



# Holly Teagle, Chairing the programme

- Holly is associate professor in Audiology in Auckland , NZ, and clinical Director at The Hearing House, NZ.
- She had a key role in the development of the international consensus statements on adult CI



**CIICA LIVE**  
**THE LIVING GUIDELINES:**  
**IMPACT ON ADULT CI**  
**SERVICES AND ACCESS?**

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**CI LIVING PRACTICE GUIDELINES:**  
**Significance and Potential Impact**



**MEDICAL AND**  
**HEALTH SCIENCES**

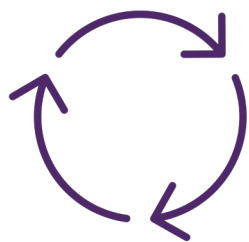


# What are Living Guidelines?

There is currently no standard of care for adult cochlear implantation

This project aims to create living practice guidelines that can be adapted and adopted in country, to optimise the care for adults eligible for cochlear implants

Find out more at  
[www.adultheating.com](http://www.adultheating.com)



“Living guidelines” are guidelines which are continually kept up to date as new evidence emerges.



Representative of  
the globe

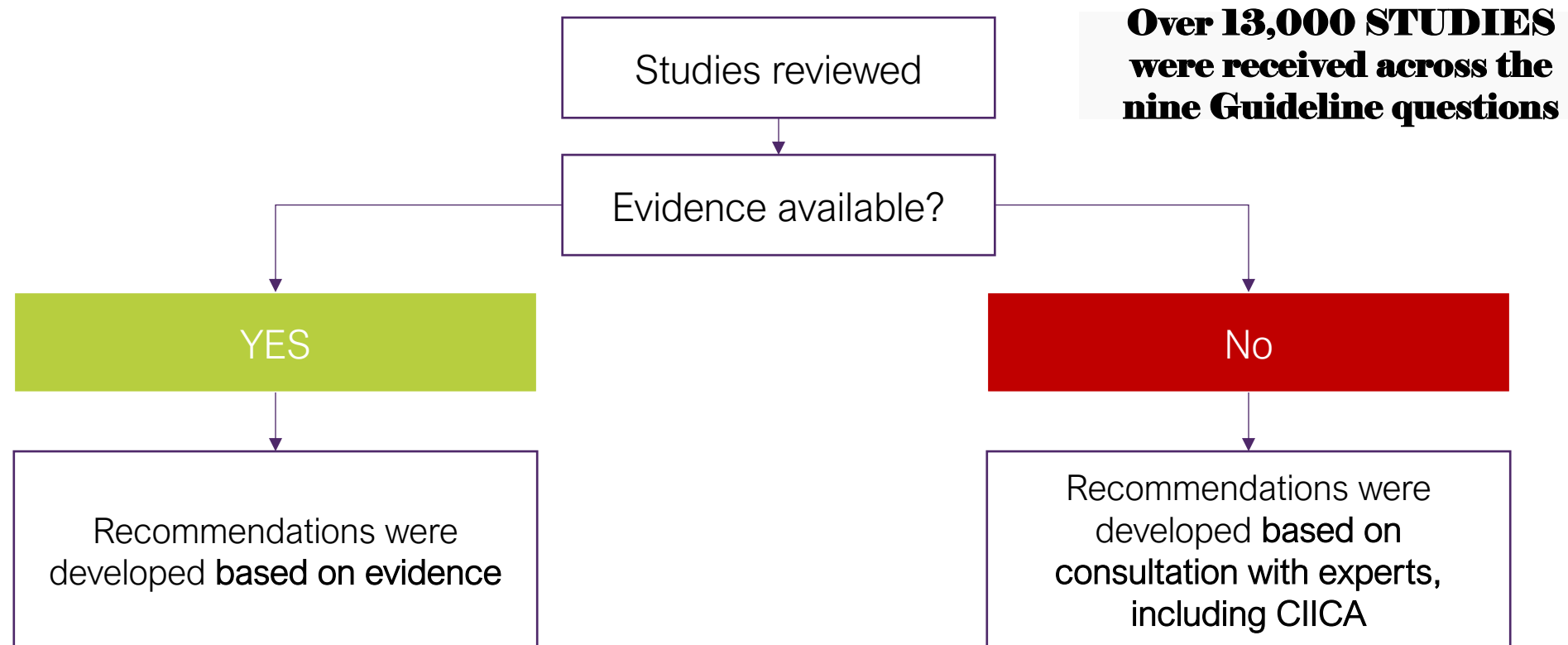


Representative of  
the healthcare  
practitioners across  
the hearing journey




Representative of  
the patient voice

# PHASE II: GUIDELINE CREATION



# PHASE III: PUBLIC CONSULTATION



CI TASK FORCE

**IMPROVING THE STANDARD OF CARE FOR ADULTS WITH HEARING LOSS AND THE ROLE OF COCHLEAR IMPLANTATION: LIVING GUIDELINES**

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DRAFT GUIDELINE FOR PUBLIC CONSULTATION  
CONSULTATION PERIOD 25TH FEBRUARY - 31<sup>ST</sup> MAY 2023

Hearing health is a recognised public health priority with prevalence of hearing loss rising worldwide.<sup>1</sup> Currently, there is a lack of awareness and inconsistency in diagnosing and managing hearing loss, especially severe to profound sensorineural hearing loss. Guidelines with clearly defined care pathways for adult cochlear implantation would enable consistent and equitable access to hearing healthcare and treatment.

An international collaboration of hearing experts, known as the CI Task Force, are leading the effort to develop Living Guidelines that will optimise care for hearing impaired adults, improve accessibility, and standardise treatment globally.

1. Wilson BJ, Tucci DL, Merson MH, O'Mahon D, Donoghue GM. Global hearing health care: new findings and perspectives. Lancet. 2017;390(10111):2603-2615.

**TO HAVE YOUR SAY AND PROVIDE FEEDBACK ON THESE DRAFT GUIDELINES CLICK HERE**



Public consultation occurred over **6 weeks** and finished on 31<sup>st</sup> of May



Final guidelines are expected to be published on 14<sup>th</sup> July

## LISTENING TO CI USERS AND FAMILIES



**Cochlear implantation should be part of the lifelong hearing journey:**

- “ It’s imperative that CI needs to be included on the hearing health continuum.

**Peer groups have major role to play before and after CI; they need guidelines:**

- “ Professional accompaniment is important, but also that of support groups, without it we walk alone without knowing where to advance, losing valuable time.
- “ Peer support may be the key for people, perhaps even more than psychological support.

**Assessments and their purpose should be clear to users and families and reflect functioning:**

- “ As a user, I have no way of comparing my own results and progress properly. I would like to know that I am getting the best possible results I can from the technology.
- “ Speech in noise (assessment) is definitely much more important because that replicates real life.

**Rehabilitation should include a counselling role: coaching can be key:**

- “ It’s astonishing that the range of mental health concerns are not being addressed . . . the jump from hearing aids to cochlear implants is massive. I don’t feel it’s being addressed.
- “ Relationships and dynamics in the family can change a lot after CI.