Barriers to replacing live appointments with tele-audiology in the canadian marketplace.

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Objectives: This study explores the feasibility of replacing live post fitting hearing aid recheck appointments with remote tele-audiology appointments using a smartphone and fitting software now commercially available in Canada. It also measures the frequency with which services are offered, accepted and completed while capturing qualitative data on barriers and interest in teleaudiology.

Background: Tele-audiology services such "Remote Support" available in the Phonak Marvel platform, show tremendous promise for health care delivery in reaching remote areas, reducing burdens associated with travel and enhancing services. However, previous research has shown numerous barriers including patient and clinician buy in and infrastructure.

Methods: 8 clinicians were trained using Remote Support and were instructed to offer each patient dispensed Phonak Marvel products their post fitting recheck appointment using it. They were then asked to document the frequency of recommendations, acceptance and completion with Remote Support.

Results: Of 163 patients fit with Marvel, 63% were offered a tele-audiology recheck with 6% accepting and 33% of those completed it. Results indicated clinicians do not routinely offer tele-audiology, reinforcing evidence that suggests clinicians are critical gatekeepers. Results also indicated that while tele-audiology is not likely replace some appointment types, qualitative data suggests significant interest in this technology.

Conclusions: Achieving buy in with clinicians is critical to achieving success with tele-audiology and training and reminding clinicians is unlikely to achieve this on its own. Tele-audiology should not threaten clinicians as this data suggests a need for live appointments; embracing tele-audiology is instead likely to provide a valued service as interest was a common theme. Barriers such as smartphone usage, comfort with technology and access in foreign markets are likely to improve over time while barriers such as limited vision and desire for interpersonal connections suggest a continuing need for live audiology services.