



audiology australia

**Submission to the Joint Standing
Committee on the National
Disability Insurance Scheme
(NDIS)**

**Inquiry into the provision of hearing
services under the NDIS**

30 January 2017

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Glossary of acronyms

3FAHL- 3 Frequency Average Hearing Loss

APA- Australian Physiotherapy Association

CAPD- Central Auditory Processing Disorders

CSO- Community Services Obligation

dB- Decibels

DSS- Department of Social Services

ENT- Ear Nose and Throat surgeon

kHz- Kilohertz

NACA- National Aged Care Alliance

NASRHP- National Alliance of Self-Regulating Health Professions

NDIA- National Disability Insurance Agency

NDIS- National Disability Insurance Scheme

OHS- Office of Hearing Services

Executive Summary

Audiology Australia thanks the Joint Standing Committee on the National Disability Insurance Scheme (NDIS) for the opportunity to provide a submission in relation to the inquiry into the provision of hearing services under the NDIS.

Audiology Australia is the peak professional body, representing 2,500 audiologists in Australia. Audiologists work with clients to help them to preserve, manage and improve their hearing, their ability to process and understand sounds, and their balance. Audiologists work with clients of all ages - from infants to older adults - and clients with complex needs to improve their ability to communicate and interact in all situations.

Audiology Australia provides the highest standard of self-regulation for its members and strives to meet the National Alliance of Self-Regulating Health Professions (NASRHP) Standards. Central to this self-regulation is the clinical certification program which includes: completion of an Audiology Australia Accredited Australian Masters-level degree and the one-year Audiology Australia internship; adhering to Audiology Australia's Code of Conduct, which is in line with the National Code of Conduct for Health Care Workers; and, meeting the rigorous Recency of Practice and Continuing Professional Development Requirements. In addition, Audiology Australia provides services to members such as the Professional Practice Standards, which provide guidance on evidence-based practice across the full range of audiological services.

Audiology Australia submits to the Joint Standing Committee:

1. That it supports a holistic assessment of the client's needs and goals in order to determine eligibility, rather than restrictive, threshold-based criteria.
2. That it is in line with the eligibility criteria for the NDIS to fund all permanent auditory and balance disorders that significantly affect individuals' ability to perform tasks and participate, not just hearing loss.
3. That it would like the opportunity to contribute to drafting, or to comment on, the NDIS eligibility criteria for people with auditory and balance disorders.
4. That it would like to work together with the NDIA to develop information training sessions for audiologists when the eligibility criteria are determined.
5. Its support for NACA's recommendations that Australian Governments ensure equitable service provision in the disability and aged care systems and that a review of the age requirements for the NDIS to determine if NDIS eligibility should be linked to the Age Pension age, as envisaged by the Productivity Commission.
6. That the NDIS must fund the full range of required rehabilitation services for hearing loss.
7. That it would like to work together with the DSS and NDIA to ensure that the costs of hearing devices and audiological services are transparent.
8. That funding for specific devices should be comparable between the Australian Government's Hearing Services Program and the NDIS.
9. That NDIS funding should allow for teleaudiology to be utilised.

10. That it supports full contestability of hearing services for all ages following the full rollout of the NDIS in mid-2019.
11. That it would like to work further with the NDIA to develop information and/or training sessions for audiologists regarding who can provide services under the NDIS, both during the transition phase and after full rollout in mid-2019.
12. That misinformation and confusion regarding the transition arrangements for hearing services to the NDIS is limiting participants' choice and control.
13. That the NDIA should recognise practitioner certification by NASRHP bodies.
14. That it would welcome the opportunity to further discuss with the Joint Standing Committee, DSS and the NDIA how its clinical certification and titling programs provide the assurance that audiologists are appropriately educated, trained and experienced to provide the full range of audiological services to participants.
15. That it would welcome a third-party verification system of provider registration which recognises clinical certification by Audiology Australia.

Audiology Australia would welcome the opportunity to discuss the submission points above as well as any other issues related to best practice and client-centred care with the Joint Standing Committee on the NDIS.

Introduction

Audiology Australia thanks the Joint Standing Committee on the National Disability Insurance Scheme (NDIS) for the opportunity to provide a submission in relation to the inquiry into the provision of hearing services under the NDIS.

Audiology Australia is the peak professional body, representing 2,500 audiologists in Australia. Audiologists work with clients to help them to preserve, manage and improve their hearing, their ability to process and understand sounds, and their balance. Audiologists help clients of all ages - from infants to older adults - and clients with complex needs to improve their ability to communicate and interact in all situations.

Audiology Australia's mission is to give value to its members as the peak professional body in audiology by providing education, advocacy, and setting ethical standards of practice, to ensure audiologists are able to deliver the highest standards of hearing health care and are valued by the community for their services.

Audiology Australia strives to succeed in this mission through various initiatives, including:

- Rigorous self-regulation for the profession of audiology, with Audiology Australia's clinical certification program at the core;
- Accreditation of Australian Masters-level degrees in audiology;
- Audiology Australia's Code of Conduct for members, which is in line with the National Code of Conduct for Health Care Workers (1);
- Scientific conferences and courses that promote evidence-based practice;
- Webinars on best practice available across Australia;
- Information Sheets and Issues Papers on political developments and changes to funding sources of relevance to members; and
- Audiology Australia's comprehensive Professional Practice Standards, which provide guidance on evidence-based practice across the full range of audiological services.

Audiologists provide services in a broad range of settings, including: early intervention agencies, aged care facilities, hearing aid clinics, medical practices, educational facilities, hospitals, community health clinics, government funded agencies, cochlear implant clinics, private practice, and ear nose and throat (ENT) specialist and otology clinics.

Audiologists are hearing health care experts, which includes treating auditory processing and vestibular (balance) disorders.

Audiology Australia notes that the NDIS is in its infancy and is yet to be rolled out in many regions and for many age groups throughout Australia. Audiology Australia therefore does not draw definitive conclusions about the future efficacy or appropriateness of the NDIS based on the experiences reported by its members to date.

Audiology Australia believes that the NDIS offers a promise of a brighter future for Australians with auditory and balance disorders. Audiology Australia is optimistic that the future eligibility requirements and funding for this scheme will be sufficiently inclusive to enable access to the scheme for all those whose lives are negatively impacted by hearing loss and other auditory and balance disorders.

However, members of Audiology Australia have raised a variety of concerns about their experiences with the NDIS during the transition period. These are included in this submission. Audiology Australia hopes to further explore these issues, the lessons learned and how they can be resolved during a hearing with the Joint Standing Committee.

Audiology Australia's response to the terms of reference

a. the eligibility criteria for determining access to, and service needs of, deaf and hearing impaired people under the NDIS

1. The NDIS offers promise of a brighter future for Australians with auditory and balance disorders

Audiology Australia welcomes the possibility of funding for hearing health care for all Australians under 65 years of age, as a result of the NDIS. Audiology Australia is optimistic that the future eligibility requirements for this scheme will be sufficiently enacted as to enable access to the scheme for all those with hearing loss and other permanent auditory and balance disorders that:

- Reduces their ability to participate effectively in activities, or perform tasks or actions unless they have:
 - assistive technology or equipment (other than common items), or
 - can't participate effectively even with assistance or aides and equipment, **and**
- Affects their capacity for social and economic participation, and
- Are likely to require support under the NDIS for their lifetime (2).

1.1 A more holistic approach to eligibility determination is welcomed

Audiology Australia's position is that audiologists should develop a rehabilitation plan, together with the client and their family, by performing a holistic assessment that includes:

- standard and advanced audiological diagnostic assessments;
- the availability/provision of rehabilitation options that focus on communication needs, participation and capacity building; and,
- an assessment of their individual circumstances, needs and goals (3).

1. Audiology Australia submits that it supports a holistic assessment of the client's needs and goals in order to determine eligibility, rather than restrictive, threshold-based criteria.

Audiology Australia therefore welcomed the move away from 'hearing threshold-based' policies currently in place for the fitting of aids under the Australian Government's Hearing Services Program Voucher Scheme (4). A more holistic approach to eligibility determination will not only ensure that all Australians receive the services they need, but will also encourage the spread of best practice approaches throughout the hearing services sector. At the same time, this will help to ensure that service provision is more tightly matched to clients' needs, thereby providing a more affordable and realistic option for government.

1.2 Treatment for all auditory and balance disorders

Audiology Australia has welcomed reports from members that auditory and balance disorders other than hearing loss may be able to be funded under the NDIS, including:

- Central Auditory Processing Disorders (CAPD);
- Balance disorders such as Ménière's disease; and
- Tinnitus.

Audiology Australia submits that all auditory and balance disorders should be recognised and, where appropriate, funded by the NDIS as these disorders can:

- be permanent;
- progressive;
- have substantial negative effects on people's mental health and wellbeing;
- substantially reduce people's abilities to participate in or perform daily activities; and
- can affect people's ability to gain employment.

2. Audiology Australia submits that it is in line with the eligibility criteria for the NDIS to fund all permanent auditory and balance disorders that significantly affect individuals' ability to perform tasks and participate, not just hearing loss.

2. Contradictory and incorrect information is widely spread regarding the eligibility criteria for participants with auditory and balance disorders

2.1 Eligibility for people with hearing loss

To promote a consistent approach to eligibility while simultaneously allowing for the individual and unique needs of each NDIS participant to be met, it is important to clarify the eligibility of people with hearing loss for NDIS services. As stated in Section 1.1, Audiology Australia welcomes the opportunity for funding for a more holistic approach to eligibility determination. However, the confusion regarding the eligibility criteria and the contradictory information that is spreading may limit individuals' access to services they need and their eligibility for funding under the NDIS according to its broader principles.

In this section, examples of situations experienced by Audiology Australia members and their clients are presented to illustrate this confusion. Audiology Australia cannot make any guarantees as to the accuracy of the examples provided by members. However, they are recounted if they reflected a pattern expressed by more than one member and across multiple rollout sites, or if accurate details could be provided.

Feedback from Audiology Australia members predominately related to confusion and concern around the NDIS eligibility criteria for auditory and balance disorders. This confusion and concern has only been amplified as a result of the delay in the release of the NDIA's access (eligibility) work package which was originally planned to be released in the first half of 2016 (5). Furthermore,

audiologists and their clients have received contradictory information from NDIS Planners and other NDIS staff regarding the eligibility criteria for people with hearing loss.

As stated in submission point 1 above, Audiology Australia is hopeful that the NDIS will determine eligibility for participants with auditory and balance disorders based on a best practice holistic assessment. Audiology Australia is therefore concerned by reports from members that they have been directly advised by NDIS staff that the Hearing Services Voucher Scheme Minimum Hearing Loss Threshold (4) or other 'threshold-based' criteria are being enforced by the NDIA.

Another member reported that an NDIA staff member stated at a community information session that a minimum 65 dB 3 Frequency Average Hearing Loss (3FAHL) was required to be eligible for the NDIS. This suggests the presence of a moderate-severe hearing loss, at which point the person would be unable to perceive speech or environmental cues in an optimal listening environment (quiet place; speaker less than 1 metre), without amplification. Furthermore, the 3FAHL is calculated from low- and medium- frequency thresholds (0.5, 1 and 2 kHz), missing many important higher frequencies that are tested as standard practice (up to 8 kHz) and which are essential to understand speech. Speech sounds such as 'k', 'f', 's', 't' and 'h' are found above 2 kHz and may not be heard clearly in the presence of even a mild hearing loss (>20dB). A mild- to high- frequency hearing loss may therefore impact a person's ability to understand and function safely in background noise. Furthermore, a 65 dB 3 FAHL cut-off is very high when compared to the 23 dB 3 FAHL Minimum Hearing Loss Threshold policy for the fitting of aids or alternative listening devices under the Australian Government's Hearing Services Program Voucher Scheme (4). A range of personal and psychosocial factors in addition to degree of hearing loss should be considered when determining eligibility.

2.2 Eligibility for people with other disorders including CAPD, tinnitus and balance disorders

As stated in submission point 2 above, Audiology Australia believes that it is in keeping with the eligibility criteria for the NDIS to fund all auditory and balance disorders including Central Auditory Processing Disorders (CAPD), tinnitus, and balance disorders such as Ménière's disease, where appropriate. These disorders may be permanent and disabling, and may reduce a person's capacity to engage in everyday activities. This meets the requirements of the NDIS as interpreted by Audiology Australia in section 1.

There is confusion about funding for tinnitus. A member of Audiology Australia was informed that supports for tinnitus would no longer be funded by South Australia Health, as this program would move over to the NDIS. However, they have since been informed that their young and adult clients with severe tinnitus are receiving the advice that they will be unable to access the NDIS. Audiology Australia's assessment of the situation is that other members are unaware that tinnitus could be considered under the NDIS.

2.3 Advice and decisions vary greatly between NDIS Planners

Audiology Australia members frequently report significant variability in NDIS planners' understanding of the eligibility criteria for auditory and balance disorders. Consequently, members have experienced difficulties understanding how to best help their clients access NDIS supports. As illustrated above, confusion and incorrect information about eligibility for the NDIS is widespread.

Audiology Australia is not aware of the current status of the NDIS access (eligibility) work package promised in the first half of 2016 in the Hearing Services Program NDIS Transition Plan (5). Audiology Australia was not consulted during the development of this package, despite being the peak body

representing audiologists in Australia. Audiology Australia would appreciate the opportunity to contribute to drafting, or to comment on, the eligibility criteria for people with auditory and balance disorders before it is finalised.

3. Audiology Australia submits that it would like the opportunity to contribute to drafting, or to comment on, the NDIS eligibility criteria for people with auditory and balance disorders.

3. Audiology Australia proposes that it work together with the NDIA to train audiologists in writing recommendations to NDIS Planners

Audiologists frequently contact Audiology Australia asking for advice on how to write reports and advice to NDIS Planners as this is a new system and it presents many new challenges. Furthermore, the lack of clarity regarding eligibility for the NDIS creates uncertainty about which aspects of the person's needs and goals are relevant to the NDIS Planner when making decisions about participants.

Audiology Australia is willing to provide the resources necessary to train audiologists in how to write appropriate reports to NDIS Planners and how to best support their clients throughout the NDIS application process. However, in order to provide accurate advice to members, Audiology Australia must first receive the definitive information regarding eligibility directly from the NDIA.

4. Audiology Australia submits that it would like to work together with the NDIA to develop information training sessions for audiologists when the eligibility criteria are determined.

4. Eligibility for older Australians nearing retirement age

In Audiology Australia's submission to the House of Representatives Standing Committee on Health, Aged Care and Sport's Inquiry into the Hearing Health and Wellbeing of Australia, the disparity in the levels of support available to older Australians when compared to younger Australians as a result of the NDIS rollout was highlighted. This inequity included:

- Access to non-means-tested support for hearing needs for Australians under the age of 65; and
- The option for a greater level of support and more holistic rehabilitation under the NDIS than under the Office of Hearing Services Voucher Program for older eligible Australians, including Pensioner Concession Card holders and Department of Veterans' Affairs Gold and White Card holders.

As a member of the National Aged Care Alliance (NACA), Audiology Australia strongly supports the recommendations outlined in NACA's Discussion Paper titled "improving the interface between the aged care and disability sectors" (6). In addition to addressing the points above, this NACA Discussion Paper also requested that:

- *"The age cut-off for NDIS eligibility could be adjusted in line with the Age Pension age, as envisaged by the Productivity Commission (7), to prevent a misalignment of systems where a person who acquires a disability between the age of 65 and 67 years cannot access the NDIS and, in practice, may have limited access to supports within the aged care system to support remaining in or returning to the workforce."*

5. Audiology Australia submits its support for NACA's recommendations that:

"Australian Governments ensure equitable service provision in the disability and aged care systems, through co-designed, clear and comprehensive policy that aligns markets, services and funding to ensure that older people with disability, and people with younger onset dementia, receive the support they need from the most appropriate system."

"The legislated review of the aged care reforms in 2016/17 include a review of the age requirements for the NDIS to determine if NDIS eligibility should be linked to the Age Pension age, as envisaged by the Productivity Commission."

c. the adequacy of funding for hearing services under the NDIS

5. The NDIS offers promise of a brighter future for hearing impaired Australians

5.1 *Treatment for hearing loss requires more than just hearing aids*

Audiology Australia hopes that the NDIS will live up to its aspirations to fund holistic rehabilitation services based on the individual needs and goals of participants. This will allow for the provision of rehabilitation options that focus on communication needs, participation and capacity building.

Although there is often a focus on hearing aids in the media and public debate, hearing aids alone are not sufficient for effective habilitation/rehabilitation for hearing loss and its consequences. Audiologists are trained to offer a holistic rehabilitation plan that may also include: (1) support and counselling (as needed) for the individual and family to improve ability to participate in activities that are meaningful to them; (2) individual and group aural rehabilitation; (3) behaviour change counselling; and, (4) devices as alternatives to or in addition to hearing aids¹. It is only through such holistic rehabilitation that outcomes for hearing impaired Australians can be met across all of the domains in the NDIA's outcomes framework: 1. choice and control; 2. daily living activities; 3. relationships; 4. home; 5. health and wellbeing; 6. lifelong learning; 7. work; and, 8. social, community and civic participation (8).

6. Audiology Australia submits that the NDIS must fund the full range of required rehabilitation services for hearing loss.

5.2 *An opportunity to unveil the true cost of hearing devices*

The cost of hearing aids and other devices to assist with hearing and auditory processing disorders can be prohibitively expensive for many Australians. Audiology Australia members have described that a "bundled" package for one hearing aid can range from \$2,000 to \$5,000 (9). The term "bundled" refers to the bundling of the audiologist's service fee and the device into one package- a practice that Audiology Australia is opposed to as it simultaneously diminishes the value of the audiological service and obscures the true cost of the hearing aid. Audiology Australia would welcome the opportunity to work together with policy-makers at the Department of Social Services (DSS) and the NDIA to address this issue.

7. Audiology Australia submits that it would like to work together with the DSS and NDIA to ensure that the costs of hearing devices and audiological services are transparent.

¹ Such as telephone adapters, frequency modulation (FM) systems and streamers, television devices for hearing assistance, as well as specialised smoke alarms and other safety equipment.

6. Experiences to date of audiologists and their clients regarding NDIS funding for services

Audiology Australia has concerns that access to funding through the NDIS may be inconsistent within and across regions, and appears to be dependent on many factors that may not relate to individual participants' needs and goals. These include:

- the level of advocacy families and individual NDIS participants can afford to invest time and money into;
- the NDIS planner's knowledge of and attitudes towards hearing services; and
- location/jurisdiction.

Audiology Australia members provided examples of funding discrepancies for participants with similar needs and goals. These included the following:

- some participants get funding for higher technology hearing aids, whereas others do not;
- some participants struggle to get funding for aural rehabilitation aimed at capacity building, while others do not; and
- some participants receive funding for higher-level technology to meet their needs while at work or university, while others do not.

This highlights the need for audiologists to become proficient in advocating for their clients as well as for the issues we raise in section 2 to be addressed. Audiology Australia is going to continue to organise information sheets and events that teach audiologists how to advocate for their NDIS clients.

Audiologists have also reported that the level of funding some clients receive is not comparable with the Australian Government's Hearing Services Program CSO scheme. We have received reports that clients have been told that they can receive more funding for a given device through the CSO scheme than through the NDIS. There is therefore an incentive to encourage clients to 'shop around'. Audiology Australia's position is that funding for specific devices should be based on individual goals and needs, and should at least be comparable across all Government-funded programs.

8. Audiology Australia submits that funding for specific devices should be comparable between the Australian Government's Hearing Services Program and the NDIS.

d. the accessibility of hearing services, including in rural and remote areas

7. Rural and remote areas- the NDIS poses an opportunity for innovative service delivery models and new providers of services

In Australia, the prevalence of ear disease and hearing loss in Indigenous communities is often significantly higher than in the overall Australian population, particularly in remote areas.

Audiology Australia shares the concerns of consumers that access to services for people in rural and remote areas may decrease once there is no longer an obligation for Australian Hearing to continue to deliver services under the CSO scheme. This may present a risk that these services will no longer be available in rural and remote areas. Audiology Australia believes that this situation may be faced by many disability and health services in addition to hearing services, as the NDIS rolls out. Audiology Australia would therefore welcome the opportunity to discuss possible solutions to help ensure the availability and choice of services in rural and remote Australia.

7.1 Teleaudiology may aid service delivery in rural and remote areas

Advances in technology provide new and exciting opportunities for the delivery of services (10), especially in remote areas where access to health care is limited and significant inequalities exist (11). Teleaudiology² and teleotology, therefore, is likely to shape future audiological practice by changing the way services are delivered to these populations. **Audiology Australia's position is that telepractice is an appropriate model of service delivery for the audiology profession.**

Teleaudiology is already used in Australia by, for example: Australian Hearing for fitting hearing aids; The Shepherd Centre in assisting children develop their listening, spoken language and social skills (12); and SCIC (Sydney Cochlear Implant Centre, a Royal Institute for Deaf and Blind Children service) in the programming of cochlear implants (13). Indeed, the majority of services related to cochlear implants can be delivered using telepractice, from otoscopy to cochlear implant programming (14).

If teleaudiology was funded under the NDIS, expected outcomes include:

- Increased and more timely access to audiological services for populations who are unable to access face-to-face services due to geographical reasons;
- Increased and more timely access to audiological services for populations who are unable to access face-to-face services due to socioeconomic or physical disadvantage;
- Increased professional support to personnel involved in delivering services; and
- Competent performance of services and mitigation of risk for patients and clinicians.

9. Audiology Australia submits that NDIS funding should allow for teleaudiology to be utilised.

² Teleaudiology is defined as the use of telecommunications technology such as the internet, computer networks, videoconferencing or telephone to provide access to audiological services for patients who are not in the same location as the clinician (3).

e. the principle of choice of hearing service provider

8. Audiology Australia supports the contestability of all hearing services in order to promote choice and control

Audiology Australia supports the principles of choice and control and believes that they should be applied to the choice of audiologist in the same way as they are applied to the choice of any other health professional. As outlined in the NDIA's Independent Advisory Council's advice on 'choice and control' (15), the Epstein-Frisch framework for the domains of choice included 1. Pervasive choices, 2. Lifestyle choices, and 3. Everyday choices. Audiology Australia believes that the choice of hearing service provider is a pervasive choice that will "affect significant milestones in a person's life and their aspirations" (15).

The current hearing services transition arrangements require that NDIS participants requiring services that fall under the Australian Government's Hearing Services Program enter either the Voucher Scheme or the Community Services Obligation (CSO) scheme. As a result, participants who do not 'self-manage' (16) their NDIS funds must see either an Office of Hearing Services (OHS) Qualified Practitioner (Voucher scheme) or Australian Hearing (Voucher and CSO schemes) for services that fall under those schemes. Services that fall outside those schemes may be provided by other non-OHS approved audiologists, as outlined in Section 9.

Audiology Australia supports the move to full contestability of hearing services for clients of all ages following full rollout of the scheme in mid-2019. Audiology Australia acknowledges that there are concerns around a potential reduction of quality if this occurs, especially for families of young children. To address these issues, Audiology Australia proposes a robust model of clinical certification, titles and publicly available information to enable recognition of the skillset of audiologists in Section 10.

10. Audiology Australia submits that it supports full contestability of hearing services for all ages following the full rollout of the NDIS in mid-2019.

9. Confusion regarding the transition arrangements for hearing services is limiting participants' choice and control

"To support participants to have choice and control over their NDIS plan, there is flexibility to ensure you can choose how to spend your funds to live the life you want." (17)

Through contact with its members, Audiology Australia has identified that there is a widespread misunderstanding that NDIS participants of all ages and needs must go to Australian Hearing for their hearing services, as this is the government provider. This misunderstanding is so widespread that it appears to exist within the NDIA itself, with three members in different rollout areas reporting that a NDIS Planner said they had received this information at a NDIA staff-training session.

Other Audiology Australia members have reported that they have been told that only OHS-approved providers can provide hearing services in the NDIS. For example, none of the members who have contacted Audiology Australia were aware that clients have the option of self-managing their funds and choosing their service provider. In addition, few have understood that they can register with the NDIS and provide NDIS services that do not fall under the Government's Hearing Services Program (e.g. the client contribution for hearing aid maintenance and batteries, therapy, and parent counselling), regardless of whether or not they are an OHS-approved provider.

Audiology Australia has attempted to counter this misinformation through public forums, round tables, and various publications, and has worked constructively with the OHS and the Quality and Safeguards Division at the NDIA to attempt to clarify the major issues. However, many of our members still perceive that the Government is sending a contradictory message regarding who can provide services under the NDIS.

Audiology Australia considers that the Government has not been sending contradictory messages. Rather, the confusion has arisen since the only information direct from Government regarding the transition of hearing services to the NDIS has come from the OHS and Australian Hearing, and these organisations have by necessity been limited to providing advice about their own services. Therefore, there is no information from the Government regarding the NDIS participants that may be seen by audiologists in each of the current 'registration statuses' (see Table 1). Furthermore, there is no information about the services that may be provided by each of the current registration statuses audiologists may find themselves in. Table 1 represents Audiology Australia's understanding of the transition arrangements currently in place, and we would appreciate the opportunity to have a factsheet including this information approved by the NDIA.

11. Audiology Australia submits that it would like to work further with the NDIA to develop information and/or training sessions for audiologists regarding who can provide services under the NDIS, both during the transition phase and after full rollout in mid-2019.

Table 1 Audiology Australia’s understanding of the NDIS clients that may be seen, and NDIS services that may be provided during the transition period by each of the current registration statuses audiologists may find themselves in.

Registered with the NDIA	OHS approved provider	Which NDIS clients can they see?	Which NDIA-approved services can they provide?
No	No	<i>Clients that:</i> - Self-manage their funds	All NDIA-approved services
No	Yes	<i>Clients that:</i> - Self-manage their funds	All NDIA-approved services
		- Are referred to the OHS Voucher program via the NDIS and do not self-manage their funds	Services that fall under the Hearing Services Program’s Voucher scheme
Yes	No	<i>Clients that:</i> - Self-manage their funds	All NDIA-approved services
		- Are approved for NDIS services that fall outside the Voucher program and do not self-manage their funds	Services that do not fall under the Government’s Voucher scheme (e.g. the client contribution for hearing aid maintenance and batteries, therapy, and parent counselling)
Yes	Yes	<i>Clients that:</i> - Self-manage their funds	All NDIA-approved services
		- Are referred to the OHS Voucher program via the NDIS and do not self-manage their funds	Services that fall under the Hearing Services Program’s Voucher scheme
		- Are approved for NDIS services that fall outside the Voucher program and do not self-manage their funds	Services that do not fall under the Government’s Voucher scheme (e.g. the client contribution for hearing aid maintenance and batteries, therapy, and parent counselling)

NOTE: This table excludes audiologists employed by Australian Hearing as these may see the full range of clients requiring hearing services approved by the NDIS, including those in the CSO component of the Hearing Services Program.

In addition to affecting the ability of audiology clinics to provide NDIS services, the transition arrangements have a negative effect on clients' right to choice and control by precluding their right to choose a hearing service provider (15). Members report that their own and incoming clients have felt forced to leave their existing provider with whom they state they were happy with, after receiving the advice when entering the NDIS. In addition, members who do not provide services through the OHS program report being placed at a disadvantage because they are losing clients as the NDIS rolls out in their area, especially adult clients who were previously not eligible for the OHS program. Providers and clients alike should be informed that participants have the option of self-managing their plan (16), allowing them the opportunity to choose their provider.

12. Audiology Australia submits that misinformation and confusion regarding the transition arrangements for hearing services to the NDIS is limiting participants' choice and control.

10. Audiology Australia plans to address consumer fears regarding the future contestability of hearing services

Audiology Australia acknowledges the consumer concerns relating to the availability, safety and quality of hearing services, especially those for children, should Australian Hearing cease to be the sole provider Government funded hearing services to children as a result of the NDIS rollout.

However, Audiology Australia is confident that it will be able to address concerns relating to the safety and quality of hearing services as the peak professional body representing audiologists. Audiology Australia asserts that audiologists have the same professional responsibility and accountability as any other health professional and that Audiology Australia's policies and positions reflect this. It will therefore strive to reassure the public through policy reform and disseminating information regarding audiologists and their work.

10.1 Audiology Australia provides the assurance that audiologists are qualified

Audiology Australia provides rigorous self-regulation for the profession of audiology, with its clinical certification program at the core. Clinical certification by Audiology Australia comprises being tested against, and continuing to abide by, a suite of policies aimed at ensuring audiologists provide services lawfully, safely and effectively and in clients' best interests. This includes meeting Audiology Australia's rigorous:

- Education and training requirements, which include completion of at least an Audiology Australia Accredited Australian Masters-level degree and Audiology Australia's full-time one-year internship program;
- Code of Conduct which is in line with the National Code of Conduct for Health Care Workers (1);
- Continuing Professional Development program; and
- Recency of Practice requirements.

Membership with and clinical certification by Audiology Australia is a requirement to provide government-funded audiological services such as via the:

- Office of Hearing Services' Hearing Services Program;
- Medicare;
- The National Disability Insurance Agency (NDIA);
- State and Territory workers' compensation schemes (such as Workcover); and
- The Department of Veterans' Affairs.

Additionally, private healthcare funds also require that the audiologist is a member of Audiology Australia for hearing service fees to be reimbursed.

Audiology Australia aims to achieve formal recognition of the high standard of self-regulation it provides for the profession of audiology by meeting the Membership Standards for the National Alliance of Self-Regulating Health Professions' (NASRHP) when applications open for the first time in mid-2017.

The NASRHP standards were developed to ensure the highest professional standards of practice (18). NASRHP continues to advocate for its self-regulatory model to be recognised in national law. Progress towards achieving this recognition was achieved earlier this year when it received funding from the Australian Government Department of Health to establish itself as an organisation to support self-regulating professions with regulatory standards comparable to registered professions.

The practitioner registration model to be adopted by the NDIA could help to ensure that only appropriately qualified health professionals may offer hearing services by recognising practitioners certified by a professional body that is a member of NASRHP. Audiology Australia believes that verification of health care workers' qualifications by a third party should only be able to be performed by an AHPRA body or a NASRHP body.

13. Audiology Australia submits that the NDIA should recognise practitioner certification by NASRHP bodies.

In addition to the rigorous clinical certification policies Audiology Australia implements are the products and events provided to members. This includes:

- Scientific conferences and courses that promote evidence-based practice;
- Webinars on best practice available across Australia;
- Information Sheets and Issues Papers on political developments and changes to funding sources of relevance to members; and
- Audiology Australia's comprehensive Professional Practice Standards, which provide guidance on evidence-based practice across the full range of audiological services.

10.2 Audiology Australia provides a public register of qualified and accredited audiologists

Audiology Australia provides the public with a register of Audiology Australia Accredited Audiologists. Inclusion in this register is only an option for clinically certified audiologists, and is currently running as an opt-in program. This register helps reassure the public that the audiologist they consult with has the qualifications, training and experience required to provide audiological services to them.

10.3 Audiology Australia will help consumers and the Government identify the scope of audiologists' practice

Audiology Australia acknowledges the concerns of consumers relating to the expertise required to deliver services to different groups of clients, especially children and people with complex rehabilitation needs. Audiology Australia agrees that consumers would benefit from an objective and clear means of identifying the scope (i.e., area) of an audiologist's practice in order to determine if they may be able to meet their needs.

It is with these consumer concerns and needs in mind that Audiology Australia is currently developing a 'titling program' for audiologists.³ The aim is to provide consumers and the Government with the assurance that an Audiology Australia Accredited Audiologist with a given title has the education, training and practical experience required to provide audiological services to a particular client group or in a particular setting. To maintain an awarded title, the audiologist will need to show that they have undertaken a minimum amount of continuing professional development and clinical practice hours within the field the title relates to. The 'titles' being considered for prioritised development relate to children and clients with complex needs. Audiology Australia notes that the plan is to have these titles implemented before full roll-out of the NDIS in mid-2019.

Audiology Australia notes that the titling program is being implemented in order to allow consumers and other stakeholders to easily identify the areas of an audiologist's expertise. The titling program is in no way intended to restrict or prohibit audiologists' practice. In fact, Audiology Australia encourages audiologists to extend the scope of their own practice, so long as they do so lawfully, safely and effectively in a way that does not put their clients or themselves at risk. This assurance is achieved and enforced via the Code of Conduct which all audiologists who are clinically certified by Audiology Australia are required to abide by, which includes the requirement that:

"1.2 f) Members must be aware of, and only engage in, those aspects of their profession that are within their scope of practice.

1.2 g) Members must recognise the limitations of the hearing services they can provide and refer clients to other competent health service providers where clinically indicated."

³ The main source of inspiration throughout the conceptualisation of Audiology Australia's 'titling program' has been is the Australian Physiotherapy Association Title Program (19).

Audiology Australia hopes that the possibility of Government funding for a broader range of audiological services as a result of the NDIS will stimulate audiologists to undertake further professional development in order to extend the scope of their own practice and in doing so be able to better meet the needs of their clients and achieve a greater sense of professional satisfaction.

14. Audiology Australia submits that it would welcome the opportunity to further discuss with the Joint Standing Committee, DSS and the NDIA how its clinical certification and titling programs provide the assurance that audiologists are appropriately educated, trained and experienced to provide the full range of audiological services to participants.

f. the liaison with key stakeholders in the design of NDIS hearing services, particularly in the development of reference packages

11. Audiology Australia has not been consulted despite being the peak professional body representing audiologists

Audiology Australia has not been consulted in the design of NDIS hearing services. This is particularly concerning given the central role Audiology Australia plays as the peak professional body in a self-regulating profession and as a founding member of the National Alliance of Self-Regulating Health Professions (NASRHP).

Audiology Australia was not consulted regarding the transition arrangements for hearing services. It would have appreciated the opportunity to present a robust model that protected consumers that could be implemented during the transition period. However, Audiology Australia acknowledges that this may not have been possible due to the time constraints posed by the rollout of the NDIS.

As outlined in submission boxes 3, 4, 7 and 12, Audiology Australia would particularly appreciate the opportunity to contribute to the following issues:

- The NDIS eligibility criteria for people with auditory and balance disorders. (submission point 3)
- Information and training sessions for audiologists when the eligibility criteria are determined. (submission point 4)
- Ensuring that the costs of hearing devices and audiological services are transparent. (submission point 7)
- Information and/or training sessions for audiologists regarding who can provide services under the NDIS, both during the transition phase and after full rollout in mid-2019. (submission point 11)
- How Audiology Australia's clinical certification and titling programs provide the assurance that audiologists are appropriately educated, trained and experienced. (submission point 14)

h. any other related matters

12. Problems encountered by audiologists when registering to provide NDIS services

Audiology Australia acknowledges that the NDIS is in its infancy and has been required to grow and adapt at a very fast rate and that 'teething issues' are therefore expected and understandable. Audiology Australia is hopeful that the NDIA will adopt a third-party verification system for audiologists, as we have been informed that audiology will likely be classified as a "low-risk" profession by the NDIA. Audiology Australia will provide an easily accessible and effective mode for verification with its comprehensive list of Audiology Australia Accredited Audiologists. Audiology Australia is also willing and able to work further with the DSS and the NDIA to improve and adapt our clinical certification model to suit their requirements and needs.

15. Audiology Australia submits that it would welcome a third-party verification system of provider registration which recognises clinical certification by Audiology Australia.

Audiology Australia is confident that such a streamlined verification system would address some of the negative experiences that have been experienced by audiologists to date when trying to register as NDIS providers. These problems are to such an extent that the most common feedback we received was that audiologists 'gave up' on trying to register to provide NDIS services. This was due to:

- Conflicting information from the NDIA regarding whether audiologists were eligible to register, or whether they should instead only register to be OHS Qualified Providers;
- Long and complicated application processes that duplicated applications they had made to other Australian Government schemes; and
- Issues with the portal and problems getting in touch with NDIA help-desk staff to assist them.

References

1. COAG Health Council. Final Report- A National Code of Conduct for health care workers. Australian Health Ministers' Advisory Council; 2015 Apr.
2. National Disability Insurance Agency (NDIA). Access Requirements [Internet]. [cited 2017 Jan 25]. Available from: <https://www.ndis.gov.au/people-disability/access-requirements.html>
3. Audiology Australia. Audiology Australia Professional Practice Standards- Part B Clinical Standards. 2013 Jul.
4. Office of Hearing Services. Factsheet- Minimum Hearing Loss Threshold (MHLT). 2015 Sep.
5. Office of Hearing Services. Hearing Services Program NDIS Transition Plan. Department of Health, Australian Government; 2016 Feb.
6. National Aged Care Alliance (NACA). Discussion paper- Improving the interface between the aged care and disability sectors. 2016 Aug.
7. Productivity Commission. Inquiry Report- Disability Care and Support. Volume 1. 2011 Jul. Report No.: No. 54.
8. National Disability Insurance Agency (NDIA). National Disability Insurance Scheme- Outcomes framework pilot study: Summary report. 2015 Sep.
9. The Real Cost of Hearing Aids. HearingHQ [Internet]. 2013 Jul [cited 2016 Dec 20]; Available from: <http://www.hearinghq.com.au/aids-implants/hearing-aids/139-the-real-cost-of-hearing-aids>
10. Psarros C, McMahon CM. Evaluating the Benefits of a Telepractice Model. In in preparation.
11. Williams T, May C, Mair F, Mort M, Gask L. Normative models of health technology assessment and the social production of evidence about telehealth care. Health Policy. 2003;64:39–54.
12. The Shepherd Centre. Submission to the Senate Select Committee on Health (Submission 154). 2015 Jul.
13. Sydney Cochlear Implant Centre (SCIC). Are you struggling to hear with your hearing aids on? A cochlear implant could help you restore your hearing [Internet]. 2015 Oct. Available from: <http://www.scic.org.au/are-you-struggling-to-hear-with-your-hearing-aids-on/>
14. Psarros C, van Wanrooy E. Remote programming of cochlear implants. In in preparation.
15. NDIS Independent Advisory Council. Choice and Control- Reflections on the implementation of the principle of choice and control under the NDIS. 2013 Aug.
16. National Disability Insurance Agency (NDIA). Module 2- Self-directing my NDIS plan. 2016 Sep.
17. National Disability Insurance Agency (NDIA). Factsheet- Choice and control. 2016 Dec.
18. National Alliance of Self-Regulating Health Professions. Harnessing self-regulation to support safety and quality in healthcare delivery- A comprehensive model for regulating all health practitioners. Allied Health Professions Australia; 2012 Mar.
19. Australian Physiotherapy Association. APA Physiotherapist Title Program- Information Booklet. 2016 Jan.



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