

# Health Select Committee

A meeting of Health Select Committee was held on Monday, 12th January, 2009.

**Present:** Cllr Mrs Ann Cains (Chairman), Cllr Jim Beall, Cllr Cains (vice Cllr Baker), Cllr Julia Cherrett, Cllr Kevin Faulks.

**Officers:** Fiona Shayler, Judith Trainer (LD);

**Also in attendance:** Linda Henerty (South Tees PCT); Des Robertshaw (Head of Audiology, University Hospital James Cook).

**Apologies:** were submitted on behalf of Cllr Baker, Cllr Cockerill, Cllr Mrs Nesbitt, Cllr Sherris, Cllr Mrs Walmsley.

## 1 **Declarations of Interest**

None

## 2 **Draft Minutes - 15th December 2008**

The minutes of the meeting would be considered in full at the next meeting.

## 3 **Review of Audiology**

Members of the Select Committee met with Des Robertshaw and Linda Henerty at the James Cook University Hospital and were provided with a full tour of all areas of the audiology department.

Information was provided during the site visit and a full meeting was held afterwards.

Information was provided on the customised digital hearing aids that were provided to patients. The new digital technology measured sensitivity to different pitches and enabled amplification to be matched individually. Referral to final fitting would take place over 2 to 3 separate visits. It was felt that this gave users time to make decisions and concentrate during the final fitting rather than providing a one stop shop approach. The testing could also detect other hearing related illnesses as part of the process.

It was stated that any patients who were having problems/difficulties with their hearing aid could turn up without an appointment at James Cook and would be able to see an audiologist, although waiting times may vary. This service was provided Monday-Friday, 2 sessions per week were also held at University Hospital North Tees (UHNT). Battery/equipment replacement was also available at the Lifestore in Middlesbrough, Lawson Street Medical Centre in Stockton and UHNT, as well as other establishments. In addition, there were a range of clinics in Lawson Street Medical Centre and UNHT (details of which had been previously circulated to the Committee). All locations were linked to a central computerised database. Des Robertshaw stated that he favoured the provision of services in a community setting.

Information was provided on cochlear implants. It was stated that the success rate was high, a high level of aftercare was provided to include speech

recognition. James Cook was responsible for the whole of the North of England.

James Cook offered advanced audiology services for patients with balance problems, Tinnitus, psychological distress from lack of hearing etc. James Cook were the specialists for the region and offered a specialist balance room with balance platform and held three clinics per week.

Discussion was held on the reasons why there had been long waiting lists in the past. It was stated that this problem had now been resolved and that the Audiology Department were now working within the 18 week care pathway. However, it was felt that the public perception that there were long waiting lists might still deter people from coming forward.

In respect of the changeover from analogue to digital hearing aids, Des Robertshaw explained that a decision had been taken not to commission the changeover of all hearing aids immediately however, all new hearing aids being fitted were digital.

A patient would not be eligible for a new digital hearing aid if they had been fitted with an analogue aid within three years. After the three year period, if a patient was tested and their hearing had not altered they would retain their analogue hearing aid; if there had been a change in their hearing then a digital hearing aid would be fitted. Repairs were still carried out on analogue aids but no replacements offered.

Des Robertshaw pointed out that some analogue hearing aids were of a very high standard, particularly those that had been customised and patients were used to them.

The 18 week care pathway also applied for changeover from analogue to digital where there was a clinical justification.

There were three tiers of screening services for children:-

Tier 1 - Neonatal screening provided by the hospital at birth

Tier 2 - Community paediatric audiology provided by local PCTs

Tier 3 - Specialist diagnostic service

The Committee agreed that further information on children's screening in Stockton on Tees needed to be obtained.

Des Robertshaw concluded that he would like to see more provision in a community setting. He felt that access to good quality hearing provision may attract more clients and therefore the service would benefit from a more responsive commissioning structure. He was also opposed to recent moves from the Government for elements of the service to be carried out by less skilled staff.

The Chairman thanked the Audiology Team for the very helpful tour and information.

CONCLUDED that the evidence received be noted.

#### **4 Work Programme**

The Scrutiny Officer would be contacting Members by email to organise visits to the various deaf clubs, as part of the evidence gathering for the review of Audiology. The meeting on 23rd February, 2009 would be to discuss conclusions and recommendations for the final report.

CONCLUDED that the report be noted.

#### **5 Chairman's Update**

It was stated that the Committee would soon be consulted on the Billingham Headway Development, a proposal to relocate six general practices in Billingham into a new, purpose built building close to their existing premises and near to Billingham Town Centre.

Members would also be consulted on the proposal to commission a Tees wide community based arrhythmia service.

CONCLUDED that the Chairman's update be noted.