and specialist expertise underpinned by theoretical knowledge and experience. Specialist expertise is generally acquired through structured development involving practical experience with qualified Specialists; ongoing training and further study; application of the scientific method in service, the development of techniques and research. Regular updating in good practice is expected for professional purposes. Registration with the Health Professions Council (HPC) or Registration Council for Clinical Physiologists (RCCP) is required.
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Responsibilities for policy and service development implementation	Specialist Healthcare Scientist jobs involve ensuring policies are implemented as directed and proposing changes for your work area.
Responsibilities for research and development	Specialist Healthcare Scientist jobs initiate and undertake innovation, improvement and research and development and are involved in the education of trainees and others within the

	workplace.
Freedom to act	Specialist Healthcare Scientist jobholders will develop their scope of practice, delivering expected results while being guided by principles and broad policies.

Overall Responsibilities

The Specialist Healthcare Scientist in Audiology in NHS Scotland, as part of an integrated team, undertakes complex scientific and clinical roles; analyses, interprets and compares investigative and clinical options and makes judgements, including clinical judgements, involving facts or situations which impact on patients.

The Specialist Healthcare Scientist is also able to undertake the tasks of the Healthcare Scientist Practitioner as necessary.

Specific Roles will include:

Individual Management Plan (IMP) Development

As Healthcare Scientist Practitioner.

In addition, the Specialist Healthcare Scientist develops and assists in the delivery of IMPs for adults and children within a specialist Audiology service.

Diagnostic Assessments

A range of clinical investigations, procedures or processes can be performed to deliver patient care according to the agreed IMP. These investigations, procedures or processes must also be interpreted and reported to the patient and others involved in his/her care.

The following may be undertaken: diagnostic tympanometry; diagnostic reflexes; reflex decay; diagnostic OAEs; speech audiometry; advanced speech testing. In addition, the Specialist Healthcare Scientist participates in the delivery of a specialist service within Audiology, for example, paediatric Audiology; balance assessment; tinnitus assessment; complex diagnostic testing, under supervision.

Communication

Highly developed specialist advice, which may be complex, sensitive and delivered within an emotive atmosphere, must be given to patients, their carers, healthcare and other professionals regarding their auditory or vestibular status and its management.

Supervision/Training

The Specialist Healthcare Scientist provides supervision for Career Stage 3, 4 and 5 roles and students.

They also contribute to the training of junior staff in their areas of specialist clinical knowledge.

Direct Referral

As Healthcare Scientist Practitioner but without supervision or restriction.

ENT Clinics

As Healthcare Scientist Practitioner but without supervision or restriction.

Multi-Agency Working

As Healthcare Scientist Practitioner but without supervision or restriction.

Fitting Hearing Aids to Patients

As Healthcare Scientist Practitioner but without supervision or restriction.

Hearing Aid Verification

As Healthcare Scientist Practitioner but without supervision or restriction.

Hearing Aid Reviews

As Healthcare Scientist Practitioner but without supervision or restriction.

Hearing Aid Adjustments

As Healthcare Scientist Practitioner but without supervision or restriction.

Auditory Rehabilitation

The Specialist Healthcare Scientist develops interventions and rehabilitation

programmes based upon autonomous clinical opinion, which may involve onward referral to relevant intervention programmes such as specialist tertiary services. The rehabilitation programmes will also include balance rehabilitation; tinnitus rehabilitation; paediatric habilitation.

In addition the Specialist Healthcare Scientist may undertake motivational interviewing or counseling.

The Specialist Healthcare Scientist has an awareness of local external agencies who can provide additional help and support to the patient.

Repair Clinics

As Practitioner.

Impression Taking

As Practitioner.

Earmould Fittings

As Practitioner.

Administration

As Practitioner.

Telephone Reviews (pre or post appointment)

As Practitioner.

Screening

As Practitioner.

Advanced Healthcare Scientist.

An Advanced Healthcare Scientist in Audiology will have developed skills and theoretical knowledge to a very high standard through performing an in-depth, highly complex role, and continuously developing clinical, scientific or technical practice within Audiology; and/or has management responsibilities for a section/small department or be largely involved in research and development.

Key Differentials

- Depth of specialist clinical knowledge
- Recognised specialist within a specific area of Audiology, e.g. balance, tinnitus, paediatrics, learning disabilities, rehabilitation
- Point of referral for colleagues
- Supervisor for Specialist Healthcare Scientists
- Management responsibility
- Undertakes research

Knowledge, training and experience	Advanced Healthcare Scientists at this stage require a Masters degree level or equivalent. This will normally be achieved through formal qualification and application of a vocational Masters degree relevant to practice. Alternatively, the required knowledge base may be acquired through in-depth service experience including significant formal study at Masters level, normally with a higher level specialist qualification which may include research, training and practice. Posts at this level require the practical application of specialist knowledge, for example, taking responsibility for a significant area of demanding activity. Registration with the Health Professions Council (HPC) or Registration Council for Clinical Physiologists (RCCP) is required.	
Responsibilities for policy and service development implementation	Advanced Healthcare Scientist jobs may involve responsibility for implementing new or revised policies across the Scientist's area of work; jobholders may propose changes that impact on other areas.	
Responsibilities for research and development	Advanced Healthcare Scientist jobs may involve carrying out research or development as a major job requirement.	
Freedom to act	Advanced Healthcare Scientist jobholders will develop their scope of practice, delivering expected results while being guided by principles and broad policies.	

Overall Responsibilities

The Advanced Healthcare Scientist in Audiology in NHS Scotland, as part of an integrated team, is expected to have a depth of clinical knowledge; undertake complex scientific and clinical roles and lead the delivery of specialist services within Audiology, for example, paediatric Audiology (including UNHS); balance assessment and rehabilitation; tinnitus assessment and rehabilitation; complex diagnostic testing. In addition he/she may have management responsibilities within the Audiology Department.

Specific Roles will include:

Individual Management Plan (IMP) Development

As Healthcare Scientist Practitioner.

In addition, the Advanced Healthcare Scientist develops and delivers IMPs for adults and children within specialist Audiology services.

Diagnostic Assessments

The Advanced Healthcare Scientist in Audiology undertakes the full range of available Audiological tests, including advanced diagnostic testing, unsupervised.

Communication

Highly developed specialist advice, which may be complex, sensitive and delivered within an emotive atmosphere, must be given to patients regarding their auditory or vestibular status and its management.

Management

The Advanced Healthcare Scientist may have management responsibility for a small department or section of a large department.

He/she may be an operational Team Leader with budgetary responsibility for equipment/stock across the whole Department.

Auditory Rehabilitation

As Specialist Healthcare Scientist.

In addition, the Advanced Healthcare Scientist may provide rehabilitation support for children and their families; group rehabilitation sessions and individual/group relaxation classes.

He/she may be regarded as point of referral for colleagues within the Department.

Research

The Advanced Healthcare Scientist may act as Research Coordinator for the Audiology Department.

The following roles can be undertaken without supervision or restriction, but should not be seen as key functions of the role:

Direct Referral

ENT Clinics

Multi-Agency Working

Fitting Hearing Aids to Patients

Hearing Aid Verification

Hearing Aid Reviews

Hearing Aid Adjustments

Repair Clinics

Impression Taking

Earmould Fittings

Administration

Telephone Reviews (pre or post appointment)

Screening

Consultant/Principal Healthcare Scientist.

A Consultant/Principal Healthcare Scientist provides clinical and scientific expertise and leadership within Audiology/wider Healthcare Science disciplines, bringing strategic direction, innovation and highly developed and specialized skills and knowledge to the role

and/or

has management responsibilities for a discipline/service/team and/or

initiates or leads formal research activities.

Key Differentials

- Provides leadership across Audiology and/or wider Healthcare Science disciplines
- Undertakes a line management role within Audiology and/or wider Healthcare Science disciplines
- Provides clinical leadership within Audiology
- Ensures high levels of professional competence within the Department
- Has budgetary responsibility for the Department.
- Ensures clinical requirements are met
- Shapes and implements Audiology/Healthcare Science policies at local and national level
- Undertakes local/regional/national Audiology service development
- Initiates and develops the research agenda
- Has responsibility for compliance with local operational policies

Knowledge, training and experience	Consultant/Principal Scientist jobs at this stage require a Masters degree or equivalent knowledge, when including the required management knowledge/qualification. Healthcare Scientist Principal, Consultant, Researcher and Service Manager jobs require broad and extensive knowledge and experience, with in-depth knowledge to Doctorate level or equivalent. Such knowledge will normally be acquired through formal study at Doctorate level and further higher specialist training, or may be through other forms of training/learning at an equivalent level. Registration with the Health Professions Council (HPC) or Registration Council for Clinical Physiologists (RCCP) is required.
Responsibilities for policy and service development implementation	Principal, Consultant and Professional and Service Manager jobs may carry responsibility for the implementation of new policies and for service development across a service or more than one area of activity. This may include organisation-wide responsibility for a major policy area.

Responsibilities for research and development	Professional Manager posts may regularly undertake research and development activities. Principal, Researcher and Service Manager, Consultant and Consultant Director jobs may additionally involve a more extensive commitment to initiating and developing research and development programmes, either locally or nationally.	
Freedom to act	Principal, Consultant, Researcher and Professional and Service Manager jobs work autonomously in managing a team and area of work, and may involve taking account of general guidelines but determining how these are best interpreted and advising the organization appropriately. This second feature is typical of an 'expert' role where there is freedom to initiate action within broad policies.	

Overall Responsibilities

The Advanced Healthcare Scientist in Audiology in NHS Scotland may operate as a specialist with a depth of knowledge within Audiology or at a broader, more strategic level across wider Healthcare Science disciplines.

Specific roles will include:

Leadership

Clinical leadership is at a local, regional or national level and is specialism-specific. As Clinical Leader, the Advanced Healthcare Scientist is clinically accountable for service provision and promotes CPD within his/her team. He/she ensures the highest levels of professional competence within the Service.

General leadership requires an ability to lead the Service and set direction: leading change through people; holding to account; empowering others; effective and strategic influencing; collaborative working and service improvement skills.

Management

Management can be of staff and their associated personal development; service development within the organizational structure; local operational policies and the departmental budget.

Supervision

The Consultant/Principal Healthcare Scientist creates a learning environment which promotes critical reflective practice: he/she helps staff overcome some of the considerable demands created by the nature of the work; reinforces and offers feedback on effective clinical skills/competence; enables improved effectiveness of clinical skills; assists staff to develop confidence in managing complex situations.

Communication

The Consultant/Principal Healthcare Scientist communicates effectively with regard to clinical and operational management, Board and national/strategic issues using all available channels of communication.

Clinical Practice

It is important that the Advanced/Principal Healthcare Scientist operating in a management role maintains a level of clinical practice.

The following roles can be undertaken without supervision or restriction, but should not be seen as key functions of the role:

Direct Referral

ENT Clinics

Multi-Agency Working
Fitting Hearing Aids to Patients
Hearing Aid Verification
Hearing Aid Reviews
Hearing Aid Adjustments
Repair Clinics
Impression Taking
Earmould Fittings
Administration

Telephone Reviews (pre or post appointment)

Screening



Guidance for the Direct Referral of Patients to Audiology Services

Introduction

This document was written to update the existing guidance to Scottish NHS Audiology Services and referrers with regard to the practice of audiology direct referral. The document was developed by looking at the practices and guidance in both the public and private sectors in the fields of both audiology and hearing aid dispensing, and through consultation with a broad range of professionals.

The aim of this guidance is to ensure safe practice while maintaining and developing an improved and timeous patient journey. In particular, it recognises that, in some instances, ENT referral will be indicated but it is important to note that this should not, in most cases, impede the progress of the patient through the referral process, especially where the likely outcome is hearing aid provision. The effective use of direct referral will rely on good communication and working relationships, in particular between local audiology and ENT services. It should also be recognised that, while the outcome of a direct referral may require an ENT opinion, this opinion may not always require a formal out-patient ENT consultation. Care is, therefore, required to ensure that patients understand that they may in some instances (but not all) receive an ENT appointment if the circumstances warrant it.

Some parameters of the guidance are set locally, in particular age restrictions. Age limits are not discriminatory in any way: rather they ensure that those who present with hearing problems are seen by the most appropriate health care professional and have their hearing loss investigated and managed in as effective and timely a way as possible.

Some local interpretation and development of this guidance is expected but feedback from all users is appreciated and will be incorporated into any future revisions.

27

Guidance for the Direct Referral of Patients to Audiology Services

Outline:

This guidance document defines the category of patient who may be referred directly to NHS Audiology Services for hearing assessment and who may make this referral.

Referrer:

General Practitioner **Hospital Doctor** *Nurse (Practice Nurse, Ward Nurse, District Nurse) *Self

*Registered Hearing Aid Dispenser

Referral Reason:

To assess the hearing threshold of individuals with the complaint of gradual onset, symmetrical hearing loss for the purpose of appropriate management.

Referral Criteria:

- 1. Patient must be 50** years of age or older.
- 2. Presenting complaint must be that of symmetrical, slow onset hearing loss. No other ear, hearing or ENT complaint should be referred via this route.
- 3. Prior to referral, patient must have been seen by GP or appropriate healthcare professional to ensure ears and ear canals are wax free and the appearance of the ear canals and tympanic membranes is normal.

^{*} subject to local arrangement.
** age limit subject to lowering by local arrangement

Guidelines and Advice for Audiology Services using Direct Referral:

- Referrals should be vetted against *Guidelines for the Direct Referral of patients to Audiology Services*. Referrals outwith this guidance should be returned to the referring source or forwarded to ENT as appropriate.
- Prior to implementing Direct Referral, Services should ensure that wax removal facilities and fast track referral to ENT services are agreed to ensure a smooth and uninterrupted patient journey. Consideration should also be given to the scheduling of Direct Referral clinic sessions to maximise the available ENT support that can be sought.
- Services should introduce Direct Referral with an age restriction of 50 years but with a view to reducing this further. Reduction to 18 years should be the target.
- ENT Services receiving GP referrals that fit the *Guidance for the Direct Referral* of patients to Audiology Services should pass these directly to their local Audiology Service.
- Direct referral applies to new patients, previously unknown to the Audiology Service. Patients referred, assessed and subsequently supplied with amplification are deemed lifelong patients and do not require re-referral. They should be periodically re-assessed as part of their lifelong care and this should be carried out in consultation between patient and service.
- Services should agree local communication protocols for communication between Audiology and referrers. This should also include the methods of onward referral.

Guidance to Audiology Services for the Assessment of Direct Referral Patients:

In addition to the vetting of direct referral requests in line with the referral protocol, the following conditions are referable and require that a medical opinion is sought.

- Partial or total obstruction of the external auditory canal and/or tympanic membrane that does not allow proper examination of the eardrum and/or would not allow the accurate taking of an aural impression. This includes wax and foreign bodies.
- 2. Abnormal appearance of the eardrum or outer ear to include a perforated eardrum, an active discharge or a history of discharge from either ear within the previous 90 days.
- 3. Persistent otalgia affecting either ear where there has been a continuous episode of pain for 7 days or more within the previous 90 days.
- 4. Vertigo (as classically described as "an hallucination of movement" not to be confused with the common unsteadiness associated with age) within the last 90 days.
- 5. Conductive hearing loss where audiometry shows 25dB or greater air/bone gap at two or more of the following frequencies: 500, 1000, 2000 Hz.
- 6. A unilateral or asymmetrical hearing loss as indicated by a difference between left/right bone conduction thresholds of 20dB or greater at two or more of the following frequencies: 500, 1000, 2000, 4000 Hz.
- 7. Hearing loss of sudden (24 hours) or rapid (up to 90 days) onset.
- 8. Sudden (24 hours), rapid (up to 90 days), or recent (within one year) worsening of an existing hearing loss. Where an existing audiogram taken in the last 24 months is available this shall mean a difference of 15 dB or more in air conduction threshold readings at two or more of the following frequencies: 500, 1000, 2000, 4000 Hz.
- 9. Hearing loss subject to fluctuation beyond that associated with colds.
- 10. Unilateral, pulsatile or distressing tinnitus (within the last 90 days).
- 11. Premature hearing loss for those aged 18-40 years of age, being greater than 30dBHL in either ear at two or more of the following frequencies: 500,1000, 2000, 4000Hz.
- 12. Concern that speech discrimination is significantly poorer than would be expected for the client's level of hearing.
- 13. Any other unusual presenting feature(s) as recognised by the Audiologist.