

14 April 2022

Mr Robert Day
Assistant Secretary, Dementia, Diversity and Design Branch
Australian Government Department of Health
Sirius Building, 23 Furzer Street, Woden
Canberra ACT 2601

Email: accommodationdesign.reform@health.gov.au

Dear Mr Day

Re: New accommodation design standards for residential aged care

Audiology Australia (AudA) welcomes the opportunity to provide a response to the Department of Health's ongoing consultation on the development of new accommodation design standards for residential aged care.

AudA is the peak professional body for the health profession of audiology, representing over 3,000 audiologists across Australia and 95% of all practising audiologists in the country. Audiologists are hearing health practitioners who provide hearing services and supports to people across their lifespan to help them preserve, manage, and improve their hearing and balance, and their ability to process and understand sounds.

We understand residential aged care providers and technical experts were consulted late last year regarding the proposed residential aged care accommodation framework. AudA was unfortunately unable to provide a submission response during the previous stage of the consultation. As such, we hope this submission will be considered by the Department for the next stage and as part of the ongoing consultation process.

Our response focuses on the importance of addressing the hearing health needs of aged care residents, with particular attention on the link between hearing loss and cognitive decline. We strongly advocate for the adoption of hearing friendly design principles in residential aged care accommodation design standards and the consideration of the hearing health needs of residential aged care residents with a hearing impairment and cognitive decline and/or dementia.

Research linking hearing loss and dementia

Emerging evidence has provided new insights into hearing health as a key component of healthy ageing, with preliminary research findings indicating a link between hearing loss and cognitive decline. Studies published by Livingston et al. (2017, 2020) indicates that unmanaged hearing loss in mid-life (45-65 years) and late-life (older than 65 years) may

account for up to nine percent of preventable dementia cases worldwide and is one of the most potentially modifiable risk factors for dementia.

Further studies have also demonstrated a link between hearing loss and cognitive decline (Michalowsky et al. 2019, Liu & Lee 2019, Lamb & Archbold 2019). Hearing impairment has been associated with a higher risk of dementia, with the correction of hearing loss potentially decreasing the speed by which an individual experiences age-related cognitive decline. This suggests that hearing protection, screening and treatment may be considered for use as strategies to address the risk of dementia and cognitive decline.

According to Dementia Australia (2022), there are an estimated 487,500 Australians presently living with dementia and an estimated 1.6 million Australians involved in their care. Furthermore, without a medical breakthrough, the number of people living with this condition is expected to increase to almost 1.1 million by 2058.

As outlined in [AudA's Hearing Health and Dementia position statement](#) (2020), AudA strongly considers that audiologists have an important professional role in the context of hearing loss and dementia, including providing clinical services to assist in the timely identification and management of hearing loss in older people, and audiological treatment to individuals with dementia that optimises communication and social engagement throughout the course of the disease.

Adopting universal hearing-friendly design principles

Loss of hearing can have the most significant impact on individuals with dementia in terms of quality of life. This is because dementia can worsen the effects of sensory changes by altering how an individual perceives external stimuli, such as noise and light. In addition, hearing is also linked to balance, and this may also lead to a greater risk of falls either through loss of balance or through an increase in disorientation as a result of an individual trying to orientate themselves in an environment that is over-stimulating and noisy (Hayne & Fleming 2014).

Acoustic design is important for individuals with dementia as they can be particularly affected by the acoustic environment. Even if an individual with dementia has normal hearing, they can lose the ability to interpret what they hear accurately – meaning the amount, type, and variety of noise an individual with dementia is exposed to needs to be carefully controlled as over or under exposure to noise can cause confusion, agitation, and aggression (Hayne & Fleming 2014).

AudA considers that there is a strong need to design aged care facilities that incorporate good acoustics and low reverberation – with more thought put into planning the acoustic environments of the physical spaces where residents gather for social activities to reduce background noise, reverberation, and loss of signal over distance. We consider it crucial to raise awareness of and adopt universal hearing-friendly design principles in the design of buildings such as residential aged care facilities.

We would welcome the opportunity to discuss any aspect of our submission with you further. I can be contacted via Elissa Campbell, Acting Chief Executive Officer on (03) 9940 3900 or elissa.campbell@audiology.asn.au.

Yours sincerely



Dr Barbra Timmer
President

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