



HINCYP

HEARING IMPAIRMENT NETWORK FOR CHILDREN & YOUNG PEOPLE



Hearing Impairment Network for Children & Young People (HINCYP) ANNUAL REPORT 2019/2020

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1. Executive Summary

This report provides an analysis and evaluation on how the HINCYP network has progressed against its objectives. HINCYP has seen challenges that have limited the progression of certain objectives. Most notably, this has been due to unavoidable delays in recruiting a Lead Clinician who took up post in October and the dedicated programme team of Programme Manager and Programme Support Officer, who have only been in place since the last quarter of the reporting period.

But, with changes finalised within the programme team, and moving into the new financial year, there is renewed optimism and rigor on continuing the successful delivery of the HINCYP network strategic objectives. Immediate concerns are progressing key priorities and establish an effective network structure.

Nonetheless, within its short lifespan, HINCYP has added value and this report has identified the following significant achievements:

- The network has identified the initial steering group membership, as well as other network members and stakeholders
- The network has started the process to write its communication and engagement strategy; education strategy; quality improvement strategy; and data plan, all of which align with the network's strategic workplan
- The network has commenced service mapping activities that will map Paediatric Audiology services across Scotland (including current workforce and associated agencies). An initial questionnaire was sent to all Paediatric Audiology departments.
- Stakeholder Communication and Engagement has commenced with a soft launch event in March, increased awareness on Twitter and raised brand awareness amongst our stakeholders through some distinctive designs and merchandise
- HINCYP has developed a 'preliminary test page' demonstrating what the HINCYP website homepage may look like

The network team also acknowledge the unfortunate circumstances of the current crisis. Since February 2020, understandably NHS Scotland priority has been to prepare for and deal with COVID-19 impact and

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this has seen clinical and other resource diverted from network activity. The network has undertaken an exercise to not only capture the impact of this unprecedented situation on the current reporting period, but also to assess the likely impact on delivery of the 2020/2021 workplan. This assessment has resulted in a two-pronged approach- where key activities will continue to be progressed, but those that require significant clinical input, will be placed on hold.

Looking towards the future workplan, priorities for the coming year will be to:

- Finalise the structure and membership of the network steering group and of the network sub-groups
- Complete a detailed Service Mapping exercise
- Produce a comprehensive communication and engagement strategy and action plan
- Development of HINCYP NMCN website
- Complete a Learning Needs Analysis (LNA)
- Support the continued roll out of the Local Record of Deaf Children
- Review the existing Paediatric Audiology Quality Standards to ensure currency and appropriateness

It is anticipated that the key steps and objectives this network will progress, will help improve and support Paediatric Audiology services across Scotland.

2. Introduction

In 2003 an Audiology Services Modernisation Project was established to implement recommendations arising from The Public Health Institute of Scotland Needs Assessment Report. The review had identified significant inadequacies in audiology services with variation in access to and standards of specialist clinical care, and ongoing support from clinical and non-clinical services. An audit undertaken in 2007 to evaluate the success of the project identified: that while broad improvements had been made, there was still significant variation across NHS Boards in the range and quality of Paediatric Audiology services.

In 2008, an Audiology Services Advisory Group was established and a National Audiology Manager appointed to lead improvement work across Scotland, that supported NHS Boards to develop and improve services- this role subsequently ended.

In 2009, the Quality Standards for Paediatric Audiology were published and a quality rating tool launched. However, use of the standards were not mandated, the coordination of their assessment and peer review is fragile, they were also not publicly available and there was little subsequent benchmarking or sharing of good practice.

Audit findings highlighted that there were significant consistency issues around quality, which would be difficult, costly and disproportionate to address at each NHS Board level. As well, the benefits of previous investment in the Modernisation of Children's Hearing Services were being lost due to lack of leadership.

Therefore, a national approach and associated appropriate leadership is considered a cost effective way to support local services, as opposed to all local services attempting to address the issues individually.

In 2015, the Scottish Government commissioned a scoping project to explore the current position in relation to Paediatric Audiology services and to consider and make recommendations for addressing ongoing issues of access and quality. The project concluded that a NMCN for Paediatric Audiology would provide the required level of national leadership, structure, governance and accountability to achieve the necessary improvements and ensuring that every child is identified as soon as possible and has access to services that meet NHS Scotland Paediatric Audiology Quality Standards (2009).

This report will now cover the network achievements and challenges throughout the year. Equally, it will discuss the network plans for the new financial year- making a strong case for recognising the particular needs and challenges of young people and children with hearing impairment. Acknowledging that in working together, there is greater opportunity to improve care and outcomes for patients and their families.

2.1 Network Aims

HINCYP NMCN was commissioned in April 2019. The network will bring together professionals from across the sector to work with children, young people and their families, to ensure that children and young people in Scotland who have a bilateral severe or profound hearing loss (approximately 757), achieve the best possible clinical and attainment outcomes; through early identification and access to services, that meet best practice.

3. Report on Progress against Network Objectives in 2019/2020

National networks have agreed core objectives that reflect the Scottish Government's expectations for Managed Clinical Networks (MCN), as described in as described in CEL (2012) 29¹. The network's core objectives are:

1. Design and ongoing development of an effective network structure that is organised, resourced and governed to meet requirements in relation to Scottish Government Health and Social Care Directorates (SGHSCD) guidance on MCNs (currently CEL (2012) 29) and national commissioning performance management and reporting arrangements
2. Support the design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities
3. Effective Stakeholder Communication and Engagement through design and delivery of a written strategy that ensures stakeholders from Health, Social Care, Education, the Third Sector and Service User are involved in the network and explicitly in the design and delivery of service models and improvements
4. Improved capability and capacity in Paediatric Audiology care through design and delivery of a written education strategy that reflects and meets stakeholder needs

¹ Please see: https://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf

5. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care, including the development of a written quality improvement strategy

6. Generate better value for money in how services are delivered

Appendix 3 contains the draft HINCYP NMCN 5 Year workplan- which has been adapted and modified from the original Paediatric Audiology NMCN Year 1-3 priorities and milestones. This draft workplan is also linked to the findings of the 2015 Scoping Project.

Note, in planning for the future workplan (2020/2021), the network team have assessed progress against original objectives and have accordingly re-adjusted these deliverables. Further information can be located in Appendix 5- the current draft HINCYP NMCN 2020/2021 work plan.

In conclusion, the overall delivery objective of HINCYP MCN is in improving the quality and efficiency of services across complex whole systems. HINCYP will achieve results through consensus and collaboration, by enabling clinicians, patients and service managers to work together across boundaries to deliver safe, effective and person-centred care.

This report now gives an overview of progress against these objectives in the year 2019/2020 (work plan can be found on Appendix 4).

3.1. Effective Network Structure and Governance

Work has begun to establish the network structure in line with National Commissioning Governance for National Networks.

3.1.1 HINCYP Core Team

Dr Ann Mackinnon was appointed as the HINCYP lead clinician on 7th October 2019, dedicating one PA session per week to HINCYP- which will continue for the coming year.

Dr MacKinnon, provides clinical expertise and leadership in the ongoing development of the network, and is accountable, on behalf of the network steering group, for network performance in meeting agreed aims and objectives.

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In March 2020 the Programme Manager, Mr Tassadaque Masood and Programme Support Officer Mr Richard Crawford were appointed. A data analyst for the network is still to be confirmed. However, support has been provided through the Information Management Service Team.

During the period of time between Dr MacKinnon's appointed and the employment of the network's dedicated Programme Manager and Programme Support Officer, work began to write the service agreement; communication and engagement strategy; education strategy; quality improvement strategy; and data plan- all of which align with the networks strategic workplan.

3.1.2 Network Steering Group

The network steering group provides direction to the programme project team and is chaired by the Lead Clinician. The network steering group members represent the NMCN constituent stakeholder groups, including patient groups. They act as a conduit for communication and decision-making between the NMCN and the professional groups/geographical area/NHS Board and/or other structure/body they represent. Please see Appendix 1 for current status and further information.

During the reporting period, the network identified the initial steering group membership, as well as other network members and stakeholders.

The network was aware that the steering group membership was not complete and planned to seek further recommendations at the inaugural HINCYP steering group, which was due to take place in March 2020. However, this had to be postponed due to the COVID-19 pandemic and has resulted in the re-scheduling of all future meetings.

3.1.3 HINCYP Working Groups

The network identified and proposed that it should establish working groups in the following areas:

- Mapping
- Standards and Pathways
- Training and Guidelines
- Data
- Patient Involvement

However, although the network is in the early stages of development, it is considering a more flexible and agile approach to sub-group membership. For example, a lead will be appointed from the steering group,

who may be supported by people from the wider membership- both will work on specific projects, that are aligned to the HINCYP NMCN 2020/2021 work plan.

3.1.4 Network Governance

Performance monitoring for NMCNs is part of national commissioning processes. It is based on effective ongoing communication between the NMCN and National Network Management Service (NNMS) throughout the year, undertaken within a cycle of bi-annual formal reporting and an annual performance review meeting between the steering group and National Services Division (NSD).

Appendix 2 sets out the governance arrangements for NMCNs, which are designated through the national commissioning processes.

3.2 Service Development and Delivery

Paediatric Audiology services are delivered in 11 of the 14 territorial NHS Boards by differing combinations of skills mix, different local service models and for varying geographies and demographics.

Practice varies according to availability of multidisciplinary expertise and each Health Board area has its own care pathways for children diagnosed with bilateral moderate, severe or profound hearing loss at birth and for those later identified children who develop a moderate, severe or profound hearing loss.

These pathways are not standardised across services: in some areas there is a multi-disciplinary team involved right from the beginning, whilst in other boards the support offered is less co-ordinated and can be disjointed.

This can lead to sub optimal clinical and other outcomes for some children, with poor communication impacting on educational attainment, mental health, family and other relationships and opportunities to fulfil their full potential.

To address this, the HINCYP launch event recommended that the network should continue to build on the service mapping activities that were undertaken in 2019/2020 and map Paediatric Audiology services across Scotland (including current workforce and associated agencies). Note, an initial questionnaire was sent to all Paediatric Audiology departments. Responses were incomplete, but highlighted difficulties for some services in providing the requested information and also the need for a more detailed service mapping analysis.

3.3 Communication and Engagement

During 2019/2020, early work towards this objective identified a broad range of stakeholders. Building on this work, to cultivate and increase effective stakeholder relationships, there are plans to produce a comprehensive communication and engagement strategy- which will be accompanied by an action plan. For further information, please refer to the current draft HINCYP NMCN 2020/2021 work plan under Appendix 5.

3.3.1 HINCYP Branding

The HINCYP network has created some distinctive designs, which will help promote the identity of the MCN and raise brand awareness amongst our stakeholders.

Among the successes, the following graphics have been created to represent the MCN:



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This is also accompanied by the following caption, that embodies what the MCN is striving towards- building a personalised approach to care, where the patient is at the centre; and reducing unnecessary variation in practice and outcomes.

'Hear for you'

To complement the overall new branding developments, merchandise has also been created. This will be used on key occasions and events to further support the brand. Our partners that helped deliver these merchandise has Investors in People and ISO9001 accreditations. They are also members of the British Promotional Merchandise Association and the Supplier Ethical Data Exchange (SEDEX).

SEDEX is dedicated to driving improvements in responsible and ethical business practices in global supply chains and enables them to ensure items are sourced from ethical suppliers.

A photo can be found below:



3.3.2 HINCYP Launch Event

In March 2020, HINCYP facilitated its launch event, unfortunately due to the emergence of the COVID -19 pandemic, the event was attended by fewer delegates than the network had planned for. The soft launch provided the network and the professionals and carers that did attend, the opportunity to find out about the

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strategic context and vision for the network. Moreover, it was an opportunity to contribute to shaping the network's strategic workplan.

The initial soft launch event positioned the MCN as a valuable support/resource which will be used to improve outcomes for deaf children, young people and their families.

A selection of the day's photos can be found below:



(Left to right): Richie Crawford, Dr Shubanghi Shewale, Adrian Carragher, Dr Ann Mackinnon, Sam Braid, Tassadaque Masood and Alley Speirs



(Left to right): Richard Crawford, Ann Mackinnon and Tassadaque Masood

A selection of the day's feedback can be found below:

I think the day went really well under the circumstances and that everyone was generally on the same page more or less, so I think the group will move on to good things and be productive once we get to the other side of our current crisis!

Adrian Carragher - Head of Audiology / Chair Area Clinical Forum – NHS Ayrshire & Arran

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I found attending the event very useful- the members of network I met were very helpful in providing guidance for a new person like me.

The event really made justice to its purpose even if the circumstances were strange.

I am so happy that I could attend. Looking forward to working with HINCYP in the future!

Shubhangi Shewale – Consultant Paediatrician – NHS Lanarkshire

I found the session structure and content very helpful.

The opportunity to meet and chat informally with the delegates in a multi-disciplinary forum was excellent; gaining the perspective of different professionals was very helpful to me. In particular working in a small rural authority how we can function is very different to some of the larger urban authorities there.

Paul Duncan - Principal Teacher - Sensory Education Service – Morayshire Local Government

3.3.3 HINCYP Social Media

The HINCYP network has started the process to increase its social media presence, specifically Twitter. These posts are mainly done through the National Managed Clinical Children and Young People Networks at @CYPNMCN.

For the soft launch event, a hashtag was developed to encourage the attendees to promote the work of the network.

A photo can be found below:



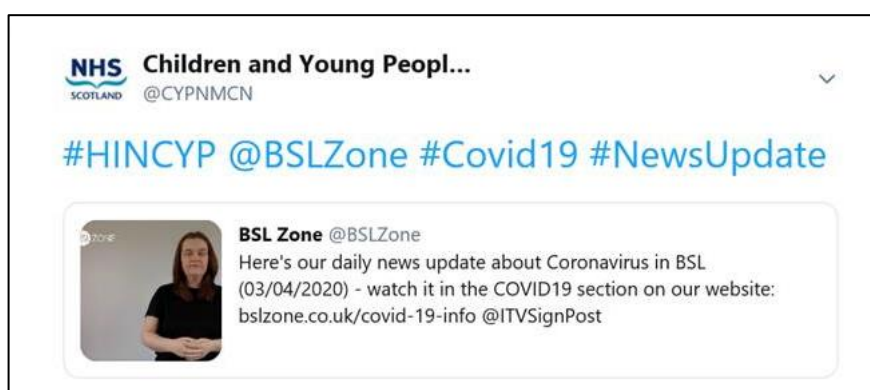
In terms of statistics, between 1 April 2019 to 31 March 2020, there have been:

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More recently, due to the emergence of the COVID-19 pandemic, the network has tried to raise awareness among children and young people. A selection of online tweets and photos can be found below:





3.3.4 HINCYP Website

Over the course of this year, HINCYP has developed an 'alpha version' of what the HINCYP homepage may look like. Further developments to this website will be conducted, over the coming year.

Below is an example of what the HINCYP homepage may look like:

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HINCYP
HEARING IMPAIRMENT NETWORK FOR CHILDREN & YOUNG PEOPLE

NHS
SCOTLAND

HOME ABOUT US PARENTS & CHILDREN PROFESSIONAL RESOURCES CONDITIONS REPORTS USEFUL LINKS CONTACT US SMELLEN LOGMAR

PARENTS & CHILDREN

CONDITIONS

PROFESSIONAL RESOURCES

Welcome to the Hearing Impairment Network for Children & Young People (HINCYP).

HINCYP aims to improve the care for children and young people with a hearing impairment. HINCYP involves professionals working in health, education and social work, parents/carers of children and young people with a hearing impairment and voluntary sector organisations.

If you would like to get in contact with HINCYP please email nss.hincyp@nhs.net

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3.4 Education

A strategy has been developed in draft form, which will be developed further in the coming year. The design and delivery of an education strategy, will help to ensure improved capability and capacity in Paediatric Audiology services, which reflect stakeholder needs.

3.5 Audit and Continuous Quality Improvement

During this year, the network has identified core data sets and data collection systems in Scotland. Although, there is no robust national data collection system in Scotland- with variation in the numbers of children with permanent bilateral moderate, severe or profound hearing loss recorded in health and education systems-the actual number is unknown. This presents problems with:

- Planning services that meet the needs of deaf children
- Equal access to multidisciplinary care that meets NHS Scotland's Paediatric Audiology Quality Standards
- Lack of consistent referral and management pathways

The Scottish Government has recently announced the national implementation of a Local Record of Deaf Children. The Record will gather prevalence data on the number of deaf children in contact with NHS Audiology services and use the information to assist services such as speech and language therapy, education and social work to support deaf children and their families.

3.6 Value

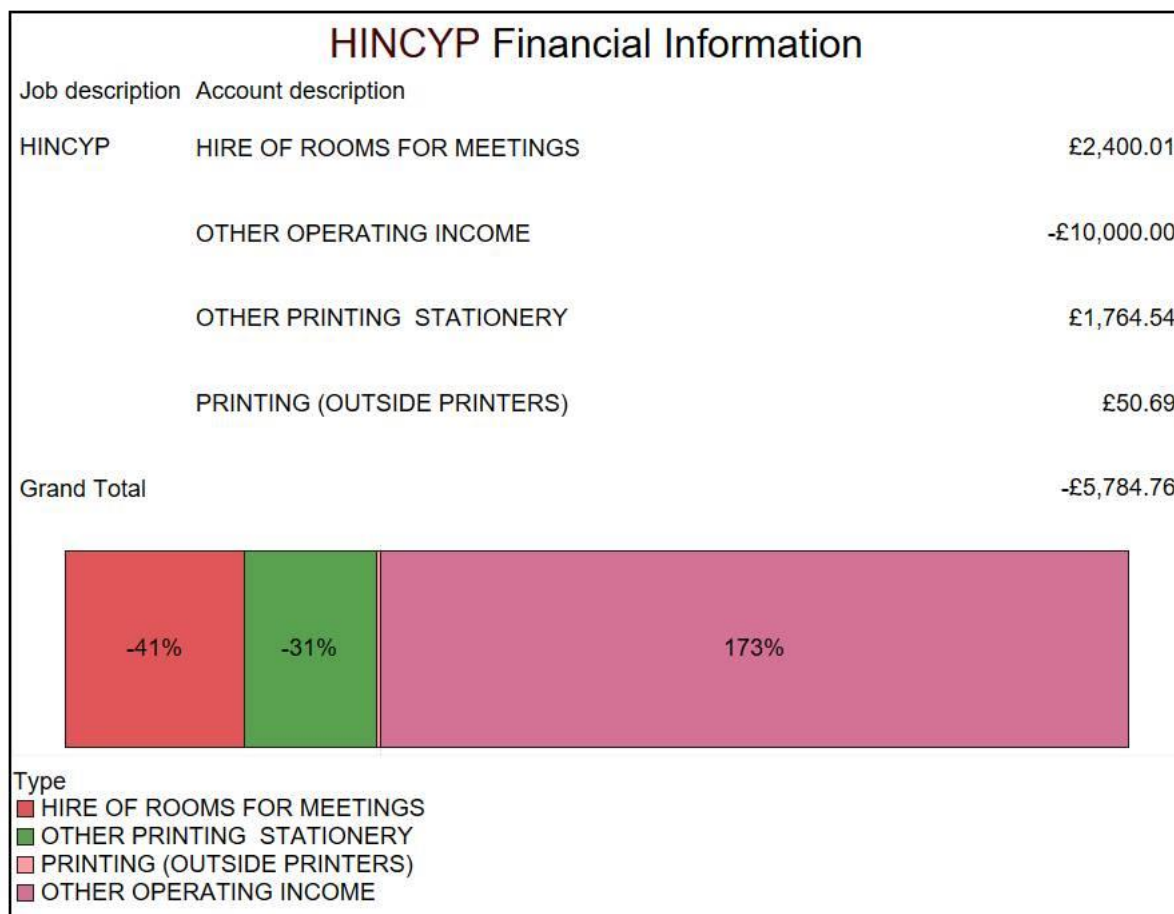
During the reporting period the network has added value by bringing together agencies and professionals, that who provide services for children with severe/profound hearing loss.

Moreover, the network will be used as a platform through which stakeholders will work in collaboration to drive improvements in services; and the experience and outcomes for young people, children and families.

3.7 Network Spend

All national managed clinical and diagnostic networks receive an annual budget of £5,000 to undertake network activity, which can include facilitating annual events and developing promotional material.

During the reporting period the network spent £5,784.76.



3.8 Risks

- There is a risk that due to the lead clinician’s tenure ending towards the end of March-2021, there will be a change of leadership- during the early development stages of the network- which could hinder network performance. To mitigate this, the steering group will consider all options, including but not limited to extending the period of tenure or initiate a recruitment process to avoid a gap.
- There is a risk that due to COVID-19 in Scotland there will be limited capacity amongst clinicians to contribute to network activity and key objectives may not be progressed as planned. To mitigate this, the network has undertaken an exercise to not only capture the impact of this unprecedented situation on the current reporting period, but also to assess the likely impact on delivery of the 2020/2021 workplan. This assessment has resulted in a two-pronged approach- where key activities will continue to be progressed, but those that require significant clinical input, will be placed on hold.

4. Plans for the Year Ahead

Below are key plans and priorities for year ahead for HINCYP. For further information, please refer to the current draft HINCYP NMCN 2020/2021 work plan under Appendix 5.

4.1 Effective Network Structure and Governance

- Establish the structure and membership of the steering group and the network sub-groups
- Fulfil requirements in relation to national commissioning performance management arrangements

4.2 Service Development and Delivery

- Complete a detailed Service Mapping exercise
- Plan to extract data from existing systems

4.3 Communication and Engagement

- Produce a comprehensive communication and engagement strategy and action plan, including mechanisms for engaging with service users
- Completion of the Paediatric Audiology NMCN website. This website will be a central point of contact for information, guidance and resources for Paediatric Audiology in Scotland and will be populated during the life cycle of the network
- Raise the profile of Paediatric Audiology and the impact of deafness on children, young people and families through social media channels

4.4 Education

- Delivery of a Learning Needs Assessment (LNA). This activity will address the current gaps in education and training in Paediatric Audiology professionals and multi-disciplinary staff involved in the care of deaf children- the findings will inform the HINCYP education strategy

4.5 Audit and Continuous Quality Improvement

- The MCN will provide the framework to support the continued roll out of the Local Record of Deaf Children
- HINCYP will review the existing Paediatric Audiology Quality Standards to ensure currency and appropriateness

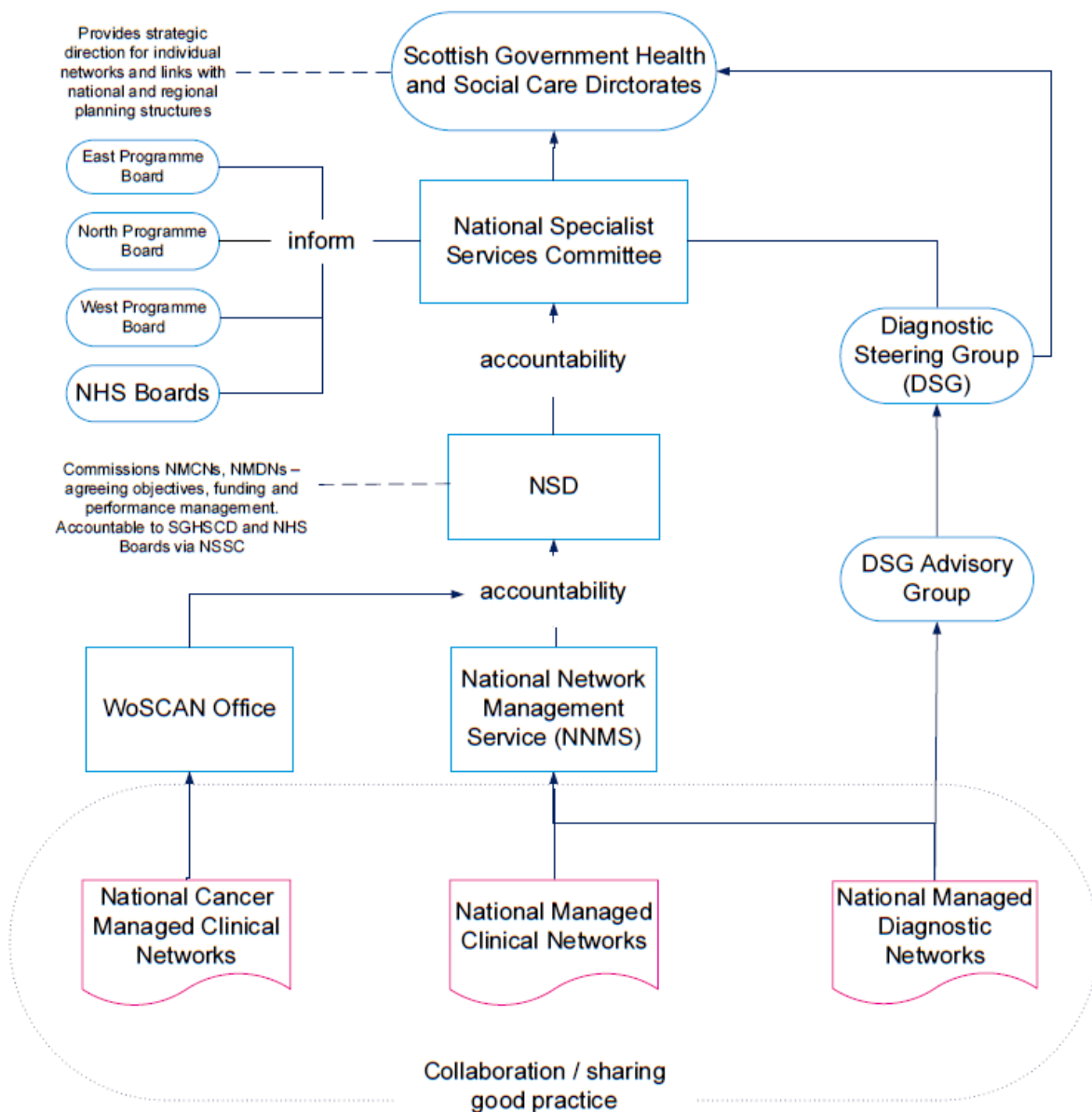
4.6 Value

- To address this, the network has determined opportunities to provide better value will be considered and incorporated into the various strategies and evaluated on a yearly basis.

Appendix 1- Proposed Network Steering Group Membership

Name	Role	Health Board
Ann MacKinnon	Lead Clinician	NHS Tayside
Adrian Carragher	Audiologist	NHS Ayrshire and Arran
Dawn Lamerton	Audiologist	NHS Lothian
David Comiskey	Audiologist	NHS Fife
Ruth Edgar	Audiologist	NHS Tayside
Susan Campbell	UNHS Manager	NHS Tayside
Lyndsay Fraser	ENT Consultant	NHS Ayrshire & Arran
Andy Chin	ENT Consultant	NHS Lanarkshire
Richard Steven	ENT Trainee	NHS Tayside
Ruth Henderson	Paediatrician	NHS Lothian
Juan Mora	Audiovestibular Physician	NHS GGC
Agnes Allen	SCIP	NHS Scotland
Jane Gallacher	SLT	NHS Ayrshire & Arran
Alasdair O'Hara	NDCS	NDCS Scotland
Angela Bonomy	SENSE	Sense Scotland
Jonathan Reid	The Alliance	ALLIANCE Scotland

Appendix 2- National Commissioning Governance for National Networks (NSD610-001.05)



Appendix 3 – (NSD610-001.04) HINCYP NMCN Draft 5 Year Workplan 2019-2024



HINCYP policy
framework 5 year pl:

Appendix 4. Detailed Description of Progress in 2019/2020

HINCYP Annual Workplan for 2019/202020 (as of 31 March 2020)

RAG status key

RAG status	Description
RED (R)	The network is unlikely to achieve the objective/standard within the agreed timescale
AMBER (A)	There is a risk that the network will not achieve the objective/standard within the agreed timescale, however progress has been made
GREEN (G)	The network is on track to achieve the objective/standard within the agreed timescale
BLUE (B)	The network has been successful in achieving the network objective/standard to plan

The Institute of Medicine's six dimensions of quality are central to NHS Scotland's approach to systems-based healthcare quality improvement; therefore, objectives should be linked to these dimensions:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance <small>[linked to Quality Dimensions 3,4,5,6]</small>						
2019-01	The Lead Clinician will invite key individuals to form the core membership of the HINCYP Steering Group	01/11/19 - 01/03/2020	Lead Clinician	Key professionals and voluntary sector representatives have been identified, invited and have agreed to join the steering group	Establishment of a knowledgeable, balanced steering group who will support the development and delivery of the HINCYP workplan going forward	B
2019-02	The network will organise 1 Steering Group meeting and establish sub-group meetings in 2020 to ensure effective delivery of the 2019-20 workplan.	01/11/2019 – 31/03/2020	Steering Group and Sub-Group membership	<p>A meeting was due to take place in March-2020. However due to the COVID-19 crisis, this was postponed. All meetings will be booked on a case-by-case basis depending on guidance and availability of group members during the COVID-19 crisis.</p> <p>It is proposed that the Network continues progresses of this objective (that was planned for 2019/20) and move it into the annual workplan for 2020/21.</p>	Effective delivery of the HINCYP workplan to ensure continuation of progress	R
2. Service Development and Delivery <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
2019-03	Start the Service Mapping exercise and identify stakeholders to involve and undertake an initial exercise to map paediatric audiology services across Scotland	01/11/2019 – 31/03/20	Steering Group	<p>An initial questionnaire was sent to all Paediatric Audiology departments. Responses were incomplete, but did highlight difficulties for some services in providing the requested information and also the need for a more detailed service mapping analysis.</p> <p>It is proposed that the Network adds this further mapping exercise as an objective for the annual workplan for 2020/21.</p>	<ul style="list-style-type: none"> - Identify the gaps in service - Service Mapping report 	B
3. Stakeholder Communication and Engagement <small>[linked to Quality Dimensions 1,3,4,5,6]</small>						
2019-04	By March 2020 draft a Communication Strategy to meet the needs of all stakeholders, including provision of information and effective sign-posting through the website	01/11/2019 – 31/03/20	Steering Group	<p>A Communication Strategy is in draft form and identifies a broad range of stakeholders- but not fully complete due to limited resource availability on the Network.</p> <p>Next step is to produce a comprehensive and approved communication and engagement strategy and action plan.</p> <p>It is proposed that the Network progresses this objective (that was planned for 2019/20) and move it into the annual workplan for 2020/21.</p>	All stakeholders across Scotland are kept informed and have a voice in the network	A

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
4. Education <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-05	Undertake a Learning Needs Analysis (LNA) to inform the design and delivery of an Education Strategy.	01/11/2019	Steering Group	<p>A Learning Needs Analysis (LNA) was not completed. However, an Education Strategy has been developed and is in draft form; which is awaiting further development and progression.</p> <p>Work has been limited on this due to delays in appointing network personnel and limited resources availability to the Network</p> <p>It is proposed that the Network continues to progress of this objective (that was planned for 2019/20) and move it into the annual workplan for 2020/21</p>	Healthcare professionals across Scotland share and increase their knowledge and skills and in Paediatric Audiology	R
2019-06	By March 2020 develop an Education Strategy tailored to address current gaps in education and training in Paediatric Audiology professionals and multi-disciplinary staff involved in the care of deaf children.	01/11/2019	Steering Group	<p>An Education Strategy has been developed and is in draft form; which is awaiting further development and progression.</p> <p>A predecessor for this objectives is the completion of the Learning Needs Analysis (LNA)- which was not completed.</p> <p>Work has been limited on this due to delays in appointing network personnel and limited resources availability to the Network The next step is to complete an education strategy taking into account the</p>	The workforce is valued and has access to evidence-based specialist training and resources for improved health and care	R

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
				<p>LNA and associated evaluation framework and delivery/implementation.</p> <p>It is proposed that the Network delays this objective (Education Strategy) and move this into the annual workplan for 2021/22. Considering the current COVID-19 crisis, focus for 2020/21, should be the delivery of a LNA.</p>		
5. Audit and Continuous Quality Improvement <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-07	Identify core data sets and data collection systems in Scotland	01/11/2019	Steering Group	<p>Until recently there has been no standardised national data collection on children with hearing impairment across Scotland within audiology departments. There are variations in the numbers of children with permanent bilateral moderate, severe or profound hearing loss recorded in health and education systems. The actual number is unclear. This presents problems in the planning of services to meet the needs of deaf children.</p> <p>The Scottish Government has recently announced the national roll out of a Local Record of Deaf Children (LRDC). The LRDC will gather prevalence data on the number of deaf children in contact with NHS Audiology services using</p>	Clinicians are able to access their data and audit patient outcomes to drive improvement	G

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
				<p>core data sets and using established audiology data collection systems. This information will assist services such as speech and language therapy, education and social work to support deaf children and their families.</p> <p>HINCYP will provide the framework to support the role out of the LRDC by;</p> <ul style="list-style-type: none"> • Supporting Health Boards to implement robust data collection locally • Supporting Health Boards to use this data for local audit and planning purposes • Providing a framework to support the aggregation of local data to provide a national picture. <p>The role out and improved use of the LRDC is one tool to help with data collection but is not the only solution.</p>		
<p>6. Value <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small></p>						

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2020	Anticipated Outcome	RAGB status
2019-08						G

Appendix 5. Draft Work Plan for 2020/2021

HINCYP Draft Annual Workplan for 2020/2021 (as of 31 March 2020)

RAG status key

RAG status	Description
RED (R)	The network is unlikely to achieve the objective/standard within the agreed timescale
AMBER (A)	There is a risk that the network will not achieve the objective/standard within the agreed timescale, however progress has been made
GREEN (G)	The network is on track to achieve the objective/standard within the agreed timescale
BLUE (B)	The network has been successful in achieving the network objective/standard to plan

The Institute of Medicine's six dimensions of quality are central to NHS Scotland's approach to systems-based healthcare quality improvement; therefore, objectives should be linked to these dimensions:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

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Objective Number	Smart Objective	Planned start/end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance [linked to Quality Dimensions 3,4,5,6]						
2020-01	The network will organise up to 4 Steering Group meeting and 3 (of each) sub-group meetings by 2021 to ensure effective delivery of the 2020-21 workplan.	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	Steering Group meetings will be planned throughout 2020/21 and sub-groups are arranged throughout the year. All meetings will be booked on a case-by-case basis depending on guidance and availability of group members during the COVID-19 crisis.	<ul style="list-style-type: none"> - Implement effective design governance structure - Effective delivery of the HINCYP workplan to ensure continuation of progress - Establish Steering Group 	G
2020-02	By March 2021, establish, define, approve and implement the structure and membership of the Network Steering Group and of the Network sub-groups- which report directly to the Network Steering Group	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	Work to commence in 2020/21 workplan. During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.	<ul style="list-style-type: none"> - Fully implemented and effective design governance structure - Effective delivery of the HINCYP workplan to ensure continuation of progress - Identify existing resources which can be used by the MCN in a more formalised way - Work-stream groups or focused task groups - Identify stakeholders - ToR for Steering Group and sub-groups 	G
2020-03	By March 2021, fulfil requirements in relation to national commissioning performance management arrangements, demonstrating satisfactory progress	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	Work to commence in 2020/21 workplan. During the COVID-19 crisis, the Network will continue to monitor	<p>The workplans reflect relevant national policy aims, including in relation to healthcare quality and realistic medicine, specifically:</p> <ul style="list-style-type: none"> - Amendment and approval of 	G

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	towards achieving annual objectives within 3-5 year strategic workplan.			the development and progress of this objective.	<p>the draft HINCYP NMCN overarching 3-5-year strategic work plan</p> <ul style="list-style-type: none"> - Creation and approval of the draft HINCYP annual work plan (2020-21) - Completion of the half-year and annual report <p>Other anticipated outcomes:</p> <ul style="list-style-type: none"> - Create and agree up to date Terms of Reference - Approval of Service Level Agreement - Comms, Stakeholder and Engagement Plan - Quality Improvement Plan including Data Plan - Education & Training report (Education Strategy) 	
2. Service Development and Delivery <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2020-04	By March 2021, complete a detailed Service Mapping exercise, which will identify key stakeholders to involve and complete an exercise to map paediatric audiology services across Scotland's 14 regional NHS boards	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>In 2019/20 to map paediatric audiology services across Scotland (including current workforce and associated agencies). An initial questionnaire was sent to all Paediatric Audiology departments. Responses were incomplete, but did highlight difficulties for some services in providing the requested information and also the need for a more detailed service mapping analysis.</p> <p>The plan for the coming year will be to identify stakeholders to involve and complete an exercise</p>	<ul style="list-style-type: none"> - Identify the gaps in service - This will inform NHS Board and regional service planning. - Service Mapping report - Promotion of national audit and research to build the evidence base to better inform knowledge and assist local, regional and national planning of services for deaf children and their families - Facilitate local areas to support, address standards and services gaps or concerns - Build a baseline of data for the network- where are the patients, where are the services, what are the categorisation of the 	G

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				<p>to map paediatric audiology services across Scotland (including current workforce and associated agencies) to inform NHS Board and regional service planning. Work will be undertaken by working with managers and planners to identify and develop plans to address any gaps that may compromise clinical and other outcomes.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p> <p><i>Service mapping will need to be done before the development of agreed national care pathways.</i></p>	<p>services. This would allow us to start to develop an '<i>atlas of variation</i>' in order to identify the improvements and changes the network can build on.</p>	
2020-05	By March 2021, plan and define what mechanisms are used to extract data from existing systems	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Priorities for the network going forward would be to find out a mechanism for extracting data from the two systems that are already in place.</p> <p>The network may need to enter into agreements with both suppliers or do we agree a regular extraction of aggregate data coming in from the boards to us. We would also need to consider if patient level data will be required and if so begin the process of gaining PBPP approval.</p>	- Build a baseline of data for the network	

3. Stakeholder Communication and Engagement [linked to Quality Dimensions 1,3,4,5,6]

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2020-06	By March 2021, identify and engage with stakeholders and analyse their needs to produce a comprehensive communication and engagement strategy and action plan	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Work to commence in 2020/21 workplan.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>	Produce a comprehensive communication and engagement strategy and action plan	G
2020-07	By March 2021, establish mechanisms for engaging with service users	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Work to commence in 2020/21 workplan.</p> <p>Explore with 3rd sector organisations, such as NDCS and SENSE, and any already established service user groups, what information they would like to see HINCYP provide for them and discuss with them the most appropriate ways of seeking feedback from and providing information to them.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>	<ul style="list-style-type: none"> - Providing consistent, high quality information and support for deaf children and their families and working with them to define quality and drive improvements - Raising the profile of Paediatric Audiology and the impact of deafness on children and families - Ensure HINCYP will continue to be visible and integrated into the Hearing Impairment community and its stakeholders - Facilitate local areas to support, address standards and services gaps or concerns 	G
2020-08	By March 2021, begin development of HINCYP NMCN website	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Website- begin development of a HINCYP NMCN website which will give access to information including care pathways, management guidelines, protocols, parent and family information, specific condition information and on-line training resources. This website will be a central point of contact for information, guidance and resources for Paediatric Audiology in Scotland and will be</p>	<ul style="list-style-type: none"> - Paediatric Audiology NMCN website - Raising the profile of Paediatric Audiology - Ensure HINCYP is integrated into the Hearing Impairment community and its stakeholders 	G

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				<p>populated during the 3 years of the project.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>		
2020-09	By March 2021, raise the profile of Paediatric Audiology and the impact of deafness on children, young people and families	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Work to commence in 2020/21 workplan.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>	<ul style="list-style-type: none"> - Introduce a HINCYP Newsletter that is delivered up to 4 times a year by March 2021 - Enhance Number of #HINCYP Tweets by up to 75% (during 2019/2020- the number of #HINCYP Tweets was 18) - Raising the profile of HINCYP and the impact of deafness on children and families - Ensure HINCYP will continue to be visible and integrated into the Hearing Impairment community and its stakeholders 	
4. Education <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2020-10	By March 2021, complete a Learning Needs Analysis (LNA) that will inform the design and delivery of an Education Strategy.	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>It is anticipated that the key steps this network will take, will help improve specific audiology training and development opportunities; as there are currently limited recognised paediatric specific audiology training and development opportunities in Scotland</p> <p>Start and complete a Learning Needs Analysis (LNA) for the Network.</p>	<ul style="list-style-type: none"> - Identify learning needs - Identify existing training resources - Education & training report (Education Strategy) - Providing information and training to Paediatric Audiology professionals and multi-disciplinary staff involved in the care of deaf children - An MCN would work with Higher Education providers to improve access to appropriate formal training and create a 	G

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				During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.	framework for Audiologists to learn from each other	
5. Audit and Continuous Quality Improvement <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2020-11	By March 2021, the MCN will provide the framework to support the continued roll out of the Local Record of Deaf Children and the aggregation of local information to provide a national picture	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Until recently there has been no standardised national data collection on children with hearing impairment across Scotland within audiology departments. There are variations in the numbers of children with permanent bilateral moderate, severe or profound hearing loss recorded in health and education systems, the actual number is unclear. This presents problems in the planning of services to meet the needs of deaf children.</p> <p>In 2018 the Scottish Government announced the national roll out of the Local Record of Deaf Children (LRDC). The LRDC gathers prevalence data on the number of deaf children in contact with NHS Audiology services using core data sets and using established audiology data collection systems. This information will assist services such as speech and language therapy, education and social work to support deaf children and their families.</p>	<ul style="list-style-type: none"> - A robust national data collection system - Data on the number of deaf children in contact with NHS Audiology services- which will aid assist support services with enhanced service planning - Improve data collection for audit and service planning - Start to develop a system of robust data collection - Facilitate local areas to support, address standards and services gaps or concerns 	G

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				<p>HINCYP will provide the framework to support the role out of the LRDC by;</p> <ul style="list-style-type: none"> • Supporting Health Boards to implement robust data collection locally • Supporting Health Boards to use this data for local audit and planning purposes <p>Providing a framework to support the aggregation of local data to provide a national picture. During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>		
2020-12	By March 2021, HINCYP will review the existing Paediatric Audiology Quality Standards to ensure currency and appropriateness.	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	<p>Review existing Paediatric Audiology Quality Standards to ensure currency and appropriateness.</p> <p>During the COVID-19 crisis, the Network will continue to monitor the development and progress of this objective.</p>	<ul style="list-style-type: none"> - Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care - Produce revised quality standards - Facilitate local areas to support, address standards and services gaps or concerns 	
6. Value <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2020-13	Opportunities to generate better value for money will be considered and incorporated into the various strategies and evaluated at the end of year 3.	01/04/2020-31/03/2021	Steering Group and Sub-Group membership	Opportunities to generate better value for money will be considered and incorporated into the various strategies and evaluated at the end of year 3.	Generate better value for money and potential efficiency savings	G

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Appendix 8: Finance

