

BAA President Blog – 17th April 2023

Hi everyone,

I honestly believed that once I'd settled in as BAA president, things would calm down a little. But it just gets busier and busier, as myself and the rest of the board directors do more to represent the profession and influence those in a position to improve things.

The Scottish National Review of Audiology has finished, and the Chair of the Review is drafting the final report and recommendations. Several board directors have contributed to reviewing the current situation and making recommendations to improve services and support the professions, including training and education of the workforce, leadership and quality assurance. We look forward to seeing the Scottish government's response to implementing the recommendations.

I enjoyed attending Audiology Cymru in Newport recently and talking to Welsh colleagues. Wales has a proactive, collaborative network of audiologists, who presented some interesting work. The weather was particularly awful, but you can't have everything.

Back in England, we feel that we have increased our voice with NHS England's leaders. We have now been invited to join the CSO's steering group and its subgroups to look at Improving Quality of Paediatric Audiology provision in England. We hope to influence the issues we have raised with them previously, such as the audiology workforce crisis, lack of NHS-provided training post qualification, and lack of a consistent national quality assurance approach. Although this work is initially focussing on paediatric audiology, much of the work will impact all audiology, and this is a real opportunity for us to influence that.

Related to this, you may know that NHS England's Diagnostic Transformation Programme plans to perform a "stocktake" of all Audiology services this summer. Prior to this, we understand that a paediatric survey/mini stocktake will be sent out by NHSE's regional Lead Healthcare Scientists - so please complete these as honestly as possible, as we believe the warts-and-all data will help NHSE understand the issues we know you are concerned about, such as staff shortages and waiting lists affecting the capacity to focus on quality.

Within BAA, we've continued to get out and about and collaborate with others. We've caught up with BSA's chair and vice-chair, attended BCIG conference and University careers events, and we continue to be a voice for our members at NHS events and meetings with the HCPC, ACHS, ACS, and we want to improve how we work with the Hearing Loss and Deafness Alliance on issues that affect patients more widely. We remain committed to continuing our core work to support the profession with CPD resources and guidance, for example. I know many of you are keenly waiting for our Scope of Practice document. This has been a significant piece of work, but excellent progress has been made, and we hope this will be out for consultation by the summer.

Our updated Onward Referral Guidance has now been published, following endorsement from our colleagues at BSHAA, so please take a look - there are a few subtle but significant changes from the previous version:

The audience of the document has changed, it does now not include GPs in the audience, only audiology professionals seeing adults for direct referrals.

The definition of 'conductive' no longer takes into account 4kHz bone conduction levels (due to the BSA removing it from the PTA doc)

The asymmetrical definition now makes it clear that this is a 15dB difference in air conduction values, not bone conduction.

The referral for bilateral worsening thresholds in existing hearing loss has been removed due to lack of evidence.

We are prioritising what members told us is important to them. You will soon see the Priorities in Audiology document we produced after analysis of discussion and feedback at our strategic workshops last year. We will continue to do our best to keep the profession moving forward. This means there hasn't been a lot of time for rest for me and Board over the last few months, but I know that many of our members are feeling similarly overstretched, as demands increase and capacity does not. Sometimes it's hard to remember why we started in this field, but hopefully, like me, being in a patient centred profession means you can find the joy regularly. For me, this happens when I know I've done a really good job with a complex patient, ticked something dull, but necessary, off my to-do list, or had a belly laugh with my lovely colleagues. Personally, I find the occasional pint of IPA, and some live music and dancing helps too!

Stay joyful, and stay in touch with us at admin@baaudiology.org

Take care

Sam Lear

President