

Newborn Hearing Screening Programme – England

The NHS Newborn Hearing Screening Programme (NHSP) is currently working with all English Primary Care Trusts, in consortia. We are working to ensure that plans are in place so that all newborn children, in England, can be offered a hearing screen by 2005. Currently 80 consortia are trained and the programme covers about 75% of births in England. Phase 4 of NHSP will conclude in March 2005 (with two phase 4 sites being re-scheduled for early in the new financial year). An additional 40 consortia will be rolled out in the final phase between April and October 2005. Each consortia planning their implementation have met with members of the national team in order to review their current service provision and have undertaken that audiology, education and social services have development plans in place to meet the needs of newly identified hearing impaired children and their families. Where concern has been expressed this has led to identification of issues and the development of action plans to resolve major issues is currently being addressed. A contributory factor to the concern is the capacity and nature of commissioned audiology (and other services) in London. We are hoping that this will be partly addressed over the next year by working in partnership with Public Health leads in London. A new post has been recently filled within the South West London Strategic Health Authority to facilitate this partnership.

The national implementation of a comprehensive newborn screening IT system (eSP) has been successful in meeting deadlines and user expectations. We are in dialogue with the National programme for IT (NPfIT) in order to ensure that this system will meet all the requirements necessary to integrate into new NHS IT developments and ensure continuity of support.

Using the information in eSP shows that of those babies eligible for the screen 99% were offered screen and from that figure >95 % of those offered took up the screen. In recent months 1.8% of well babies screened were referred for audiological assessment and about 2.5% overall.

Excellent and hands-on screener training is at the core of the rollout and this has been rated as 'highly satisfactory' by the systematic feedback that we have obtained. NHSP has developed a National Vocational Qualification for screeners, and is now working with sites to look at how to use this experience to devise further training (possibly NVQ standard). We do not feel that radically changing the training is an option in meeting the very stringent timetable over the year.

Training for audiologists in assessment techniques for very early identified deaf children has been commissioned and over 100 paediatric audiologists have benefited from this training. We continue to provide updates on NHSP for audiologists and teachers of the deaf and are working with Higher Education Institutes to provide appropriate courses to meet their needs.

The coming year will see more emphasis on the safe roll out of remaining consortia and the continued development of the IT that supports the process. We will continue to develop realistic standard setting, quality management and quality assurance for the partnerships and processes that have been successful in delivering a high quality newborn screening programme. The programme is on target to have all areas of England working with NHSP and screening all babies by 2005/6, provided that there is appropriate continued funding and adequate recruitment of staff. Phase 5 areas will continue to need more planning concerning organisational, infrastructural and structural work prior to the introduction of newborn hearing screening (this is exacerbated as we cannot delay sites to later phases).

Anne Stevenson, NHSP Operations Manager, 14th March 2005