

Glasgow Hearing Aid BENEFIT Profile Protocol

A. Background

The GHABP has been developed as a tool to evaluate

- service provision
- individual patient management

This takes the form of a patient-centred structured interview that establishes

- the patient's initial disability and handicap prior to the fitting of a hearing aid at the initial assessment (Before Fitting - Part 1)
- use, benefit, residual disability and satisfaction after patient management at the follow-up appointment, 8-12 weeks after fitting (After Fitting- Part 2).

The interview looks at 4 pre-specified situations and up to 4 user-defined situations specific to the patient's communication needs.

This protocol is specifically written for first-time hearing aid patients and is assuming a software version of the GHABP will be used to collect information. The GHABP can, however, be used with reassessment patients.

If a patient had previously worn a private hearing aid a significant amount of time ago i.e. 5 years ago, they should be classed as a new user and the GHABP completed. Otherwise, if they wear a private aid nowadays or recently, they should be classed as a reassessment patient and the GHADiffP completed.

B. Summary

- Set the scene for how the interview will take place
- Use the wording on the questionnaire
- Ensure that there is a definite response for the 'Does this situation...?'
- Ensure that the patient is aware of the choice of answers
- If one of the pre-specified situations can be interpreted in more than one way, examine this further in the user-defined situations.
- User-defined Situations
 - Identify situations where it is important for the patient to **hear as well as possible**
 - Avoid suggesting situations – instead ask the patient to think back over situations that have happened in the last week or two
 - Be as specific as possible
 - Include specific situations that may have been included in the pre-defined situations
- If never wears the aid, this means the intervention has not been effective, therefore:
 - benefit is 'HA no use at all'
 - residual disability is that recorded prior to HA fitting
 - satisfaction is 'not satisfied at all'

If the reason for non-use is that the situation has not yet occurred by the end of the patient's management, then fill in as N/A.

C. Interview procedure

How to administer GHABP (Part 1) at the Initial Assessment

Fill in the first two columns that assess the patient's degree of difficulty (initial disability) and the impact on the patient's life (handicap).

1. Set the scene for how the interview will take place. Inform the patient that they will be asked about four specific listening situations and will be asked:
 - whether this situation occurs in their life
 - how much difficulty do they have in this situation
 - how much does this difficulty worry annoy or upset them.
2. Ask about the first situation using the wording on the PC; further description in keeping with the context of the situation may be required.
3. Ask whether this situation happens in their life. It is important here to get a "yes" or a "no" answer. If the patient answers "no" the software will automatically move on to the next situation. If the patient answers 'no' but has already indicated the situation does occur, remind them of their previous comments.
4. If this situation does occur, ask "How much difficulty.....". Draw the patient's attention to the appropriate answers particularly if they start deviating. Don't try and answer the question for the patient.
5. Ask "How much does.....". Again draw their attention to the appropriate answers, which are different to the first set.
6. Repeat this process for all 4 pre-defined situations. If for any of these situations the patient comments that their difficulty is different for a similar situation i.e. a busy street as opposed to a shop, this other situation can be examined separately on the user-defined section.
7. User-defined situations. These allow the patient to identify specific situations that occur in their life that are important to their own *communication needs*. It is important to get across the '*for you to be able to **hear as well as possible***'. In some cases the patient may find a situation important for them to hear as well as possible, yet they may *not* have any difficulty; this is still entered.

Ask the patient to think of *up to* 4 new listening situations.

Do not suggest situations e.g. "do you have difficulties in the pub or on the phone?" Many patients will simply say nothing – don't leave it there. Ask the patient to think back over the last week (or two) for any situations where it was important to them to hear as well as possible. **Leave them to think**. Most people will come up with one situation. When Stuart Gatehouse used the GHABP in n=293 patients:

100% came up with one situation
89% came up with at least 2 situations
80% " " " " " 3 "
65% " " " " 4 "

The situation needs to be as *specific as possible* – this increases the efficiency of the interview - e.g. they could think it important to hear TV as well as possible, but if they specify that its news programmes or Eastenders then that's even more specific and the specific programme should be noted. This makes it easier for them to pin down their answers when they come back at the follow-up appointment.

Also, if a situation is specified that has been included or is similar to one of the pre-defined situations e.g. listening to granddaughter or wife in a quiet room or having a conversation with a group of people at the local pub/club/bingo hall, this should still be examined in the user-defined section.

8. Having identified all the situations proceed with asking the questions. Other information that is volunteered but is not directly relevant to the GHABP should be noted as this may be useful in the overall rehabilitation and counselling of the patient.

9. *Look at the summary of results, and use to guide patient rehabilitation*

How to administer GHABP (Part 2) at the Follow-up appointment

This will usually take place between 8-12 weeks after the hearing aid is fitted and looks at:

The extent to which the hearing aid is used (use)
The extent to which problems have been reduced (benefit)
The extent to which problems remain (residual disability)
The extent to which the client has been satisfied by the intervention *now* (satisfaction)

1. For each pre-specified situation ask the questions. Again, direct the patient to the appropriate answers on the monitor.
2. User-defined situations. Use the situations that were defined at the initial assessment.
3. Ensure that the answers along the columns for a specific situation make sense.
4. If the patient reports they never use the aid, this means the intervention has not been effective, therefore by definition:
 - benefit is 'HA no use at all'
 - residual disability is that recorded prior to HA fitting
 - satisfaction is 'not satisfied at all'

If the reason for non-use is that the situation has not yet occurred by the end of the patient's management, then fill in as N/A.

5. *Look at summary of results and use to guide patient rehabilitation.*

D. Patient Management Default Responses

The patient management systems employ a number of default options to some of the responses, depending on which system and which version of the system you are using. For example, both Auditbase and PN (regardless of which version) will move onto the next situation if the current situation does not happen in the patient's life.