Module 8 summary

Referral and Escalation

How to recognise hearing and ear problems, decide whether they are routine, urgent or an emergency, and escalate them safely in line with NICE and NHS guidance.

Key points

- Emergency (call 999) – hearing loss with stroke signs, a head injury with drowsiness, vomiting or fluid from the ear, or a swallowed battery.
- Urgent (GP or NHS 111 the same day) – sudden or rapidly worsening hearing loss, ear pain, discharge, swelling or new dizziness.
- Routine (arrange in the coming days or weeks) – gradual hearing changes, suspected earwax without warning signs, hearing aid faults.
- NICE recommends that sudden hearing loss which came on over 3 days or less in the past 30 days is seen by a specialist within 24 hours.
- Never assume sudden hearing loss is earwax.
- Hearing aid faults go to the supplier – the NHS audiology service or the private provider.
- Use a structured handover, for example SBAR, and record what you did.
- Urgent medical problems go to NHS services, never to a commercial hearing provider first.

Get help when

- Stroke signs, a serious head injury or a swallowed battery – call 999.
- Sudden or rapidly worsening hearing loss, ear pain, discharge, swelling or new dizziness – GP or NHS 111 the same day.
- Gradual hearing change, suspected earwax, hearing aid faults – the GP, practice nurse, or hearing aid supplier.

In an emergency call 999. For urgent advice contact the GP or NHS 111. Always follow your care home's policies and the resident's care plan.

Clinical review: pending — drafted November 2026 from the references listed. Awaiting review by a qualified audiologist.

Full module, quizzes and certificate: https://carehomehearing.org/training/referral-and-escalation/