



for **Australian Hearing**

Impact of a sale of Australian Hearing on children

The Australian Government is investigating the future ownership of Australian Hearing. If the sale proceeds, it will introduce significant risks to the programs and services received by hearing impaired and Deaf children in Australia and could have a detrimental effect on the outcome for these clients.

There are approximately 20,000 hearing impaired and Deaf children and young adults who receive their services at Australian Hearing's national network of service locations. The clients range in age from birth to 26 years. A proportion has multiple disabilities. 11% are Aboriginal and Torres Strait Islander clients who may receive their services in mainstream hearing centres, or via a culturally appropriate outreach program in urban, rural and remote areas of Australia.

Children diagnosed with hearing loss, particularly infants diagnosed with hearing loss through newborn hearing screening programs, are given the highest priority for service over other client groups seen at Australian Hearing.

Client programs are delivered according to international best practice standards. The services incorporate the principles of Access and Equity and Social Inclusion. Current arrangements ensure the Australian Government receives the best value for money due to:

- the economies of scale achieved by Australian Hearing's purchasing power
- services being delivered as a Community Service Obligation. This arrangement ensures the paediatric program benefits from the existing infrastructure of Australian Hearing as a provider in a broader market, and payments to Australian Hearing are based on the actual cost of service delivery without any profit margin

Families appreciate that:

- the program allows for a family centred approach, giving families time, information and support to allow them to make an informed decision for their baby or child
- the child receives an individually tailored program to meet the needs of the child and the family, and to support the child to reach their full potential

- there are strong relationships between audiological services, educational services and other support services including referrers
- the service is provided by highly skilled clinicians
- the clinical programs are research based and supported by clinical protocols
- the programs are solely focussed on achieving the best outcome for the child and are not influenced by commercial practices such as sales targets or financial incentives
- services are equitable and not based on the family's ability to pay
- information and guidance is impartial and unbiased
- services are well located to minimise the need for travel

Any changes to existing arrangements introduces risks for the following reasons:

1. Expertise

There are no formal qualifications in paediatric audiology and no registration system for Audiologists. Australian Hearing provides in-house training and a support network for its clinicians to ensure that services are delivered by people with appropriate skills. Given the small client population involved, there may not be interest from clinicians or training institutions to take over this responsibility from Australian Hearing, leaving high need clients without access to appropriately skilled clinicians.

Also, the small number of hearing impaired and Deaf children will make it difficult for clinicians to maintain their skill levels if the program is fragmented and delivered by multiple providers.

2. Service access

Clients in rural and remote areas may lose access to services due to the cost of delivering services in these locations.

Clients from culturally and linguistically diverse backgrounds may lose access to interpreters and translated materials due to the cost of providing these services.

3. Technology

Technology levels may be reduced due to cost, or because the new Provider is aligned with a particular manufacturer. Technology recommendations from the child's Audiologist may be compromised due to the introduction of commercial practices such as financial incentives for fitting particular devices.

4. Advice and guidance

Advice and guidance may no longer be impartial if the new Provider is aligned with a particular educational provider or device manufacturer.

5. Clinical programs

Programs for children, particularly babies, are very time intensive. There is a risk that children and their families may not be provided with the time they need.

6. Newborn hearing screening referrals

The success of newborn hearing screening programs is dependent on strong relationships between the diagnostic hospital and Australian Hearing. This ensures timely appointments and reduces the risk of children being lost in the system. There is a higher risk of infants being lost to follow up if there are multiple providers.

Because Australian Hearing has been the sole provider of services to hearing impaired and Deaf children in Australia for almost 70 years, the private sector has not had the need to build resources to provide services in this area. Therefore it is not clear how the paediatric program might transfer from Australian Hearing to the private sector without impacting on clients and their families. Making the contract to deliver the paediatric program a condition of the sale of Australian Hearing, might appear to protect the interests of this client group, however there is no guarantee that the new owner would give the paediatric program the priority that it currently receives with the Government Provider, and the new owner may decide to withdraw at the end of the contract, leaving hearing impaired and Deaf children and their families with no reliable service.

Changing the service delivery arrangements to a private provider will increase the cost of the Program as a profit would need to be factored into the payment arrangements. This will have a flow on effect to the cost of providing services under the National Disability Insurance Scheme (NDIS) as well, as Deaf and hearing impaired children who qualify for services at the NDIS continue to receive their audiological program from Australian Hearing under the Community Service Obligations Program. Families are concerned that the services their children receive will be reduced in order to offset the cost of paying a commercial rate for the Program to be delivered by the private sector.

The decision on the sale of Australian Hearing is not only about the financial benefit that may be realised from the sale of a Government asset. More importantly a decision on the sale has to be considered in the context of the impact on the lives of Deaf and hearing impaired children and their families. It is essential that the needs of this client group are protected and that client outcomes are not compromised if the sale proceeds.

This report was prepared by Deafness Forum, with acknowledgement to its researcher and author Margaret Dewberry.

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