

Personalised long-term follow-up of cochlear implant patients using remote care

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Auditory Implant Service

The problem

vastly increasing patient numbers

current care pathway is not patient-centred

why can't we just stay the same?

funding

same number of patients, same level of service treat many more patients with streamlined optimised service

We need to change ...

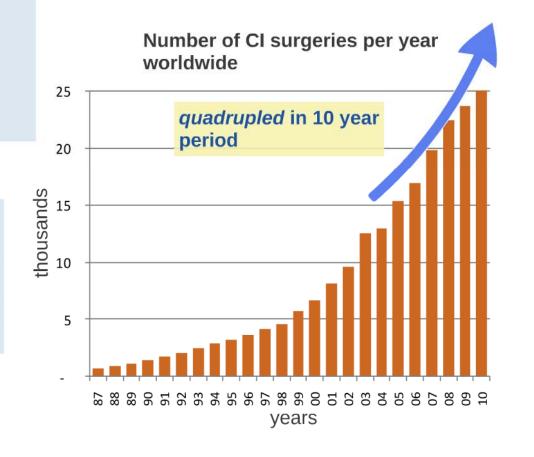
"when I go back there, it is a 2 hour drive, I don't have time"

"it would have been good to have something where I could have done a quick test at home to say it's okay, it's not okay"

Vastly increasing patient numbers

number of pensioners projected to rise by 28% in 20 years

95% of deaf adults in the UK don't have implants >53,000 in 2014



Patients want to take more control



"I would love to be able to play with the maps"

"when I go back there, it is a 2 hour drive, I don't have time"

patient preference

"it would have been good to have something where I could have done a quick test at home to say it's okay, it's not okay" "Yes like an Iphone, like your iPhone, you understand the iPhone so well, so easily"



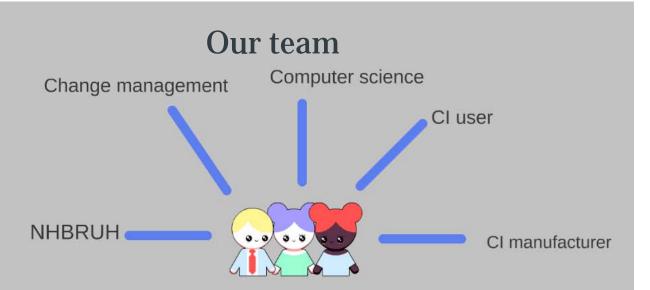
One solution – personalised remote care



Think about these patient needs ... which could be done remotely?







- 1. remote and self-monitoring
- 2. self-adjustment of device
- 3. online/smart phone intervention package

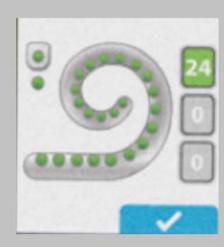
1. remote and self-monitoring

speech perception check and long-term follow-up questionnaire





impedance check





2. self-adjustment of device



3. online/smart phone intervention

package

rehab

music

advice



goal-setting

reminders

trouble-shooting

training



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Advantages to patients



less travel time, expense, disruption (time off work, childcare etc) for routine appts: appts only scheduled when needed



increased confidence, empowered to manage own hearing health



- ability to check hearing at home and take action if worse
- ability to troubleshoot equipment at home and order correct spare part

Outcomes we will measure

- patient empowerment
- · clinician and patient preference
- speech perception
- · use of clinic resources

Ask us how it went in July 2016!

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