

WHO, WHEN and HOW to refer to Hearing Australia.

Information for Health Services in Aboriginal & Torres Strait Islander communities



Who is Hearing Australia?

For over 70 years, we've had the privilege of helping Australians rediscover the joy of sound. We are the nation's largest provider of government-funded hearing services for children, young adults under 26, Aboriginal and Torres Strait Islander children and adults, pensioners and veterans.

Our services:

- assessing hearing
- selecting and fitting hearing devices
- regular hearing checks to monitor changes
- training to improve listening and communication
- providing counselling and rehabilitative programs
- ongoing care and device repair services
- home visits for those unable to travel to a clinic
- helping to manage hearing loss on a day-to-day basis

Who and when to refer to Hearing Australia

Adults.

Ask: 'Are you having trouble hearing?' Refer if the answer is 'yes'. Many adults will be able to access government funded services, including:

- Aboriginal and Torres Strait Islander adults over the age of 50 or Community Development Program participants
- Pension card holders (age, disability, single parent)
- Most veterans
- National Disability Insurance Scheme (NDIS) participants with hearing needs in their plan



Children and young adults under 26 years.

Refer directly to Hearing Australia for hearing aid consideration when:

- A baby is diagnosed with permanent hearing loss in one or both ears. This may include sensorineural hearing loss and absent ear canals. Prompt referral is critical for children to develop optimal language and communication.
- A child or young adult has passed newborn hearing screening, but there are risk factors for hearing loss and family members believe hearing is deteriorating. Risk factors include:
 - Family history of permanent hearing loss in childhood
 - Bacterial meningitis
 - Chemotherapy
 - Syndromes related to hearing loss
 - Serious head injury
 - Cytomegalovirus (CMV) during pregnancy or
 - Extracorporeal membrane oxygenation (ECMO) after birth
- A child is aged under three years and both ears are chronically discharging
- A child has middle ear disease and average hearing levels greater than 30dBHL in the better ear that has persisted beyond three months.
- The parent/carer has a high level of concern and thinks their child may need hearing aids.

For children needing hearing assessment, but who don't meet these criteria, refer to other visiting or local hearing services with appropriate capability for the child's developmental age.

Recommendations for good hearing health practice

1. Check whether baby had their hearing screened at birth, what the results were and whether follow up took place, if required.
2. Hearing loss can occur at any age, even after passing newborn hearing screening. Ask regularly how children's listening skills are developing. Use the PLUM and HATS checklists as a framework for this conversation (hearhappy.nal.gov.au). As a guide, toddlers with no hearing problems are able to do these things by the age of 1 year, most of the time:
 - Respond to their name when they are called, in quiet and noise
 - Recognise familiar people by their voice, without seeing them
 - Notice sounds in their environment such as cars, birds, or a knock at the door.
3. Check baby's ear health at every visit or at scheduled intervals: examine ears with an otoscope, add tympanometry from six months, and hearing checks from 3.5 years.
4. Use the Otitis Media Guidelines for Aboriginal and Torres Strait Islander Children.

Call 131 797 to discuss referral or speak with your visiting Hearing Australia audiologist.