**Introduction & Background**

One in two of us will have a significant hearing loss in older life, and this can affect every aspect of communication and daily life. There is no cure, but people with hearing loss are offered a hearing aid. Little is known about the patient experience of using hearing aids so there is a risk they are prescribed to people who do not use them. People may stop using hearing aids because they find practical management and adapting to new sound difficult. For some, managing the aids is more difficult than managing hearing loss without hearing aids.

Patient Reported Experience Measures (PREMs) are simple questionnaires about specific conditions. An audiology PREM could be used to understand patients’ experiences of hearing loss and using hearing health services, and the efforts they make to manage their hearing. Audiology services vary throughout the UK and a PREM would provide us with more information about the experience of audiology patients.

**Aim:** To improve knowledge of adult patient experience of hearing loss and hearing services (audiology).

**Methods**

This research consists of three linked studies called work packages (WP). These WPs will run at parallel time points over the 3 years e.g. WP 3 implementation interviews will begin in year 1 alongside WP 1 and continue into year 2.

- **WP1**
  - Develop a conceptual model to explain how work of coping with hearing loss (including hearing aids) is experienced.
  - Conduct a systematic review using narrative synthesis.
  - Conduct a qualitative interview study (n=54).

- **WP2**
  - Develop a PREM tool based on themes arising in WP1.
  - PREM reliability and validity testing (n=300).
  - Evaluation of contrasting clinical help-seeking and non-help-seeking participants with hearing loss.

- **WP3**
  - Implement the PREM in contrasting clinical locations.
  - Examine potential for the PREM to lead to service changes.

The Sample is stratified to ensure we learn about the experience of hearing loss and using hearing aids (or not) throughout the life course. To do this, we have included:
- Young adults: transitioning from paediatric to adult services
- 30s-40s: those managing a career and family life
- 50s-70s: Noticing hearing loss symptoms for the first time
- 80s - end of life: Most likely to have hearing loss.

**Progress to date**

- Start date: 1st July 2022
- Interviews have been conducted with:
  - People with hearing loss (accessed via audiology sites and non-clinical routes (n= 15; ongoing)
  - Relatives/carers of people living with hearing loss
  - Clinicians.
- Coding of the data gathers has begun
- Narrative review
  - search strategy developed, search conducted, and full-text screening underway.
- PREM
  - Interviews with clinicians to get their opinions on implementing a PREM in practice. Tool to be developed once WP 1 is completed.
- Patient and public involvement contributors will continue to contribute advice, guidance and steering at every stage of the research process.

**Next Steps…**

- Complete the narrative review and continue conducting interviews
- Analyse interview data & develop conceptual model to understand the work of coping with hearing loss
- Continue working with PPI contributors
- Develop PREM to complement existing outcome measures in practice
- Continue interviews with clinicians about PREM implementation.

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