



Hear and Say  
Opening worlds

**Joint Standing Committee on the National Disability Insurance Scheme**  
***Provision of hearing services under the National Disability Insurance Scheme Recommendations***

**Question on notice response to recommendations:**

**Recommendation 1**

2.57 The committee recommends the NDIA monitors eligibility rates for adults with hearing impairments to build a clearer picture of the number and needs of the people who have been found ineligible for NDIS services and reports on its finding in 12 months.

**Response:**

We support the review over 12 months and the report on findings. This is an area of great need and review, as there are reasonable and necessary ongoing supports required for those with hearing loss who are >26yrs. We have great concern regarding the current hearing loss criteria for this group and believe it should be widened.

Adults eligible to receive Australian Hearing services must currently fit into specified categories, however the majority of persons with permanent hearing loss will require technology changes and upgrades and many will not be in a position to fund these. Some will require rehabilitation, educational and vocational support at different times to address individual needs.

First Voice recently completed a project aimed to collect data on children who received early childhood intervention (ECI) therapy from First Voice member centres and have now finished school. The purpose was to gain a better understanding of their social, educational and employment outcomes. The results from this pilot study show how 154 survey respondents, who graduated from a First Voice member early childhood intervention program between 1993 and 2002.

First Voice is a member-based organisation that advocates for evidence-based early intervention services that give children who are deaf or hearing impaired the listening and spoken language skills necessary to achieve fluent spoken communication, mainstream education, employment of choice and social integration within the hearing world.

**The results are very pleasing but what is key in relation to Recommendation 1 is that in order to maintain this level of function and integration, there are reasonable and necessary ongoing supports needed for the >26yrs as noted above.**

Key results are:

- 95% of respondents attended a mainstream high school
- 86% of respondents completed Year 12
- 82% of respondents had been accepted into a tertiary (higher education or vocational/technical) study course
- 62% of respondents have a tertiary level qualification
- 77% of respondents have at some point been in regular paid employment for a period of six months or more
- 84% of respondents have been involved at some stage in community activities or organisations
- 65% of respondents were willing to share their major achievements, awards or life events

Please find full report attached.



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In summary, Hear and Say:

- Supports a succinct and independent review of adult eligibility criteria for NDIS hearing loss support
- Recommends the inclusion of rehabilitation therapy with any issuance of assistive hearing technology
- Commends the findings of the First Voice pilot study into social outcomes for children with hearing loss who graduate from listening and spoken language early intervention programs

### **Recommendation 2**

2.58 The committee recommends the NDIA reviews immediately the cases of people with hearing impairment who were previously found ineligible and tests their eligibility against the revised guidelines.

#### **Response:**

Yes we support this immediate action to review cases previously found to be ineligible. In addition, those persons with hearing loss who may not have applied for NDIS, as they thought they would not meet criteria, should also be sourced/reviewed. As such, recommend an additional program of work to ensure that new criteria is communicated to all relevant parties?

### **Recommendation 3**

2.59 The committee recommends the Australian, state and territory governments clarify and make public how they will provide services for people who are deaf and hard of hearing who are not participants in the NDIS.

#### **Response:**

Yes we support this recommendation. Transparency around referral pathways and stakeholder engagement and partnerships is essential. In addition, further clarity regarding who is **not** eligible. Reinforcing the use of existing pathways and service providers with demonstrated success will minimise any detrimental impact of non-NDIS participants

### **Recommendation 4**

3.83 The committee recommends Australian Hearing be formally appointed as the independent referral pathway for access to early intervention services under the NDIS and funded appropriately to take on this new role.

#### **Response:**

Yes we support the recommendation that the Office of Hearing Services create a national 'guided pathway' system, based in Australian Hearing, to assist parents in choosing expert early intervention services for their children.

Australian Hearing has well recognised paediatric audiology expertise and experience in providing non- biased information regarding early intervention options to the families of children with hearing loss.

It should be noted that we believe that it would be a conflict of interest for Australian Hearing to be delivering early intervention services ( not including hearing aid fittings) whilst offering this independent referral advice.



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Additionally, there are some long standing organisations such as Hear and Say that have been delivering paediatric audiology services which (if stringently accredited) may assist with reducing any barriers for referral and will provide additional value to shared clients.

**Recommendation 5**

3.87 The committee recommends NDIA ensures that the early intervention packages take a holistic approach to the needs of participants and include:

- scaled funding, depending on need;
- funding provision for additional services beyond core supports, depending on need; and
- retrospective payment of the costs borne by approved service providers for the provision of necessary and reasonable supports between time of diagnosis and plan enactment.

**Response:**

Yes, in principal we support this recommendation. We support consideration of:

- first year package amounts being the same
- Access should be based on assessment of functional and holistic need, rather than a simple measure of a hearing loss threshold and funding should go beyond core supports when there is need.
- review and agreement regarding time requirements to be funded for retrospective payment of costs accrued prior to plan enactment

**Recommendation 6**

3.90 The committee recommends the NDIA urgently finalise, publish and introduce the early intervention reference packages.

**Response:**

Yes we support this recommendation.

Australia has excellent UNHS coverage and any delay in access to EI negates the positive impact of early diagnosis. We recommend enrolment into an holistic, multidisciplinary early intervention program. Program intensity will be based on child need (high, medium, low) and recommended by early intervention specialist with experience in working with children with hearing loss. Reference packages will enable faster access and enrolment into a program.

The research shows that there is a critical period for best outcomes in relation to listening and speaking due to neuroplasticity. Attached is a Deloitte Access Economics report which outlines the cost benefit of appropriate early intervention.