Independent audiologists

Annual Report

1 July 2017 - 30 June 2018

P.O. Box 164 Turramurra NSW 2074

Tel 0424 720 915

https://independentaudiologists.net.au exec@independentaudiologists.net.au

The mission of Independent Audiologists Australia is to promote and support clinical practices owned by Audiologists.

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Mission Statement

The mission of Independent Audiologists Australia is to promote and support clinical practices owned by Audiologists.

About Independent Audiologists Australia Inc Executive Members 2017 – 2018

President:	Mr Grant Collins
Vice President:	Ms Myriam Westcott
Treasurer:	Ms Sharyn Lim
Secretary:	Ms Jane MacDonald
Councillors:	Dr Matthew Callaway
	Mr Mel Gray-Thompson
	Dr Tegan Keogh
	Ms Philippa Long
	Ms Elaine Melville
	Mr Wesley Ong

Executive Officer:

Dr Louise Collingridge

IAA has national membership and holds activities across Australia.

Contact Independent Audiologists Australia Inc

Website:	www.independentaudiologists.net.au
Email:	exec@independentaudiologists.net.au
Tel:	0424 720 915
Mail:	P.O. Box 164 Turramurra
	NSW, 2074

ABN:

37475036210



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> Independent Audiologists Australia Inc is a not for profit association incorporated in the State of Victoria.

President's Report Grant Collins



I have been pleased to serve as President of Independent Audiologists Australia Inc (IAA) during the period ending 30 June 2018 – a very busy time for those concerned with hearing and balance issues.

The National Disability Insurance Agency grappled with acceptable criteria to support those whose function is impacted by hearing and balance disorders. At the same time, a parliamentary inquiry investigated hearing health and wellbeing of Australians, to which IAA and several of its members contributed. The report from the parliamentary inquiry issued in September 2017 made 22 promising recommendations. Those recommendations with just one exception will not be taken up by the current government. Instead, the current's government response has been to hold stakeholder meetings, appoint an ad hoc committee to develop a roadmap for hearing and for that committee to consult with others in the field.

The Australian Competition and Consumer Commission (ACCC) investigated and fined some large hearing related businesses during 2017 -2018. To assist members faced with countering public opinion that businesses that dispense hearing aids cannot be trusted, IAA held a seminar in October 2017 that responded to findings reported by the ACCC related to transparent pricing in audiology clinics. In addition, IAA reviewed its code of ethics and standards of practice for full members to ensure guidelines are provided for transparency in billing; and to avoid real or perceived conflicts of interest in our members' practices.

To provide audiologists with the tools to establish themselves as central to decision making for those with hearing and balance loss, IAA held a seminar Making Contemporary Clinical Audiological Decisions. We investigated the place of decision making the context of implantable devices in everyday practice. Also important to decision making and hearing devices is the advent of decision-making tools, which was addressed in a webinar for our members by Dr Christopher Whitfeld, a former member of our association.

IAA launched a new website in 2017 which offers information for the public about audiology, hearing and balance loss and seeking assistance. The new IAA website site allows the public to contact IAA members through the site. Members can promote their clinics via their IAA website profiles.

IAA continued to work alongside other organizations both internationally and locally. IAA has a close affiliation to Independent Audiologists New Zealand, and both organizations subscribe to the resources of the Academy of Doctors of Audiology, a US based like-minded organization, on behalf of members. Members of IAA are almost all members of Audiology Australia, a relationship that was evident by IAA's support for their national conference at which many IAA members met and congregated near our stand.

As always, IAA works as a team, and responds to members. Our regular survey of members indicates that they value our advocacy and education work, want us to continue what we are doing and value their IAA membership. Moving into the next financial year will see IAA's staffing grow, with the contracting of a new part time Executive Officer and change in role for our current Executive Officer to Chief Executive Officer.

Enjoy reading the IAA Annual Report (2017 – 2018), which is intended to offer insight into the activities we undertake within the world of hearing loss, balance disorders and independent audiology practice.

Grant Collins IAA President



Treasurer's Report Sharyn Lim

Income to Independent Audiologists Australia for this financial year was derived from membership subscriptions, seminar fees and sponsorship, selling promotional materials, as well as interest from savings.

Accumulated funds available at the start of this financial year (1 July 2017) amounted to \$142 517. Available funds (to 30 June 2018) totalled \$108 867, representing an operating loss of \$33 650.

Income from membership sponsorship appears lower than in previous years, but in part this is because sponsorship was paid in either the previous or current financial year, which results in an apparent greater loss. In fact, sponsorship remained similar across both years. Slightly higher costs were associated with running seminars and promoting the association, but overall expenses were similar to the previous years. The total expense incurred during this period was \$171, 346.

Liabilities for the next financial year will be as follows:

<u>Fixed:</u> Chief Executive Officer contract (\$80,000 pa) Executive Officer contract (\$40,000 pa) Insurances Telephone, website and other online services <u>Variable</u>: Seminar expenses Travel Postage and stationary Banking / Merchant Fees Promotional materials and activities.

As a not-for-profit association, all surplus funds are used for association purposes, and income tax is not payable. The association is registered for GST. Financial record keeping involves reconciling the bookkeeping records in Cashflow Manager, an accounting software programme, and internet banking.

Cash is held in an interest-bearing savings account and in a cheque account – both at Westpac. Two signatories are required to authorise any payment from the association's accounts. Monthly reconciliation is reported to the Treasurer.

557 51,394 42,750 32,958 10,038 137,696 921 14,850 2,513 42,921 500	930 42,237 46,841 61,900 7754 159,662 1,320 9,002 638 35,587 460	2,058 142,630 14,880 25,296 10,249 195,113 1,386 17,806 1,164 83,911 1,300
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8,352	3,776	6,627
7,185	2,138	4,101
3,793	12,610	8,089
6,941	6,941	8,841
2,534	1,991	2,467
3,460	9,031	20,381
2,629	13,328	353
73,059	73,059	73,249
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	7,185 3,793 6,941 2,534 3,460 2,629 73,059 171346	7,185 2,138 3,793 12,610 6,941 6,941 2,534 1,991 3,460 9,031 2,629 13,328 73,059 73,059 171346 170,744 (33,650) (11,082)

Income and expenditure statement for the year ended 30 June 2018, showing a comparison with the



Membership Dr Louise Collingridge Executive Officer

Full members of Independent Audiologists Australia hold tertiary qualifications in audiology, have a financial interest in an audiology related business that is at least 50 % owned by audiologists and sign acceptance of the IAA code of ethics.

During the 2017 – 2018 financial year, IAA reviewed its code of ethics and standards of practice for full members to provide guidelines to ensure transparency in billing and to avoid real or perceived conflicts of interest in our members' practices. In response to the growth of franchise models in Australia, our members voted to exclude franchisees from full membership. Members who franchise their audiology businesses are expected to adhere to the IAA code of ethics in their franchise operations.

Life members Neil Clutterbuck, Susan Clutterbuck, Marie-Louise Hekel and Janice Milhinch continue to follow the operations of IAA. They were all awarded life membership of the association in recognition of their role in founding the association.

All full and life members enjoy the same rights to:

- access the members only section of the website
- voting rights
- propose and second membership applications
- object to members joining
- serve on the Executive
- call for special general meetings
- use the letters M. IAA after their name
- display membership certificates and membership status in their clinics and websites
- pay members fees (for themselves and their staff) to attend IAA seminars
- members are listed in the "Find" section of the association's website unless a request is made to remove their name or details.

Membership trends by Financial Year

	2018	2017	2016
Membership at financial year end	111	95	82

Full membership has increased over the past few years. One hundred and eleven audiologists were full or life members of IAA on 30 June 2018. They operate almost 350 clinic sites across Australia.

Full members were surveyed in February 2018 to provide input to the association as to direction that the association should take in the year ahead. Results endorsed the advocacy activities of the association and provided direction for future educational events.

Subscription to IAA is open to *any* individual who is interested in the work of the association. Subscribers newsletters and advance notice of events held by IAA. Complimentary subscription is offered to representatives of advocacy groups and university clinics.



2017 – 2018 was a very full year for advocacy undertaken by Independent Audiologists Australia, as well as by individual members, several of whom provided individual submissions to various inquiries, in addition to those provided by the association. Highlights were as follows:

August 2017 – Myriam Westcott and Louise Collingridge were invited presenters at an Australian Society of Rehabilitation Councillors (ASORC) educational event in Melbourne.

September 2017 – IAA submitted a detailed comment for an Independent Review of Accreditation Systems within the National Registration and Accreditation Scheme for health profession.

October 2017 – IAA collaborated with Audiology Australia to enquire whether HICAPS for private health funds would be extended to audiology.

October 2017 – Grant Collins and Louise Collingridge were invited speakers at the Better Hearing Australia national conference in Brisbane, along with Trent Zimmerman, who had chaired the parliamentary inquiry into hearing health and wellbeing.

December 2017 – IAA submitted a comment on an investigation into Patient Safety and Quality Improvement in Primary Care by the Australian Commission on Safety and Quality in Health Care.

December 2017 – Louise Collingridge contributed to staff training at the Deaf Society NSW.

January 2018 – Louise Collingridge met with Roxanne Marcelle-Shaw, Director of the Professional Standards Authority to discuss self-regulation of the audiology profession.

February 2018 – Louise Collingridge represented IAA at the Victorian allied healthcare research project – Louise represented IAA

February 2018 – IAA submitted a letter to the Australian Government Competitive Neutrality Complaints Office supporting reports about the activities of Australian Hearing raised by the Hearing Business Alliance.

March 2018 – Tegan Keogh represented IAA at a consultation of the NDIS.

March 2018 – IAA collaborated with AudA, HCIA, HBA, ACAud, HAMAADA, HAASA to respond to a report by Price Waterhouse Coopers that reviewed pricing and device supply within the Hearing Services Programme.

March 2018 – IAA corresponded with the Federal Minister for Aged Care and Indigenous Health about the regulation of audiology in Australia.

March 2018 – Grant Collins and Louise Collingridge participated in a roundtable discussion between industry and professional groups in Canberra, on the invitation of Minister Wyatt, Minister for Aged Care and Minister for Indigenous Health.

May 2018 – IAA provided detailed comment on a Thematic Review of the Commonwealth hearing services legislation.

May 2018 – Louise Collingridge represented IAA in a panel about the NDIS at the Audiology Australia national conference in Sydney.

I was thrilled to be here for Grant and Louise's presentations as well... because it was just so inspiring to hear that presentation about what I'd broadly describe as ethical audiology and thank you for all that you and the association are doing.

I was here for Grant's presentation because I think that focused on how the interaction of regulation and sales practices and so on can affect the ability of the profession and incentive for the profession to provide the rehabilitative services. Hopefully if the Government adopts recommendations in relation to commission and regulation of audiology and audiometry that will be a foundation for moving forward.

> Trent Zimmerman Chair of the Parliamentary Inquiry into Hearing Health and Wellbeing, speaking at the Better Hearing Australia conference, Brisbane 28 October 2017.



Excellence in Education Programme Myriam Westcott Vice -President and Chair of Education

A one-day seminar for full IAA members was held in Melbourne in October 2017 on the topic of pricing, **Price Matters**. Keynote presentations were on the topic of unbundling of hearing device prices from hearing services, the rights of audiologists as consumers dealing with device suppliers addressed by the Australian Consumer and Competition Commission (ACCC) and addressing concerns about accessing funding via the National Disability Insurance Scheme (NDIS).

A two- day seminar was held in March 2018 at St Vincents Hospital on the topic **Making Contemporary Clinical Audiological Decisions**. The seminar was open to all. Convened by IAA members Deborah Pallett and Celene McNeill, both of whom integrate implantable technologies into their daily audiological practice, the seminar brought together medical and surgical specialists, audiologists, researchers, device suppliers and patients with lived experience to address the issue of decision making in audiology.

Full members of IAA who attend our events are awarded certificates annually that indicate the number of hours of ongoing education they have accumulated. In 2017 – 2018 a total of 17.25 hours could be accumulated from IAA events.



Quality is ensured through detailed planning of all seminars and master classes, according to the following principles:

- 1. The Independent Audiologists Australia Executive appoints a Chair of Education to oversee all decisions related to the Excellence in Education programme.
- 2. Seminar topics arise from contemporary themes that emerge at international conferences and in international peer reviewed publications, and which are determined by the Executive, to be relevant to local needs.
- 3. Seminar convenors are appointed to assist with seminar arrangements at the discretion of the Executive and the Chair.
- 4. All seminar contributors are invited because of their academic, research and/or clinical record and reputation.
- 5. Seminar contributors are required to submit detailed abstracts before seminar programmes are finalised.
- 6. Seminar programmes are carefully compiled to ensure maximum learning opportunities, introducing theoretical bases, current research findings, and clinical applications for each topic.
- 7. Seminar programmes allow sufficient time for each contributor to offer in depth and advanced knowledge on their specific topic.
- 8. Programmes build in discussion and question time to ensure that the relevance of each topic is made known within each seminar.
- 9. Pre-seminar reading lists and post-seminar access to presentations and resources are available to all Independent Audiologists Australia members, and to seminar delegates who are not members.
- 10. Feedback is sought after all activities to ensure optimal learning and development opportunities.

"Best independent event I have been to. I will be signing on to the next one."

"Appropriate content for the current landscape of Audiology. Viewing cases from multiple perspectives was excellent.".

"Really excellent and dynamic group of speakers. The energy in the room – the audience was so engaged"

"This seminar more than any prior activity has conveyed to me the need and confidence to integrate implantable solutions into my practice".

.....Seminar Delegates attending Making Contemporary Clinical Audiological Decisions, St Vincent's Hospital, Sydney March 2018



Governance & Ethics Dr Tegan Keogh

Independent Audiologists Australia Inc (IAA) is incorporated as a not for profit association in the State of Victoria. Rules of the association are lodged with Consumer Affairs, in Victoria.

The rules of Association are updated as changes are voted in by the membership.

During 2017 – 2018, IAA members reviewed and revised membership criteria to specifically exclude franchisees from eligibility as full members. As of May 2018, the following is an extract from the IAA Rules, and explains eligibility criteria for full membership:

Demonstrate to the reasonable satisfaction of IAA that the applicant has a financial interest in an audiology business and that the audiology business has at least 50% ownership by audiologists, for example:

- (i) If the business is a company, audiologists must control at least 50% of the shareholding of the Company;
- (ii) If the business is a partnership, at least half of the partners in the partnership must be audiologists;
- (iii) For any other entity or business structure, audiologists must have at least 50 % interest in the business and be able to control the decision-making of the business to the reasonable satisfaction of IAA.

Applicants must provide evidence to IAA sufficient to identify and substantiate their financial interest in an audiology business, for example, by providing the corporate identifier of the business (ABN, ACN), a company search, or a copy of the relevant partnership agreement. IAA may request that an applicant provide additional information regarding its financial interest if required prior to admitting an applicant as a full member of IAA.

Despite anything else in these Rules, audiologists who operate a franchised audiology business as a franchisee are ineligible for full membership of IAA.

Franchisors of a franchised audiology business are eligible for full membership of IAA provided they meet the eligibility criteria in Rule 2.

During 2017, IAA also revised the code of ethics to reassure the public that consulting a full member of IAA would mean transparency in billing and appropriate handling of real or perceived conflicts of interest. The IAA code of ethics, which are accepted by all full members, bases it handling of conflict of interest on standards set for medical practitioners and specialists. Added to this, any full member who operates as a franchisor of an audiology practice is expected to apply the IAA standards of practice within their franchise business. The ethical standard pertaining to operating a franchise is as follows:

If a full IAA member operates more than one audiology business, including as part of a franchise arrangement, they must ensure that:

(a) they operate all businesses, including franchised businesses, in accordance with the IAA Code of Ethics and Rules of Professional Conduct;

(b) all employees, franchisees and other key persons within the business comply with the IAA Code of Ethics and Rules of Professional Conduct;

If a full IAA member operates an audiology business which does not meet the eligibility requirements as stated in the rules of association, that member will lose eligibility for full IAA membership and must tender their resignation as a full member of IAA in accordance with Rule 7;

If a full IAA member operates more than one audiology business and fails to adhere to the IAA Code of Ethics and Rules of Professional Conduct in operating any one of those business, that member will lose eligibility for IAA membership and must tender their resignation as a full member of IAA.

IAA has not received any formal complaints against any full members of the association. Should that occur, the IAA rules call for the forming of a committee to investigate and act on any complaint.

Judith Boswell Scholarship Winner Sally Jayne Walz



The inaugural Judith Boswell Scholarship was awarded by Independent Audiologists Australia (IAA) to Sally Jayne Walz from Flinders University. Sally Jayne's report to IAA is shown here.

I was thrilled to receive the inaugural Judith Boswell Scholarship for Audiology students undertaking a rural or remote placement. The scholarship gave me the opportunity to complete my 2nd year 5week block placement in Alice Springs with NT Hearing and Alice Audiology. These placements are an integral part of the Flinders University Master of Audiology and provide students with a supportive environment to really hone their clinical skills and gain valuable insights into working life as an Audiologist.

I benefited greatly from choosing Alice Springs as my clinical placement destination. Not only did I get to experience working life in a completely different community setting than the one I have lived in for my entire life, I got to meet people from one of the world's oldest living cultures. Placements in Central Australia are coordinated through the Centre for Remote Health. During their 'Introduction to Central Australian Aboriginal Cultures and Context' I was privileged to learn about the traditional knowledge that is passed down orally through generations, about Arrente kinship systems and the history and survival of Arrente culture in Alice Springs. Armed with this information I felt more prepared to hopefully bridge the culture and language barriers that could arise in clinic.

There were certainly many memorable experiences I gained from 'going rural'. One moment I look back on fondly is when I was at Alice Springs Hospital helping to assess patients for the ENT clinics with my fantastic supervisor Bec from NT Hearing. She recognized a client she has known for some time in the waiting area, a foster carer with three children to look after; two were young babies in their strollers. We could see the foster mum would have her hands full during the appointment, so we offered to take the babies for a stroll around the hospital to help settle them and so mum could go in to see the ENT with her older child with fewer distractions! It was a proud moment for me to be part of a small act of kindness in a rural community setting. I have since reflected that perhaps it is not something that would come up all that often in a metropolitan setting, and that in smaller communities the strength of your relationships with your clients really is everything and will ultimately build a strong foundation to give continuous quality care where it is needed most.

From a more clinical perspective, I cannot stress enough the invaluable learning experiences I was exposed to. There was a vast array of clinical presentations; everything from foreign bodies, Otitis Media, perforations, cholesteatoma, post-surgical follow up, congenital deafness and much more. I was exposed to diagnostic ABRs, hearing aid fitting, routine testing and assessing more challenging cases. Practicing my clinical skills in a challenging environment really helped me to quickly solidify my existing knowledge, but also helped me to learn when to ask for help (and that it is something that should be done often and unashamedly when one is learning the ropes!). I was also thrilled to be able to scrub in and observe a myringoplasty surgery at the Alice Springs Hospital, and view the surgeon's work through the second magnifying scope. These experiences have given me so much confidence in my clinical and interpersonal abilities, and also strengthened my problem-solving skills in high pressure situations.

A few final words about rural clinical placements; I urge any student audiologist to take up the challenge and be adventurous! While it is tough being away from family and friends for weeks at a time, I gained so many new friends, contacts and working relationships while I was away. I am of the strong opinion that a rural placement is the best way to gain exposure to a very broad range of clinical presentations, skills, interesting people and to get a feel for community-based practice.

I am so glad to have had the experiences I did in Alice Springs and am indebted to Independent Audiologists Australia for making my clinical placement possible through the Judith Boswell Scholarship.

Sponsorship & Affiliations Grant Collins President



Sponsorship was provided to the association at the start of the financial year to enable the association to plan seminar budgets in advance. We appreciate the support of sponsors and their commitment to serving independent audiologists.

The agreement that held with sponsors during 2017 – 2018 was as follows:

- Sponsors' company logo displayed on the Independent Audiologists Australia website
- Sponsors' company logo printed on all seminar and master class programmes
- Sponsors could register up to 2 company representatives at Independent Audiologists Australia seminars and networking functions offered during the sponsorship period for the same registration fee as is paid by members of the association.

Sponsorship was neither binding nor restrictive on the policies, associations, membership, practices or other sources of funding of Independent Audiologists Australia.



Sponsors 2017 – 2018

During 2017 – 2018, IAA investigated alternative forms of sponsorship and decided that future sponsorship would be linked to specific events and activities of the association. We acknowledge our longstanding relationship and support from sponsors to date and look forward to working with them on specific projects and events.

Affiliations

Independent Audiologists Australia is affiliated to like-minded associations Academy of Doctors of Audiology in the USA and Independent Audiologists New Zealand. In the past year, the Hearing Business Alliance has been established in Australia, which offers a complementary focus to that offered by IAA, and we have sought a close affiliation with that new group.

IAA also keeps close associations subscribing to consumer groups Self Help for the Hard of Hearing People, Better Hearing Australia and Deafness Forum (ACT). Independent Audiologists Australia Members have the opportunity to participate in the SHHH hearing aid bank in New South Wales. Discussions have been held with the Deaf Society, Parents of Deaf Children and Aussie Deaf Kids in relation to service provision and regulation and scope of practice of audiologists. Representatives of various groups have attended IAA seminars as contributors and delegates.













Excellence in Education in 2018 – 2019 Dr Tegan Keogh

Practice Management

16 – 17 November 2018 (for IAA Members) Melbourne, Victoria

A two-day seminar for IAA members and their practice managers. Topics to be covered include practice management software, claiming public funding and software, preparing for audits from the Hearing Services Programme.

Hearing in Noise

15 – 16 March 2019 (Open to all) Mantra Mooloolaba, Queensland

A two-day seminar with invited speakers from across a range of disciplines that address noise in society including researchers, engineers, clinicians and consumers. The focus on hearing in noise will assist clinicians to face this routinely reported difficulty in clinical settings.

Aural Rehabilitation Master Class with Dr Brent Spehar

17 March 2019

clEAR is an online aural rehabilitation programme with an evidence base that allows for online support communities to be formed and new skills to be learned. Full members of IAA will attend this half day master class to gain skills in establishing rehabilitation services within their clinics.

Over the Counter Devices

October 2019 (for IAA members and their representatives)

Convened by Grant Collins, this seminar will address all aspects of the supply and impact of over the counter devices for independent practices. Keynote speaker Dr Brian Taylor will draw on recent experience in the USA of introducing over the counter devices.

Incoming Executive 2018 - 2019

At the IAA AGM held on 16 November 2018, a new Executive Committee was formed, which will take Independent Audiologists Australia through the next financial year.

President:	Mr Grant Collins
Vice President:	Dr Tegan Keogh
Councillors:	Dr Matthew Callaway
	Dr Ross Dineen (appointed subsequently by the Executive)
	Mr Mel Gray Thompson
	Ms Philippa Long
	Ms Elaine Melville
	Dr Celene McNeill
	Mr Wesley Ong