**Option to reduce ABR referral rates from NHSP**

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### Introduction

- Completed within first 4-5 weeks after birth
- All babies with no clear response must be referred for diagnostics by 44 weeks gestation or within 4 weeks of screen completion.
- "Ideally the screen should be completed before discharge from hospital", both AOEAs and AABRs.
- Where this is not achievable an outpatients appointment (OPA) is arranged.
- Change in equipment in 2015, referral rates for diagnostic ABR from NHSP significantly increased to an unsustainable level (suspected this was due to increased sensitivity to ward noise).
- A change in protocol was agreed where if AOAIEII and/or AABR were required this would be as an OPA.
- It is acknowledged it is preferable to complete the screen fully whilst an inpatient, due to the local 6 hour discharge target, this is difficult to achieve where AOAIE II or AABRs are required (based on minimum of 5 hours between AOAIE I and II).
- To investigate retrospectively whether the change in pathway was a success in reducing demand for neonatal diagnostic ABR tests (following the introduction of the new screening equipment).

### Methods

- Retrospective data analysis of diagnostic audiology neonatal referral rates
- Compare referral rates for same quarter each year (Aug – Oct) 2008 - 2021

### Results

- **Referral rate from NHSP for a 3 month period per year**

#### New Pathway

- **AOAE I Inpatient**
- **AOAE II Outpatient**
- **AABR Outpatient**

- **Upgrade kit**
- **New pathway introduced**

#### Existing kit/pathway

- **New kit/pathway**

### Discussion

- **New kit more sensitive to ward noise, resulting in sudden and unsustainable increase in ABR demand**
- **Change in pathway did not impact the coverage rate of NHSP and still met the KPI targets**
- **Potentially reduced parental anxiety associated with onward referral for diagnostic test**
- **Does this reduction warrant further investigation to NHSP recommended protocols?**

### Conclusion

New pathway maintains NHSP coverage with a steady referral rate for Neonatal Diagnostic ABRs; resulting in effective and efficient use of resources whilst reducing parental anxiety.