



SUBMISSION:

National Disability Insurance Scheme (NDIS) National Workforce Plan 2021-2025

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OTITIS MEDIA

Audiology Australia (AudA) welcomes the opportunity to provide a submission in response to the NDIS National Workforce Plan (the Plan) as part of the NDIS workforce inquiry conducted by the Joint Standing Committee on the NDIS. AudA is the peak professional body for the health profession of audiology with over 3,000 members practising across Australia.

Audiologists are hearing health practitioners who provide hearing services and supports to their clients, which include NDIS participants. Currently, there are 21,700 participants with a hearing impairment in the NDIS. This represents 5% of the total 449,998 NDIS participants (NDIA 2021).

Our submission focuses on Priority 3 outlined in the Plan as set out below.

Priority 3: Reduce red tape, facilitate new service models and innovation, and provide more market information about business opportunities in the care and support sector

AudA strongly supports the seven initiatives that will be implemented by the government under Priority 3 and which the Committee has identified as necessary in order to remove red tape, encourage new service models and improve market information to enable efficient operation in the care and support sector.

We have provided three key recommendations for the Committee's consideration to better support hearing health providers and other allied health providers in the NDIS and increase the capacity of the allied health workforce to deliver services and supports to participants.

Recommendation 1: Reducing the administrative burden for allied health providers

The administrative burden experienced by allied health providers in the NDIS system is significant. As outlined in the State of the Disability Sector Report (2019) released by the National Disability Services, 58 per cent of providers agree or strongly agree that there are too many unnecessary rules and regulations in the NDIS. Furthermore, the Department of Social Services' provider survey on NDIS workforce challenges (2020) has indicated that excessive administrative burden was the most significant challenge impacting the productivity of the allied health workforce, with 72 percent of allied health professionals listing excessive administrative burden as one of their top three challenges. By comparison, the difficulty of establishing new business processes was ranked as the second most significant challenge at 34 per cent.

AudA members providing hearing services and supports to participants with a hearing impairment in the NDIS have consistently raised the issue of the "labour intensive", "time-consuming" and "difficult" experience of completing the Hearing Devices and Hearing Technology Assessment Template (template). Specifically, AudA members have provided the following comments regarding the current template:

- The template is a significant barrier for those clients who are not very experienced with completing the template and may require 2 to 3 hours or longer to complete.
- Multiple clients have not accessed an audiologist to get their template completed due to the potential complexity and time involved.

- Completing the template is a labour intensive, difficult and time-consuming experience that is frustrating for all parties and does not seem to be conducive to good outcomes.
- The template could be shortened and simplified by reducing the repetitiveness of the document.

In addition, AudA members have also raised the following concerns in regard to hearing health care in the NDIS:

- There seems to be an assumption in the NDIS that basic level hearing technology is sufficient to meet the needs of hearing-impaired people. As the NDIS hearing scheme generally caters to participants with a severe or profound hearing loss, participants are highly reliant on their hearing aids to function and communicate in daily life. In many cases, basic level hearing devices are insufficient to enable those with serious and severe hearing loss to participate in daily life.
- The requirement for hearing providers to undertake trials of at least two or three different levels of hearing devices places an enormous clinical and administrative burden on the audiologist/clinic.
- Additionally, the procedure of trialling multiple hearing devices is a burden for some clients, particularly for those who must take time off work to trial devices and/or require advanced level hearing devices.
- At times, National Disability Insurance Agency (NDIA) staff/assessors have rejected recommendations provided by audiologists. Based on their reasons/feedback, it appears that some assessors have limited hearing health knowledge.
- The current funding for the Hearing Support Category is not sufficient. Hearing devices are the primary support that participants with hearing needs require. As such, more funding needs to be directed to this area.

Recommendation 2: Embracing a holistic approach to hearing health care in the NDIS

AudA highlights that current funding models do not adequately support the capabilities of the allied health workforce. In hearing health care, we note that audiologists are trained to offer a holistic rehabilitation plan that may also include: support and counselling (as needed) for the individual and family to improve ability to participate in activities that are meaningful to them; individual and group aural rehabilitation; behaviour change counselling; and devices as alternatives to - or in addition to - hearing aids such as telephone adapters, remote microphone systems and streamers and television devices for hearing assistance. More information about the range of skills of audiologists is set out in the Scope of Practice for the audiology profession.

As such, AudA believes that the NDIS should fund the full range of required rehabilitation services for hearing loss. Although there is often a strong focus on hearing aids in the media, hearing aids alone are not sufficient for effective habilitation/rehabilitation for hearing loss and its consequences. In AudA's view, it is only through such holistic rehabilitation that outcomes for participants with hearing impairment can be met across all domains in the NDIA's outcomes framework.

Furthermore, in addition to the provision of rehabilitative services related to communication and hearing aid use, audiologists are also trained to provide emotional and psychosocial support and social skills training for people with and without hearing aids or assistive listening devices and at various stages of life.

However, time and funding are two key barriers which prevent audiologists from providing emotional support to clients, including referrals to mental health professionals (Bennett et al. 2020). We highlight that the Deloitte report, *The Social and Economic Cost of Hearing Loss in Australia* (2017), suggests that almost 50% of the economic cost of hearing loss is due to its psychosocial impacts. This indicates that there is a significant cost saving to the government if audiologists are empowered and enabled to provide psychosocial and mental health support to their clients.

Recommendation 3: Supporting the use of digital health across the health care system

AudA strongly supports enabling allied health professionals in rural and remote areas to access professional support and supervision remotely, including for multidisciplinary team interventions.

More broadly, we consider that there is a strong need for government to provide financial support and subsidisation for infrastructure to enable digital health and the integration and streamlining of secure communications across the entire health system. There is also a need to maximise the use of contemporary digital health advancements to complement allied health services and improve client outcomes – this includes the expansion and enhancement of telehealth services and the My Health Record system.

We also note that communication skills and digital literacy is key in delivering effective telehealth services and successful client outcomes. Our members have indicated that not every allied health professional currently has the skills to be able to complete and manage a telehealth appointment. Therefore, we consider it essential to ensure that the allied health workforce is well-equipped with the digital literacy and communication skills needed to provide successful telehealth services and is enabled to use digital infrastructure confidently and effectively.

References

- Bennett RJ, Meyer CJ, Ryan B, Barr C, Laird E, Eikelboom RH. Knowledge, Beliefs, and Practices of Australian Audiologists in Addressing the Mental Health Needs of Adults With Hearing Loss. *Am J Audiol*. 2020 Jun 8;29(2):129-142. doi: 10.1044/2019_AJA-19-00087. Epub 2020 Mar 16. PMID: 32176532.
- Deloitte (2017) *The Social and Economic Cost of Hearing Loss in Australia*.
- Department of Social Services provider survey on NDIS workforce challenges (2020)
- National Disability Insurance Agency (NDIA) NDIS Quarterly Report to disability ministers, 31 March 2021.
- National Disability Services (2019) *State of the Disability Sector Report*