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4th June 2026

[REDACTED]

Dear Sir/Madam

Freedom of Information Act (FOI) 2000 - Request for Information Reference: Routine
NHS Adult Audiology Services

I am writing in response to your request for information under the FOI 2000.

I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold some of the information you have requested. A response to each part of your request is provided below.

Home, Community, Hospital.

FOI Request / Question	Question Response	Is there an exemption?	Exemption	Exemption Details
<p>1. Length and review structure of the routine adult audiology pathway: a) Where hearing aids are fitted, please state the standard review point applied within the commissioned routine adult audiology pathway used by the Trust, expressed as the number of months from the date of hearing aid fitting (for example, 36 months). b) Where a defined review point is used, please describe what normally happens at that point under the commissioned pathway, including: • Whether patients continue on the same pathway with ongoing aftercare where reassessment is not clinically indicated Or • Whether reaching the review point automatically ends the pathway and triggers reassessment. c) Please state whether the commissioned pathway used by the Trust defines a maximum time limit for a routine adult audiology pathway (measured from the date of hearing aid fitting) at which point a reassessment and new pathway are automatically required if this has not already occurred (for example, 60 months).</p>	<p>a) The standard review point applied within the routine adult audiology pathway used by the Trust, is 36 months from the date of hearing aid fitting. b) The patients continues on the same pathway with ongoing aftercare where reassessment is not clinically indicated. c) "open ended".</p>			

<ul style="list-style-type: none"> • If Yes, please state the duration in months. • Where no standard review point or maximum pathway duration is defined within the commissioned pathway, please state “open ended”. 				
<p>2. Eligibility and referral access into hospital audiology:</p> <p>a) Which referral routes are accepted for entry into the Trust’s routine adult audiology service? Please state whether each of the following is accepted:</p> <ul style="list-style-type: none"> • GP referral • ENT referral • Internal hospital referral • Other referral routes (please specify) <p>b) During the most recent complete 12 month period for which information is held, how many referrals for routine adult hearing loss were accepted into the Trust’s audiology service from each referral route listed in part (a)?</p> <p>c) During the same 12 month period, how many patients counted in part (b) had an ENT outpatient appointment before their first audiology appointment?</p>	<p>a) GP referral ENT referral Internal hospital referral</p> <p>b) GP = 2515 ENT – not able to manipulate data held to answer this Internal hospital referral – not able to manipulate data held to answer this</p> <p>c) During the same 12-month period, all patients counted in part (b) had an ENT outpatient appointment before their first audiology appointment?</p>			
<p>3. Patient age profile: During the most recent complete 12 month period for which information is held, how many routine adult audiology patients were seen in each of the following age bands?</p> <p>a) 18-49</p>	<p>Direct access clinics from GP:</p> <ul style="list-style-type: none"> • 18-54 years = 491 • 55 years and over = 2024 <p>Information not held for patient age profile for other routine adult audiology</p>			

b) 50–54 c) 55 and over	appointments such as hearing aid fittings, repairs, reassessments etc.			
4. Total appointments across a completed pathway: During the most recent complete 12 month period for which information is held, how many completed routine adult audiology pathways fell into each of the following attendance bands? a) 3 or fewer outpatient audiology appointments b) 4 outpatient audiology appointments c) 5 outpatient audiology appointments d) 6 outpatient audiology appointments e) 7 or more outpatient audiology appointments • For this question, attendances should be counted as the total number of outpatient audiology appointments delivered across the entire pathway, not per year. • A pathway should be treated as completed where it ended through discharge or through a clinical review that triggered a new hearing assessment.	Information is not held regarding number of audiology outpatient appointments for each patient pathway.			
5. Audiology activity volumes: During the most recent complete 12 month period for which information is held, please state the number of: a) Adult hearing assessments b) Hearing aid fitting appointments	a) 9763 b) 3533			
6. Hearing aid fittings by patient type: During the most recent complete 12 month period for which	a) 2936 b) 597			

<p>information is held, how many hearing aid fitting appointments were delivered: a) For NEW patients starting their first NHS hearing aid pathway with the Trust? b) For EXISTING patients starting a fresh NHS hearing aid pathway following clinical reassessment? • If the Trust does not distinguish between these categories, please state this explicitly.</p>				
<p>7. Average time to hearing aid refitting following reassessment: During the most recent complete 12 month period for which information is held, among EXISTING patients who were provided with new NHS hearing aids following clinical reassessment, what was the average time elapsed (expressed in years to one decimal point – e.g. 4.6), between the date of the original hearing aid fitting and the date of hearing aid refitting? • If this information is not held, please state this explicitly. For the purposes of this question, a hearing aid refit means the provision of new NHS hearing aids at the start of a fresh routine adult audiology pathway following clinical reassessment. It excludes repair, maintenance, reprogramming, or like for like replacement within an existing pathway.</p>	<p>This information is not held.</p>			
<p>8. Patient Initiated Follow Up (PIFU): a) Is PIFU used at any stage within the Trust’s routine</p>	<p>a) Yes</p>			

<p>adult audiology service? b) If PIFU is used, is activity generated through PIFU recorded as outpatient audiology activity within Trust systems? c) If PIFU is used, is PIFU related activity included within any activity planning or activity management arrangements that apply to routine adult audiology services? • For the purposes of this question, Patient Initiated Follow Up (PIFU) means a model where patients are invited to contact the service to request follow-up or aftercare, rather than being routinely recalled.</p>	<p>b) Activity generated through PIFU is recorded as outpatient audiology activity within Trust systems. c) PIFU related activity is included within activity planning for routine adult audiology services</p>			
<p>9. Adults holding NHS hearing aids: How many active adult audiology patients under the Trust's care are currently recorded as holding NHS issued hearing aids? • For the purposes of this question, treat an active adult audiology patient as someone who has had at one or more NHS audiology appointments within the last four years.</p>	<p>47,278 active adult audiology patients under the Trust's care currently recorded as holding NHS issued hearing aids.</p>			
<p>10. Waiting times and patient backlogs: a) What is the current average waiting time, expressed in weeks, from receipt of referral to routine adult audiology assessment (refer-to-assess)? b) What is the current average waiting time, expressed in weeks, from audiology assessment to</p>	<p>a) 8 weeks b) 3 weeks c) 363 d) 201</p>			

<p>hearing aid fitting (assess-to-fit)? c) How many patients are currently waiting for an initial routine adult audiology assessment? d) How many patients are currently waiting for a hearing aid fitting appointment following assessment?</p>				
<p>11. Funding and payment arrangements for routine adult audiology services: a) What funding or payment model is used by the Trust for routine adult audiology services? Please state which of the following applies: <ul style="list-style-type: none"> • Block contract • Activity based payment • National tariff • Locally agreed tariff • Other funding model (please specify) b) Where payment is activity based or tariff based, please state: <ul style="list-style-type: none"> • The defined unit(s) of payment used (for example: assessment, hearing aid fitting, outpatient attendance etc) • The payment amount applied to each unit c) Where a block contract or other fixed funding arrangement applies, please state the total funding amount (monthly and/or annual) and confirm whether this funding is linked to an assumed or planned level of activity.</p>	<p>a) Block Contract is used by the Trust for routine adult audiology services. b) N/A c) Block contract funding is linked to a planned level of activity.</p>			

<p>12. Planned activity and volume controls: a) During the most recent complete 12 month period for which information is held, was routine adult audiology activity subject to any planned activity schedule or formal activity management process? • If Yes, what activity units were planned or managed (for example: assessments, outpatient attendances, hearing aid fittings, follow up appointments, aftercare appointments)? • If activity was planned or managed, what was the planned annual volume for each activity unit during that period? • If activity was planned or managed, what was the actual annual volume utilised for each activity unit during that period?</p>	<p>a) Information is not held specifically for routine adult audiology activity regarding a planned activity schedule.</p>			
<p>13. Earwax removal within hospital audiology: a) Do routine adult audiology services provided by the Trust include earwax removal? b) During the most recent complete 12 month period for which information is held, how many routine adult audiology patients were seen and how many of these received earwax removal?</p>	<p>a) No</p>			

I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

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 us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.