



NATIONAL COMPETENCY STANDARDS FOR AUDIOLOGISTS

1 January 2022

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TABLE OF CONTENTS

About Audiology Australia	3
National Alliance for Self-Regulating Health Professions (NASRHP)	3
Audiology Australia's National Competency Standards	4
Relationship to the Scope of Practice and Professional Practice Standards	4
Relationship to the Code of Conduct	4
Development of the National Competency Standards	5
Format of the National Competency Standards	5
Review	5
Audiology Australia - National Competency Standards	6
Domain 1: Audiological clinical practice	6
Domain 2: Professional communications and collaborations	7
Domain 3: Education and lifelong learning	8
Domain 4: Quality, safety and compliance	9
Domain 5: Ethical and professional behaviour	10
Domain 6: Advocacy	11
Glossary of Terms	12

The Standards comprise six Domains:



Domain 1:
Audiological clinical practice



Domain 2:
Professional communications and collaborations



Domain 3:
Education and lifelong learning



Domain 4:
Quality, safety and compliance



Domain 5:
Ethical and professional behaviour



Domain 6:
Advocacy

About Audiology Australia

Audiology Australia is the peak professional body for audiologists with over 3,000 members. Audiologists are tertiary educated health professionals who work with clients of all ages to help them to preserve, manage and improve their hearing, their ability to process and understand sounds, and their balance.

Audiology Australia provides the highest standard of self-regulation for its members based on the standards set by the National Alliance of Self-Regulating Health Professions (NASRHP). Central to this self-regulation is the clinical certification program which includes:

- completion of an Audiology Australia Accredited Australian Masters-level degree and the intensive one-year Audiology Australia internship;
- meeting the rigorous Recency of Practice and Continuing Professional Development Requirements; and,
- adhering to the [Code of Conduct](#) that all members of Audiology Australia must abide by and that is based on the [National Code of Conduct for Health Care Workers](#).

Aspects of the clinical certification process are supported by a series of documents which describe the underpinning knowledge, skills and competencies required by audiology students and clinical interns. These documents provide the road map for competency acquisition across the development spectrum; however, they were designed to support individual components of the training and education of audiologists such as accreditation of the education program or completion of the clinical intern year.

National Alliance for Self-Regulating Health Professions (NASRHP)

To ensure the highest standards of self-regulation for the Audiology profession, Audiology Australia is a member of NASRHP.

NASRHP was originally an informal alliance which began in 2008 under the auspices of Allied Health Professions Australia, to support member organisations of self-regulating health professions. Its transition to a formal independent body providing a quality framework for

these professions has been supported by seed funding by the Australian Government Department of Health. The NASRHP Board has the decision-making power regarding governance, and its membership. All decisions are independent of government.

Australian peak bodies of self-regulating allied health professions wishing to join NASRHP must meet benchmark standards for regulation and accreditation of practitioners within that profession. NASRHP standards have been closely modelled on the Australian Health Practitioner Regulation Agency (AHPRA) standards and are composed of the following eleven standards:

- Scope (Areas) of Practice
- Code of Ethics/Practice and/or Professional Conduct
- Complaints Procedure
- Competency Standards
- Course Accreditation
- Continuing Professional Development
- English Language Requirements
- Mandatory Declarations
- Professional Indemnity Insurance
- Practitioner Certification Requirements
- Recency and Resumption of Practice Requirements

This facilitates national consistency in quality and support for self-regulating health professionals and satisfies national and jurisdictional regulatory requirements, including the National Code of Conduct of health care workers. This provides assurance to patients they are receiving a quality service from a certified health professional. (Excerpt NASRHP Website: <http://nasrhp.org.au/about-us/>)

One key tenet of NASRHP is the focus on competency standards as the document which underpins a wide range of professional processes. NASRHP Standard 4: Competency Standards articulates the following objectives for professional competency standards:

- Providing a basis for assessment of practitioners' performance; ensuring they can safely and effectively fulfil their required role prior to certification
- Informing the public of the role of the professional and the minimum expectations they can have in their interaction with the professional
- Informing the education sector of the professions workplace requirements to assist with curriculum development
- Informing government and policy makers of the range and standard of practice they can expect from entry level allied health practitioners in Australia.

Audiology Australia's National Competency Standards

As part of alignment to the NASRHP requirements, Audiology Australia has developed National Competency Standards [the competency standards].

Competency standards describe the knowledge, skills and attributes expected of the Audiologist, whatever their work setting or location. Competency standards allow for professional judgement and for application for a variety of purposes and within diverse settings.

The National Competency Standards:

- fully articulate the minimum skills, knowledge and behaviours required for 'entry level' practice for audiologists in Australia
- provide the standards against which the public can expect safe practice
- become the primary document which describes the professional attributes and skills required for audiologists to work across multiple contexts in an increasingly complex health system
- become the primary document which supports further recognition of the profession as highly qualified health professionals and a key component of the Australian health and ageing sector.

'Entry level' refers to the expected minimum standard of Audiologists considered to be qualified and competent to undertake independent clinical decision making without supervision once they have completed their Clinical Internship.

The competency standards describe the minimum competencies expected on completion of the Clinical Internship, and the Intern will be assessed against the National Competency Standards. These competency standards, therefore, replace Audiology Australia's Clinical Internship Competencies and Review Standards dated March 2018.

The competency standards continue to apply once the Audiologist has become a full member of Audiology Australia and a practising Audiology Australia Accredited Audiologist.

Assessment of an individual's application to resume practice are guided by the competency standards as their resumption of practice program is based on relevant parts of the competency standards.

A separate set of competencies applicable in the Masters degrees in audiology is used by each university program to set the curriculum and assessments of their students. Audiology Australia assesses each university's progress in ensuring all students have attained the competencies, and accredits the university program accordingly.

The competencies applicable to graduating with a Masters degree align with, and show progression towards, those required to be met on entry to the profession after completion of the internship - the National Competency Standards.

Relationship to the Scope of Practice and Professional Practice Standards

The Scope of Practice provides an overview of the services that may be offered by appropriately qualified and experienced audiologists in Australia practising the profession of audiology.

The Professional Practice Standards are non-mandatory guidelines for businesses for practice operation and clinical practice and/or for individual clinicians who are interested in exploring a topic in more detail.

The National Competency Standards describe the minimum competencies expected of every Audiology Australia Accredited Audiologist.

Relationship to the Code of Conduct

The National Competency Standards refer to the [Code of Conduct](#) for Audiology Australia at various points, and operate alongside it. The Code of Conduct must be complied with in full.

Development of the National Competency Standards

In 2019, Audiology Australia commenced development of the National Competency Standards project, led by the National Competency Standards Working Group under the oversight of the Audiology Australia University Accreditation and Competencies Committee.

The Working Group comprised experienced Audiology Australia Accredited Audiologists from a range of settings, volunteering their time and expertise to the project.

Feedback was sought from Audiology Australia members in 2019 on how to structure the competency standards with the resulting decision to use domains with which to group the competencies. In online workshops in 2020, members brainstormed ideas for competencies that could be included within each domain.

In developing a first draft, the Working Group reviewed the information gathered at the workshops, consulted other health professions in Australia, consulted Audiologists responsible for their organisation's intern program, and researched the approach taken by audiology organisations internationally.

The draft went out to all Audiology Australia members at the end of 2020 in the first round of a Delphi survey process. Feedback from the first round was reviewed, with changes made to the draft.

A second Delphi survey round, again open to all members, was conducted in April 2021, the feedback reviewed and the draft revised. The Audiology Australia Board approved the final National Competency Standards in July 2021.

Format of the National Competency Standards

The National Competency Standards are structured around domains which describe the main areas with which the competency statements are grouped.

The domains include items which describe the particular knowledge and skills applicable to audiology, as well as other, more general items that may also be applicable to other health professions.

The National Competency Standards include the following six domains:

1. Audiological clinical practice
2. Professional communications and collaborations
3. Education and lifelong learning
4. Quality, safety and compliance
5. Ethical and professional behaviour
6. Advocacy

These domains are populated by a number of competencies, and each competency is further described by a number of sub-competencies. The sub-competencies articulate the performance outcomes - the observable behaviour or results that demonstrate that the competency has been met.

Each intern will be assessed against every sub-competency in the competency standards, whatever their work setting or location.

The domains and the competencies within are not presented in order of importance. Rather, every competency is considered to be equally important and together describe competent practice.

Terms used in this document are defined in the Glossary.

Note that 'client', defined in the glossary, is used throughout the competency standards to refer to any recipient of audiological services. The term client may include an individual, parent, family member, significant other, carer or organisation.

Review

A set of competencies is a work in progress - it recognises that the profession changes as the knowledge and evidence base changes. The National Competency Standards, therefore, will be reviewed as appropriate. This will generally occur at least every five years.

National Competency Standards date of commencement:
1 January 2022

DOMAIN 1: AUDIOLOGICAL CLINICAL PRACTICE



Provides safe, evidenced-based, client- and family-centred, and responsive audiological practice across the lifespan.

COMPETENCY	SUB-COMPETENCY
1.1 Facilitates the identification and referral of individuals and groups requiring audiology services	<ul style="list-style-type: none"> i. Understands and communicates the benefits of evidence-based screening programs and referral guidelines to ensure individuals requiring audiology services are identified and referred ii. Collects and reviews information from a range of sources such as referrals, reports and consultation to determine an individual's need for audiology services iii. Recognises and responds to the distinct hearing health needs of Aboriginal and Torres Strait Islander peoples and other populations at risk of developing ear, hearing and associated conditions
1.2 Plans, conducts and appropriately modifies each assessment	<ul style="list-style-type: none"> i. Practises client- and family-centred clinical care ii. Collects and analyses case history, goals, expectations, needs and priorities, in partnership with the client when appropriate iii. Collects and analyses pertinent information from referrals, reports, consultation, and other relevant sources of information to understand the client's situation iv. Clearly communicates to client what assessments and procedures will be performed, in order to confirm consent v. Plans and conducts a valid, accurate and reliable assessment, selecting the tools, equipment and techniques that will address the unique needs of the client
1.3 Analyses and interprets assessment results	<ul style="list-style-type: none"> i. Analyses and integrates the data using knowledge, skill and judgement, taking into account the reliability of testing ii. Formulates valid conclusions regarding the site of lesion and functionality of any ear, hearing and associated conditions iii. Shares assessment findings with the client when appropriate
1.4 Develops, shares and modifies recommendations based on the assessment results and client needs	<ul style="list-style-type: none"> i. Establishes goals and/or specific needs, in partnership with the client ii. Develops recommendations for intervention, including audiological therapy, technology modifications to the environment and/or further referrals in line with the client's goals and needs iii. Supports the client to make informed decisions by sharing information and explanations of assessment results, implications, management options and recommendations
1.5 Implements intervention plans with consent and evaluates client outcomes	<ul style="list-style-type: none"> i. Implements and appropriately modifies intervention plans which are client- and family-centred ii. Evaluates client outcomes using client reported and/or objective measures
1.6 Uses reflective practice to evaluate and improve clinical practice	<ul style="list-style-type: none"> i. Improves clinical performance on an ongoing basis through reflective practices, such as peer review, case revision and personal reflection ii. Plans and implements strategies to improve clinical practice iii. Seeks support for debriefing or guidance following a challenging interaction

DOMAIN 2: PROFESSIONAL COMMUNICATIONS AND COLLABORATIONS



Promotes health and wellbeing through respectful and appropriate communications to ensure mutual understanding with all stakeholders.

COMPETENCY	SUB-COMPETENCY
2.1 Uses appropriate and effective verbal and non-verbal communication, adapted to suit the professional situation and health literacy of the other person(s)	<ul style="list-style-type: none"> i. Ensures all interactions, regardless of communication mode, meet the specific needs of each client, including Aboriginal and Torres Strait Islander peoples and those from other culturally and linguistically diverse backgrounds ii. Demonstrates an understanding of and respect for the specific cultural and communication needs of the Deaf community iii. Uses inclusive language and explains terminology and/or jargon which may be unfamiliar to the listener/reader iv. Demonstrates understanding of the role of non-verbal communication, including facial expressions and natural gestures v. Communicates in a professional, timely, caring and empathetic manner to encourage trust and honesty in all relationships vi. Participates respectfully in challenging conversations
2.2 Optimises the environment and mode of communication as required to maximise effectiveness of communication	<ul style="list-style-type: none"> i. Utilises or advocates for the use of interpreters, when required, to convey information accurately and confidentially ii. Considers and manages the environment to optimise communication including factors such as background noise, lighting, camera and microphone settings, and privacy requirements iii. Communicates in accordance with the Code of Conduct for Audiology Australia, including when engaged in advertising or marketing activities or when using social media
2.3 Communicates in accordance with confidentiality and privacy considerations	<ul style="list-style-type: none"> i. Obtains informed consent from the client, whether written or verbal, before information is shared, including confirmation of the intended recipients of the information ii. Determines with discernment what is relevant or pertinent to the person/organisation receiving information, clarifies why the information is being shared and ensures personal details are not used inappropriately
2.4 Ensures documentation is timely, stored securely and conforms with medical and legal requirements	<ul style="list-style-type: none"> i. Retains evidence of communication regarding clients such as referrals, letters, emails and case notes, allowing client access in accordance with privacy and other legislative requirements ii. Identifies in the client record when consent to exchange information has been obtained and whether written or verbal iii. Produces succinct, factual, respectful, relevant, targeted, legible and informative case notes iv. Generates accurate and complete reports in a timely manner v. Provides accurate, meaningful and complete information in records being transferred to another service
2.5 Collaborates with clients, colleagues and other professionals	<ul style="list-style-type: none"> i. Demonstrates the ability to identify and engage with interprofessional networks ii. Manages conflicts to find resolutions that are respectful of client interests, seeking support where needed iii. Partners with the client, colleagues and other professionals and organisations to achieve the best outcome for the client iv. Recognises and respects the roles and perspectives of other individuals v. Enhances interprofessional collaboration through respect, trust, shared decision making and partnerships

DOMAIN 3: EDUCATION AND LIFELONG LEARNING



Maintains and improves currency of knowledge, skills and new evidence for audiological practice.

COMPETENCY	SUB-COMPETENCY
3.1 Ensures ongoing capability for audiological practice and maintains currency of professional knowledge and performance to provide optimal care	<ul style="list-style-type: none">i. Identifies one's own professional strengths and areas for development through self-reflection, review of performance and feedbackii. Uses a range of learning activities such as literature review, continuing education and mentorship to fulfil learning needsiii. Develops a plan and implements strategies to achieve and maintain capability and currency of professional knowledge and practiceiv. Maintains knowledge of relevant resources and technologies for audiological practicev. Develops and maintains digital literacy for audiological practicevi. Demonstrates commitment to continuing professional development
3.2 Contributes to the knowledge base of Audiology	<ul style="list-style-type: none">i. Critically appraises or participates in research relevant to Audiology to contribute to the knowledge baseii. Adapts practice in line with new evidence and with policies and procedures of the workplace

DOMAIN 4: QUALITY, SAFETY AND COMPLIANCE



Provides safe, effective, compliant, and high-quality audiology services.

COMPETENCY	SUB-COMPETENCY
4.1 Ensures service delivery complies with relevant guidelines, standards and legal obligations	<ul style="list-style-type: none">i. Complies with the policies and procedures that are consistent with current evidence and best practice professional standardsii. Ensures knowledge of and adherence to all professional, legal and statutory requirements pertinent to the workplace, to enable safe practice
4.2 Takes responsibility for quality assurance	<ul style="list-style-type: none">i. Participates in ongoing continuous quality improvement incorporating client needs, emerging evidence and practice standardsii. Practises in a manner that supports the rights of the client to receive high quality care and best possible outcomesiii. Complies with complaints processes and procedures and takes action to address issues that are relevant to quality service delivery
4.3 Ensures the environment is safe and meets the clinical need	<ul style="list-style-type: none">i. Complies with relevant workplace health and safety legislation and workplace policiesii. Ensures cleanliness, infection control, safety of room, maintenance and calibration of clinical equipmentiii. Complies with infection control processes that are consistent with current national, state, territory and workplace standardsiv. Adheres to risk management processes and protocolsv. Ensures test environment is fit for purpose for the clinical need and modifies where necessary
4.4 Contributes to ongoing wellbeing in the workplace	<ul style="list-style-type: none">i. Participates in ongoing training to maintain safety and wellbeingii. Utilises effective strategies to manage workload, including seeking support when requirediii. Recognises and responds to factors impacting wellbeing in the workplace

DOMAIN 5: ETHICAL AND PROFESSIONAL BEHAVIOUR



Acts in an ethical, safe, lawful and accountable manner that upholds integrity of the Audiology profession.

COMPETENCY	SUB-COMPETENCY
5.1 Maintains integrity of the Audiology profession	<ul style="list-style-type: none">i. Complies with the Code of Conduct for Audiology Australiaii. Ensures all own interactions with clients, other professionals, and the public, including those on social media, are respectful and maintain the integrity of the Audiology profession
5.2 Ensures professional and ethical behaviour	<ul style="list-style-type: none">i. Practises in a way that maintains equity, dignity, honesty and cultural safety, demonstrates cultural sensitivity, recognises diversity and supports individual rightsii. Practises audiology within scope of practice, capability and experienceiii. Refers to or consults with other professionals or services when faced with issues outside scope of practice, capability or experienceiv. Ensures all own professional communications are accurate, evidence-based and not misleading or coercivev. Ensures clients are not unduly impacted by own personal judgements and valuesvi. Upholds personal and professional ethics within the workplace and applies ethical principles to decision-makingvii. Ensures clients' rights, privacy, needs, interests and choices are prioritised and supportedviii. Escalates or supports others to escalate concerns about unethical practice
5.3 Maintains professionalism, respectful demeanour and standards	<ul style="list-style-type: none">i. Recognises and maintains professional boundariesii. Recognises, discloses and effectively manages conflicts of interest in line with the Code of Conduct for Audiology Australiaiii. Understands and takes responsibility to manage impact of own behaviour on othersiv. Works with colleagues and other professionals in a respectful and supportive manner

DOMAIN 6: ADVOCACY



Promotes the Audiology profession and advocates for the health and wellbeing of people with regards to ear, hearing and associated conditions.

COMPETENCY	SUB-COMPETENCY
6.1 Advocates for and partners with people who have or are at risk of ear, hearing and associated conditions	<ul style="list-style-type: none"> i. Works with relevant stakeholders to advocate for and partner with people who have, or are at risk of developing, ear, hearing and associated conditions, and their families ii. Raises awareness of the communication needs of those who have, or are at risk of developing, ear, hearing and associated conditions iii. Identifies and addresses the barriers that impede or prevent access to services and resources by those with ear, hearing and associated conditions iv. Empowers people with ear, hearing and associated conditions to participate in their community through education and ongoing support
6.2 Advocates for and partners with Aboriginal and Torres Strait Islander peoples with regards to their hearing health care	<ul style="list-style-type: none"> i. Demonstrates an understanding of the importance of advocating for education, resources and services which meet the specific hearing health needs of Aboriginal and Torres Strait Islander peoples in a culturally safe manner
6.3 Advocates for self and colleagues	<ul style="list-style-type: none"> i. Advocates for a safe and equitable work environment, free from discrimination and undue pressures ii. Promotes best practice standards in the workplace iii. Advocates within the workplace for fair and reasonable performance expectations that align with Audiology Australia ethics and Code of Conduct
6.4 Advocates for the Audiology profession	<ul style="list-style-type: none"> i. Identifies and engages with opportunities to advocate for the Audiology profession ii. Ensures all own professional interactions are conducted in a manner that helps promote positive perceptions of Audiology iii. Promotes the Audiology profession through the sharing of professional knowledge and experience

Glossary of Terms

TERM	DEFINITION
Advocacy	In the health setting, a strategy to raise levels of familiarity with an issue and promote health at the individual and community levels. Could involve casual and informal recommendations to others to see an Audiologist, or explaining to others the skills of an Audiologist, as well as formal representations to communities, organisations and government bodies.
Audiologist	A university qualified health-care professional who identifies, diagnoses, treats, and monitors disorders of the auditory and vestibular systems. 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, including those with complex needs, to improve their ability to communicate and interact in all situations.
Client	Any recipient of audiological services. May include an individual, parent, family member, significant other, carer or organisation.
Client-centred care	Treating clients receiving healthcare with dignity and respect, involving them in all decisions about their health. It is an approach that is linked to their healthcare rights and is grounded in mutually beneficial partnerships with health care providers and clients.
Clinical Intern	An individual who has completed two years in an Audiology Australia accredited Masters level university program, or who is an overseas qualified Audiologist wanting to practise in Australia, and is undertaking a minimum one year clinical internship during which they are supervised by more experienced colleagues on the pathway to becoming an Audiology Australia Accredited Audiologist.
Code of Conduct for Audiology Australia	The Code of Conduct ¹ sets the fundamental standards of behaviour and responsibilities that members of Audiology Australia must abide by.
Cultural Safety / Culturally Safe	<p>Cultural safety² is determined by Aboriginal and Torres Strait Islander individuals, families and communities. Culturally safe practice is the ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism.</p> <p>To ensure culturally safe and respectful practice, health practitioners must:</p> <ol style="list-style-type: none"> Acknowledge colonisation and systemic racism, social, cultural, behavioural and economic factors which impact individual and community health; Acknowledge and address individual racism, their own biases, assumptions, stereotypes and prejudices and provide care that is holistic, free of bias and racism; Recognise the importance of self-determined decision-making, partnership and collaboration in healthcare which is driven by the individual, family and community; Foster a safe working environment through leadership to support the rights and dignity of Aboriginal and Torres Strait Islander people and colleagues.
Deaf Community	The Deaf community in Australia is a diverse cultural and linguistic minority group with many distinctive characteristics including language, values and behaviours.
Deaf Culture	Deaf culture is the set of social beliefs, behaviours, art, humour, literary traditions, history, values, and shared institutions of communities that are influenced by deafness and which use sign languages as the main means of communication.

TERM	DEFINITION
Digital literacy for audiological practice	The ability to identify and use technology confidently, creatively and critically as an Audiologist, and to assist clients and their families where required.
Evidence-based care	An approach to making quality decisions and providing audiological services based upon personal clinical expertise in combination with the most current, relevant research available on the topic.
Family-centred care	Family-centred care extends client-centred care, ensuring that care is planned around everyone, not just the individual client, and in which all are recognised as care recipients.
Interprofessional collaboration	Collaborative practice which occurs when Audiologists work with other Audiologists, and/or with other professionals, including those within healthcare and those within other areas. Also known as interprofessional practice.
Intervention plans	A series of decisions based on the gathering and analysis of a wide range of information addressing the specific needs of a client. An intervention plan should be documented and includes next steps and suggested recommendations to improve, maintain, promote or modify health, functioning or health conditions.
Quality improvement	The framework used to systematically improve the ways care is delivered to clients.
Reflective practice	The process where individuals consider their experiences to gain insights about their whole practice. Reflection supports individuals to continually improve the way they work and/or the quality of care they give to people.
Risk management	Analysing processes and practices that are in place, identifying risk factors and implementing procedures to address those risks.
Scope of Practice	The Scope of Practice for Audiologists ³ provides an overview of the services that may be offered by appropriately qualified and experienced Audiologists in Australia. That is, it provides an overview of the scope of practice of the profession of audiology.
Service	The provision of audiological treatment, procedure, programs, or other intervention. 'Service' can also refer to a person or organisation as the provider of the audiological or other service.
Site of lesion	Conclusion drawn from analysis of diagnostic assessments regarding the region of the auditory or vestibular system where dysfunction occurs.
Stakeholders	Person or body interested in audiological service, including client, family, carer, allied health professional, medical professional, government, support services, community organisations.
Statutory requirements	Legal requirements of a state, territory, or federal government.
Workplace health and safety	Involves the management of risks to the health and safety of everyone in a workplace, including staff, clients, visitors, and suppliers. Creating a safe work environment is a legal requirement. Also known as Work Health and Safety, or Occupational Health and Safety.

1 Code of Conduct for Audiologists and Audiometrists: <https://auderc.org.au/code-of-conduct/>

2 The National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020 – 2025: <https://www.ahpra.gov.au/About-AHPRA/Aboriginal-and-Torres-Strait-Islander-Health-Strategy/health-and-cultural-safety-strategy.aspx>

3 Scope of Practice for Audiologists and Audiometrists: <https://audiology.asn.au/Tenant/C0000013/Position Papers/Other documents/Scope of Practice All-in-one 20170119.pdf>



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