



A submission to the Queensland Health Audiology Regulatory Impact Statement Stakeholder Consultation

Deafness Forum Australia, June 2024.

Who is Deafness Forum Australia?

Deafness Forum Australia is recognised by the Commonwealth Department of Health as the national consumer representative peak body for the 4 million Australians who live with hearing loss, have ear or balance disorders, people who also communicate using Australian Sign Language, and their families and supporters.

Deafness Forum's mission is to make hearing health & well-being a national priority in Australia. It is the peak body representing the views and interests of the 4 million Australians who live with hearing loss, have ear or balance disorders, people who also communicate using Australian Sign Language, and their families and supporters.

Deafness Forum represents Australia as a Foundation Member of the World Hearing Forum (part of WHO), as a member of the International Federation of Hard of Hearing People, and as an associate member of the World Federation of the Deaf.

Recommendation

Deafness Forum Australia strongly supports Regulatory Option 7 - national registration of the audiology profession under the National Registration and Accreditation Scheme (NRAS).

We would recommend that Option 7 be expanded to cover national registration of both audiologists and audiometrists.

Introduction

As the peak national representative body for the four million people across Australia with hearing loss, ear or balance disorders, those using Australian Sign Language, and their families and supporters, we appreciate the opportunity to provide input to the Decision Regulatory Impact Statement (Decision RIS) to determine options for the future regulation of the audiology profession, including registration under the National Registration and Accreditation Scheme (NRAS).

Research indicates that one in six Australians live with some form of hearing loss.ⁱ Rates of hearing loss increase with age – hearing loss can be seen in 4% of those aged 0-24, 14% for people aged 25-64,ⁱⁱ and 41% for people 65 years and over - or 2 in every 5 people. It's been estimated that by 2060, 7.8 million Australians will live with some level of hearing loss or impairment.ⁱⁱⁱ

Access to high-quality audiology services is vital in supporting people with hearing loss to participate as citizens and members of the community. Hearing impairment has been linked to fewer educational and job opportunities, poorer mental health outcomes, and increased social isolation.^{iv} Many people who acquire hearing loss experience a drop in self-esteem and confidence because of their impaired ability to communicate with other people.^v Feelings of distress and depression are common within this cohort.

Access to quality audiology services is particularly critical for infants and children with hearing impairment, to prevent developmental delays associated with language skills and social development. Many hearing loss complications in infants can be prevented with diagnosis and treatment before 6 months old.^{vi}

Australians living with hearing loss, and their families should be able to expect consistently high standards of care across the audiology profession, which we believe can only be achieved through mandatory registration of audiology practitioners.

We wish to be clear that we have great respect for the audiology profession and know that most practitioners work to high levels of professionalism and expertise. Our concern relates to a series of reported cases in which infants have experienced significant, adverse outcomes because of sub-standard care within paediatric diagnostic audiology and cochlear implant (CI) care services, which will result in lifelong impacts for both these children, and their families. Such tragic cases acutely highlight the inherent risks in the work routinely conducted by audiologists and show that the present system of self-registration is not operating effectively as a safety net.

The key test for determining whether to regulate is to assess the relative costs of regulation versus the risk of harm of not regulating. The reality is that 16 health professions are already regulated under the National Registration and Accreditation Scheme (NRAS), with negligible adverse impacts to either practitioners or the public as consumers of these health services.

As a consumer representative peak in this space, we think the case for regulation is clear and urgent and consider that the existing self-regulation approach presents an unacceptably high level of risk to public health and safety. An independent regulatory body would provide a more robust and reliable regulatory framework, allowing for impartial oversight free from commercial conflicts of interests or industry pressures to dilute standards.

Independent registration facilitates effective monitoring and enforcement of standards through thorough audits, investigations, and penalties such as suspension or deregistration, mechanisms often weak under industry self-regulation. This structure not only boosts public confidence that professionals are held to high standards by a neutral entity, but also ensures more reliable compliance with best practices that safeguard consumers. It effectively reduces conflicts of interest, prevents the erosion of standards for commercial gains, and reinforces enforcement integrity, enhancing public trust in the profession.

Deafness Forum Australia welcomes the State and Territory Health Ministers' decision to commission a Decision Regulatory Impact Statement (Decision RIS) to revisit the option of regulating the audiology profession and hope that this review will finally result in the necessary regulatory interventions necessary to ensure public health is prioritised, and all audiology practitioners are suitably trained, qualified and safe to practice.

The Scope of the Problem

The problem statements and risks of harm detailed in the consultation paper provide a somewhat accurate summary of the issues consumers can experience when accessing audiology services.^{vii}

While the issues paper focuses primarily on the vulnerability of newborns and young children as audiology patients, it is our experience that most patients who access audiology services will have some level of vulnerability and would benefit from enhanced consumer protections.

There is no real way, at present, to get any insight into the extent of poor practice across the audiology profession. Adult diagnostic services are not audited, and those accessing audiology services may struggle to judge the quality of audiology treatments, in the first instance, and may not pursue a formal complaint, even if they are dissatisfied with the quality of treatment, especially if there is no clear pathway to do this and very limited chance that a complaint will result in disciplinary action against the practitioner.

An individual's vulnerability can be influenced by various factors, including age, ethnicity (including whether the person identifies as Aboriginal or Torres Strait Islander) level of English comprehension, disability, or mental health status, as well as their socioeconomic status and the levels of trust they already have in the health profession, based on previous experiences. Vulnerability can be exacerbated in rural, regional, and remote communities with thin markets, where there are fewer opportunities to exercise consumer choice and control.

The hearing services industry is highly commercialised with a handful of large retail chains commanding most of the Australian market. The range of different schemes supports and sources of information for people to access hearing aids and hearing health services can make navigation of this market very difficult for people with hearing loss and their families.

In our experience, there are significant gaps in public knowledge about the differences between audiologists and audiometrists, as distinct practitioner subcategories within the audiology profession, which is not helped by businesses routinely describing audiology professionals as

'clinicians' or *'hearing care experts'*, or *'audiology professionals'*. People seeking hearing care often don't know what type of professional they are seeing, or what types of services the practitioner treating them is trained to provide. This is a major cause for concern and complaint among our constituents.

We are concerned too about the commercialisation of the hearing health industry, its focus on selling devices and the pressures audiologists can experience through commercial partnerships between hearing care services and hearing aid manufacturers. There are inadequate consumer protections in place to ensure that audiologists are not compromised by these commercial partnerships – as can be seen through publicly reported instances where hearing device companies have offered commissions to audiologists for hearing aid fittings, or audiologists have had to work under sales targets and key performance indicators based on numbers of hearing aids sold.

These issues exist on top of more general questionable business practices which can occur in any commercial setting such as overpricing, overservicing, and false and misleading advertising.^{viii}

We support action to ensure that the scope of service delivery performed by audiologists is aligned to nationally prescribed levels of knowledge, skills, and experience, and that professional qualifications mechanisms exist to manage underperforming audiologists, as well as those who engage in unethical business practices.^{ix}

Deafness Forum Australia considers having a single organisation, independent of the profession, that has oversight or authority to investigate and consistently manage complaints and apply sanctions across the audiology profession to be essential to protect the public and enhance the reputation of the audiology profession. Of the five shortlisted options, our recommendation is to implement Option 7 – the national registration of the audiology profession under the National Registration and Accreditation Scheme (NRAS), which should be expanded to regulate both audiologists and audiometrists.

We will detail our rationale for this choice in the section below.

Benefits of Regulatory Option 7: - national registration of the audiology profession under the National Registration and Accreditation Scheme (NRAS)

1. Public Safety and Confidence

The National Registration and Accreditation Scheme (NRAS) is already recognised nationally. Regulation under the NRAS is considered appropriate for a range of health professionals whose scope of practice includes activities considered to be of higher risk.

The Australian public is familiar with the concept of registration in the health care context, and imports value on registration as an indication of a certain quality and level of care.

Bringing the audiology profession under NRAS would mean that audiologists and audiometrists would be regulated under the Australian Health Practitioner Regulation Agency (AHPRA). AHPRA is both widely known and respected by consumers of health care services. It would enhance public trust in the audiology profession if these professions were added to AHPRA's remit.

It is essential for consumer protection for both audiology and audiometry be regulated within the same framework to prevent audiologists who are suspended from practice establishing themselves as audiometry professionals, noting that the public may not be able to necessarily understand the difference.

It is significant to mention that the body representing independent audiologists in Australia advocates strongly for full independent registration of all audiologists and audiometrists by the Australian Health Practitioner Regulation Agency. This organisation, distinct for its lack of financial interest in the registration process, positions itself as a neutral party advocating for industry-wide standards prioritising public safety and professional integrity. Their recommendation for AHPRA's oversight is said to reflect a commitment to transparency and accountability, ensuring that audiologists and audiometrists are held to uniform, rigorous standards. This stance is particularly noteworthy given the contrast with other major bodies in the field, which may have vested interests that influence their perspectives on regulation and registration.

2. Professional Recognition

In our experience, the practitioners would value registration, affirming their deserved professional status.

Being registered with AHPRA provides a formal acknowledgment of an audiology practitioner's qualifications and competence, facilitating professional credibility and recognition both within Australia and internationally.

Registration would bring the status of the audiology profession as an industry up to the same level as other health qualifications, such as physiotherapy, optometry, nursing, and pharmacy, and would provide the public, (and employers) with a much-needed demarcation between audiology and audiometry as two distinct professions with different levels of skill and expertise.

3. Regulated Practice Standards

There are currently no mandatory regulated practice standards for audiology professionals in Australia. AHPRA sets and enforces practice standards, ensuring that all registered practitioners adhere to high standards of care and professional conduct. Currently, registered health professions regulated under the National Scheme each have several core registration standards that bring consistency in practice across Australia and inform board decision-making if a practitioner becomes the focus of a complaint.^x Core registration standards include^{xi}:

- The criminal history registration standard
- The English language skills requirement standard
- The recency of practice, continuing professional education, and professional indemnity insurance registration standards

These standards are in conjunction with profession-specific standards which are developed by the National Boards for each of the professions. Requiring the audiology profession to meet both general and specific practice standards, would instil greater public confidence, and increase the status of the audiology profession while at the same time ensuring consistent standards of practice for audiology professionals which accord with broad public expectations across the health service industry.

4. Complaints and Discipline Management:

AHPRA provides a structured process for addressing complaints and managing disciplinary processes which helps maintain professional integrity and accountability. Clear pathways for complaints to be made are essential in ensuring that cases of poor practice are reported and addressed. AHPRA's complaint mechanism is already well known and is relatively easy for the consumer to understand and access.

AHPRA can investigate and take a range of disciplinary actions against a practitioner, if it is found that the complaint is valid, including putting conditions on practice, issuing cautions, requiring that practitioners commit to certain undertakings, and in serious instances, suspending the practitioner's registration so they can no longer practice.

5. Legal Recognition and Protection:

Registration often confers certain legal protections and responsibilities on registered professions, including the exclusive right to use professional titles and perform specific healthcare functions, which are regulated by law.

This would be particularly important in the context of the audiology profession, noting anecdotal reports in the profession of audiometrists having been expected by their employers to practicing outside the scope of their skills. Audiometrists would have clearly defined service boundaries to operate to, which they could rely on.

6. Mobility Across States and Territories:

AHPRA provides national registration, making it easier for registered health professionals to work across different states and territories.^{xii} Practitioners can relocate to another state or territory and continue to practice, without the administrative burden of re-registering.

Consumers will know they are receiving services of a consistent national standard wherever they live in Australia, be it metropolitan, regional and remote settings.

7. Access to Support and Resources:

Registered practitioners have access to professional development resources, guidance on best practices, and support for ethical and professional issues, which can aid in career advancement and ensure continuous learning. This ensures that registered practitioners are well-informed and have access to the most up-to-date research and training as well as information on relevant public policy issues relating to healthcare.

8. Provider Transparency through the 'Register of Practitioners'

AHPRA maintains a known public register of registered health practitioners which allows members of the public to know if a health practitioner is allowed to practice. No such register currently exists. The register also provides details on any conditions that a health practitioner might have had imposed on their practice, whether they have committed to any undertakings, and if they have been reprimanded in the past. This type of information supports members of the public to exercise informed decision-making when accessing health services.

A Note on Potential and Actual Conflicts of Interest

When considering recommendations from the professional body overseeing audiology services, it is imperative to acknowledge its inherent conflict of interest. The body operates under a business model that benefits financially and in stature from mandatory membership for clinicians to provide services under government programs. This conflict could skew regulatory decisions, perhaps through unconscious bias, towards protecting and enhancing their business model rather than focusing on consumer safety. Recognising this conflict is essential for ensuring that recommendations are thoroughly scrutinised and modified to prioritise consumer protection and service integrity above all.

Commercial interests and their lobbyists would be hesitant to support enhanced, independent registration for audiologists and audiometrists if they perceive that such regulation could negatively affect their business model and profitability. This reluctance is rooted in a conflict of interest like that seen in professional bodies. Recognising these conflicts is crucial for ensuring that the regulatory framework for audiologists and audiometrists is designed to protect consumers and uphold the profession's integrity. This underscores the need for a regulatory approach that is independent, transparent, and robust enough to withstand pressures from vested interests.

Concluding Summary

The hearing services space is complex and evolving. It is increasingly commercialised and profit-driven, with growing pressure and influence from multinational hearing aid companies. People looking to seek audiology services are confronted with a range of choices but are often at a loss to make an informed decision since there are no uniform indicators of quality care.

The Australian public has come to expect high standards and quality of care from all health professionals and deserves the peace of mind associated with nationally consistent complaint mechanisms to enact professional sanctions for unethical or improper practices.

National registration of the audiology profession under the National Registration and Accreditation Scheme (NRAS) would bring the profession under the jurisdiction of an established, fit-for-purpose regulatory authority that already has much of the infrastructure necessary to facilitate this transition

An independent registration body, distinct from the industry it regulates, is a crucial safeguard against the risk of regulatory capture - a scenario where the industry's interests could potentially override the public's best interests. This separation is a vital measure to prevent the sector from exerting undue influence on registration standards or enforcement for its own advantage, a risk inherent in the current system.

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Deafness Forum Australia is Australia's Hearing Health peak body for Citizens and a National Disability Advocacy peak organisation | Foundation Member of the WHO World Hearing Forum | Member of the International Federation of Hard of Hearing People | Associate Member of World Federation of the Deaf | Foundation Member of Australian Federation of Disability Organisations.

ⁱ Australian Institute of Health and Welfare, *People with disability in Australia*, web report, 23 April 2024 https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia/contents/people-with-disability/prevalence-of-disability#dis_type, accessed 2 May 2024.

ⁱⁱ Ibid.

ⁱⁱⁱ Australian Government, Department of Health and Aged Care, *About Ear Health*, last updated April 3, 2024 <<https://www.health.gov.au/topics/ear-health/about>> accessed 2 May 2024.

^{iv} Victorian Government, Department of Health, *Hearing Loss – how it affects people*, last updated 18 April 2017 <[Hearing loss - how it affects people - Better Health Channel](#)> accessed 5 June 2024.

^v Ibid.

^{vi} Stanford University, School of Medicine, *'Hearing Loss in Babies'* 2024 <[Hearing Loss in Babies - Stanford Medicine Children's Health \(stanfordchildrens.org\)](#)> accessed 5 June 2024.

^{vii} Tony Ibrahim, CHOICE, *Profit-hungry hearing clinics put on notice by the ACCC*, 3 March 2017 <[Profit hungry hearing clinics put on notice by the ACCC | CHOICE](#)> accessed 5 June 2024.

^{viii} See as an example, Australian Competition and Consumer Commission, *Leading Australian hearing clinic pays penalties for misleading customers*, media release, 28 Sept 2018 <[Leading Australian hearing clinic pays penalties for misleading customers | ACCC](#)> accessed 5 June 2024.

^{ix} See here p. 9 of the Issues paper.

^x Australian Health Practitioner Regulation Agency, *Registration Standards, 2024* <[Australian Health Practitioner Regulation Agency - Registration Standards \(ahpra.gov.au\)](#)> accessed 5 June 2024.

^{xi} Ibid.

^{xii} Australian Government, Department of Health and Aged Care, *National Registration and Accreditation Scheme*, updated 2 June 2023 <[National Registration and Accreditation Scheme | Australian Government Department of Health and Aged Care](#)> accessed 5 June 2024.