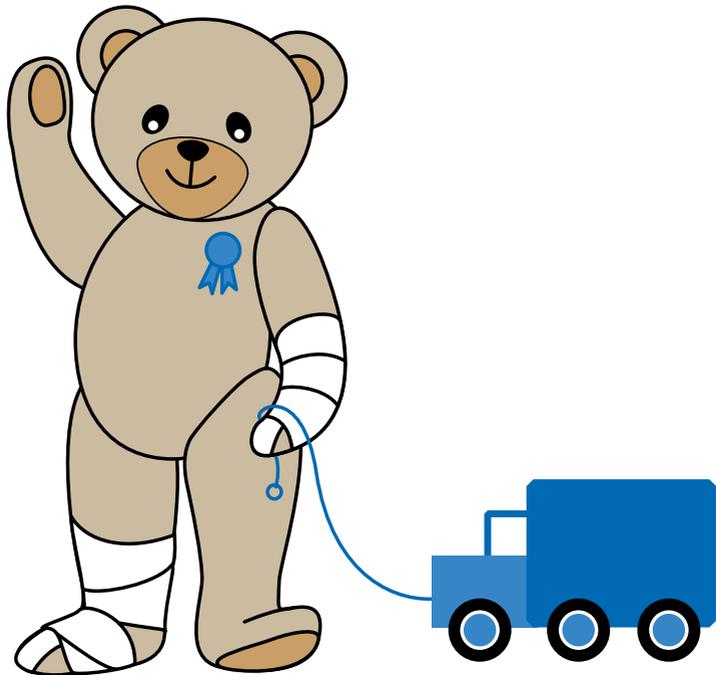


Your child's hearing aid

Audiology Department



Patient information leaflet



Child's name: _____

Teacher of the Hearing Impaired: _____

This booklet is intended to provide you with information about the practical use and maintenance of your child's hearing aids. If you have any questions after reading this, please do not hesitate to contact Paediatric Audiology.

We (Paediatric Audiology) work closely with the Physical and Sensory Support Service (Surrey) and Specialist Teacher Advisory Service (Hampshire), to provide the best support for children with hearing impairment, on an individual basis. You should have been offered a referral to one of these services, and you will have to sign a consent form for the referral to take place. Please ask us if you are not sure or would like more information.

The National Deaf Children's Society (a national charity) also provides a lot of useful information on its website – www.ndcs.org.uk – which may be of interest.

This leaflet is written for families whose child is using a behind-the-ear hearing aid.

Are there any alternatives?

Different hearing aids are available, such as in-the-ear or bone conduction hearing aids. We may have discussed these alternatives with you already, and agreed that a behind-the-ear hearing aid is the most suitable for your child. If a hearing loss is at a severe-to-profound level, another option to hearing aids could be the use of Sign Language. If you would like more information about alternatives to behind-the-ear hearing aids, please do ask us.

What are the risks and benefits of using a hearing aid?

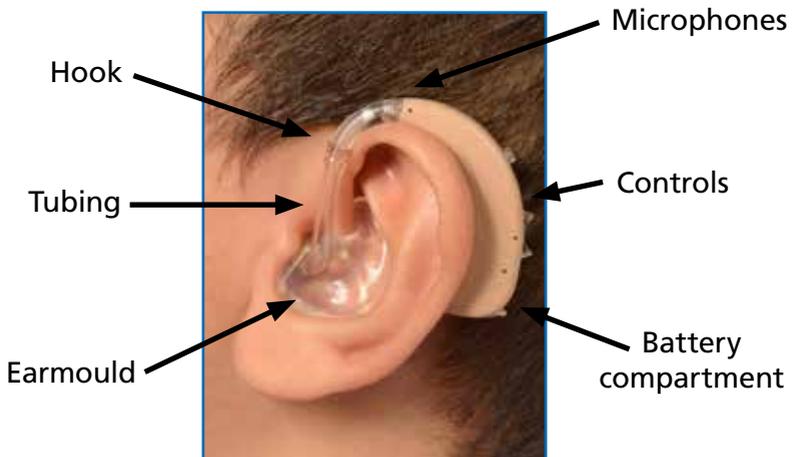
When we told you about your child's hearing loss, we should have discussed with you the benefits of a hearing aid. The job of a hearing aid is to make sounds louder. The sound vibrations entering the ear canal are made stronger so that the impaired cochlea can send a signal to the brain. The signal will not be perfect as the hearing aid does not make the hearing become normal, but amplifies sounds so that your child can hear them. The priority is to enable your child to hear as many speech sounds as possible, to maximise their opportunity for good communication.

Many factors will influence how much benefit a child gets from a hearing aid. These include degree and type of hearing loss, as well as other medical factors. A child who wears their hearing aid for more wakeful hours each day will have greater opportunity to benefit from it.

If a child's hearing aid is set too loudly for a long period of time, there is a risk of causing damage to the remaining hearing. We regularly review a child's hearing so that we can be aware of any changes, and we encourage you to alert us if you are concerned that a hearing aid is set too loudly. Hearing aids are set as accurately as possible to a child's individual prescription, and the maximum loudness is also limited for safety. These factors all minimise the potential risk to your child.

We are very happy to discuss these factors in more detail, so please do ask in clinic or contact us sooner if you have any questions or concerns.

What does the hearing aid look like?



What is an earmould?

The earmould is a soft, custom-made piece which fits into the outer part of the ear. It holds the tube which delivers the sound into your child's ear, and keeps the aid secure. These can be made in see-through plastic, or in a variety of solid or glittery colours, depending on your child's preference.

Children will need new earmoulds as they grow. If an earmould becomes loose the hearing aid will whistle. Since young babies grow quickly, they will need new earmoulds very frequently. The information below is intended to act as a general guide, but of course children all grow at different rates so please let us know if you think your child needs to have new earmould impressions taken.

Newborn – weekly or fortnightly

From three months – fortnightly

From six months – monthly

From one year – every three months

Older children – annually

We aim to provide a home visit service for impressions for babies until their first birthday, due to the number of appointments required. We regret that we are unable to visit older children at home, but we will endeavour to offer you a hospital appointment within two working days if you alert us that your child needs impressions. Impressions will also be offered in your hearing aid review appointments as required.

If your child has an active ear infection or if there is too much wax, we may not be able to safely take an impression. In this case, we will provide advice.

Replacement earmoulds will be posted to your home directly from the factory, unless you request otherwise.

When should we expect future appointments?

It is important that every child's hearing and hearing aid use is monitored closely, to ensure the aids are set optimally and they are getting full benefit from their aids.

Young children will usually be seen routinely on a three-monthly basis while we build a picture of reliable information about their hearing levels using behavioural testing methods. Behavioural testing can be attempted from seven months of age.

As children become older and more reliable at hearing tests, and particularly if their hearing is stable, we will agree with you to gradually lengthen the time between routine appointments, up to a minimum of one appointment per year.

When children can perform hearing tests reliably by pressing a button to indicate they have heard a sound (pure tone audiometry), appointments are run by a single clinician. At this time it may be possible for their hearing aid review appointments to take place at Ashford Hospital or Fleet Community Hospital, if either is more convenient for you. For younger children, two clinicians are needed for the appointment and the specialist equipment required is only available at the Royal Surrey County Hospital, Guildford.

What are real ear measurements?

When prescribing hearing aid settings, we aim to take measurements of the size and shape of your child's ears, by placing a thin tube into their ear next to their earmould. This does not hurt, and is an important measurement to make when possible. The measurement allows the aid to be set as accurately as possible, taking into account how the size and shape of that ear affects the sound coming from the hearing aid. For a successful measurement, the ear needs to be free of wax and infection, and the mould needs to fit well.

Young babies will have an appointment arranged for real ear measurements to be completed three months after their fitting, because they are growing so quickly.

What is data logging?

The hearing aids we use are very sophisticated and can record data such as the average number of hours of use per day, the noise level in the listening environment, and how frequently the user alters the settings.

This information is used in clinic to make adjustments to optimise your child's hearing aid settings. If you do not wish us to record this information on your child's hearing aids, please let us know and we will de-activate this function.

How do I fit the hearing aid?

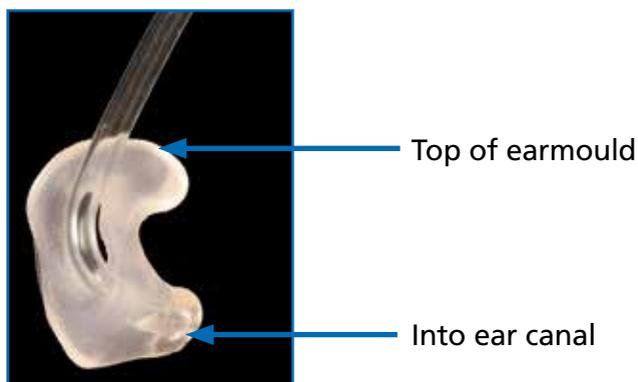
Concentrate on the earmould first – the hearing aid just loops over the ear once the earmould is in place. Make sure the earmould is inserted correctly in the ear. Incorrect insertion can cause feedback (whistling) and can feel uncomfortable.

Hold the back of the earmould with your finger and thumb and bring the earmould back past the ear in the position it will be when wearing it. If you are teaching your child to put their own hearing aid in, it is usually easier for them to use their right hand for their right ear and their left hand for their left ear.



The top of the earmould goes under the fold near the top of the ear. The part which holds the tubing goes down into the ear canal.

Fit the top and canal parts of the mould into the ear. Make sure that the top is tucked under the fold of the ear. Keep hold of the back of the earmould until you have completed this step.



Now let go of the back of the earmould and push it into the ear. It may help to pull the ear down and back at the same time.



When the earmould is in place, loop the hearing aid over the top and behind the ear.

How do I care for the hearing aid?

A hearing aid is a precious piece of equipment because it helps your child hear. It needs to be looked after carefully and to be put in a safe place when it is not being used e.g. when your child goes to bed at night.

The hearing aid itself doesn't like water. It should be taken out of your child's ear for example if your child is swimming or in the bath or shower.

If your child is taking part in PE at school and their hearing aid might come in to contact with anything hard (e.g. if they are doing gymnastics) they may want to take it out to protect their ear and the hearing aid.

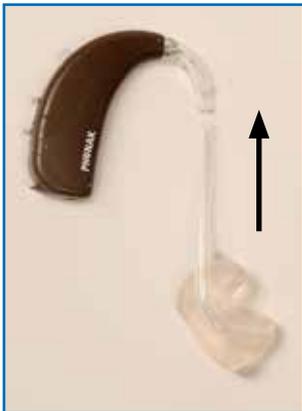
How do I clean the hearing aid?

The earmould and hearing aid need to be kept clean. You can wipe the earmould everyday with a dry cloth or anti-bacterial wipe (available from the chemist) before putting it in your child's ear.

The earmould will also need to be washed regularly with soap (the kind you would use on your skin) and water. If your child suffers with frequent ear infections the earmoulds will need to be soaked regularly in a sterilising solution (e.g. Milton) to prevent the spread of infection.



To wash the earmould you need to remove it from the hearing aid. To do this hold onto the tubing with one hand and the hearing aid in the other and ease the two bits apart, as shown. You may need to pull it fairly hard but this should not harm the hearing aid.



After you have washed the earmould there is likely to be some water remaining in the tubing. You can use the 'puffer' in your care pack to blow any water out of the tube before re-connecting the hearing aid.

To re-connect the earmould and hearing aid match the curve at the back of the ear-mould to the curve of the hearing aid and ease the tubing onto the elbow of the aid, as shown.

Moisture or condensation can build up in the tube. If this happens you can disconnect the earmould and hearing aid and use the puffer to remove the moisture. Some people find that they have moisture present in the tubing of the earmould most of the time; special tubing (known as stay-dry tubing) may be used to prevent this.

Ear wax can also block the tubing of the earmould causing the sound from the hearing aid to be less clear. A brush which has a hook on one end that can be used to remove any wax can be provided.

Can the tubing be replaced?

The tubing of the earmould will need replacing. How often the tubing needs to be changed varies from person to person. The tubing in your child's earmould may need changing because it has become hard or brittle, because it is completely blocked with ear wax, because it has fallen out of the earmould or because your child suffers with frequent ear infections (regular changing of earmould tubing can reduce the spread of infection).

Your Audiologist and Teacher of the Hearing Impaired will be able to change the tubing of the earmould for you. They will also be able to show you how to do it if you would like them to. If this is the case we can provide spare tubing for you to keep at home.

If the tubing frequently falls out of your child's earmould a tubing lock can be fitted to anchor it in place.

Do I need to dry the hearing aid?

Some hearing aids are sensitive to moisture building up from everyday use. This could cause them to work well for some of the time but not all of the time (known as being 'intermittent'). We will provide drying pots and tablets, which dry the hearing aids to prevent moisture from building up. They need to be used regularly, which could be every night when your child has gone to bed.

What about batteries?

Batteries can be collected Monday–Friday from 8.30am–5pm from Audiology reception, or at your child's appointments. Please see our 'Local NHS hearing aid battery centres' leaflet for details of other sites which may be closer to your home. You may be asked for a brown battery record book, which should be given to you when your child's hearing aid(s) are fitted and details which batteries they need.

How can I help my child get used to their new hearing aid?

Some children are happy to wear their hearing aids home from clinic and continue to wear them all of the time. Other children however take a little time to adjust to the new sound. If this is your child, here are some tips to help:

- At first get your child to wear their hearing aid(s) for short periods, maybe 30 minutes, 2-3 times per day. Try to keep them otherwise occupied during these periods and in environments where background noise is limited as much as possible. This maybe by playing with them, listening to or reading a story together, or watching a film. It is important that when they are using their hearing aid(s) they are exposed to quality sound, for example using noise makers (with very young children), singing nursery rhymes, or listening to/joining in conversation.
- If your child continues to pull their hearing aid(s) out, which at some stage most children learn to do, this is most often overcome by calmly continuing to re-insert the hearing aid(s).

Sometimes children may pull their hearing aid(s) out for a reason. This maybe because it is causing some physical discomfort, is a loose fit in their ear, falls away from their ear or loud sounds are uncomfortable. If you think this is the case, contact your audiologist.

- Some parents report that their children won't wear their hearing aids after school. You could try giving them a specified break, maybe for 30 minutes, and then start using the hearing aid(s) again. Communication and learning continues at home as well as school and being able to hear conversation at the dinner table or listen to the TV at a normal volume will make life easier for everyone.

Once a hearing aid has been fitted, the aim is for your child to wear it all through the day.

Troubleshooting tips: is my hearing aid faulty?

Sometimes a hearing aid becomes faulty or may appear to be faulty. Here is a list of common problems with remedies you can try.

If you are unable to solve the problem yourself and your hearing aid is still not working properly it may need to be sent for repair. Usually there is no charge for the hearing aid to be replaced or repaired.

What if there is no sound from the hearing aid?

- Check that the hearing aid is switched on properly.
- Check that there has been no accidental confusion between new and used batteries and that the battery is in the right way around. If the battery is in correctly and working you should be able to hear a high-pitched whistling sound when the aid is on but out of the ear with the volume (if manually adjustable) on maximum. Cupping your hand over the end of the earmould can emphasise this whistling.
- The earmould tubing may be blocked by ear wax. If this is the case you can attempt to remove it by washing, or using a pin head. If this is not successful try retubing the earmould (if we have shown you how to do this and given you spare tubing). If you are not able to retube the hearing aid yourself contact Paediatric Audiology for advice.
- The earmould tubing may be blocked by condensation. If this is the case a 'puffer' can be provided to dry the tubing.
- The hearing aid filters may be blocked. You can replace these if we have shown you how and given you spare filters. If you are not able to do this yourself contact Paediatric Audiology for advice.
- The hearing aid may be damaged or faulty. If you think this is the case contact Paediatric Audiology for advice.

What if the sound from the hearing aid is not clear or sounds distorted?

- The battery may be weak. Try replacing the battery with a new one.
- The earmould may not be inserted properly. Try reinserting the earmould using the guide in this booklet.

- This may happen if the earmould is not fitting into the ear well or if the hearing aid is damaged or faulty. If you suspect either of these causes please contact Paediatric Audiology for advice.

What if the sound from the hearing aid is not loud enough?

- The earmould may not be inserted properly. Try reinserting the earmould using the guide in this booklet.
- The earmould tubing may be blocked by ear wax. If this is the case you can attempt to remove it by washing, or using a pin head. If this is not successful try retubing the earmould (if we have shown you how to do this and given you spare tubing). If you are not able to retube the hearing aid yourself contact Paediatric Audiology for advice.
- The earmould tubing may be blocked by condensation. If this is the case a 'puffer' can be provided to dry the tubing.
- The hearing aid filters may be blocked. You can replace these if we have shown you how and given you spare filters. If you are not able to do this yourself contact Paediatric Audiology for advice.
- This may also be due to wax in your child's ears, a change in their ability to detect sounds, because the settings of their hearing aid(s) need adjustment or because their hearing aid is faulty or damaged. If you suspect any of these causes contact Paediatric Audiology for advice.

What if there is feedback (whistling) from the hearing aid?

- The earmould may not be inserted properly. Try reinserting the earmould using the guide in this booklet.
- This may also be caused by too much wax in the ear, the earmould being too loose or if the settings of the hearing aid need adjustment. If you suspect any of these causes please contact Paediatric Audiology for advice.

What if the hearing aid gets lost?

Your child's hearing aids remain the property of the Royal Surrey County Hospital, and are provided on loan for as long as they are required. We therefore ask and trust that you will take good care of them, to minimise the risk of loss and damage.

If aids are lost or damaged please contact us and we will aim to replace them as quickly as possible and without charge. However if some types of aids are repeatedly lost or damaged, it may be necessary to take a Team decision on whether to consider a less expensive or more robust type of hearing aid for your child.

If your child uses a radio aid system and any part of this (including the connecting shoes) is lost or damaged, you will need to contact your Teacher of the Hearing Impaired, as this equipment is property of the Physical and Sensory Support Service (Surrey) or Specialist Teacher Advisory Service (Hampshire).

Reference sources

- National Deaf Children's Society: www.ndcs.org.uk
- Modernising Children's Hearing Aid Services: www.psych-sci.manchester.ac.uk/mchas
- Department of Health. 2008. Transforming Services for Children with Hearing Difficulty and their Families: A Good Practice Guide. London: DoH

Our commitment to you

- To provide you with an excellent service and to meet your child's individual needs.
- To be available to you when you or your child need advice or reassurance.
- To provide support when you are coming to terms with a hearing loss.
- To ensure you and your child feel confident and happy using a hearing aid.

- To offer you a suitable date and time for appointments.
- To make every effort to see you on time for your appointments.

Your commitment to us

- To make every effort to arrive on time at appointments made for you.
- To inform us as soon as you know that you will be unable to attend an appointment.
- To help staff to help you by cooperating with them.
- To respect and care for any devices loaned to your child as best you can, as they remain the property of the Royal Surrey County Hospital.

How to contact Paediatric Audiology

The Paediatric Audiology telephone number is **01483 571122 ext. 4880**. Please leave an answerphone message if prompted. We endeavour to respond to all messages received within 24 hours or the next working day. Please contact us on this telephone number or alternatively email **rsc-tr.paedenquiries@nhs.net** if:

- You need to contact Paediatric Audiology for advice.
- The remedies above have not helped and you suspect that the hearing aid is damaged or faulty. A replacement hearing aid can be programmed and means of collection arranged.
- The problem occurring is not with the hearing aid itself e.g. if a new earmould is needed or the hearing aid requires some fine-tuning. If this is the case we can arrange a convenient time to see you and your child to work out the problem.
- **Unfortunately due to other clinic commitments it is not usually possible to replace/adjust a hearing aid if you drop-in without prior notification.**

Contact details

Please do not hesitate to contact us if you have any questions after reading this leaflet.

Paediatric Audiology

Telephone: 01483 571122 **ext** 4880

Please leave an answerphone message if prompted.

Alternatively please email: rsc-tr.paedenquiries@nhs.net

We endeavour to respond to all messages received within 24 hours or the next working day.

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–3.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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Future review date: January 2021

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