
EXECUTIVE SUMMARY AND RECOMMENDATIONS FROM THE

REPORT OF THE INDEPENDENT REVIEW
OF THE HEARING SERVICES PROGRAM



Professor Michael Woods
Dr Zena Burgess
August 2021

Executive summary

The Independent Review of the Hearing Services Program

The independent Hearing Services Review Expert Panel (Expert Panel) was commissioned by the Australian Government to review its Hearing Services Program and recommend opportunities to improve all aspects of the program's scope and operation. The Expert Panel, comprising Professor Michael Woods and Dr Zena Burgess, examined:

- whether the Hearing Services Program delivers services aligned with clinical need and contemporary service delivery
- how the voucher and hearing device maintenance payment system compares with advances in the manufacturing sector and in product offerings
- how technology is changing the provision of services through the program
- how program services are currently delivered and whether access can be enhanced for vulnerable Australians and in thin markets such as in regional, rural and remote areas.

The deliberations of the Expert Panel were informed by policy papers, previous reviews and audits of the Hearing Services Program, national and international research, and its own analyses of the issues. In December 2020 the Expert Panel sought submissions from, and consulted with, stakeholder groups comprising consumer advocates, program clients, industry (including service providers and hearing device manufacturers), professional associations and academics. Further stakeholder feedback was sought on the Expert Panel's draft report in May-June 2021 and responses were considered when preparing this final report.

Previous reviews

There have been several previous reviews of all or part of the Hearing Services Program, including the relatively recent *Review of Services and Technology Supply in the Hearing Services Program* undertaken by PricewaterhouseCoopers (PwC) in 2017. However, the current arrangements for delivery of hearing services through the program have remained largely unchanged since its establishment in 1997.

The Expert Panel has conducted an independent review of the Hearing Services Program and provides detailed recommendations to government in this report. The Expert Panel notes that some of its recommendations align with those contained in the PwC report.

Hearing Services Program objectives

The enabling legislation for the Hearing Services Program provides no statement of purpose for the Hearing Services Program and does not set out specific objectives. While high-level statements about the program are contained in other documentation, they provide only a generalised framework for the program and its funding streams. This lack of clarity of objectives contrasts with the legislation establishing the aged care system and the National Disability Insurance Scheme (NDIS).

The Expert Panel considers that there is a need to explicitly define the objectives of the Hearing Services Program to emphasise the centrality of client outcomes, choice and control; provide clarity and direction for its administration; ensure alignment with contemporary service delivery; enable accountability through the measurement of outcomes; and guide its future reform.

The Expert Panel has proposed a set of draft objectives which are directed to eligible people with hearing loss, contracted service providers, qualified practitioners and program administrators. The Expert Panel recommends that these draft objectives be the subject of further consultation with all relevant stakeholders.

Eligibility for the Hearing Services Program

To access publicly subsidised services through the Hearing Services Program, a person needs to be in one of the categories of eligible people specified under the *Hearing Services Administration Act 1997*.

Australians who are currently eligible under the broadly based voucher stream of the Hearing Services Program include those holding a Pensioner Concession Card; Department of Veterans' Affairs Veteran Gold Card holders and some Veteran White Card holders and their dependents; current permanent and full-time reservist members of the Australian Defence Force; and those referred by Disability Employment Services under its Disability Management Services program.

Eligible clients under the voucher stream can receive one full hearing assessment (usually inclusive of questions about how their hearing loss is affecting their lives and what their goals might be) and can be offered a hearing device per ear if their hearing loss is above the Minimum Hearing Loss Threshold (MHLT) of 23 decibels. The voucher also covers an annual review of their hearing loss, maintenance and repair services for their hearing device and any adjustment of their device. Clients are also fully or partially covered for a hearing device replacement if the device is lost or damaged beyond repair.

Voucher clients whose level of hearing impairment is assessed as being below the MHLT are not eligible for a subsidised device. However, following their hearing assessment they can receive up to 2 rehabilitation sessions until their next voucher in 5 years.

Those eligible for the Community Service Obligations (CSO) stream include people who are eligible for the voucher stream of the Hearing Services Program but who have complex hearing or communications needs or live in a remote area; Aboriginal and Torres Strait Islander people over the age of 50 years or participants in the Community Development Program; and anyone under the age of 26 years, including NDIS participants.

After considering the perceived confusions about eligibility for some age groups, the Expert Panel recommends that the eligibility definitions for the 2 age cohorts of 21–25 years and over 26 years be clarified. As described above, the CSO stream currently includes infants, children, adolescents and those aged up to 25 (including 'young Australians' aged up to 21 years of age

and 'young adults' aged 21-25 years as defined in the *Australian Hearing Services (Declared Hearing Services) Determination 2019*) and voucher-eligible adults with complex needs. The Expert Panel recommends that those aged up to 25 years remain with CSO and be eligible to access services through Hearing Australia.

However, the Expert Panel recommends that adults from 21 years of age should have greater choice of service provider on the following basis:

- adults from 21 to 25 years of age with hearing loss should be able to access hearing services from any Hearing Services Program provider of their choice
- voucher-eligible people from 26 years of age who have complex hearing or communication needs and/or cochlear/bone anchored implants should be able to access appropriate specialist services from any Hearing Services Program provider of their choice.

For all contracted service providers who intend to deliver specialist services to people from 21 years of age who have complex hearing or communication needs and/or cochlear/bone anchored implants, there will be specific requirements. The providers will be asked to demonstrate that their practitioners can support these clients with the capacity, skills and cultural awareness capabilities that meet the clients' needs; and that their service delivery accords with the standards and guidelines developed by the Practitioner Professional Bodies. Hearing Australia would continue to be a provider of these services (it is currently the sole provider of services under the CSO stream).

Extending the eligibility criteria

The Expert Panel examined the various public benefits, private benefits and costs of extending the categories of eligibility for the Hearing Services Program to additional groups of people with hearing loss. Following analysis, the 3 groups identified as having high-priority net benefits are Low Income Health Care Card holders from 26 years of age until Age Pension eligibility age, all Aboriginal and Torres Strait Islander peoples, and permanent residents of aged care homes.

The Expert Panel also noted the opportunity provided by Medicare billing arrangements to encourage general practitioners (GPs) to undertake awareness raising of hearing health. The Expert Panel recommends that, where considered warranted by the patient and GP, there be a referral for a full diagnostic hearing assessment for claimable assessments. This would apply to those aged 75 years and older, 45–49 year-olds who are at risk of developing chronic disease, permanent residents of aged care homes, people with an intellectual disability, refugees and other humanitarian entrants, and Aboriginal and Torres Strait Islander people (children and adults).

The client experience and need for support

The Expert Panel notes the importance of client choice and control as an underpinning principle of all health care. It advises that, to the extent possible, people with hearing loss should be able to make choices about the hearing health services they receive and the contracted service providers they choose to use, and they should have control over how those services are provided. This has been a recurring theme in earlier reviews and parliamentary inquiries.

For client choice to have meaning, people must have knowledge and understanding of the available options and the consequences of choosing them. This requires that people have timely and reliable information in an easily understood and accessible format before they make those decisions.

The client journey often begins at the Hearing Services Program website. The Expert Panel recommends that there be a range of illustrative client service pathways on the website which clearly show the options for clients who may be eligible for hearing services now or in the future. This should be further developed to direct clients to various service options through the relevant entry points for registration under the program.

The options should particularly address the needs of children and young people, Aboriginal and Torres Strait Islander peoples, people from culturally and linguistically diverse backgrounds, people living in rural and remote locations, and adults with complex hearing needs, as well as the broader community of people with hearing loss. The service pathways should also assist people who are not eligible for the publicly funded subsidies under the program but are seeking help with managing their hearing loss. The Expert Panel considers that further stakeholder engagement, through public consultation, on the recommendations of this report will help develop optimum pathways.

Stakeholder submissions and research evidence demonstrate that when people use decision aids they improve their knowledge of the options and feel better informed and clearer about what matters most to them. On this basis, the Expert Panel recommends the development and application of decision aids on the program website. Additionally, the website could continue to be upgraded to make it easier to navigate and also include more information to support consumer decision-making.

A particular priority for the Expert Panel has been to seek input from consumers and organisations that represent clients' interests. Consumer organisations are very supportive of the Hearing Services Program and believe it makes a significant difference to people's lives. Similarly, families generally do not want to see changes to existing arrangements, where Hearing Australia is the sole CSO provider for children's services. The Expert Panel recommends that the Department of Health establish a permanent hearing services consumer consultation forum with relevant consumers and their representative organisations. Such a forum would facilitate information exchange; enable the provision of advice on improving the equitable, effective, efficient and sustainable functioning of the Hearing Services Program and associated hearing activities; and explore ways to increase the opportunities for consumer advocacy groups and organisations to assist people with hearing loss. This would not preclude opportunities for the broader range of stakeholders to provide input into improving the operation of the program.

The Expert Panel found that hearing impairment, hearing care help-seeking and hearing health care provision are complex and multifactorial. Current interventions by a number of program contracted service providers are focused on the supply and fitting of hearing devices, recognising that devices are often integral to helping with hearing loss. A related issue is that the assessment of the hearing loss of voucher clients relies primarily on the use of pure tone audiometry. Recent evidence, including from the World Health Organization, indicates that this should not be the sole method of understanding the holistic needs of people with hearing loss or as the indicator of appropriate interventions. Even where a hearing device is warranted, evidence suggests that positive outcomes from their use depend on client readiness, motivation and support and not solely on the level of hearing loss.

The Expert Panel also noted that it is difficult to obtain a full picture of the uptake of rehabilitation options within the Hearing Services Program, as this component of care is often billed as part of other services, such as fittings and maintenance items.

A concern that consumer groups commonly express is that there is minimal use of additional support services – separate from any fitting of a hearing device – as part of the overall package of hearing health care made available to clients. This is despite stakeholder support for this approach. Having examined the evidence, the Expert Panel recommends that the scope of the program be more clearly defined to include a holistic assessment of client needs and their communication requirements, lifestyle and life circumstances, as well as any psychosocial needs. There should be a specific requirement under the program for the delivery of rehabilitation, communication and education services during several stages within the overall support available to all clients, irrespective of whether, or by whom, a hearing device has been fitted.

A review of the current Schedule of Service Items and Fees (Services Schedule) was outside the scope of this review but is strongly recommended by the Expert Panel. This review is needed to ensure that the Services Schedule includes items with a strong focus on communication and education support, and rehabilitation, and that those items are appropriately remunerated. The Services Schedule review should also assess whether there is a need to rebalance the fees—for example, if there is an unintended bias in profit margins which favours hearing devices ahead of providing rehabilitation services.

The Expert Panel noted that the COVID-19 pandemic has had an impact on the face-to-face delivery of services through the Hearing Services Program. Changes to the program have included the use of teleaudiology for some clinical appointments, a relaxation of the rules to allow verbal client consent for services, and the provision of hearing services at temporary business sites and home visits. The Expert Panel heard that the ongoing provision of flexible modalities for service delivery, such as teleaudiology and settings-based service delivery models, will be welcomed by some clients (including those in residential aged care) but that the alternative modalities are not well suited to all services and they do not meet the needs of all clients. The Expert Panel considers that these more flexible options for service delivery should continue to be available where they are clinically appropriate and suitable for client preferences, circumstances and capability. This view was supported by feedback received on the Expert Panel's draft report.

The positive client experience of the program described above is tempered by evidence that over 60% of people who are currently eligible for its services are not engaged with the program. In particular, there is significant under-representation of some eligible populations that face specific barriers to accessing those services.

Given the increased risk and incidence of ear health problems among Aboriginal and Torres Strait Islander peoples, it is a concern that they are under-represented in the CSO stream and that they find it difficult to access culturally appropriate hearing services across the entire Hearing Services Program. The Expert Panel has recommended a co-design approach to developing culturally safe and accessible hearing health services – in a way that maximises opportunities for collaboration with the Aboriginal Community Controlled Health Sector. The National Aboriginal Community Controlled Health Organisation (NACCHO) highlighted its support for this approach, noting that it must align with the broader Closing the Gap initiatives.

The Expert Panel found that there are other high-priority populations that experience additional challenges in accessing hearing health services. These barriers should be addressed with a view to improving their access to the program. The high-priority populations include people from culturally and linguistically diverse backgrounds; people living in regional, rural and remote communities; residents of aged care homes; and older people in general.

The Expert Panel acknowledges the Australian Government's response to the final report of the Royal Commission into Aged Care Quality and Safety, which contained recommendations for access to allied health services that had implications for the hearing health support for residents of aged care homes; and the work currently being undertaken through the 2019 *Roadmap for Hearing Health* to address access for these groups. The Expert Panel has endorsed those initiatives, including the enhancement of sector workforce capacity. Again, a co-design approach is recommended, especially for culturally and linguistically diverse communities.

Contemporary service delivery

Client choice of a contracted service provider can affect what services they are offered (such as education and counselling and/or a hearing device), how services are offered and the quality of services they receive. It probably even determines the range and brands of hearing devices recommended to them. However, provider decisions on these matters can be shaped by corporate concerns such as vertical integration with hearing device manufacturers rather than by the comprehensive communication and education needs of clients based on the principle of informed choice and control over their management of hearing loss.

A related issue is that, under the voucher stream, a client may either choose a fully subsidised hearing device or use their voucher to contribute to the cost of a partially subsidised hearing device and pay the additional amount themselves. This may be creating a perverse incentive for contracted service providers to market the more expensive, partially subsidised hearing devices. The Expert Panel considers there is a need for increased transparency and accessibility of information to consumers across all aspects of the program, including by contracted service providers publishing additional information on the range and function of available hearing devices; pricing of partially subsidised hearing devices; qualifications and accreditation details of contracted service providers and/or practitioners; and how clients can provide feedback on service experience and outcomes.

The Expert Panel has noted that continual technological advances in hearing health care are shaping consumer demand and contracted service provider offerings to clients but considers that the program Services Schedule may not be keeping pace with these advances. In addition to the review of the Services Schedule proposed earlier, there is an opportunity to review and update the minimum specifications of fully subsidised devices and review all program technologies, with input and advice from the broad range of stakeholders. These reviews are interlinked and could be conducted under a single governance structure.

Hearing Services Program administration

There is a complex legislative, contractual and policy framework underpinning the delivery of services through the Hearing Services Program. While positive steps have been taken to simplify the regulatory framework for the program, there is agreement that further work is needed.

Most stakeholders who responded to the *Hearing Services Program Review consultation paper* suggested amendments to the current service delivery model rather than broader reform. Nevertheless, the Expert Panel considers that there are opportunities to implement changes to the current administration of the program to ensure that its objectives are being met; the contracted service providers, workforce and suppliers are appropriately regulated; the program demonstrates value for money; and the program has the flexibility to adapt to emerging trends.

As mentioned above, there are no legislated Hearing Services Program objectives. In addition, there are no clearly described client clinical outcomes or standardised client outcome measures for contracted service providers or any defined program-level outcomes or associated measures or processes in place to monitor and evaluate these. A more strategic and comprehensive collection, analysis and reporting of client-centred data within the program is a necessary part of continual improvement of the program into the future. The data collections that are currently available are inadequate for this task.

The Expert Panel recommends that the Australian Government develop and invest in a Hearing Services Program monitoring and evaluation framework that supports the monitoring of the program's achievement of its objectives. This framework should address improvement to client clinical outcome measurement (hearing and non-hearing); qualitative and quantitative program outcome measurement, including client reported experience measures; measurement of the impact on administration of regulatory and program changes; better use of the Hearing Service Online (HSO) portal to capture and analyse data; and ensuring clients can access their audiological records and assessment reports.

The Expert Panel also notes the value of establishing a national hearing health database and has recommended, as a minimum, that the Australian, state and territory governments implement a national digital database of hearing screening of infants and children.

Research

The Expert Panel acknowledges that the 2019 *Roadmap for Hearing Health* and various parliamentary inquiries have provided suggestions for future research and that the Australian Government is supporting the Roadmap's research recommendations through its \$7.3 million investment in research, which will improve evidence to support better hearing outcomes.

The Expert Panel has identified further research opportunities - for example, research on service delivery models, clinical and program outcomes and their measurement tools; and program evaluation research. Importantly, though, what is missing is a strategic approach to considering and planning for research. The Expert Panel considers it critical that a research strategy for hearing health and hearing loss is developed in consultation with stakeholders and then published on the Hearing Services Program website. A guiding principle should be that research is co-designed with relevant population cohorts and that those groups of people be involved in the conduct of the research, in its analysis and in the dissemination of research findings. Research funded through the Hearing Services Program also needs to have a more strategic approach, aligning with this broader research strategy.

Furthermore, noting the rich data that longitudinal studies provide about the life course of hearing impairment, the Expert Panel recommends that the Australian Government support meaningful longitudinal studies that align with the research strategy - in particular, funding the extension of the Longitudinal Outcomes of Children with Hearing Impairment (LOCHI) Study conducted by the National Acoustic Laboratories.

Recommendations

The Hearing Services Program Review Expert Panel (Expert Panel) makes the following recommendations to reform the Hearing Services Program. The focus is on optimising outcomes for the program's clients; improving the equity, effectiveness, efficiency and sustainability of service delivery; ensuring good governance; and modernising key components of the program.

Chapter 2

Objectives of the Hearing Services Program

Recommendation 1: Defining new objectives for the Hearing Services Program

- 1(a) The Australian Government should define the objectives of the Hearing Services Program to guide the expectations of those with hearing loss; the Department of Health's administration of the program; the delivery of services by contracted service providers; the participation of other stakeholders in the program; and the measurement and assessment of client outcomes. The Australian Government should also establish a regular assessment of program outcomes to ensure the accountability of all participants.
- 1(b) The Australian Government should undertake consumer and broader stakeholder consultation on the following draft objectives before committing to a final set of program objectives and subsequently enshrining them in legislation:
 - A. The program's objectives for eligible people with hearing loss are that they:
 - A.1 have equitable access to prescribed services which comprise hearing assessment and hearing rehabilitation, hearing devices and other support - specifically, that eligible people:
 - i. have equitable access to support, irrespective of their location or personal attributes and circumstances
 - ii. be provided with support which is culturally safe and appropriate to them
 - A.2 are able to exercise informed choice about and control how to live with and manage their hearing loss, including:
 - i. how to address their communication needs and maximise social inclusion through social activity and economic participation and in physical and cultural pursuits to the fullest extent possible
 - ii. how they can be engaged in the planning, assessment, selection and delivery of the services offered to them

- A.3 are able to exercise informed choice about, and control the selection of, their service provider and have clear and independent processes for resolving any complaints.
- B. The program's objectives for contracted service providers under the Hearing Services Program are that they:
 - B.1 always act in the best interests of the eligible clients who have chosen them
 - B.2 demonstrate that they meet program contract requirements such as key performance indicators
 - B.3 provide culturally safe and appropriate services that respond to the needs of people with hearing loss in their local area.
- C. The objectives for qualified practitioners/hearing professionals are that they:
 - C.1 deliver safe services
 - C.2 abide by all current Practitioner Professional Bodies' codes of conduct and meet all professional standards and/or competencies.
- D. The program's objectives for the government and its Hearing Services Program administrators are that:
 - D.1 when defining the subsidised set of prescribed services, categories of eligibility, hearing loss thresholds and criteria for contracted service provider accreditation, they have regard to:
 - i. supporting the communication needs of people with hearing loss and their social inclusion through social activity, economic participation, and physical and cultural pursuits
 - ii. the benefits to families and other persons with whom people with hearing loss communicate
 - iii. the broader benefits of employability, participation in society, social cohesion and economic growth
 - iv. the quantum and sustainability of costs to, and opportunities forgone by, current and future taxpayers
 - D.2 they ensure that the services, hearing devices and other technologies made available to people with hearing loss through the Hearing Services Program are regularly reviewed against agreed outcomes to reflect best practice and ensure that people with hearing loss do not experience harm arising from poor quality services or supports
 - D.3 they raise community awareness of the issues that affect the social and economic participation of people with hearing loss and facilitate their greater community inclusion
 - D.4 they support the measurement and collection of data associated with hearing loss in Australia and the outcomes achieved by hearing services programs, and invest in research, to:
 - i. facilitate innovation, continuous improvement and contemporary best practice in improving hearing health, preventing hearing loss and supporting people with hearing loss
 - ii. inform the future direction of hearing services programs.

Chapter 3

Eligibility requirements for support under the Hearing Services Program

Recommendation 2: Modernising the voucher stream terminology

The Australian Government should replace the term ‘voucher stream’ with a term such as ‘Hearing Benefits Scheme’ to modernise the program terminology and better reflect the purpose of the stream (noting that the current term ‘voucher stream’ has been retained throughout this report).

Recommendation 3: Clearer delineation of Community Service Obligations stream clients

The Australian Government should retain the eligibility for all young Australians and young adults under 26 years of age to access hearing services through the Community Service Obligations stream as currently provided for in the Australian Hearing Services (Declared Hearing Services) Determination 2019.

Recommendation 4: Greater choice of provider for young adults and for adults with complex hearing needs

The Australian Government should enable adults from 21 years of age to have greater choice of provider on the following basis:

- 4(a) Subject to Recommendation 4(c), all young adults from 21 to 25 years of age with hearing loss should be able to access hearing services from any Hearing Services Program provider of their choice.
- 4(b) Subject to Recommendation 4(c), all voucher-eligible adults from 26 years of age who have complex hearing or communication needs and/or cochlear/bone anchored implants should be able to access appropriate specialist services from any Hearing Services Program provider of their choice.
- 4(c) The Australian Government should require all contracted service providers who intend to provide specialist services to people from 21 years of age who have complex hearing or communication needs and/or cochlear/bone anchored implants to demonstrate that they can support these clients with the capacity, skills and cultural awareness capabilities that accord with the standards and guidelines developed by the Practitioner Professional Bodies. The Australian Government should implement a system of audits to ensure that providers are claiming appropriately for specialist services delivered in accordance with this recommendation.

Recommendation 5: Extension of eligibility to additional priority populations

The Australian Government should expand the categories of eligible people under the voucher stream to include:

- 5(a) people who are Low Income Health Care Card holders from 26 years until Age Pension eligibility age
- 5(b) Aboriginal and Torres Strait Islander people from 26 years of age
- 5(c) permanent residents of aged care homes.

Recommendation 6: Making better use of Medicare

The Australian Government, through its management of Medicare, should encourage general practitioners (GPs) to undertake awareness raising of hearing health and, where considered warranted by the patient and GP, provide a referral for a full diagnostic hearing assessment for the following Medicare claimable items:

- a health assessment for people aged 75 years and older
- a health assessment for people aged 45–49 years who are at risk of developing chronic disease
- a comprehensive medical assessment for permanent residents of aged care homes
- a health assessment for people with an intellectual disability
- a health assessment for refugees and other humanitarian entrants
- a health assessment for Aboriginal and Torres Strait Islander peoples (children and adults).

Chapter 4

Clinical need and client experience within the Hearing Services Program

Recommendation 7: Engagement with consumer groups

The Australian Government should establish a hearing services consumer consultation forum with consumers and carers, consumer/carer organisations representative of consumer diversity and cultures. The forum would facilitate information exchange; seek advice on improving the equitable, effective, efficient and sustainable functioning of the Hearing Services Program and associated hearing activities; and explore ways to increase the opportunities for consumer organisations to support their members and assist people with hearing loss.

Recommendation 8: Client decision-making support

8(a) The Australian Government should co-design a range of illustrative service pathways on the Hearing Services Program website that clearly show the options for clients who are eligible for hearing services in the voucher stream (including Community Service Obligations (CSO) specialist services) and the CSO stream. Pathways should identify links with related programs. These pathways should be reviewed, at an appropriate time period following implementation to assess their usefulness.

Specific pathways, using appropriate language and communication modes, should be developed for clients who might benefit from targeted wayfinding information, including:

- children and young people aged under 26 receiving services through Hearing Australia
- clients with complex hearing or specialist needs
- adults with cochlear/bone anchored implants
- Aboriginal and Torres Strait Islander clients seeking hearing services
- clients from culturally and linguistically diverse backgrounds
- clients living in rural and remote areas
- permanent residents of aged care homes.

- 8(b) The Australian Government, following consultation with stakeholders, should incorporate a set of privacy-protected decision aid tools into the Hearing Services Program's website to assist prospective clients to make more informed choices about managing their hearing loss and to be informed of the services available through the program. This initiative should be reviewed within 2 years of implementation to assess its effectiveness and advise on improvements.
- 8(c) Subject to the outcome of the review recommended in Recommendation 8(b), the Australian Government should consider trialling a set of decision aid tools in the hearing assessment process, with the data to be stored in a client's clinical file and made available to them.

Recommendation 9: Availability of translation, interpreting and Auslan services

The Australian Government should ensure that audiologists and audiometrists are made aware of the Auslan services available under the National Disability Insurance Scheme and the National Auslan Interpreter Booking and Payment Service (NABS) programs and how to access these services. Audiologists and audiometrists should be included as 'approved groups and individuals' who are able to freely access the national Translating and Interpreting Service.

Recommendation 10: Delivering rehabilitation and other holistic support services

- 10(a) The Australian Government should amend the scope of the Hearing Services Program to require contracted service providers to offer a more holistic assessment of clients' communication and hearing needs and a broader range of services to better address those needs. This should include:
- a holistic assessment of client needs which supplements an assessment of hearing loss with an understanding of an individual's communication requirements, lifestyle and life circumstances, and psychosocial needs
 - a broad scope of communication support and education alternative services prior to offering the option of being supplied and fitted with a hearing device
 - rehabilitation services as part of providing a fully or partially subsidised hearing device or as a standalone intervention
 - communication, education and psychosocial support alongside hearing assistance
 - assessment and management plans better suited to clients from diverse backgrounds.
- 10(b) The Australian Government should require qualified practitioners who deliver these services to ensure that they can be safely and appropriately provided, in line with Practitioner Professional Bodies' scope of practice and codes of conduct.

Recommendation 11: Access to teleaudiology

The Australian Government should continue its current support and funding for teleaudiology as a service delivery option for Hearing Services Program clients. Providers of teleaudiology should ensure that the service meets the needs of their client, is provided with appropriate comfort and sound quality, and is delivered in accordance with Practitioner Professional Bodies' scope of practice and codes of conduct. The Expert Panel notes that:

- this may be an appropriate mode of service delivery for many rehabilitation and communication/education services
- in some instances and for some cohorts, contemporaneous face-to-face support from another person may be required to make the most of the teleaudiology service (for example, from a family member, Aboriginal Health Worker, aged care worker or translation service).

Recommendation 12: Streamlining the Schedule of Service Items and Fees

The Australian Government should undertake a review of the current Schedule of Service Items and Fees (Services Schedule) to:

- clearly define and describe communication support and education, and rehabilitation services, as they relate to the Hearing Services Program
- simplify the services defined in the current Services Schedule, including by removing any current restrictions around the use of communication support and education, and rehabilitation services, in the current service delivery model
- review the current fees payable under the Services Schedule to ensure that service items which have a strong focus on communication support and education, and rehabilitation, are appropriately remunerated; and undertake any necessary rebalancing of the fees.

Recommendation 13: Improving access for Aboriginal and Torres Strait Islander peoples

13(a) The Australian Government should co-develop an Aboriginal and Torres Strait Islander framework for hearing health, with Aboriginal and Torres Strait Islander leadership, aligned with the National Agreement on Closing the Gap. This should include alternative models of hearing service delivery that are culturally safe and accessible to increase the proportion of eligible Aboriginal and Torres Strait Islander people with hearing loss taking part in the Hearing Services Program.

13(b) The Expert Panel endorses the proposed actions in the *Roadmap for Hearing Health* to improve access for Aboriginal and Torres Strait Islander peoples and recommends that the Australian Government implement and evaluate the following short-term action regarding enhancing this sector's workforce:

Strengthen the Aboriginal and Torres Strait Islander workforce to deliver hearing health services. This would include support for Aboriginal Health Workers to develop skills in hearing health.

Recommendation 14: Improving access for people from culturally and linguistically diverse backgrounds

The Australian Government should identify and analyse shortfalls in engagement with, and outcomes from, the Hearing Services Program for culturally and linguistically diverse populations, including issues related to availability of information and advice in community languages (see Recommendation 9). The Australian Government should undertake a co-design approach to working with peak bodies representing these groups to address any identified issues impacting on access for eligible clients to the Hearing Services Program.

Recommendation 15: Improve access for regional, rural and remote communities

15(a) The Expert Panel recognises the ongoing challenges for regional, rural and remote communities in accessing hearing health services and references its previous advice to the Australian Government regarding the changes to Hearing Services Program voucher stream. The preference of the Expert Panel remains for Option 1 – Provide a loading on service items delivered in rural and remote regions (MM 3–7), irrespective of the size of the provider – as one of the ways to ameliorate the transition impacts of the changes to the program. The Expert Panel also continues to support Option 3 – Expand teleaudiology services available through the program.

15(b) The Expert Panel endorses the proposed actions in the *Roadmap for Hearing Health* to improve access for people experiencing hearing loss in regional, rural and remote communities; and recommends that the Australian Government implement and monitor the outcomes of the following action regarding enhancing the sector's workforce capacity to support these people:

Telehealth is made more accessible for hearing healthcare practitioners to provide services to consumers, particularly those living in rural and remote communities.

Recommendation 16: Improve access for residents of aged care homes

16(a) The Expert Panel endorses the proposed actions in the *Roadmap for Hearing Health* to improve access for older Australians living in aged care homes and/or receiving aged care services; and recommends that the Australian Government implement and monitor the outcomes of the following actions:

Enhancing awareness and inclusion: Lift the quality of hearing health and care in aged care across the country, with a focus on identification, management and workforce training.

Identify hearing loss: Ensure aged care assessment processes, including on entry to residential care, appropriately identify hearing loss and balance disorders.

In line with the Australian Government's response to the final report of the Royal Commission into Aged Care Quality and Safety, the Expert Panel encourages further action to ensure that aged care providers include routine opportunities for their residents to have access to hearing services. Models of care should match both residents' specific needs (for example, their cognitive impairment) and the environment in which they live.

Chapter 5

Service delivery of the Hearing Services Program

Recommendation 17: Supply and client choice

The Australian Government should enable improved consumer choice by amending the contract with providers to require them to publish (as a minimum, on their website in an easily accessible manner):

- the range of services they provide and the features (including quality and limitations) of all devices (fully and partially subsidised) that they supply under the program
- prices of the partially subsidised devices that they provide under the program
- qualifications and relevant accreditation status of the provider
- information on the mechanism through which clients can provide feedback on service experience and outcomes.

Recommendation 18: Broadening the scope of technology to facilitate client choice

18(a) The Australian Government should evaluate the benefits and costs of including developing technologies, such as rechargeable devices and batteries, directional microphones, alerting devices, mobile applications and remote controls, in the Schedule of Service Items and Fees.

18(b) The Australian Government should commission the following reviews and convene one or more broad sector working groups of stakeholders, including consumer representatives, to participate in them:

- a review of hearing technologies which should be listed under the Hearing Services Program
- a review of the minimum specifications for fully subsidised hearing devices under the Hearing Services Program, as outlined in the manufacturers' Deeds of Standing Offer, and the criteria which guide the inclusion of those devices in the Deeds of Standing Offer.

Chapter 6

Design of the Hearing Services Program

Recommendation 19: A national data service

The Australian, state and territory governments should implement a national digital database of hearing screening of infants and children, recognising that the responsibility for universal newborn hearing screening and screening at any other age, such as prior to starting school, lies with state and territory governments. This initiative could act as a precursor to the development of a broader national hearing health data service.

Recommendation 20: Program monitoring and evaluation

- 20(a) The Australian Government should develop and invest in a Hearing Services Program monitoring and evaluation framework that supports the monitoring of the program's achievement of its objectives, in terms of both client outcomes and program-level outcomes.
- 20(b) The Australian Government should report on the performance of the program in 2 years, drawing on improved data availability and measurement tools, and commission an independent evaluation within a further 5 years.

Chapter 7

Hearing health and hearing loss research

Recommendation 21: Research strategy

- 21(a) The Australian Government should develop a research strategy in consultation with hearing services stakeholders and publish it on the Hearing Services Program website. Guiding principles should be that research is co-designed with relevant population cohorts and that those groups are involved in the conduct of the research, its analysis and the dissemination of the research findings.
- 21(b) Research funded directly through the Hearing Services Program should be aligned with this broader research strategy. Research priorities should be advised through consultation but should include the removal of barriers to accessing the program's services and facilitating the cultural appropriateness of service delivery.

Recommendation 22: Longitudinal studies

The Australian Government should support meaningful longitudinal studies that align with the research strategy, noting the rich data that such studies provide about the life course of hearing loss.

In this respect, the Australian Government should continue to fund the National Acoustic Laboratories to extend the conduct of the Longitudinal Outcomes of Children with Hearing Impairment (LOCHI) Study.



Health.gov.au