Engage Implementation Guide | **Introduction**

This document is the first in a series of four training guides designed to help your team implement the Immersive Engage demo consistently and confidently in clinical practice. It covers what the tool is, why it works, how to think about patient conversations, and how to get comfortable with the app before using it with real patients.

The remaining guides cover:

Appointment Type #1: Full Consultation
Appointment Type #2: Screening to Full Hearing Assessment
Appointment Type #3: Existing Patient Upgrade Visit

What is the Immersive Engage Hearing Aid Demonstration?

The Engage Hearing Aid Demonstration is a tablet-based hearing experience that allows patients and their companions to hear what today's advanced hearing aid technology actually sounds like, in realistic, real-world listening environments, before any treatment decision is made.

Unlike a traditional hearing aid demonstration, Engage does not require fitting a device to the patient's ear. Instead, the patient listens through headphones to audio that was recorded through actual hearing aid technology in real environments. That audio is then personalized to the patient's specific hearing profile, so what they hear reflects how that technology would actually perform for their pattern of hearing loss.

The experience takes five to eight minutes and walks the patient through a series of scenes:

Quiet Room	Patient listens with their own hearing, then toggles the hearing aid on. A low-stakes starting point that builds familiarity and sets a clear baseline.
Outdoor Environment	Demonstrates spatial awareness and directional features of advanced technology. The patient can rotate the tablet to experience 360-degree sound.
Noisy Restaurant	Demonstrates the capability of modern hearing aids in challenging listening environments with background noise. Patient can rotate to experience virtual reality-based directionality.
Hearing Loss Simulator	Allows a companion to hear a simulation of the patient's specific hearing loss. Increases companion's emotional buy-in and understanding.

Engage differentiates itself from the rest of the market by replacing explanation with an experience. The patient is not left to wonder what better hearing sounds like. They actually hear it.

Clinical Challenges This Tool Addresses

Every clinician working in hearing care knows the moments that are hardest to navigate: the patient who says they need to think about it and never comes back, a companion sitting quietly in the corner who does not seem to understand what is at stake, or even a live hearing aid demonstration that goes sideways because of a fit issue or feedback. Unfortunately, this is the current industry standard.

Engage helps eliminate those challenges by giving clinicians a consistent, controlled, experience-based tool that addresses them.

Patient ambivalence and objections

Hearing loss is unique among chronic health conditions in that patients often underestimate its impact on their lives. They have adapted and found workarounds, potentially convincing themselves and others that their hearing loss is not that bad. This decreases their motivation to find a solution.

So when a patient says “I need to think about it,” or “I am not sure I am ready,” what they are expressing is ambivalence toward a problem they aren’t sure they need to solve. However, this is not a firm decision against treatment. Empty words, statistics, and audiograms won’t be enough to move the needle, but experiencing the solution might.

Engage gives the patient a concrete, first-hand experience of what better hearing sounds like in the situations that matter most to them. The patient is able to ground their purchase decision experientially, giving them far more confidence in their choice and minimizing pre-existing objections.

Low patient buy-in

An often under-discussed aspect of hearing aid sales is the tension between intellectual and emotional decision-making. Even patients who acknowledge the extent of their hearing loss may struggle to connect that acknowledgment to a felt motivation to do something about it. They understand intellectually that treatment makes sense, but they do not feel it.

Emotional buy-in is built through personal relevance. The Engage demo, when introduced alongside a conversation about the patient's own priorities, creates a direct link between what the patient said they care about and what they just heard. Personal experience combined with understanding creates the motivation to adopt hearing aids.

The scripts in this guide are structured specifically to surface that personal relevance before the demo begins, so the experience lands in a context that is already meaningful to the patient.

Engaging the companion

Companions play a significant but often underutilized role in treatment decisions. They may have adapted to the hearing loss over months or years, speaking louder, repeating themselves, or simply avoiding situations where communication is difficult. What they cannot do is understand what the patient is actually experiencing.

The companion hearing loss simulation directly gives them that experience. In a matter of minutes, a companion can hear what their loved one's world sounds like, personalized to that specific hearing loss. The emotional impact of that moment is something clinicians consistently describe as one of the most powerful in the visit.

When a companion understands what the patient is living with, they become an active partner in the motivation to pursue treatment rather than a passive observer. Engage creates a clear, repeatable path to that engagement.

Live hearing aid demonstrations that backfire

The live hearing aid demonstration has long been a standard part of the hearing care consultation. It can be incredibly effective. It can also go wrong in ways that are difficult to recover from. Examples include a device not fitting comfortably, feedback startling the patient, sound quality that does not match expectations, or simply a rushed experience that leaves the patient confused rather than convinced.

Every one of those variables is outside the clinician's control. And when the demo goes wrong, it does not just fail to help, it can actively undermine the patient's confidence in the technology and in the clinician.

Engage removes those variables entirely. The clinician controls the experience from start to finish. The audio is consistent, the technology performs as designed, and the patient's reaction is to the technology's actual capabilities. This reliability also has a meaningful effect on clinician confidence, particularly for newer team members who may not yet feel comfortable navigating an unpredictable live demonstration.

Scripts: Motivational Interviewing for Patient Buy-In

Motivational Interviewing (MI) is a clinically validated, patient-centered communication approach originally developed for behavioral health settings and now widely used in chronic disease management, including hearing care. At its core, MI is a conversation style that helps people explore and resolve their own ambivalence about change rather than being told what to do by a clinician.

Four key principles

Ask, don't tell. Open-ended questions invite patients to articulate their own reasons for change. This is more motivating than any explanation a clinician can offer.
Reflect, don't react. Summarizing what a patient says back to them in their own words builds trust and helps them hear themselves more clearly.
Evoke, don't impose. The goal is to draw out the patient's intrinsic motivation, not to create motivation from the outside.
Support autonomy. Patients who feel they are choosing a path rather than being directed down one are significantly more likely to follow through.

Why does patient-centered communication matter in hearing care?

Again, we have to acknowledge how unique hearing loss is among chronic health conditions, specifically in that the person experiencing it often underestimates its impact. Meanwhile, the people around them see it clearly. Studies have shown that patients frequently arrive at a hearing appointment ambivalent, skeptical, or in denial. The traditional approach of explaining the audiogram, presenting the technology, and quoting the price produces the statistics we all know: low treatment acceptance, high return rates, and slow adoption.

MI-based approaches alters this dynamic. By surfacing what the patient already cares about, their relationships, their confidence, their ability to participate in life, and connecting that to the experience of better hearing, you are helping someone recognize something they already want.

How these scripts implement MI

Each script in this guide series is structured around three MI moments:

Discovery	Open-ended questions that surface the patient's own priorities before the demo begins.
Reflection bridge	A summary that connects their stated goals to the experience they are about to have.
Post-demo reflection	Questions that move the patient from what they just experienced to imagining their own future with better hearing.

These scripts are designed so that the clinician is a guide, not a salesperson. The patient does most of the motivational work themselves because that is what actually produces lasting change.

Preparing for Your First Engage Demo Patient

You can be ready to use Engage confidently with real patients in less than one hour of practice. The protocol below walks you through three stages, each with a clear time target and specific goals.

Total practice time: under 60 minutes

1	**Solo familiarization**	**30 minutes**

Before involving anyone else, spend time alone with the app until the mechanics feel natural. The goal of this stage is fluency, not perfection. When you are in front of a patient, your attention should be on them, not on remembering which button to press.

Work through the following tasks on your own:

- Open the app and navigate to the setup screen. Practice entering an audiogram for a mild-to-moderate hearing loss.

- Accept the recommended dome settings and move through to the scene selection screen.
- Open each scene, press play, and toggle the hearing aid on and off. Do this at least three times per scene until the toggle feels instinctive.
- Practice rotating the tablet in the outdoor scene to experience the 360-degree audio. Find a comfortable way to demonstrate this to a patient.
- Move through all three scenes in sequence, then return to the beginning. Practice scene transitions until they feel smooth.
- Open the companion hearing loss simulation scene. Toggle it on and off.

Goal: By the end of this stage, you should be able to navigate the full app without looking at any instructions. If you cannot, repeat the sequence.

2	**Internal role-play with coworker**	**15 minutes**

Pair up with a colleague, front desk staff, or any team member. One person plays the clinician. The other plays a patient who has just received their audiogram results. You do not need a full script, just run the demo section of the visit, from the discovery questions through to the post-demo reflection.

Roleplay guidelines:

- The person playing the patient should respond naturally. They can be curious, skeptical, or emotionally moved, whatever feels authentic.
- The clinician should practice asking the three situations question, running the reflection bridge, guiding through the scenes, and asking "What did you notice?" after the headphones come off.
- Rotate roles so both people experience the demo from the patient's perspective. This is valuable in itself, as it helps clinicians understand what the

experience feels like from the other side of the headphones.

- After both rotations, take five minutes to debrief: what felt natural, what felt scripted, what you would do differently.

Goal: Fluency with the talk track and the ability to hold a natural conversation around the demo experience, not recite a script.

3	**Soft launch with a low-stakes patient**	**15 minutes**

Your first real use of the Engage demonstration should be with a patient where the relationship is already warm and the stakes feel manageable. The best candidates are:

- An existing patient in for a routine review or annual check who you know well
- A family member or friend of a staff member who is willing to participate
- A patient who has already expressed openness to treatment and is returning for a follow-up conversation

Things may not go perfectly, and that is expected. The goal is to get the real experience of reading a patient's reactions, adjusting in the moment, and seeing firsthand how the demo lands with someone who is not playing a role.

Keep it to the demo portion only, approximately 15 minutes including the discovery questions and post-demo reflection. You do not need to run a full appointment script on your first try.

Goal: One real experience with a real patient. After this, you are ready to integrate the Immersive demo into your standard workflow.

Readiness checklist

Before using the Immersive demo with your first patient, confirm you can do each of the following without hesitation:

✓	Enter an audiogram and accept recommended dome settings without referring to instructions.
✓	Navigate through all three scenes smoothly, including scene transitions.
✓	Toggle the hearing aid on and off in each scene with confidence.
✓	Rotate the tablet naturally in the outdoor scene.
✓	Ask the three situations question and the companion question without it feeling forced.
✓	Deliver the reflection bridge in your own words.
✓	Ask "What did you notice?" and sit comfortably with the silence that follows.

When you can check every item on this list, you are ready. The scripts and detailed guidance for each appointment type are in the guides that follow.

Three Core Immersive Demo Use Cases		
Appointment Type	**Primary Goal**	**Demo Placed After...**
Full Consultation	Drive treatment acceptance for a new patient with confirmed hearing loss	Audiogram review and hearing loss counselling
Screening → Full Hearing Assessment	Convert a screened patient into a booked Full Hearing Assessment	Screening result and brief counselling
Existing Patient Upgrade Visit	Motivate a current hearing aid user to trial advanced technology	Review of current devices and listening challenges

Patient selection guidance:

- **Good candidates:** Audiogram within aidable range, accompanied by a companion, expresses interest in technology, on the fence about treating.
- **Skip the demo if:** Hearing loss outside demo range, overwhelmed or no interest in technology, already committed (don't delay with the demo).

Continue to Guide 2: Full Consultation