

Response to Audiology Recommendations for HOSC

Further to HOSC presentation and discussion on the 6th March 2025, 3 recommendations were made. Below represents the ICB's response to these.

Recommendation 1: For further information to be provided around the level of need for audiology services (including amongst children), and on supply at the local and acute levels. It is recommended that further resourcing is sought to tackle waiting lists and prioritisation, particularly around Community Diagnostic Centres.

The ICB is currently supporting a national review of audiology services for paediatric patients. Therefore, we are requesting the information relating to demand, service delivery and capability come from that independent report once published. This avoids any prejudice of information. However, participating in this review, it included a visit OUH as well as the other NHS Trusts. Notably, a proposal has been developed to improve access, capacity and resourcing for these services. This would affect both adult services and paediatric services. Therefore, we ask this information is shared once an outcome from the proposal has been reached.

In addition, the ICB has supported the OUH in bidding for capital funds that would provide key estate and equipment capabilities, necessary to improving access and capacity for paediatric services.

Furthermore, the ICB is currently working with community providers and the OUH to support a safe clinical model where some more patients could be supported by community providers and increase overall capacity while also reducing waiting times for such services in the hospital. This is being led by the OUH and supported by the ICB as well as community providers.

Recommendation 2: For improvements to be made around communications with the wider public to increase awareness of available support from audiology services.

The ICB support this recommendation and is liaising with all its. We are working with providers to engage with primary care colleagues and support any local marketing they may do to inform and support patients, including making information accessible to all. However, we are also mindful as to not cause an aggressive marketing scheme that drives inappropriate use of services.

Recommendation 3: That Community Audiology is brought onto the same Electronic Patient Record system as the rest of Oxford University Hospitals NHS Foundation Trust.

The ICB has considered this and supports the intention and recommendation. However, this is not viable as many providers have autonomy to use their own system – both NHS Trusts and independent providers. The demand for providers in Oxfordshire to opt to the OUH system, would be at the risk to the rest of their provision nationally and to other systems.