**Radio aids case study: capturing changes to local policy and practice**

**June 2019**

Following the release of research highlighting the benefits of using radio aids in the early years, NDCS launched its national campaign to increase access to radio aids, making them available for all pre-school deaf children who would benefit from one, and for this equipment to be available for use within pre-school settings, the family home and local community. Across England many local areas have engaged with our campaign, reviewing policy and practice and making changes.

**Background**

This is a case study from Norfolk County Council, including information on their policy on radio aids in the early years and information on the corporate insurance scheme, how it came about and how Norfolk VSSS team fits into it.

# Costs

**Overall cost of insurance to the service**

£315 per year arranged through the LA insurance scheme which covers approximately 150 radio aids, 3 wall pilots and 47 SoundFields systems, plus a considerable amount of other equipment for visually impaired CYP e.g. 18 CCTVs, over 70 iPads and over 50 laptops.

**Is this a block sum or costed per device?**

It is a block sum, but we had to list all the devices for the LA.

**Has the annual cost changed over time?**

This is the first year we have had to pay a premium – I think because we are claiming more and more each year – previously it had been subsumed into an overall Children’s Services insurance premium.

**Is there an excess to be paid? If so, who pays this?**

There is £100 excess – if being used at home only, we would pay. We tried to get settings to take responsibility for the £100 excess if equipment was lost or damaged while in their care, but this proved politically sensitive and difficult to implement.

# Process

**Are there any limits to the number of claims that can be made?**

Not to date.

**Is there any information or support that’s provided to families around safe and effective use of equipment? Are any particular messages given to families around reassuring them that they won’t be ‘in trouble’ if something happens?**

We do talk to families, CYP and settings (latter via an SLA as well) about how important the equipment is and how much it costs so they understand it needs to be looked after – this is due to so many being lost now the equipment is much smaller. Whilst this is emphasised we understand that losses do happen. Training for parent/carers etc, and ongoing monitoring is part of standard procedures. See below excerpt from our policy:

As part of the school’s agreement to this, the school has to -

* Keep a record in school of this equipment, in the student’s file.
* Ensure that the equipment is kept secure when not in use.
* Release staff for initial training which will be given at initial fitting where this is done in the school.

As part of the parents/carers agreement they will ensure the equipment is kept safe and used responsibly.

**Is there a process that families need to follow if a device is lost or damaged – is there any particular evidence they need to provide?**

Yes, all the equipment is covered, so we replace all losses and repairs. We will ask the TODs what has happened to the equipment as they will submit an HI repair/ loss form. In some cases, the insurance team have asked for a statement from the school/setting.

**What is the turnaround process to replace broken/lost equipment? Are families provided with a spare while they wait?**

We aim to turn around any equipment within 5 working days if it is damaged or needs repair but if the equipment has to be returned to the manufacturer or needs replacing completely we provide a spare – again within the 5 working days if possible.

# Coverage

**What does the insurance cover? Does it include minor repairs? Integrated receivers? Devices provided by health or others (e.g. MiniMic)?**

The cover is for loss and damage so yes it covers repairs but not equipment provided by Health.

**Are there issues around upgrades to devices – is this still covered under the policy?**

If they can’t repair because they don’t support it or if they are no longer available, they will replace for the latest version.

**Are there any specific exclusions?**

Not to my knowledge.

# Outcome or intended outcome

**Is there anything to report generally about the provision of radio aids in the early years, any early outcomes or feedback from families?**

We provide radio aids from when hearing aid use is established at the discretion of the ToD.

Under 5s should have integrated RX

All have either a Roger Inspiro or a Roger touch screen Tx and Roger Pens from Y9 –Roger Pens are not suitable in the primary years.

Feedback from families has been very positive as this is something some were requesting a number of years ago. Particularly useful in the car, at the playground, on the bus etc.