

Hearing Screening vs the Annual Health Check for People with Learning Disabilities



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1. Introduction

Annual health checks offered to people with learning disabilities in primary care include hearing assessment. However, the effectiveness of these have been questioned, as they often involve nothing more than subjective questioning. Alternatives, such as hearing screening have been recommended. We completed hearing screening for people with learning disabilities in community locations, and compared hearing screening results to their annual health check outcome.



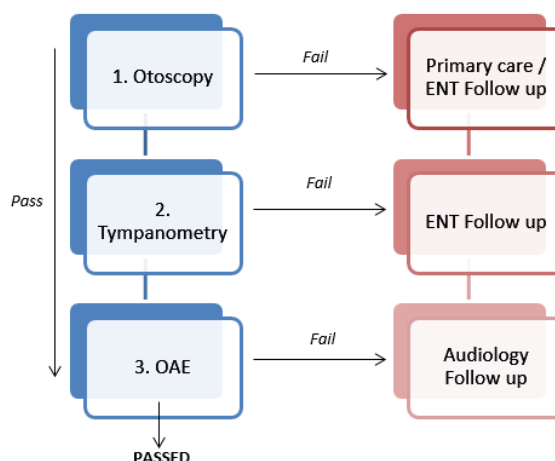
2. Methods

Hearing screening was carried out in four community locations. 75 people with learning disabilities volunteered to take part. A three step screening process was designed, involving otoscopy, tympanometry and TEOAE. Contact was made with every individuals' GP to inform them of the results of the screen and to request onward referral where indicated.

3. Key Results

- 23% (n=17) had occluding wax preventing screening
- 44% (n=25) had NCR OAE in one or both ears
- Only 3/25 (12%) were already known to Audiology
- 22 people required referral to Audiology to verify their hearing levels
- Only 59% (n=13) were referred by their GP
- 11 people attended Audiology and each person was able to complete a PTA with reasonable adjustments
- 10/11 were diagnosed with hearing loss, and 5 of these had additional red flag ENT symptoms
- 7/10 were offered hearing aids, but only 2 accepted
- The average age of participants was 28 (range 15-77). A t-test showed no significant difference (p=0.28) between CR / NCR OAE groups.

Annual health check records were accessed for all 22 people with suspected hearing loss. Hearing loss was either not identified, or not actioned, in every single case



4. Conclusion and Next Steps

Hearing screening appears to be a better detector of hearing loss in people with learning disabilities than the annual health check and a change to practice is therefore recommended. Work is also required in improving referral rates, better communication with primary care providers, raising awareness of the capabilities of Audiology departments and the benefits of hearing aid provision. The study group have received funding to expand the project and phase two involves assessing the feasibility of screening being performed by non-audiologists, as well as direct referral without GP involvement.

The path to excellence

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