



Provider 2023 Self-Assessment Report

4/3/2024

Provider Self-Assessment

The Department of Health and Aged Care administers the Australian Government Hearing Services Program. The program works with contracted service providers to support their compliance. The program monitors provider compliance under the [Compliance Monitoring and Support Framework](#).

The Self-Assessment Tool (SAT) is a requirement of the [Service Provider Contract](#) (the contract). The SAT supports providers to undertake an annual review of their processes and systems to ensure they are compliant with the requirements of the program.

The SAT was available through Citizen Space from 16 October 2023. Submissions were due 30 November 2023.

Summary of Outcomes from the 2023 Self-Assessment Process

- 333 providers were required to submit a SAT and all providers submitted their SAT by the due date.
- 325 providers (97.6%) stated the SAT assisted them to comply with program requirements.
- 172 providers (51.7%) require follow up on one or more identified issues. These include:
 - records management (51 providers (15%))
 - completion of the practitioner confirmation (43 providers (12.9%))
 - disclosure of device supply arrangements (41 providers (12.3%))
 - incorrect practitioner listing (40 providers (12%)).
- 27 providers (8%) suggested improvements for the SAT. We have forwarded some of these suggestions to Citizen Space for their consideration for future changes to the system. Some providers requested a list of the SAT questions, or an offline version of the SAT to prepare responses. We remind these providers that we include a SAT Questions Document with the SAT notification email.

Providers should also note that the SAT is not the correct forum for suggesting program changes. Providers should respond to program consultations to ensure suggestions are formally recorded.

Compliance Issues

We identified several recurring issues through the SAT. While some providers will receive follow-up separately, all providers should take note of the following issues and should ensure that all staff understand the requirements.

Disclosure of device supply arrangements

While 98.5% of providers have a written device supply arrangements disclosure, many reported they provide this to clients with other provider information “at the first appointment” or “on request” and, in some instances, provide this “verbally”. **Please note that this disclosure must be provided to all clients in writing every time a device is discussed** (before every Fitting, Refit, Replacement or Spare Device). **This requirement applies even if a provider has no preferred supplier arrangements.** Please refer to clause 9.5 of the contract. Providers may choose to meet this requirement by including the device supply arrangements disclosure on their device quote template.

Electronic records

Some providers, including some storing all records electronically, reported printing and posting electronic records to a new provider. **Section 29(8) of the Schedule of Service Items and Fees states that electronic records must not be printed and posted.**

If a client record is in hard copy (a paper record), electronic information from Noah can be included in printed form (Noah data should also be provided on a USB drive or similar). All documents that are created electronically or are scanned into a provider’s system after completion by a client, **must remain in electronic format and must be sent to a new provider in electronic format.**

Practitioner listings

More than 25% of providers reported practitioner changes through the Practitioner Confirmation section of the SAT. Approximately 33% of these were outside the 5 working days required under the contract, with some up to 5 years old. We remind providers that, under **clause 6.1(h)** of the contract, they have warranted that they **will update the information held in the portal, including Qualified Practitioner information, within 5 working days of any change.**

Some providers noted that the Practitioner Confirmation section of the SAT was difficult and tedious to complete and suggested there could be a better way of collecting this information. This activity was required due to the number of practitioner links in the portal that were not current. If this information is kept up to date, this activity should not be required again.