Worcestershire Acute Hospitals NHS Trust

Recommended Guidelines for ABR Testing Referrals

This guidance does not override the individual responsibility of health professionals to make appropriate decision according to the circumstances of the individual patient in consultation with the patient and /or carer. Health care professionals must be prepared to justify any deviation from this guidance.

Introduction

This guidance is intended to help newborn hearing screeners on when and how to refer babies for an Immediate Follow Up ABR.

This guideline is for use by the following staff groups:

Newborn Hearing Screeners
Admin for screening

Lead Clinician(s)

Kim Doughty	Local Manager/Team Leader
Approved by Audiology Governance	21st July 2026
Review Date: This is the most current document and should be used until a revised version is in place	21st July 2029

Key amendments to this guideline

Date	Amendment	Approved by:
July 26	No changes	Audiology Governance Meeting

INTRODUCTION

This guidance is intended to help newborn hearing screeners on when and how to refer babies into audiology for an Immediate Follow up Auditory Brainstem Response testing. This includes information to pass to parents/guardians.

The eligible population for the newborn hearing screen is all newborn babies born or resident in England and those babies under 3 months (12 weeks) of age or if born <40 weeks gestation, under 3 months (12 weeks) corrected age, who have moved into the area (and who are the responsibility of NHS England).

Babies referred for ABR testing by paediatricians.

Babies excluded from the screen - The four groups listed below should not undergo the newborn screen but must be referred directly to audiology for assessment ABR, using the current BSA guidance.

1. Microtia / external ear canal atresia
2. Confirmed or strongly suspected Neonatal bacterial meningitis or meningococcal septicaemia.
3. Programmable ventriculo-peritoneal (PVP) shunts in place.
4. Confirmed congenital cytomegalovirus (cCMV)

Paediatricians need to email the generic Audiology paediatric referral account wah-tr.audiologypaedreferrals@nhs.net or the Audiology account " wah-tr.AudiologyHearingServices@nhs.net to request an ABR, stating the baby's name, date of birth and NHS number. They also need to give the reason, mentioning one of the above 4 reasons, as to why they are referring for an immediate follow up ABR.

Babies for referral for ABR testing from the Newborn Hearing Screeners

For all babies whether classed as a Well baby or NICU baby, if they do not obtain a Clear response for Aabr testing, unilaterally or bilaterally, they need a referral into Audiology for ABR testing.

Screeners must explain the results to the parent/guardian and why they need to be referred on for further testing. A refer does not mean that there is a hearing loss present but further testing is needed to obtain more information on threshold of hearing.

Go through the "Baby's visit to audiology" leaflet or scan the QR code.
Explain what will happen at the appointment:
It will take approximately 2 hours, and baby needs to be asleep
Bring a feed, nappies and a change of clothing to help baby settle.
The test does not hurt, and they can stay with baby throughout testing.
They are welcome to bring someone to the appointment with them, but it is not recommended to bring other children, due to the length of the appointment and that conditions need to be quiet.
Express the importance of attending the appointment.
The results will be discussed after testing, though a second appointment may be needed.

Provide the parent/guardian with contact details in case they have any questions once they have left. Ask if they consent to text reminders.

ABRs can be booked at Worcestershire Royal Hospital. Kidderminster Treatment Centre or Alexandra Hospital. Ask where they would prefer to be seen.

Babies need to be seen within 4 weeks of the screen or when they meet 40 weeks corrected age for premature babies.

Generate an Appointment.

Upload screening results to Smart4Hearing and set outcome.
Check outcome is set correctly to:

No clear response – Unilateral Referral
No clear response – Bilateral Referral

If it is a referral from the paediatricians for an Immediate Follow Up ABR, the outcome must be set as:

Screen contraindicated

Check patient Status is set correctly to:

Follow – up (Immediate)

Enter details into Audibase using Hotkey 49 - ctrl shift 49

Email Local Manager for the Newborn Hearing Screen and Admin for screening/audiology to request an ABR appointment. Include name, NHS number and where they would prefer to be seen.

Monitoring

Page/ Section of Key Document	Key control:	Checks to be carried out to confirm compliance with the Policy:	How often the check will be carried out:	Responsible for carrying out the check:	Results of check reported to: *(Responsible for also ensuring actions are developed to address any areas of non-compliance)*	Frequency of reporting:
	WHAT?	**HOW?**	**WHEN?**	**WHO?**	**WHERE?**	**WHEN?**
	Ensure that all babies that need a referral are referred to Audiology for an ABR	A routine Newborn hearing screen referral Audit will be undertaken to ensure that the process is followed correctly	Annually	Local Manager Newborn Hearing Screen/ lead screener	Audiology ServiceManager/ Governance Team	Annually following audit

References

Newborn Hearing Screening Programme (NHSP) operational guidance. Published November 2016. Updated 26 July 2018. Public Health England.

Contribution List

Contribution List

This key document has been circulated to the following individuals for consultation;

Designation
Edward Southan – Interim Countywide Audiology Manager
Kim Doughty– Newborn Hearing Screen Lead
Jess Scully – Paediatric lead

This key document has been circulated to the chair(s) of the following committee's / groups for comments;

Committee
Audiology Governance

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and included as an appendix to key document when submitted to the appropriate committee for consideration and approval.

Please complete assessment form on next page;

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Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form
Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust	✓	Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust	✓	Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	**Edward Southan**

Details of individuals completing this assessment	**Name**	**Job title**	**e-mail contact**
	Kim Doughty	**Newborn Hearing Screening manager/Interim Lead**	**Kim.doughty@nhs.net**
Date assessment completed	**22.6.2026**		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	**Title:** Guidance			
What is the aim, purpose and/or intended outcomes of this Activity?	To check that babies/children are being referred to Audiology correctly.			
Who will be affected by the development & implementation of this activity?	✓ ❑	Service User	✓	Staff
	✓ ❑	Patient	❑	Communities
	✓ ❑	Carers	❑	Other
	❑	Visitors	❑	_____
Is this:	✓ Review of an existing activity ❑ New activity			

	❑ Planning to withdraw or reduce a service, activity or presence?
What information and evidence have you reviewed to help inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.	
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	These protocols are generally stipulated by NHS England
Summary of relevant findings	

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale**. Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age		✓		
Disability		✓		
Gender Reassignment		✓		
Marriage & Civil Partnerships		✓		
Pregnancy & Maternity		✓		
Race including Traveling Communities		✓		
Religion & Belief		✓		
Sex		✓		
Sexual Orientation		✓		
Other Vulnerable and		✓		

Equality Group	Potential positive impact	Potential neutral impact	Potential negative impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)				
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)		✓		

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
		.		
How will you monitor these actions?				
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)	**November 2026 when guidance needs reviewing**			

Section 5 - Please read and agree to the following Equality Statement

1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA	K Doughty
Date signed	22.6.2026
Comments:	
Signature of person the Leader Person for this activity	K Doughty
Date signed	22.6.2026
Comments:	

Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	No
2.	Does the implementation of this document require additional revenue	No
3.	Does the implementation of this document require additional manpower	No
4.	Does the implementation of this document release any manpower costs through a change in practice	No
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval.