



FACT SHEET- Ear, nose and throat services

<p>What happens now?</p>	<p>A patient under 60 with simple hearing loss is first seen by an intermediate service which provides care to patients – generally older – to help them avoid going into hospital unnecessarily. If hearing loss is detected the patient is referred to Croydon Health Services NHS Trust audiology department for a hearing aid and other appropriate treatment.</p> <p>Any patient under 60 with hearing loss is referred to an ear, nose and throat (ENT) specialist (either intermediate or hospital service), most patients are then referred to Croydon Health Services NHS Trust audiology department. This means patients will have been on two waiting lists.</p> <p>All routine ear, nose and throat referrals from GPs should be triaged by the Croydon ENT triage service – to reduce the number of simple procedures happening in hospital. Waiting times are much lower in the intermediate service 2-3 weeks vs 18 weeks+. If the patient's condition is urgent or an emergency they would be referred to St George's Hospital ENT clinic.</p>
<p>Why is change needed?</p>	<ul style="list-style-type: none"> ▪ Long waiting times for hospital treatment ▪ Patients under 60 have more than one appointment unnecessarily ▪ Patients with urgent ENT issues have to go out of borough for treatment and at greater cost per procedure undertaken ▪ Patients are experiencing unnecessarily long waiting times for diagnosis and treatment/management of their condition ▪ Simpler ways for GPs to refer patients are needed
<p>What does the future look like?</p>	<ul style="list-style-type: none"> ▪ Croydon Health Service NHS Trust audiology department will accept direct referral for all hearing loss patients (excl. infection/discharging ears) for adults of all ages requesting scans as required ▪ Patients with an urgent ENT issue can be referred to the local intermediate ENT service
<p>What does this mean for patients?</p>	<ul style="list-style-type: none"> ▪ Shorter wait times for diagnosis and treatment/management ▪ Care closer to home ▪ Fewer appointments ▪ Fewer visits to different healthcare services
<p>What does this mean for GPs?</p>	<ul style="list-style-type: none"> ▪ The changes should not affect general practice other than revised referral forms

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<p>What improvements do we expect to see?</p>	<ul style="list-style-type: none"> ▪ Reduction in outpatient first appointments ▪ Reduction in outpatient procedures done in hospital – as more simple procedures will take place within the more local intermediate service
<p>When will it happen?</p>	<ul style="list-style-type: none"> • Agreeing new model with Croydon Health Services NHS Trust • Redesigning referral forms • Communications with stakeholders • Launch of new pathway (exact date TBC)
<p>Meet the team</p>	<p>Clinical lead Dr Shahab Karim</p> <p>Commissioning lead Paul Cooper</p>