



Australian Government
Department of Health



Hearing Services Program Review

Review of the Hearing Services Program

Draft Executive Summary and
Recommendations

May 2021

EXECUTIVE SUMMARY

The Review into the Hearing Services Program

An independent 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, has examined:

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

The deliberations of the Expert Panel have been informed by policy papers and previous reviews, inquiries and audits of the Hearing Services Program, and national and international research. The Panel has sought submissions from, and consulted with, stakeholder groups comprising industry (including service providers and hearing aid device manufacturers), consumer advocates and clients, professional associations and academics.

Interim Advice to Government

On 6 October 2020, the Australian Government announced changes to the Hearing Services Program Voucher Stream in the Federal Budget. The changes related to the Voucher period, the 12 month warranty period maintenance payment and the timing of the maintenance payments. The Minister requested that the Expert Panel provide Interim Advice to the Government on the impact of the implementation of these changes to the Hearing Services Program. This advice was provided to the Minister in the report *Hearing Services Review Interim Advice to Government – Implementation of Hearing Services Program Changes* (Interim Advice) on 25 February 2021 and, where applicable, the conclusions from that report are included in this Review report.

Previous reviews

There have been several previous reviews of all or part of the Hearing Services Program. Of note is the relatively recent *Review of Services and Technology Supply in the Hearing Services Program* undertaken by PricewaterhouseCoopers (PwC) and completed in 2017. The Expert Panel has independently drawn its own conclusions and developed recommendations, but nonetheless notes the consistency of some of its recommendations with those contained in the PwC report.

Program objectives

The enabling legislation for the Hearing Services Program provides no statement of purpose of the Program or its specific objectives. This lack of clarity is in contrast to the legislation establishing Aged Care and the NDIS.

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

While the high level statements of objectives of the Program that are contained in other documentation provide a generalised framework for the Program and its funding streams, the actual implementation is characterised by an over-emphasis on providers supplying and fitting clients with hearing aid devices.

This Review has proposed a set of potential objectives as a starting point for consultation with relevant stakeholders, including people with hearing loss, their advocates and the general community. The suggested objectives are directed to eligible people with hearing loss, service providers, qualified practitioners and Program administrators.

An associated recommendation is that the term 'Voucher stream' be changed to move away from the idea that the Program's purpose is to deliver an entitlement to a publicly subsidised hearing aid device instead of more broadly helping people with hearing loss to be supported in their communication and psychosocial needs. The Expert Panel envisages stakeholder consultation on this, but suggests a term such as 'National Hearing Support (NHS) stream' replace the current 'Voucher stream' to better reflect its purpose and function. The Expert Panel proposes that the Community Service Obligation (CSO) stream retain its title.

Eligibility for the Program

To access publicly subsidised services through the Hearing Services Program, a person needs to be in a category of eligible people as specified under clause 5 of the Hearing Services Administration Act 1997. The next step for eligible Voucher clients is to receive one full hearing assessment and be offered a hearing aid device per ear if their hearing loss is above the Minimum Hearing Loss Threshold (MHLT) of 23 decibels. The Voucher also covers the maintenance and repair services for their hearing aid device as well as an annual review of their hearing loss and any adjustment of their device. Clients are also covered for a hearing aid 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 and following their hearing assessment can receive up to two rehabilitation sessions until their next Voucher.

Australians who are currently in eligible categories for the Voucher stream in the Hearing Services Program include: those holding Pensioner Concession Cards (PCC); Department of Veterans' Affairs Gold Card holders and some White card holders, and their dependents; current permanent and full-

time reservist members of the Australian Defence Force (ADF), and those referred by the Disability Employment Services (Disability Management Services) Program.

Those eligible for the Community Service Obligations (CSO) stream include: anyone under the age of 26 years, including NDIS participants; Aboriginal and/or Torres Strait Islander people over the age of 50 years or participants in the Community Development Program; and 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.

The Expert Panel recommends that the eligibility definitions for the Voucher stream be amended to include adults with complex hearing needs and adults with cochlear/bone anchored implants rather than having them included under the CSO stream. This would give people in these groups a wider choice of providers. There would be no change to the scope of services available to meet their special needs. Hearing Australia would continue to be a provider of these services (for which it was the sole provider under the CSO stream), as it is a registered provider under the Voucher stream.

The Expert Panel examined the various public and private benefits and costs of extending the categories of eligibility for the Hearing Services Program to groups of people with hearing loss who are currently not eligible. Following analysis, two groups identified as having high priority net benefits are Low Income Health Care Card holders and all Aboriginal and Torres Strait Islander people (irrespective of their age). The Expert Panel also noted the opportunity to improve access to assessment for older Australians by including a full diagnostic hearing assessment in the funded MBS item 'Health assessment for people aged 75 years and older' if it is considered warranted by the patient and their GP. In all cases, this might require additional skills development for hearing service providers to effectively support these groups.

The client experience

The Expert Panel notes the importance of client choice and control as an underpinning principle of all health care and 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 providers of those services, and have control over how those services are provided. This has been a recurring theme in earlier reviews and Parliamentary inquiries. Choice is based on knowledge and understanding of available options and the consequences of choosing them, and requires that people have timely and reliable information in an easily understood format prior to them making those decisions.

This does not necessarily occur at the moment for clients of the Hearing Services Program and the Expert Panel identified several ways in which consumers' access to information could be improved, including by the use of Decision Aids. The Program website could be upgraded to make it easier to navigate and to include more information to support consumer decision making, including by developing a range of illustrative client service pathways.

A particular priority for the Expert Panel has been to seek input from consumers and organisations who represent consumer interest. 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, with some expressing concern that any changes may put the outcomes for their child

at risk. Consequentially, recognising that issue-driven consumer engagement currently takes place, the Expert Panel recommends that the Department of Health establish a hearing services consumer consultation forum with relevant consumers and representative organisations. Such a forum would facilitate information exchange, to seek advice on improving the equitable, effective, efficient and sustainable functioning of the Hearing Services Program and associated hearing activities, and to explore ways to increase the opportunities for consumer advocacy groups and organisations to assist people with hearing loss.

The Expert Panel found that while hearing impairment, hearing care help-seeking and hearing health care provision are complex and multifactorial, current interventions by providers under the Program to address client hearing impairment are strongly focused on the supply and fitting of hearing aid devices. A review of the current Schedule of Fees is needed to assess whether there is an unintended bias in profit margins which favours hearing aid devices ahead of providing rehabilitation services. Such a review may point to the benefits of rebalancing the fees.

A commonly expressed concern is that there is minimal use of additional rehabilitation services as part of the overall package of hearing health care made available to clients, despite stakeholder support for this approach. Evidence suggests that positive outcomes from the use of hearing aid devices depends on client readiness, motivation and support, not solely on the level of hearing loss. Accordingly, the lack of separately provided rehabilitation is a deficit in the current service provision models.

The Expert Panel also noted, however, that it is difficult to obtain a full picture of the uptake of rehabilitation options within the Program as this component of care is often included in other services such as fittings and maintenance items. The Expert Panel considers that the scope of the Hearing Service Program should be more clearly defined in terms of offering a more holistic assessment and broader range of interventions that better suit clients' needs. The scope should include a specific requirement for the delivery of rehabilitation and support as a separate service at several stages within the overall support available to all clients. The Expert Panel recommends that these issues be examined and supports a review of the Schedule of Service Items and Fees. The Panel has also explored the option of conducting a pilot trial if rehabilitation services being delivered independently from providers of hearing aid devices and other hearing supports.

A related issue is that under the Hearing Services Program (Voucher stream) the assessment of hearing loss is evaluated primarily using pure tone audiometry. Recent evidence, including from the World Health Organisation, indicates that this should not be the sole option for understanding the holistic needs of people with hearing loss or the indicator of choice of intervention(s), whether that be the supply and fitting of hearing aid devices or other support. The Expert Panel recommends that hearing assessment should be redefined to be a comprehensive process that includes an individual's communication and psychosocial needs – of which pure tone audiometry is only one part. It further considers that any amendment to the current Minimum Hearing Loss Threshold should be deferred until the completion of current research by the National Acoustics Laboratory on this matter.

The positive client experience of the Program described above is tempered by the 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 who face specific barriers to accessing those services.

It is a matter of concern, considering the increased risk and incidence of ear health problems amongst Aboriginal and Torres Strait Islander people that they are underrepresented in the CSO stream and find it difficult to access culturally appropriate hearing services across the entire Hearing Services Program. The Panel has recommended a co-design approach to developing culturally safe, and accessible hearing health services for Aboriginal and Torres Strait Islander people – one that maximises opportunities for collaboration with the Aboriginal community controlled health sector.

The Panel found that there are other high priority populations who experience additional challenges in accessing hearing health services and who should have those barriers addressed with a view to improving access to the Program. These include people from culturally and linguistically diverse backgrounds, people living in regional, rural and remote communities, older people in general and residents of aged care homes specifically. Acknowledging 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 enhancement of sector workforce capacity. Again, a co-design approach is recommended, especially for culturally and linguistically diverse communities.

Service provision

Client choice of a service provider can affect how and what services the client is offered (education and counselling and/or a hearing aid device), the quality of services they receive, and even likely determine the range and brands of hearing aid devices they are offered. However, service provider decisions about services provided and which hearing device aid devices are offered can be shaped by corporate concerns such as vertical integration with hearing aid device manufacturers rather than by the comprehensive communication and psychosocial needs of clients based on the principle of informed choice and control over their management of hearing loss.

The Expert Panel considers there is a need for increased transparency and accessibility of information to consumers across all aspects of the Program, including on the range, features and pricing of hearing aid devices, to support consumer choice. A related issue is that having fully and partially subsidised hearing aid devices may be creating a perverse incentive for service providers to market partially subsidised hearing aid devices in place of suitable full subsidised devices. The Panel has recommended actions to improve consumer choice including updating the client rights and responsibilities information to form a Client Charter, giving clients access to their service history and to available services via a client module in the Hearing Services Portal, and expanding the range and frequency of services available through the Program, including the existing rehabilitation and client review services.

The Expert Panel acknowledges 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 relaxation of rules to enable the use of tele-audiology for some clinical appointments, allowing verbal client consent for services and the provision of hearing services at temporary business sites and home visits. It is likely that some of these changes will become 'business as usual' for the delivery of clinical services. More generally, continual technological advances in hearing health care are shaping consumer demand and the service provider offerings to clients. However the Program schedule may not be keeping pace with these advances. The Panel heard that more flexible modalities for service delivery will be welcomed by some clients, such as tele-audiology and settings

based service delivery models, including in residential aged care settings, but that the alternative modalities are not well suited to all services nor do they meet the needs of all clients.

The Expert Panel recommends there should be a review of the current Program technologies and pricing to inform changes to the Services Schedule, so that updated technologies can be available to clients into the future.

Program administration

The majority of 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 there are opportunities to implement changes to the current administration of the Program to ensure program objectives are being met, that the service providers, workforce and suppliers are appropriately regulated, that the Program demonstrates value for money and that it has the flexibility to adapt to emerging trends. This might include a name change from Voucher stream to something like the 'National Hearing Support stream' (NHS), or a similar term which more accurately reflects the purpose and processes of the rehabilitation and support that should be provided.

Wayfinding for consumers often begins at the Hearing Services Program website. In line with the overriding principle of informed consumer choice and control, the Expert Panel recommends the development of a range of illustrative client pathways, accessible on the website, which clearly show the options for clients who are eligible for hearing services. This concept should be further developed to direct clients to various service options through the relevant entry points for registration. The options should particularly address the needs of children and young people, Aboriginal and/or Torres Strait Islander people, 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 illustrative pathways should also assist people who are not eligible for the publicly funded subsidies under the Program but who are seeking help with managing their hearing loss. The Expert Panel considers that further stakeholder engagement during public consultation on the draft report will help consider optimum pathways.

In similar manner to the current lack of legislated Hearing Services Program objectives, there are no clearly described client clinical outcomes or standardised client outcome measures for service providers and no defined Program level outcomes or associated measures; or processes in place to monitor and evaluate these. Available data collections are inadequate for this task. Stakeholder feedback supports a greater investment in measuring client hearing and non-hearing outcomes to help track client progress and to monitor the effectiveness and efficiency of the Program. The Expert Panel recommends the Australian Government develop and invest in a Data Plan which would enable the measurement of performance against Program objectives. The Plan would address the abovementioned deficiencies and make better use of the Hearing Services Portal to capture and analyse data.

There is a complex legislative, contractual and program policy framework underpinning the delivery of services through the Hearing Services Program. While positive steps have been made in simplifying the regulatory framework for the Program, there is agreement that further work is needed. In addition, hearing aid device supply arrangements have not been comprehensively reviewed for almost ten years, may not be demonstrating value for money, and require early attention.

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* research recommendations through its \$7.3 million investment in research that will improve evidence to support better hearing outcomes.

The Expert Panel has identified further research opportunities including researching 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 Panel considers it critical that a Research Strategy is developed in consultation with stakeholders and then published on the Program website. Guiding principles should be to ensure co-design with the relevant population cohort, with research priorities to include the removal of barriers to access to services and to facilitate the cultural appropriateness of service delivery. Research funded through the National Acoustics Laboratory also needs to have a more strategic approach, aligning with this broader Research Strategy.

Hearing Australia is currently developing a hearing loss prevention National Strategy, and the Expert Panel recommends the Department continue to work in collaboration with Hearing Australia on its implementation. Furthermore, recognising the long term value of the Longitudinal Outcomes of Children with Hearing Impairment (LOCHI) study, the Expert Panel recommends the Australian Government continue to fund the National Acoustics Laboratory to complete this study.

Implementation of the outcomes of this Review

The Expert Panel estimates that the expected annual cost increases of the Program arising from the recommendations of this report would be as outlined below.

For expanding eligibility to low income earners, the Expert Panel estimates an expenditure increase of \$5,153,700 to \$8,269,600 p.a. from the 2021/22 financial year to the 2024/25 financial year. By the 2024/25 financial year, the annual nominal increase in expenditure would represent a 0.3 per cent increase from 2019/20.

For expanding eligibility to Aboriginal and/or Torres Strait Islander people aged 25-49 years the Expert Panel estimates an expenditure increase of \$21,341.9 to \$33,907.9 p.a. from the 2021/22 financial year to the 2024/25 financial year. By the 2024/25 financial year the annual nominal increase in expenditure would represent a 1.22 per cent increase from 2019/20.

These above changes would be the biggest source of cost increases. Other less significant expenditure increases are expected to arise from the removal of various barriers which currently inhibit people from accessing services. Program expenditure savings may arise, however, such as where a greater investment in rehabilitation services is more than offset by savings in the fitting and supply of devices which are subsequently discarded or underutilised. Further there would again be flow on benefits to the people with hearing loss, their communication network, workplaces and broader community.

Some of the recommendations from this Review would be relatively simple to implement. However, the Expert Panel acknowledges that others, as has been the case with prior reviews, are more complex and in

some cases involve changes to existing legislation and/or collaboration with other jurisdictions. Many recommendations which are likely to have a significant impact on consumers, the professional workforce and industry would require time and negotiation to implement successfully. Nevertheless, it is the view of the Panel that these challenges are part of the opportunity for change, and can be addressed through a well-constructed reform implementation plan.

RECOMMENDATIONS OF THE REVIEW OF THE HEARING SERVICES PROGRAM

The Hearing Services Program Review 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

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's administration of the Program, the delivery of services by 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 community consultation on the following draft objectives before committing to a final set of Program Objectives and to subsequently enshrining them in legislation:

A. The Program's objectives for eligible people with hearing loss are that they:

A1 have equitable access to prescribed services which comprise hearing assessment and hearing rehabilitation, hearing aid devices and other support. Specifically, that eligible people:

- (i) have equitable access to support irrespective of their location or personal attributes and circumstances; and
- (ii) be provided with support which is culturally safe and appropriate to them;

A2 are able to exercise informed choice about, and control how to live with hearing loss, including:

- (i) how to address their communication needs and maximise social inclusion through social activity, economic participation, and in physical and cultural pursuits to the fullest extent possible; and
- (ii) how they can be engaged in the planning, assessment, selection and delivery of the services offered to them; and

A3 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 service providers under Hearing Services Program are that they:

B1 always act in the best interests of the eligible clients who have chosen them;

B2 demonstrate that they meet Program contract requirements such as key performance indicators; and

B3 provide culturally appropriate services that respond to the needs of people with hearing loss in their local area.

C The objectives for Qualified Practitioners (QPs)/health professionals are that they:

C1 abide by all current Practitioner Professional Bodies (PPBs) Codes of Conduct and meet all professional standards and/or competencies.

D The Program's objectives for the Government and the Hearing Services Program administrators are that:

D1 when defining the subsidised set of prescribed services, categories of eligibility, hearing loss thresholds and criteria for service provider accreditation, it has 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; and

(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; and

(iv) the quantum and sustainability of costs to, and opportunities forgone by, current and future taxpayers;

D2 it ensures that the services, hearing aid devices and other technologies made available to people with hearing loss through the Hearing Services Program are regularly reviewed and modified to reflect best practice, and to ensure that people with hearing loss do not experience harm arising from poor quality services or supports;

D3 it raises community awareness of the issues that affect the social and economic participation of people with hearing loss, and facilitate their greater community inclusion; and

D4 it supports the collection of data associated with hearing loss in Australia and the outcomes achieved by hearing services programs, and invests 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

2. Extension of eligibility to additional priority populations

2(a) The Australian Government should expand the categories of eligible people under the Voucher stream of the Hearing Service Program to include all Low Income Health Care Card holders.

2(b) The Australian Government should expand the categories of eligible people under the Voucher and Community Service Obligation (CSO) streams of the Hearing Service Program to include all Aboriginal and/or Torres Strait Islander people (noting that some choose to enter the Program through Voucher eligibility criteria pathways. Clients choose only one stream).

3. Clearer delineation and support for Voucher stream and CSO stream clients

3(a) The Australian Government should replace the term 'Voucher stream' with a term such as 'National Hearing Support stream' to modernise the Program terminology and better reflect the purpose of the stream.

3(b) The Australian Government should improve clarity for eligibility to the National Hearing Support and CSO streams by including in the definition of eligible clients for the National Hearing Support stream those clients who have special needs, namely adults with complex hearing needs and adults with cochlear/bone anchored implants. The Australian Government should then remove these categories of adults from the definition of eligible clients for the CSO stream.

3(c) The Australian Government should implement a system of audits to ensure Providers are appropriately claiming for clients who have special needs, namely adults with complex hearing needs, adults with cochlear/bone anchored implants and clients without specialised or complex hearing support needs.

3(d) The Australian Government should require all Providers to demonstrate that they have the capacity, skills and cultural awareness capabilities to support clients with specialist hearing support needs, such as adults with complex hearing needs and adults with cochlear/bone anchored implants, and encourage Practitioner Professional Bodies (PPB) to develop appropriate training for clinicians to deliver these specialised hearing services.

4. Making better use of Medicare

The Australian Government, through its management of Medicare, should include within the funded item 'Health assessment for people aged 75 years and older' a full diagnostic hearing assessment where considered warranted by the patient and the GP.

Chapter 4 – Clinical need and client experience within the Hearing Services Program

5. Engagement with consumer groups

The Australian Government should establish a hearing services consumer consultation forum with consumers and representative organisations to facilitate information exchange, to seek advice on

improving the equitable, effective, efficient and sustainable functioning of the Hearing Services Program and associated hearing activities, and to explore ways to increase the opportunities for consumer organisations to assist people with hearing loss.

6. Client decision-making support

6(a) The Australian Government should develop a range of illustrative client pathways on the website that clearly show the options for clients who are eligible for hearing services in the Voucher stream and the CSO stream. These should be reviewed at an appropriate time period following implementation to assess their usefulness. Specific pathways should be developed for clients who might benefit from targeted wayfinding information, including:

- children and young people under 21 receiving services via Hearing Australia;
- Aboriginal and/or Torres Strait Islander clients seeking hearing services;
- clients living in rural and remote areas;
- clients from culturally and linguistically diverse backgrounds;
- clients with complex hearing or specialist needs; and
- adults with cochlear/bone anchored implants.

6(b) The Australian Government, following consultation with stakeholders, should incorporate a set of linked Decision Aid Tools in the Program's website to assist prospective clients to make more informed choices before committing to join the Program. This should be reviewed within two years of implementation to assess its effectiveness and advise on improvements.

6(c) Following a review of the effectiveness of the set of linked Decision Aid Tools on the Hearing Services Program website, the Australian Government should consider including them in the Hearing Assessment process, with the data to be stored in the client's clinical file and made available to the clients.

7. Availability of translation, interpreting and Auslan services

The Australian Government should ensure that audiologists are made aware of the AUSLAN services available under the NDIS and the NABS programs and how to access these services. (The Panel recognises that a separate Australian Government process is underway to include audiologists and audiometrists as 'approved groups and individuals' with the national Translation and Interpreting Service.)

8. Delivering rehabilitation and support services

8(a) The Australian Government should undertake a review of the current Schedule of Fees to assess whether:

- there is an unintended bias in profit margins which favours the supply and fitting of hearing aid devices ahead of providing rehabilitation services, and undertake any necessary rebalancing of the fees; and

- the complexity of the current Schedule of Fees can be simplified from the current 55 items to under 20 service items to more clearly capture these rehabilitation interventions.

8(b) The Australian Government should amend the scope of the Hearing Services Program to require service providers to offer a more holistic assessment of clients' needs and broader range of interventions to better address those needs. This would include:

- holistic assessment of clients' needs;
- rehabilitation alternatives prior to offering the option of being supplied and fitted with a hearing aid device; and
- rehabilitation services as part of providing a device; and
- psychosocial support alongside hearing assistance; and
- assessment and management plans better suited to diverse clients.

8(c) The Australian Government should consider developing and implementing a pilot to test the feasibility of the provision of independent rehabilitation services delivered by counsellors who can provide the necessary psychosocial support for clients, including clients with diverse needs.

9. Assessment of hearing loss

The Australian Government should redefine a hearing assessment to be a comprehensive process that involves an individual's communication and psychosocial needs and should be guided by the National Acoustics Laboratory (NAL) Report to be released in 2021 in redefining the minimum hearing loss thresholds and other communication and psychosocial needs criteria (also referred to as 'eligibility criteria' by NAL).

10. Improving access for Aboriginal and Torres Strait Islander people

10(a) The Australian Government should work with key Aboriginal and/or Torres Strait Islander stakeholders to co-develop alternative models of hearing service delivery that are culturally safe and accessible to increase the proportion of eligible Aboriginal and/or Torres Strait Islander people with hearing loss taking part in the Health Services Program.

10(b) The Expert Panel endorses the proposed actions in the *Roadmap for Hearing Health* to improve access for Aboriginal and Torres Strait Islander people and recommends that the Australian Government implement and evaluate the following short term action regarding enhancing the 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.

11. Improving access for people from culturally and linguistically diverse (CALD) backgrounds

The Australian Government should develop a data base and undertake analysis of shortfalls in engagement with, and outcomes from, the Health Services Program for culturally and linguistically

diverse populations. 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.

12. Improve access for Regional, rural and remote communities

12(a) The Australian Government should maintain Hearing Australia's role as sole provider of CSO services, recognising the critical role that its service plays in maintaining access to hearing health care for eligible people living in regional, rural and remote areas and the likelihood that increased competition would exacerbate service availability for people with hearing loss who live in thin markets.

12(b) 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, this being:

The Australian Government should undertake further analysis and consultation with the sector and community on the following policy approaches:

- 1. Provide a loading on service items delivered in rural and remote regions (MM 3-7)*
- 2. Provide a loading on service items delivered by small and medium service providers*
- 3. Expand teleaudiology services available through the Program*

12(c) 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 short term 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.

13. Improve access for residents of Aged Care Homes

The Expert Panel endorses the proposed actions in the *Roadmap for Hearing Health* to improve access for older Australians living in residential aged care facilities 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 particular 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.

Chapter 5 – Service delivery of the Hearing Services Program

14. Supply and client choice

The Australian Government should enable improved consumer choice by:

- (i) amending the Deed to require providers to publish (as a minimum, on their website in an easily accessible manner) the price and features of the devices they supply under the Program;
- (ii) undertaking a detailed feasibility study into the impacts on clients, providers and manufacturers of deleting partially subsidised devices from the Program; and
- (iii) convening a stakeholder working group, including consumer representation, to advise on new minimum specifications and other supply and technology issues.

15. Broadening the scope of technology

15(a) The Australian Government should continue its support of flexible service modalities such as tele-audiology and other technologies such as improving Bluetooth technologies as they are discovered and implemented, subject to evaluations of the benefits and costs of those modalities and the level of confidence and comfort felt by clients that their needs are being met.

15(b) The Australian Government should conduct a review of the benefits and costs of current Hearing Services Program technologies and pricing to inform changes to the Services Schedule, so that updated technologies can be available to all clients into the future

Chapter 6 – Program design of the Hearing Services Program

16. A national data service

The Australian, State and Territory Governments should commission a feasibility study into the development of 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.

17. Program monitoring and evaluation

17(a) The Australian Government should develop and invest in a Data Plan for the Hearing Services Program that aims to support the monitoring of the Program's achievements of its objectives (as described in Chapter 2). The Data Plan should address:

- improving client clinical outcome measurement (hearing and non-hearing);
- qualitative and quantitative program outcome measurement, including client satisfaction measures;
- better use of the Hearing Service Portal to capture and analyse data; and
- ensuring clients can access their audiological records and assessment reports.

17(b) The Australian Government should undertake an internal Preliminary evaluation of the Program in two years, drawing on the improved data availability and measurement tools and a major external evaluation in five years.

Chapter 7 – Hearing health and hearing loss research

18. Research strategy

18(a) The Australian Government should develop a Research Strategy in consultation with hearing services stakeholders and publish it on the Hearing Service Program website. A guiding principle should be to ensure co –design with each relevant population cohort, with research priorities to include the removal of barriers to access to services and to facilitate the cultural appropriateness of service delivery

18(b) Research funded through the National Acoustics Laboratory also needs to have a more strategic approach, aligning with this broader Research Strategy.

19. *The Longitudinal Outcomes of Children with Hearing Impairment Study*

The Australian Government should continue to fund the National Acoustics Laboratory to conduct the Longitudinal Outcomes of Children with Hearing Impairment (LOCHI) Study.