

Outstanding Care,
Compassionate People,
Healthier Communities



Sherwood Forest Hospitals
NHS Foundation Trust

Audiology Services

An Individual Management Plan
for your hearing loss



Welcome to Audiology Services

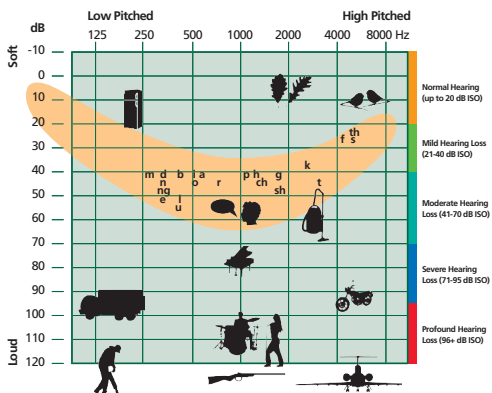
You have been referred for a hearing assessment which we have done today.

The results of this are explained below along with the problems this may cause.

The chart (right) will help you get a general view where specific speech and environmental sounds lie. From top to bottom, you can see that sounds are getting louder, and from left to right, the frequency of each sound is getting higher in pitch.

Your audiologist has plotted your audiogram on the chart (right). Any sounds above the line, may be difficult for you to hear. Sounds below the line are usually audible to you.

Date of hearing assessment:



• Frequency and intensity of the sounds represented by the letters shown are an approximation based on American English.

• Sources: World Health Organisation; American Academy of Audiology.

Your audiogram classifies your hearing loss primarily as:

■ Normal

You can hear quiet sounds of less than 20dBHL.

■ Mild

You often have difficulty following speech especially in noisy situations. This type of loss is often noticed by family first rather than yourself.

■ Moderate

You often have difficulty following speech and other quiet noises. Amplification can be very successful for this loss but you also need to use good hearing tactics (see pages 5 and 6 for more information).

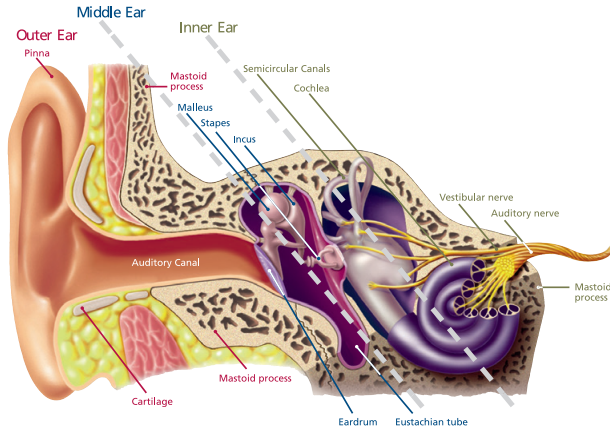
■ Severe

You are unable to hear speech even in quiet surroundings and do not hear general noises such as traffic unless it's loud. Amplification can be very successful for this loss but you need to use good hearing tactics (see pages 5 and 6 for more information). Lip reading classes may also be useful for you.

■ Profound

You are unable to hear most sounds unless really loud. Amplification is often useful but you will need to rely on good communication tactics including lipreading, subtitles on TV and possibly sign language.

Anatomy of the ear



Sound waves travel along the ear canal to the eardrum, and cause it to vibrate. The eardrum passes the vibrations through the ossicles (middle ear bones) and into the inner ear (cochlea).

Inside the cochlea, there are thousands of tiny hair cells. The hair cells change the vibrations into electrical signals that are sent to the brain via the auditory nerve. The brain tells you that you are hearing a sound and what that sound is.

Causes of hearing loss

Hearing loss falls into two broad categories: the first is congenital, which is hearing loss that is present at birth and caused by factors like genetics, infections contracted during pregnancy or birth complications. The second is acquired, which is hearing loss that occurs after birth, and is the result of factors like damage to the ear or aging.

Although we in fact 'hear' with our brains, hearing loss happens when one part of the ear - the outer, middle or inner ear - is damaged or unable to function properly, and cannot conduct sound signals to the brain normally.

Causes in the outer ear

This can include problems such as wax build up, infection in the ear canal and atresia (closure) of the ear canal.

Causes in the middle ear

Inflammation, fluid behind the eardrum, perforation of the eardrum and otosclerosis (a stiffening of the bones in the middle ear) are the most common middle ear disorders. Some outer and middle ear problems can be effectively rectified with medication or surgery.

Causes in the inner ear

This is where most hearing problems arise. The most common cause is the natural aging process (presbycusis), but loud noise, some types of medication or skull fractures can also affect hearing. Fine hair cells in the inner ear (cochlea) become damaged and affect the transmission of signals to the auditory nerves. Usually, inner ear hearing loss cannot be addressed medically but can be corrected with hearing aids.

Facts about hearing loss

An estimated 1.1 billion people around the world are affected by hearing loss - that's about 16% of the world's population and around nine million people in England have a hearing loss.

- Approximately one in every 1000 infants have a hearing loss.
- Approximately one in three people over 60 have a hearing loss.
- Studies show that around 65% of people with hearing loss experience mild hearing loss, 30% moderate and 5% severe or profound hearing loss.

Agreed needs | We have agreed that my hearing needs are:

Completed actions:

Planned actions:

Management of your hearing | What happens next?

☐

We advised you on hearing tactics

☐

We discussed assistive listening equipment

☐

You do not need / want a hearing aid

☐

You wish to try a hearing aid:

☐ Right ear

☐ Left ear

☐ Both ears

The choice of hearing tip to help with hearing in your situation is:

☐ Slim Tube

☐ Earmould

Your hearing aid will make things a bit louder for you so you don't have to listen as hard. It should help you hear when people are speaking to you and give you more confidence.

Your hearing aid will not give you perfect hearing but it will certainly help in many situations. In noisy places, background noise will still be there as it is for someone who has normal hearing. This will just take a little time to adjust to.

You will be offered a review appointment following the fitting of your hearing aid to resolve any issues you may have.



There are a number of things which you and your family and friends can do to help you hear well. Below are some helpful hints and tips to ease communication.

Recognising the limitations of a hearing aid

There are two types of hearing problems - one of loudness and one of clarity. A hearing aid can make things louder but your hearing loss limits how clear the sound is.

You should notice an improvement with a hearing aid as it increases the volume of speech but it won't return your hearing to normal.

Communication strategies - being assertive with your hearing loss

These are methods of coping with difficult listening situations, by planning ahead, manipulating the environment and hearing conversations. Opposite are some examples of how to help the situations that may arise.

Manipulating the environment

It is important to make those around you aware that you have a hearing loss and encourage them to become more aware of visual cues in conversation with you. Remember that noisy places such as busy streets and large shops may be more difficult to communicate in because of the loud background noise. If you do miss parts of a conversation, repeat the bits you have heard back to the speaker then ask them to clarify what you have missed.

This shows the speaker that you are listening to them but missing some words due to your hearing loss.

Tips for family and friends to help you hear

Don't shout

You should keep your voice at a normal level. It is uncomfortable for a hearing aid user if you shout and it looks aggressive.

Don't turn away

Find a suitable place to talk with good lighting and away from noise and distractions.

Don't cover your mouth

Speak clearly and use normal lip movements, natural facial expressions and gestures.

01

Get my attention

Before you start to speak you must ensure you are in the same room as me and I have your full attention.

02

03

Don't speak too fast

If I don't understand what you are saying you need to try and slow down your speech.

04

05

Face me

Always turn and face me as it helps me pick up any visual clues you may give.

06

07

Get to the point

Use plain language and don't waffle.

Access to work

If you're disabled or have a physical or mental health condition that makes it hard for you to do your job, your employer should make reasonable adjustments to make sure you're not substantially disadvantaged when doing your job. If the help you need at work is not covered by your employer making reasonable adjustments, you may be able to get help from access to work.

For more information:

Telephone: **0800 121 7479**

Textphone: **0800 121 7579**

Monday to Friday from 8am to 6pm

BSL video relay service is available.

Call to ask for information in Braille, large print or audio CD.

Web: **www.gov.uk/access-to-work**

RNID

RNID is a charitable organisation working on behalf of the UK's 9 million people who are deaf or have hearing loss. They provide information and support for people with hearing loss.

RNID information line:

9 Bakewell Road, Orton Southgate, Peterborough, PE2 6XU

For more information:

Telephone: **0808 808 0123 (freephone)**

Textphone: **0808 808 9000 (freephone)**

Fax: **020 7296 8199**

SMS: **0780 0000 360**

Web: **www.rnid.org.uk**

Email: **information@rnid.org.uk**

Twitter page: **@rnid**

Sherwood Forest Hospitals NHS Foundation Trust

Audiology Services
Newark Hospital
Boundary Road
Newark
Nottinghamshire
NG24 4DE

Telephone: **01623 672383**
Email: **sfh-tr.Audiology@nhs.net**
Textphone: **0792 0206720**

Audiology Services
Clinic 8, King's Treatment Centre
King's Mill Hospital
Mansfield Road
Sutton-in-Ashfield
Nottinghamshire NG17 4JL

Telephone: **01623 672383**
Email: **sfh-tr.Audiology@nhs.net**
Textphone: **0792 020672**

Adult Deaf and Visual Impairment Service

Welbeck House
Darwin Drive
Sherwood Energy Village
New Ollerton
NG22 9FF

Telephone: **0300 500 80 80**
Mobile: **07342 063969**
Email: **advise.duty@nottscg.gov.uk**

C2Hear, Interactive multimedia videos on hearing aids and how to hear well:

www.c2hearonline.com

Online auditory skills training:

www.hearingsuccess.com

Further sources of information

NHS Choices: **www.nhs.uk/conditions**
Our website: **www.sfh-tr.nhs.uk**

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: **sfh-tr.PET@nhs.net**

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.