



Quality Standards for Tinnitus Services

Report on the 2024 National Audit of Audiology Services in Wales

Version 1

Endorsed by	Date
Welsh Scientific Advisory Committee	10 th March, 2025

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Purpose of this document

The purpose of this document is to provide an overview to the Welsh Government on the performance of the Audiology Services in Wales, as measured against the Quality Standards for Tinnitus Services Version 1.6.

Background

Following the successful implementation of the Adult Rehabilitation and Paediatric Quality Standards in Wales, it was felt that Tinnitus Services would benefit from a similar approach in order to maintain an equitable, high-quality service across Wales.

ASSAG (the Audiology Standing Specialist Advisory Group of the Welsh Scientific Advisory Committee) agreed in 2018 for Paediatric and Adult Quality Standards audits to take place in year 1 and year 2 followed by Tinnitus and Vestibular Quality Standards audits in year 3. Work began developing Tinnitus and Vestibular Quality Standards in 2019. This involved joint working with representatives leading in this area of service delivery across Wales. The aim was to develop a comparable self-assessment and external audit process for these specialised areas of Audiology.

A Working Group was set up which included senior Audiology clinicians and managers from across Wales. The working group's main objective was to jointly develop Quality Key Performance Indicators for Tinnitus Services in Wales.

The audit process

In March, April and May 2024, all Audiology Services in Wales were audited using Version 1.6 of the Quality Standards for Tinnitus Services.

The services were:

- Aneurin Bevan University Health Board (ABUHB)
- Betsi Cadwaladr University Health Board (BCUBH)
- Cwm Taf Morgannwg University Health Board (CTMUHB)
- Cardiff and Vale University Health Board (CVUHB)
- Hywel Dda University Health Board
- Powys Teaching Health Board
- Swansea Bay University Health Board

The audits for Powys Teaching Health Board were submitted by 1 other Health Board that currently provide the Tinnitus for North Powys. The Powys service was therefore assessed as part of the audit for Powys Teaching Health Board and Betsi Cadwaladr University Health Board (BCUHB).

Steps in the process:

- Audiology Heads of Service were asked to complete a self-assessment for each of their services; these were forwarded to the audit teams by the Audit Coordinator prior to the audit visits.
- Each audit team was led by a senior audiology clinician from an external Health Board. Local patient representatives were invited to attend each audit. An independent, auditor, recruited from Tinnitus UK, also attended every audit to ensure consistency and external (non-NHS) scrutiny in scoring.
- Following audit visits, the audiology lead auditor, and Tinnitus UK representative collaboratively produced the assessed service performance report. Summary reports were sent to the Chief Executive of the respective Health Board and Head of Service via the Audit Coordinator.

Actions completed

- March – April 2024: Self-audit for each service against the Quality Standards for Tinnitus Services Version 1.6, using the Quality Rating Tool (QRT).
- March - May 2024: Visits by external audit teams, organised and administrated by an Audit Coordinator. Full details can be found in the 'Arrangements for the External Audit of Paediatric & Adult Audiology Services against the Quality Standards for Paediatric Audiology, Adult Hearing Rehabilitation, Tinnitus and Balance Services' Draft 5.2
- July 2024: Brief individual summary reports for each Health Board audited were sent to the Chief Executives (copied to Heads of Services and the Associate Audit Coordinator) informing them of the outcome of the audit visits for sites within their own Health Board.

This All-Wales audit report has been provided to ASSAG for approval prior to submission to the Welsh Government.

The Standards

Services were audited against the following 7 standards:

1. Accessing the Service
2. Communication and Information Provision
3. Tinnitus Assessment
4. Tinnitus management
5. Clinical Skills and Expertise
6. Collaborative working
7. Outcomes and Service Improvement

There were 27 individual criteria. Low scoring criteria were judged as those scoring less than 2 on the Quality Rating Tool (QRT).

0 = No elements of the quality statement are met (or not evident)

1 = Few elements of the quality statement are met

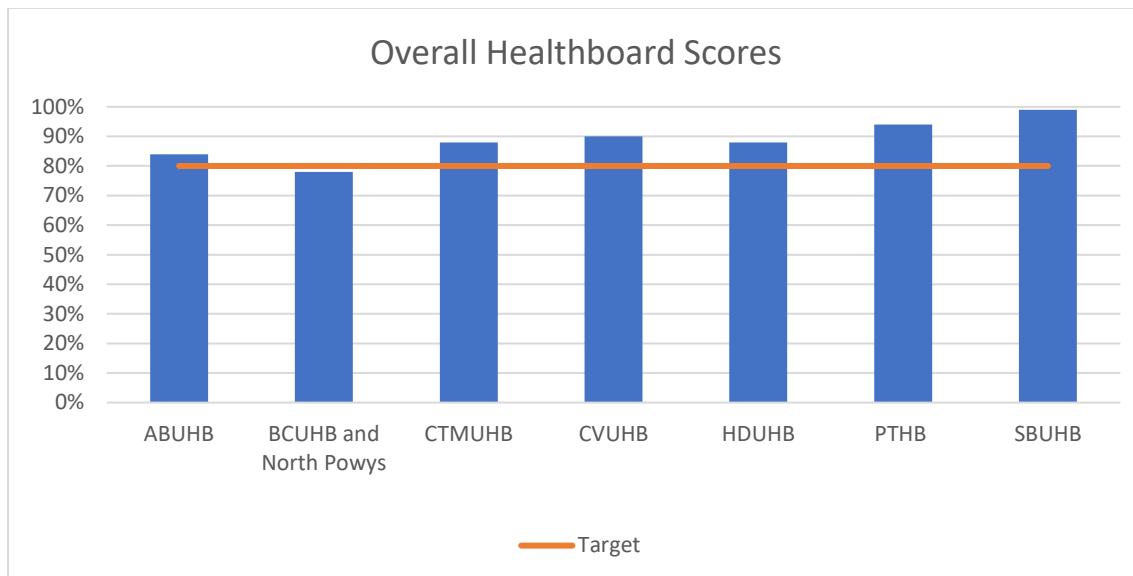
2 = Meets around half of the elements of the quality statement criteria

3 = Almost fully meets the quality statement criteria

4 = Fully compliant with good to best practice as indicated by quality statement criteria

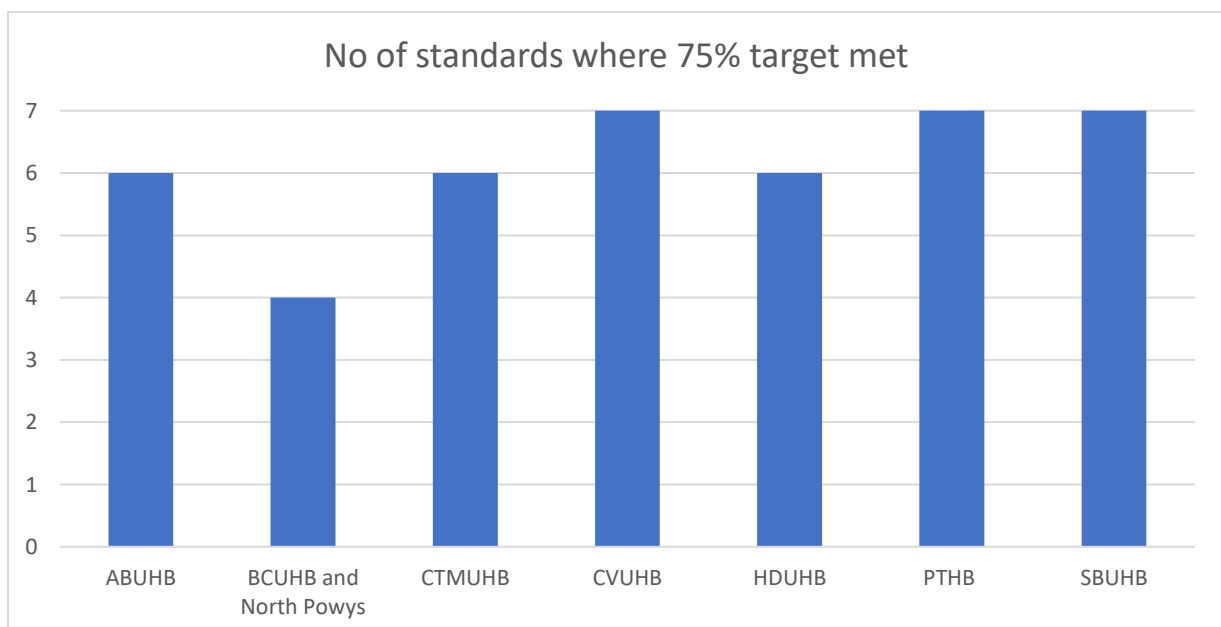
Summary of Outcomes and Analysis of Audit Results

Overall Target



Graph 1. Six of the seven services in Wales exceeded the overall compliance of 80%

Individual Standards



Graph 2. Five out of the seven services met, or exceeded, the compliance target of 75% for each individual standard.

For five out of seven standards the compliance of 75% was met by all services.

These were:

Standard 2: Communication and Information Provision

Standard 3: Tinnitus Assessment

Standard 5: Clinical Skills and Expertise

Standard 6: Collaborative Working

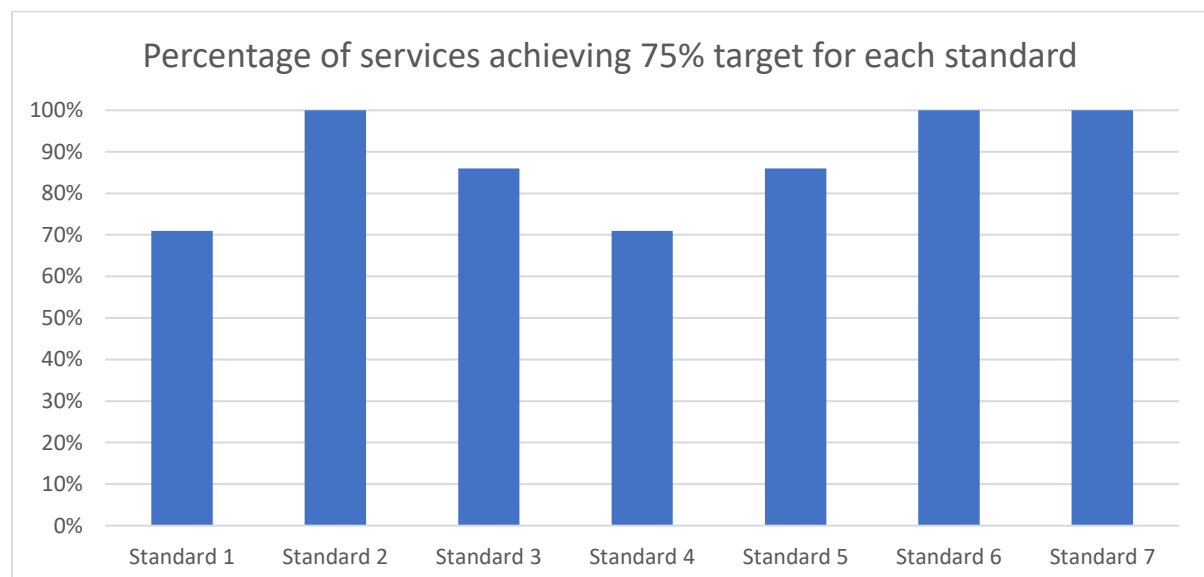
Standard 7: Outcomes and Service Improvement

For all other standards, four services failed to meet the 75% target.

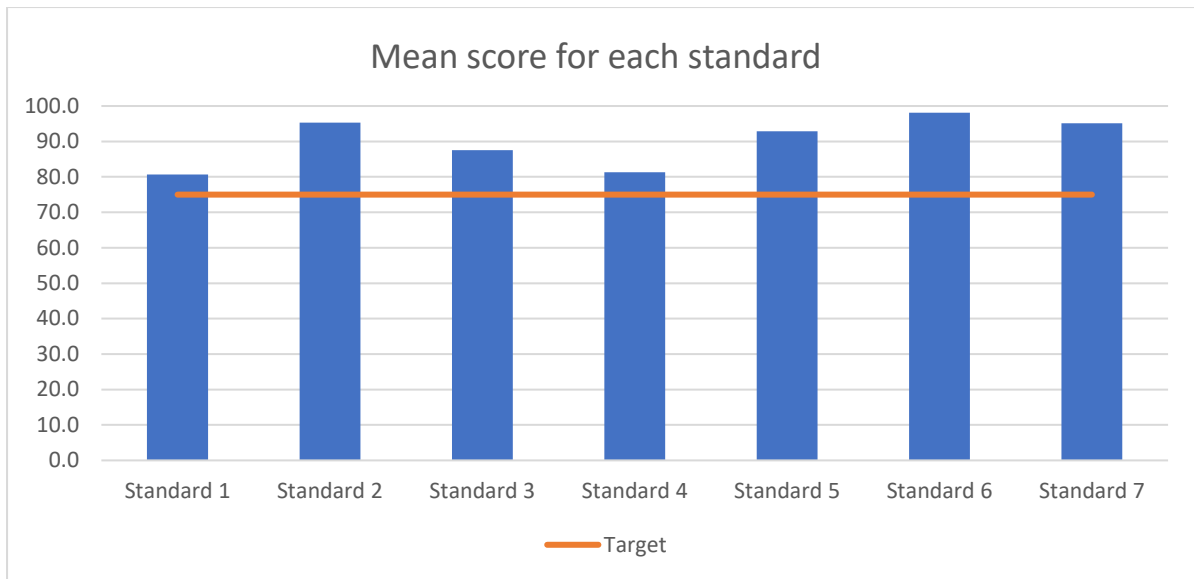
These were:

Standard 1: Accessing the Service - Cwm Taf Morgannwg University Health Board and Hywel Dda University Health Board

Standard 4: Tinnitus Management – Aneurin Bevan University Health Board and Betsi Cadwaladr University Health Board



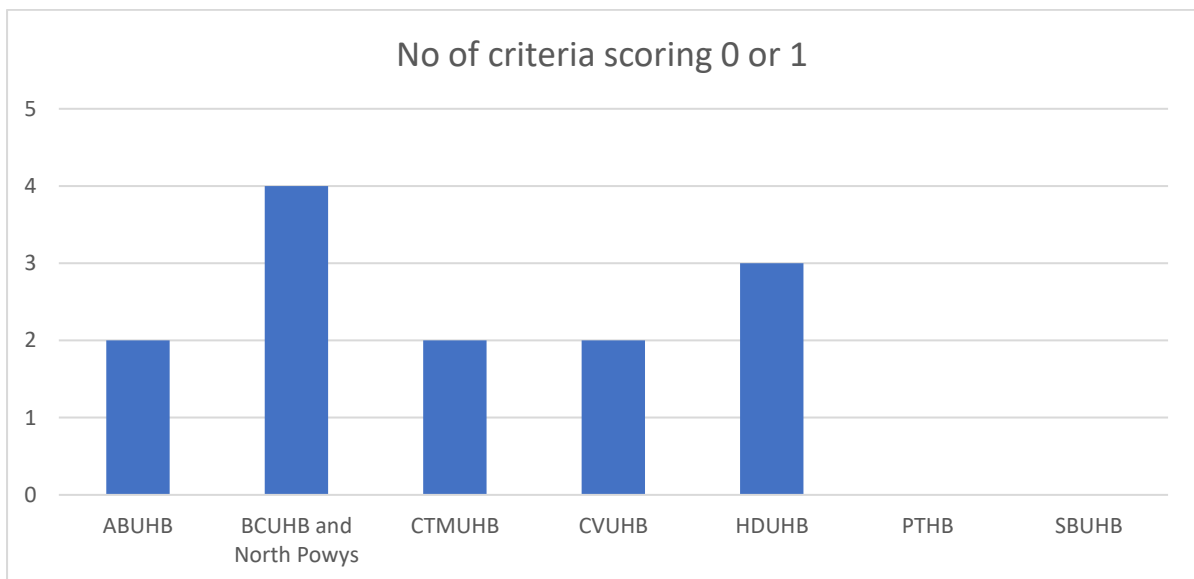
Graph 3. The percentage of services that met compliance target for each standard.



Graph 4. Mean scores for each standard across Wales.

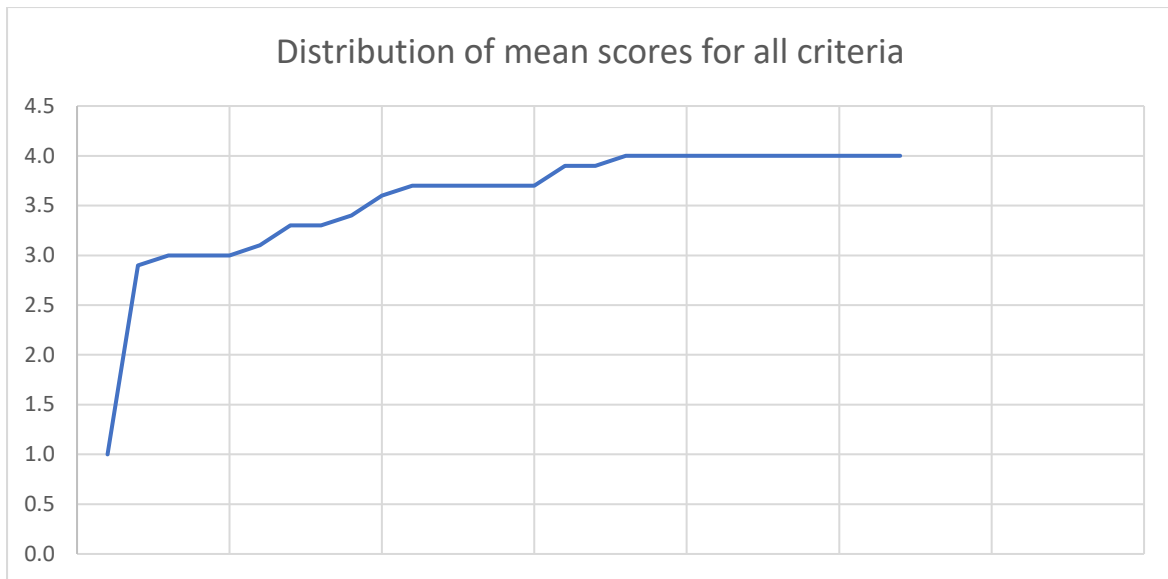
Individual Criteria

27 individual criteria are included in the audit. A score of 0 or 1 is considered a low score. Most services had small numbers of low scoring criteria.

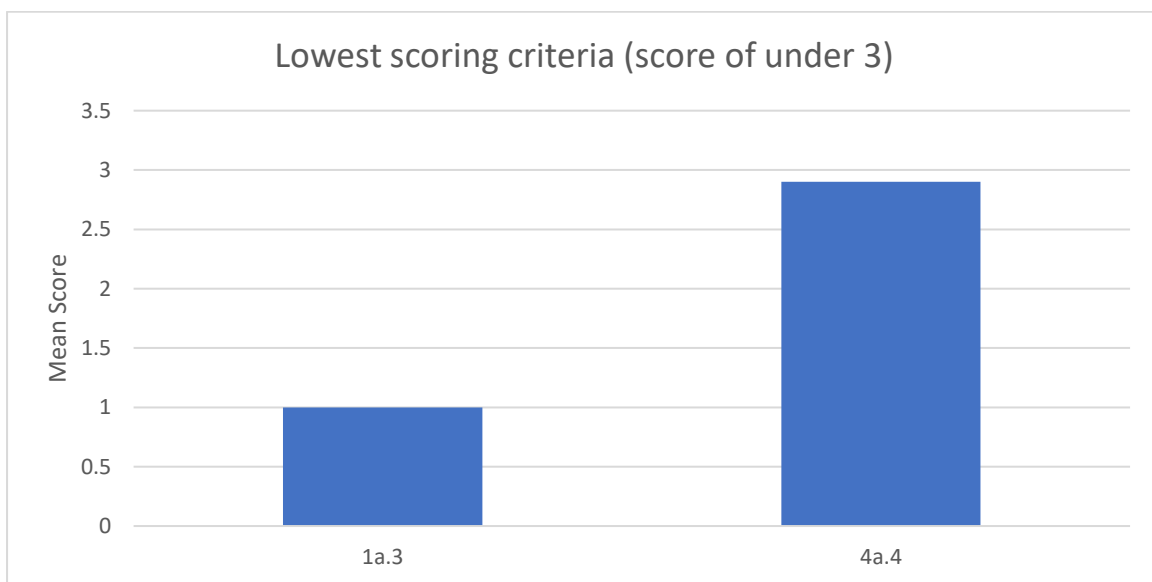


Graph 5. Number of low scoring criteria for each service

Across Wales, out of a total of 27 criteria, 10 criteria had a mean score of 4, the maximum possible. Of the lowest scoring criteria, the lowest score across services was 0 for 4 services for 1a.1 (*Routine new referrals, for tinnitus assessment & management options are offered an appointment within 14 weeks of referral for all patients*) and a score of 0 for 1 service for 4a.4 (*95% of patients reviewed have recorded outcome measures*).



Graph 6. Distribution of mean scores across Wales from all criteria



Graph 7. The lowest scoring criteria

The lowest scoring criteria were:

- 1a.1 Routine new referrals, for tinnitus assessment & management options are offered an appointment within 14 weeks of referral for all patients
- 4a.4 95% of patients reviewed have recorded outcome measures.

Areas of good practice

The audit report also noted areas of good practice which allows for sharing of good practice across Wales. Areas where good practice was commended were:

- 1a.1 – Self-referral form online
- 1a.2 - Access to ACT for patients willing to attend.
- 2a.3 - Patients are given a comprehensive Tinnitus Handbook to work through in the appointment.
- 4a.1 - Group information/educational sessions are offered when clinically appropriate to help address the large number of people waiting for an appointment.
- 3a.1 - Sharepoint being used by BCUHB Audiology is extensive and informative.
- 4a.1 - Provided evidence of detailed history and journal entries; individual management plans.
- 5a.3 - Audiologists involved in Tinnitus Management meet frequently to discuss case studies.
- 6 - Really good specific date for each clinician regarding 3rd sector referrals, identifying training needs.
- 6a.1 - Good working relationships with collaborative partners. Hearing Care Collaborative Group and Joint working group particular and well established and beneficial for all sectors involved.
- 6a.2 - Good evidence of onward referral to various external services. E.g., ACT, care and repair.
- 7a.a – Constant, year round patient satisfaction surveys.
- 7 - Use of 'grrr' forms was a good idea but also included more formal ways of addressing staff satisfaction. Stakeholder Engagement Framework was exceptional. SBAR on approach to innovations was excellent.

Comments on Interpretation of Outcomes

The 27 individual criteria which make up the seven standards have not been weighted in terms of their relative importance. Therefore, technically the overall scores should be regarded as indicators of the quality of individual services rather than definitive measures. There is a risk that a single criterion with a large impact, for example access times, can have significantly poor performance, but not be highlighted using this methodology. Therefore, the results of these audits should not be taken in isolation.

The audit model adopted in Wales continues to include measures to improve the consistency of scoring (e.g., rotation of auditors, review meetings of participants and clarifications of criteria to reduce ambiguities). The provision of standardised evidence requirements is included within the standards document, and scoring guidance used for the 2024 audit aims to align the process across sites and across the different audit teams.

Comments on Compliance with Targets

The compliance target for 2024 was set at 75% for each individual standard and 80% overall. All services except for Betsi Cadwaladr University Health Board met the compliance target of 80% overall. Five out of seven services met, or exceeded, the compliance target of 75% for each individual standard.

General Recommendations

All services scored low for criteria 1a.1, which states routine new referrals, for tinnitus assessment & management options are offered an appointment within 14 weeks of referral for all patients. No services were fully meeting this at the time of audit visits, mostly due to post-Covid backlogs of patient waiting to be seen.

A method for sharing the good practice highlighted in this report should be developed between services across Wales prior to the next Audit round.

Feedback has been gathered from all auditors and Heads of Service to provide information on any improvements needed for future rounds of auditing.

Report prepared by Joanne Goss, Tinnitus Quality Standards Audit Co-ordinator. This full audit report has been provided to ASSAG for approval prior to submission to the Welsh Government. We are grateful to Tinnitus UK for their participation in the 2024 audit process.