

# Grasping opportunities and taking chances: an accidental journey to the perfect destination

**BY JONATHAN PARSONS**

Here, Jonathan Parsons tells us more about his journey from clinical audiologist to setting up a social enterprise in the National Health Service.



Chime Social Enterprise is directly contracted to the NHS.

**M**y route to Exeter and to a social enterprise has had several twists and turns and not many of these were thought out as a career route until circumstance meant a change in action. Talking to a few colleagues recently of similar age (and NHS pension taxation difficulties) I started out as a real youngster. Seventeen and thrown into a supernumerary course in the Trent region with three-month rotations in medical physics and physiological measurement. Never once visited by a supervisor in two years, this suited me fine as earning some money to pay for a motorbike and learning to live was much more a priority for me than getting excited about what I was learning. Prior to having an audiology exposure, I did like respiratory physiology because the department got you doing something meaningful rather than just sitting and watching. Audiology at Queen's Medical Centre (QMC) Nottingham was in similar vein: great fun, quickly seeing patients and making a difference - I was hooked. I loved the practical side. I spent a little time each week at Nottingham General and attended the local college to

obtain a BTEC as well as gaining BAAT qualifications along with colleagues who I still sometimes see at the BAA Conference.

A curtailed attempt at HTEC followed, entirely because I was not prepared to do any work. This was a theme that followed me from school - I had potential but it had been years since I had any enthusiasm for learning.

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I spent a short time in Leicester and then hooked up with Nick Setchfield again in Leeds. I learned so many things from him and he gave me a chance when my career was stalled - I'm forever grateful. I loved my time in Leeds. It was an exciting role - lots of balance work and also ABRs

on newborns. It was before any national protocol and tone pips were learned from textbooks, with experimentation where I could.

I had students to look after for the first time - you know who you are! The need for supervision skills led me to taking a 7307 City and Guilds teaching course at the local college in Leeds. For me the experience was revolutionary. At 26, or something like that, I suddenly discovered that I did want to learn and how rewarding that can be - something that has never left me since. I distinctly remember sitting in and observing an MPPM session at college and recognising my previous self amongst the students. I was fascinated with what was being taught - I hadn't ever really listened as a student.

After five brilliant years at Leeds, the desire to maximise my career potential had me applying for Head of Service posts when they arose. I was delighted at the end of 1995 to be appointed at the Royal Devon and Exeter Hospital. Nothing really prepares you for this leadership role. Managerial experience in my previous post was limited at the expense of being an expert clinician. This said, you quickly come

## AUDIOLOGY FEATURE

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to terms with hospital budgets, arguments to be won and when to take risks with overspends. I remember being pulled up short when asked what hearing aid I would fit to 'this child' and shown an audiogram. That had not been my speciality, but I had worked with the first paper versions of DSL previously. I got myself on a course – possibly the first one that Richard Seewald conducted in the UK, and this quickly influenced practice. In fact, after an NDCDS article in those early days, we had children attending from all over the country.

You find that you come up against brick walls in terms of what can be achieved locally, and that prompted me to look at what was happening nationally. It was clear that no recognised training structure and three professional bodies was not the way to be influential. Peggy Chalmers (bless her) and I went to see the then CSO Peter Greenaway and work began to correct the situation. A long story, but the British Academy of Audiology was formed in 2004 and I was proud to be the first president.

In the meantime, I had followed up on my new interest in learning and had completed an MSc in Healthcare at Exeter University. Hard work but I loved it. This enabled me, with some formal supervision, to be accepted onto the clinical science register.

The lessons over the years for me, have been that there wasn't a clear and obvious route for me but that you should grab the opportunities when they come along. If you have the values of the NHS at heart and work with the twin goals of wanting the very best for your patients and colleagues, this will drive you to find a way.

It is this grasping of opportunities that led us to take the plunge 12 years ago and turn our service into a social enterprise directly contracted to the NHS. We took advantage of the fact we were primary care trust-employed at the time and this allowed us, under 'right to request', to make the case to explore this model in terms of efficiency and quality. More learning ensued with 'how to run a business' – not something that the NHS particularly prepared me for, but seek and you will find help. I think we are onto something. It enables a hospital-based service to build on all the good things we do and have more control of the future. I will be very happy to talk to anyone about that who is interested in doing similarly. So, that is where I am currently and I still find the profession exciting and frustrating in equal measure but I wouldn't swap, and there are many different routes to a destination you may often be uncertain of.

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**Declaration of competing interests:** JP is employed by Chime Social Enterprise.