

# Cleveland Hearing & Speech Center Program Evaluation Summary 2023 Audiology Services

## Summary of Services Executive Summary

The Audiology department showed continued growth in 2023 accounting for the 3rd straight year of growth in terms of number of clients served, number of hearing aids dispensed, and revenue generated. In addition, we saw growth in terms of the expansion of services offered, most notably, we added some basic cochlear implant services.

We remain focused on providing high-quality, evidence-based services that are efficient, effective and accessible to all. In 2023, we continued our practice of collecting subjective and objective outcomes and each individual but improved how we stored the data, allowing us to better report on them in the aggregate.

The hard work of our skilled team has continued to provide benefit to clients who are exceptionally pleased with our services.

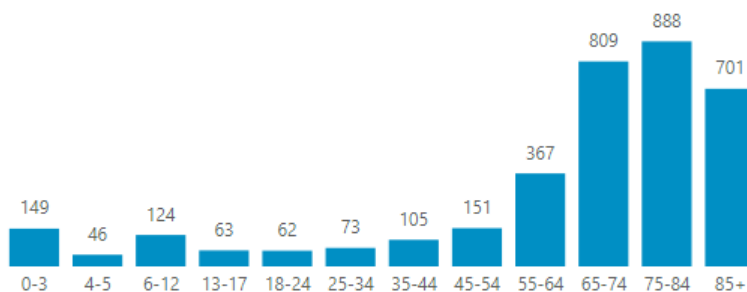
### **Who we serve**

In 2023, audiology served 3,541 unique clients in our offices with the following demographic breakdown:

55% female	57% White
42% male	17% black
3% unknown	2% Asian
	23% unknown

The overwhelming majority (89%) of clients we served in audiology were over the age of 18 with only 11% being pediatric clients.

Clients by Age



## Analysis

The number of individuals served in in-house at CHSC clinics continues to grow each year with a 20% growth since last year. It is not surprising that the majority of clients are adults as hearing loss is more prevalent as we age. We believe the reason we see more women has to do with the fact that many veterans (predominately men) are able to obtain free services from the VA. We serve slightly more white individuals than people of color compared to census data in Cuyahoga County. CHSC continues outreach in earnest in communities that have high numbers of people of color, however, hearing healthcare may not be considered a high priority – but we continue to educate in these communities.

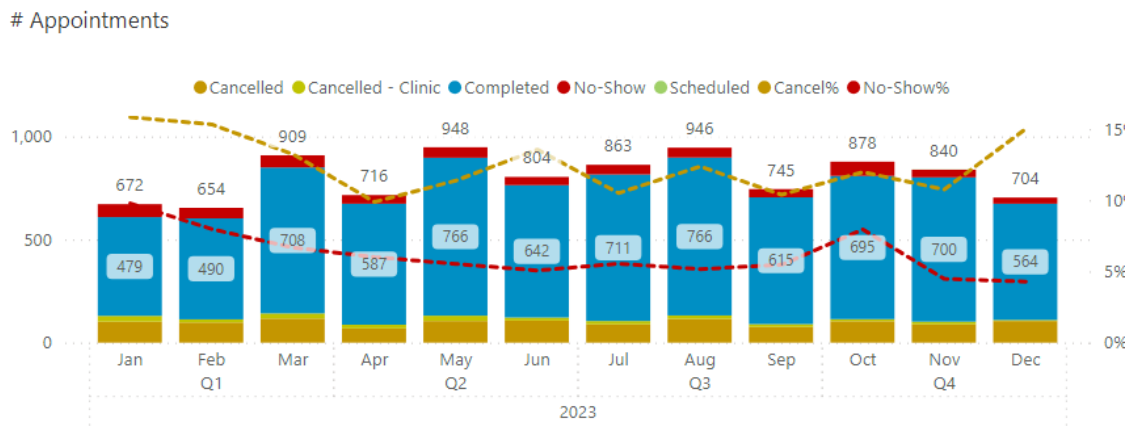
## Plan

CHSC is moving our headquarters in July 2024 into the neighborhood many of our clients live in, hoping to attract communities that may have difficulty accessing care or may not understand the importance of that care. We will have community events/outreach activities to ensure the community is aware our services are in their neighborhood.

## Efficiency Clinical schedules

In 2023, we had 9,679 appointments scheduled in clinic in the audiology department. This is a 19% percentage increase over 2022. We had an increase in number of appointments scheduled every single month of 2023 compared to 2022.

In 2023, 7,723 appointments were completed (approximately 80% of all scheduled appointments) with a combination of no-shows and canceled appointments accounting for the other 20%. This is an increase in the percentage of completed appointments over 2022 (74%) thus a decrease in the no show/ cancels since 2022.



Year-Over-Year

Year	Month	Appts	Appts PY	Appts YoY	No-Show%	Cancel%
2023	Feb	490	415	18%	8%	15%
2023	Mar	708	523	35%	7%	13%
2023	Apr	587	470	25%	6%	10%
2023	May	766	491	56%	6%	11%
2023	Jun	642	597	8%	5%	14%
2023	Jul	711	500	42%	6%	11%
2023	Aug	766	627	22%	5%	12%
2023	Sep	615	517	19%	5%	10%
2023	Oct	695	495	40%	8%	12%
2023	Nov	700	500	40%	4%	11%
2023	Dec	564	416	36%	4%	15%
2024	Jan	710	479	48%	5%	13%

The breakdown of appt's by office is below. In 2023, University Circle continued to have the highest No-Show / Cancellation rate (25%) compared to other offices. However, University Circle showed an improvement over 2022 (33%).

Breakdown by Office

Appt. Status	BH	LH	UC	WL	Total
Cancelled	223	416	284	253	1176
Cancelled - Clinic	39	97	58	8	202
Completed	1473	2707	1691	1852	7723
No-Show	71	175	226	105	577
Scheduled		1			1
<b>Total</b>	<b>1806</b>	<b>3396</b>	<b>2259</b>	<b>2218</b>	<b>9679</b>

**Analysis:**

In 2023 we added walk-in appointment times and same-day appointment times at all offices and encouraged the use of them instead of scheduling check-up appointments for clients 6 months in advance. These 6-month follow-up appointments had high rates of no-show/ cancel thus reducing those also decreased the number of no-show/cancellations.

University Circle continues to have the highest rate of No Shows/ Cancels which is not surprising given the low socioeconomic status of the neighborhoods this office serves. Transportation and securing basic necessities are challenges faced by this population.

## Plan:

Moving forward we will continue to fine-tune the schedules to ensure we are maximizing efficiencies and will modify appointment types/times as needed. In addition, our move from the University Circle office to the Midtown area (anticipated July 2024) will hopefully have a positive effect on the clients currently served by University Circle. Our office will be closer to the homes of many of the clients we serve, potentially reducing transportation barriers. The office is also on major bus lines and much closer to freeway access.

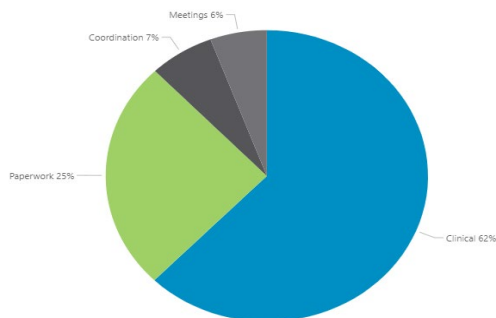
In addition, in 2024 we will add a targeted follow-up email protocol to clients to better stay in touch with them and remind them of the need for continued hearing healthcare in order to get the most out of their treatment.

## Productivity

We closely monitor how a clinician spends their time to ensure we are maximizing clinical schedules and providing efficient care. Our overall goal within the department goal is for clinicians to be in face-to-face contact with clients 60% of the time. In 2023 we met that goal with an overall productivity of 62%.

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### ALLOCATION OF TIME



## Analysis

We monitor this statistic closely for each individual clinician. Some clinicians who take on administrative responsibilities have lower percentages of time with clients and those who are fully clinically focused may have more time with clients. In addition, new clinicians may be given more coordination/paperwork time. Our range was 40-74% of time face-to-face with clients.

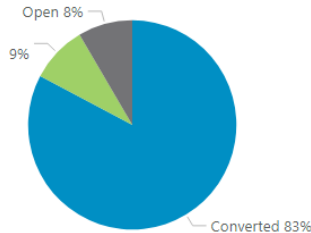
## Plan

We will continue to monitor and work to ensure each clinician is using their time in a manner that is most effective for treating our clients (clinical time) as well as moving our department forward (admin time).

## Help/ Opportunity Rates

We track the Opportunity rates of providers to assess their level of helping clients who are candidates for hearing aids. Our overall help/ conversion rate is very strong at 83%. (National information gathered suggests a help rate of 70% is very good and 80% would be an ideal goal).

Opportunities



## Analysis

We pride ourselves on finding the correct balance between helping a client who needs hearing aids for the treatment of hearing loss while not treating clients who are not emotionally ready to take the next steps. Because we have so many funding options for many clients we can remove the financial aspect from the discussion and we are able to focus more on the client's desire to treat their hearing loss (and possibly help them move to a space they are comfortable doing so) versus trying to "make a sale".

## Plan

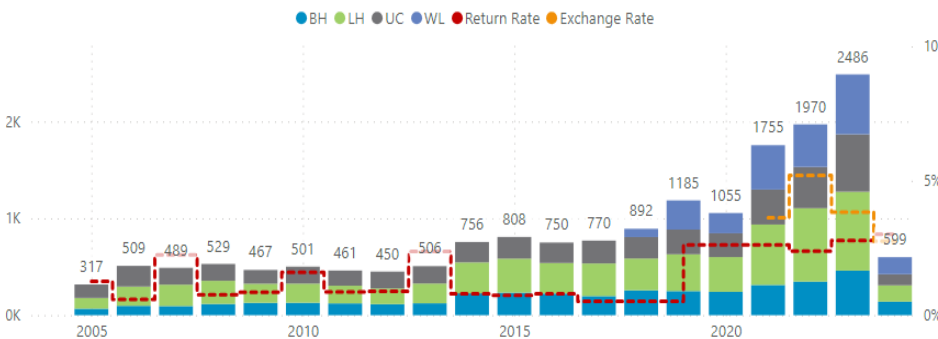
We are extremely pleased with our rates of treatment for hearing loss as they are favorable compared to national data. We will continue to monitor.

## EFFECTIVENESS

### Number of Hearing Aids dispensed

The number of hearing aids dispensed is a strong indicator of the growing impact of our services. In 2023, we set a target of 2250 hearing aids to be dispensed. We exceeded that goal by 11% dispensing 2,486 hearing aids.

# Hearing Aids Dispensed



- 2024 number only reflects sales through March 25, 2024.

## Analysis

The number of hearing aid units dispensed has been on a rapid incline for the past several years with a 223% increase since 2017. A large portion of this growth can be attributed to the advent of Medicare Advantage plans which provide insurance coverage for hearing aids and the Baby Boomers hitting an age where hearing loss is common. We expect we will see continued growth in hearing aid units for the next several years.

## Plan

We continue to strive to increase access to hearing healthcare including hearing aids which is the most effective treatment for hearing loss. We set a goal to dispense 2600 hearing aids in 2024 and plan to add a new staff member in April 2024 to help meet that goal.

## Return Rate

The return rate of hearing aids is one measure to judge the effectiveness of treatment and a client's satisfaction with the treatment.

## Analysis

CHSC's return rate is historically low and was 2.8% in 2023. (Goal was 5% based on national data).

## Plan

We are pleased with our return rate and will continue to monitor as a way of ensuring we are meeting the expectations of our clients.

## Outcomes

CHSC tracks outcomes for hearing aid fittings both subjectively and objectively to ensure effectiveness.



## Subjective Measure

Subjectively, we use the International Outcomes Inventory – Hearing Aids (iOi\_HA). This 7-question survey is given to new hearing aid users during their trial period and the information gained is used to help guide their treatment. One question of the iOi-HA is a pointed question and we use it to obtain aggregate data.

**Considering everything, how much have your new hearing aid(s) changed your enjoyment of life? 1=Worse, 2=No change, 3=Slightly better, 4=Quite a lot better, 5=Very much better**

There is normative data on the iOi-HA and we can compare our results to this data. National data is broken down based on mild moderate hearing loss (average score 3.7) vs. severe profound (average score 3.3). We are unable to segregate our data in that manner but have made our overall goal a 3.5 and we have far exceeded that with an average score of 3.83 which exceeds the national averages in both categories.

**Analysis:**

The use of the iOi-HA and the last question, in particular, has been a strong tool in judging the subjective benefit that the hearing aid provides. We are pleased with how our scores compare to national data. Additionally, we consider ourselves leaders the audiology community in using a data-driven approach to look at hearing aid outcomes in the aggregate.

**Plan**

We will continue to use this tool moving forward as we are pleased with the ease of use and the quality of the information it provides.

**Objective Measure**

Objectively we complete Real Ear measures on every hearing aid fitting. This measure looks at the audibility of speech for each individual and fine-tuning of hearing aids are guided by this measure. We aim for the client to meet “target” at all frequencies in the 500-4kHz range. We have met the target 77% of the time with a goal of 75%

**Analysis**

How to judge if a client “meets” target is an ongoing discussion as there has been some variability among providers in how they report. There does not appear to be any national consensus on this topic. In addition, due to the degree of hearing loss and other factors, it is not realistic for all clients to meet target and there does not appear to be any data on how many hearing aid fittings should meet target.

**Plan:**

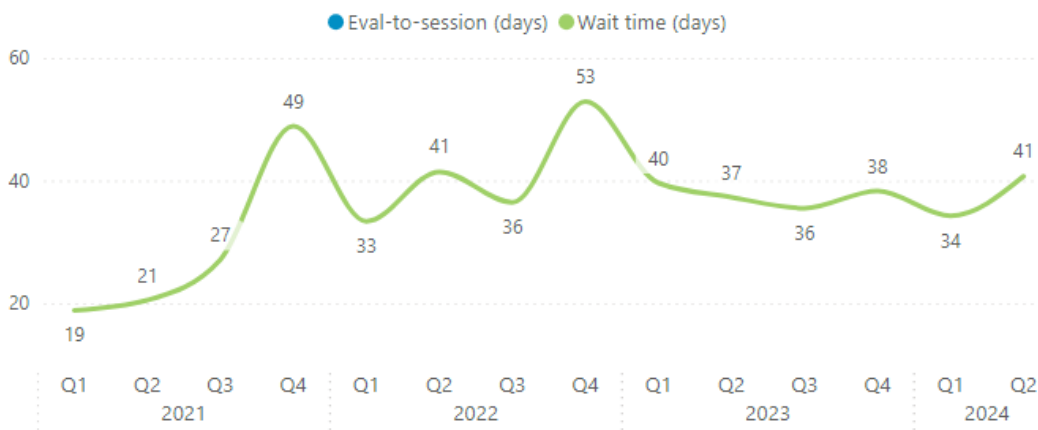
We will continue to educate staff on what CHSC considers to “meet target” and what is not (establishing our own intra-agency reliability). This will allow us to find an internal baseline and set goals for the percentage of clients who meet target. We can then look for trends amongst styles of hearing aids, manufacturers, and technology level to determine if there are clinical decisions we are able to make to encourage better outcomes. We can also determine if particular clinicians need additional support to obtain optimal outcomes across their client population.

## ACCESSIBILITY

### Wait time to first appointment

We analyze the accessibility of services in several ways. The wait time for first appointment for a new client is one measure we began tracking 2023 as we feel it is representative of overall accessibility of the schedule. Although this is a new metric we began looking at, we were able to look back since 2021. We see there is variability throughout the year with year-end being very high wait times. The range in 2023 went from 36-40 days.

Waitlist Duration



### Analysis

Our wait times are higher than we would like as there is a high demand for our services. The increased wait at year-end is likely due to clients trying to use their medical benefits prior to year-end and insurance company requirements that have cut-off dates which may push back appointments. Overall, we would like the average wait time to be under 30 days. In 2023 the average wait time was 38 days, which did not meet our overall goal.

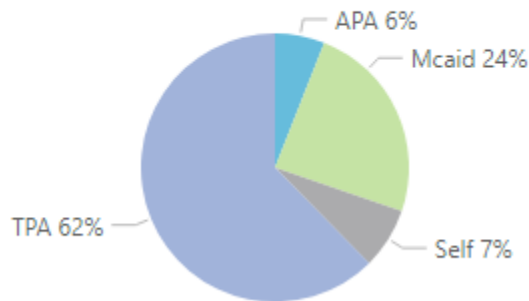
### Plan:

Due to high demand for our services and longer than ideal wait times, we hired an additional audiologist to begin in April 2024. This will hopefully provide more accessibility to open appointments and allow us to reduce wait times for initial appointments. We are also increasing the number of audiology aides we have in an effort to have simple, basic work handled by the aide versus using in-demand audiology time. We will continue to offer walk-in clinics several times per week for emergency hearing aid appointments for our existing clients, much of that work can be completed by an audiology aide.

## Financial Accessibility

The second way we look at accessibility is financial accessibility. CHC prides itself on providing services that are financially accessible. This is shown in our payer mix which shows that 93% of clients had low/ no cost options for hearing aids.

Clients by Payor



### Analysis:

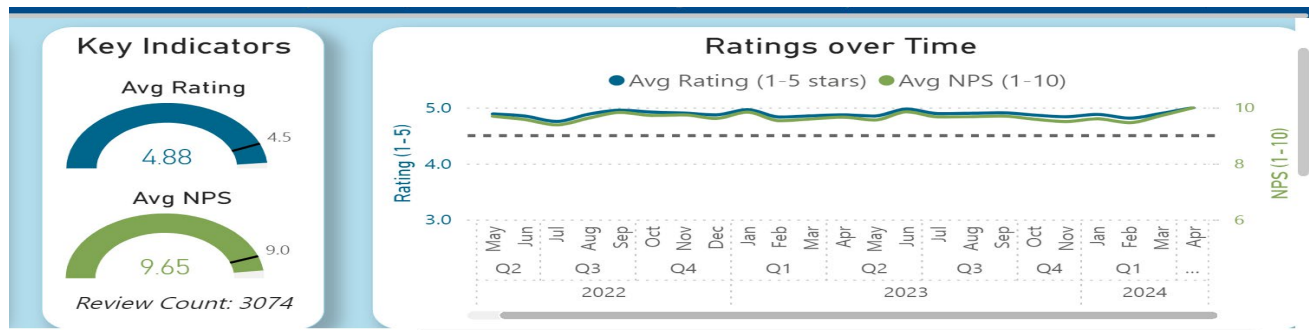
We provide great financial accessibility to the community for hearing healthcare and wish to continue to do so.

### Plan:

We plan to continue to accept a variety of insurance plans while continuing to seek out grant funding for our sliding fee programs. At the same time, we will also continue to pursue more self-pay clients which help provide more financial stability for the organization.

## Client Satisfaction

The department sources feedback through Gather Up. Clients are emailed to rate their services out of 5 stars and asked how likely they are to recommend CHSC to a family member or friend out of 1 – 10. These requests are sent after their first appointment and not more than one time in a 30 day period. The 1 – 10 rating is called a net promoter score (NPS) and indicates the loyalty of our client base. Clients who give a 9 or 10 are considered promoters who are loyal enthusiasts of our services and will keep coming back along with referring others to CHSC. Clients who give us 7 – 8 are considered passives who are satisfied with our services but may be vulnerable to moving to competitors. Clients who give us a 0 – 6 are detractors, who are unhappy with services with the potential to damage the brand. Any client who submits feedback that indicates they are not satisfied is contacted by the department director to attempt to rectify the situation, and client complaints are logged.



## Analysis

Overall, our responses have been overwhelmingly positive. In fact, many of our negative responses have been submitted in error (misunderstanding the rating system). However, we do individually follow up on any negative feedback. Themes we have seen include complaints with wait times/ scheduling difficulty and overall dissatisfaction with cost/ funding for hearing aids and cost of services.

## Plan

To address the common issues, we have expanded our audiology team and are adding a new audiologist in April 2024 to decrease wait times as well as continually revamping our schedules to allow for maximum efficiencies. In addition, we continue to work with as many managed care plans as possible to allow clients to use their insurance benefit as well as providing our Audiology Patient Assistance Program for those who cannot afford their co-pays or have no insurance

## Audiology in the Community

- CHSC played an integral role this year in assisting in providing on-site educational audiology services in 3 school districts.
- 107 children with hearing loss were served through our home-based early intervention program and 741 home visits were completed.
- 246 people reached through 12 educational seminars.
- Numerous others were connected with at 5 community-based health fairs.

