



**Sunraysia
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Community Affairs References Committee,
community.affairs.sen@aph.gov.au

9th October, 2009.

Dear Sir/Madam,

re: Inquiry into Hearing Health in Australia

I work at Mildura Base Hospital as the only paediatric audiologist for a 400km radius, and also work in aural rehabilitation in my own clinic. As such, I encounter many frustrations concerning limited access for clients to services.

Hearing loss at birth is one of the highest incidents of birth defects. Because of this, many states within Australia provide hearing screening to babies after birth. In Victoria, the Victorian Infant Hearing Screening Program has been underway in metropolitan Melbourne, and there are plans to roll this out to regional areas in the future. I am concerned about access to follow-up diagnostic audiological services to babies in country areas, and because of this I was involved with the Audiological Society of Australia (ASA) in writing a submission to government for dedicated diagnostic paediatric audiology funding to public hospitals. Currently audiology is funded as part of a global allied health budget, making it possible for hospital management to reduced audiology services and shift money to other allied health areas. This submission was presented to Maxine Morand, and Daniel Andrews.

It is imperative that babies born with significant hearing loss are diagnosed early, provided with auditory rehabilitation and early intervention to improve their acquisition of speech and language, and to enable them to maximise their outcomes for education, thus improving their employment prospects later in life, and significantly enhancing their quality of life. An area lacking in rural areas is the support services offered to parents after their baby is diagnosed as hearing-impaired. There are often no community parent advisers available in rural areas, however they are available in metropolitan areas.

Access to community audiological services is often affected by regional hospitals being unable to attract audiological staff. There is a great disparity between audiology salaries offered by hospitals and the private sector, whereby a new graduate audiologist can be paid two and a half times as much working for a private hearing aid company than a hospital. This all results in some regional areas of Victoria having no paediatric audiological services, and others having long waiting lists.

The extent, causes and cost of hearing impairment in Australia was highlighted in the "Listen Hear" Report, which is available on the ASA website.

(www.audiology.asn.au)

In my local area, I do have exposure to clients whose deafness impacts on their employment prospects. Some of these people have been helped by accessing free hearing aids through the Commonwealth Rehabilitation Services via Centrelink.

There is a significant indigenous community in and around Mildura. They are able to access paediatric audiology as a free service at Mildura Base Hospital. Private access has been made more affordable with the recent inclusion of Medicare rebates for audiology for ATSI clients. The absence of this cover for non-ATSI Australians disadvantages those who are unable to afford to pay for these services. The only other Medicare rebates for audiology services are available if these tests are billed under a doctor's provider number. Currently it is only pensioners and veterans who are entitled to government-funded testing via the Office of Hearing Services scheme. I observe many people in my local community who are ineligible for free or government rebated testing and due to current economic difficulties are unable to afford to pay privately.

Yours sincerely,

Jane MacDonald.

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