

**MINISTERIAL
STANDING
COMMITTEE on
HEARING**

ANNUAL REPORT

2004-2005

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Background

The Ministerial Standing Committee on Hearing was established in February 2004, according to Section 20 of the *Health Administration Act 1982*, to provide the NSW Minister for Health with advice in relation to strategic directions for hearing services in NSW. The inaugural meeting of the Ministerial Standing Committee on Hearing was held at Parliament House on 30 March 2004.

The Standing Committee has a broad role and strategic focus, working with other government departments and non-government organisations involved in the provision of hearing services. The Standing Committee facilitates the multidisciplinary collaboration of service providers across the whole spectrum of care including screening, diagnosis, treatment, research, education and occupational safety.

The Standing Committee oversees hearing services in NSW, including:

- State-wide Infant Screening – Hearing (SWISH) program
- Diagnostic audiology services in Area Health Services
- Cochlear implant services

This report has been prepared to provide an overview of the Committee's achievements to date and to highlight areas the Committee intends to focus on in the future.

Terms of Reference

The Terms of Reference for the Ministerial Standing Committee on Hearing are to:

- Set strategic directions for hearing services in NSW, in consultation with key interest groups including people with hearing disabilities, members of the wider community, and health professionals.
- Identify gaps in the provision of hearing services whether in particular sectors of the community or by geographical area.
- Identify, consider and advise the Minister for Health on issues relating to:
 - Funding priorities for hearing services
 - Quality and appropriateness of hearing services, including the use of standard, agreed clinical pathways and treatment protocols
 - Timely and equitable consumer access to required services, including those for rural residents
 - Outcomes of investments in hearing services
 - Research, education and training programs.

The Ministerial Standing Committee on Hearing is chaired by the Hon Peter Anderson and comprises a wide-ranging membership. It includes representation from hearing service providers, State and Australian government agencies, support and advocacy groups, as well as several parents of deaf children.

The Committee met four times in the financial year 2004-2005 and meetings were held on the 10 September 2004, 18 November 2004, 24 February 2005 and 3 May 2005.

A full list of Committee members is at Appendix 1.

Sub-Committees and Working Groups

The following Sub-Committee and Working Groups were established to provide specific advice to the Ministerial Standing Committee on Hearing on key matters.

Cochlear Implant Sub-Committee

The Cochlear Implant Sub-Committee is chaired by Ms Susan Richards, who is the parent of a deaf child. The Sub-Committee has two sub groups: the Children's Cochlear Working Group and the Adult Cochlear Working Group. Membership lists for the Sub-Committee and two Working Groups are attached at Appendix 2.

The Sub-Committee was established to review current issues in cochlear implant services for children and adults including the determination of needs, eligibility, challenges and opportunities, and to make recommendations for the future of cochlear implant services.

Family Support Working Group

The Family Support Working Group is chaired by Ms Sue Rayner, who is the parent of a deaf child. A membership list is attached at Appendix 3.

The Working Group was established to review the current provision of support services for families with children and adolescents under 21 years of age, to identify issues in accessing family support, and to make recommendations for future family support services.

Adult Services Working Group

The Adult Services Working Group is chaired by Ms Sue West, who is the daughter of a deaf parent. A membership list is attached at Appendix 4.

The Working Group was established to review access to services for adults with hearing impairment and to recommend strategies to address service needs.

Data Working Group

The Data Working Group is chaired by Ms Leanne Wallace, Acting Director, Primary Health and Community Partnerships Branch, NSW Department of Health. A membership list is attached at Appendix 5.

The Working Group was established to identify gaps and key issues in relation to hearing data collections and to recommend strategies to address these.

Key Achievements

1. State-wide programs

1.1 Statewide Infant Screening-Hearing (SWISH)

The State-wide Infant Screening - Hearing (SWISH) program commenced in December 2002.

The SWISH Program is aimed at identifying all babies born in NSW with significant permanent bilateral hearing loss by three months of age, and for those babies to be able to access appropriate intervention, by six months of age.

Technology is now available to diagnose hearing problems in the neonatal period, and identification of hearing loss is achieved through universal hearing screening of all newborns.

Early identification and intervention are important, with research suggesting that intervention commencing by six months of age may result in optimal speech and language development and reduce the need for ongoing special education.

Each Area Health Service has SWISH Coordinator staff responsible for implementing and managing the screening program across all facilities in its Area. SWISH Coordinators have adopted innovative approaches such as service agreements with private hospitals and employing dedicated screeners to meet local needs (eg Indigenous and CALD populations) to ensure maximum screening capture. Parent/carer brochures describing the SWISH program are available in English and 19 other community languages, in print and electronically via the NSW Health website.

SWISH diagnostic audiology services are provided through the three tertiary paediatric hospitals, which are the acute care hubs of the three paediatric services networks covering the State. Newborns receive an audiological diagnosis, as well as counselling and medical assessments, to assist with selecting appropriate intervention.

The SWISH Travel Assistance Scheme was established to reimburse parents for the cost of travel where they live a considerable distance from a tertiary paediatric hospital.

Following diagnosis, newborns are referred to intervention services appropriate to the degree of hearing loss, specific medical diagnosis and parental preference.

The SWISH program meets international benchmarks for hearing screening programs and in 2004 won the Baxter NSW Health Award for Effectiveness of Health Care, and the NSW Premier's Public Sector Gold Award in the category of Service Delivery. These awards recognise the innovation, collaboration, and positive outcomes produced by all organisations involved in the implementation of the SWISH program.

The following represents a summary of SWISH statistics:

- For the period May 2003 to June 2005, screening coverage rates have averaged over 95 per cent.
- Since the commencement of the program in December 2002 to June 2005, approximately 208,000 babies have been screened, with 179 identified by the program as having significant permanent bilateral hearing loss.
- The identification rate of significant permanent bilateral hearing loss by SWISH is 0.9 per 1,000 births, which has remained steady since the commencement of the program.
- The number of newborns identified by screening as requiring diagnostic audiology (Dec 2002-Jun 2005) is 386 and the diagnostic audiology follow-up rate is 97 per cent.
- The average age of diagnosis of hearing loss in NSW has fallen from 18 months to 1.6 months, and the average age of first hearing aid fitting has fallen from 22 months (for severe losses) to 3.8 months for all losses.

Appendix 6 contains the data related to the SWISH program for the second year of the program (December 2003 to November 2004). As the follow-up of newborns (including premature infants) may occasionally take a longer period of time, definitive SWISH screening data can only be provided retrospectively for the six months previous.

1.2 Otitis Media Screening - NSW Aboriginal Affairs Plan 2003-2012: *Two Ways Together*

The NSW Aboriginal Affairs Plan 2003-2012: *Two Ways Together* is a new initiative of the NSW Government which specifically focuses on universal Otitis Media screening for 0 to six year-old Aboriginal children. It is noted that this initiative differs from the existing NSW Otitis Media Strategic Plan for Aboriginal Children (the Strategic Plan) which began in 2000. Where the *Two Ways Together* Plan specifically focuses on the universal screening of 0 to six year-olds, the Strategic Plan has a wider age cohort (up to twelve¹² years of age) and focuses primarily on health promotion, with opportunistic Otitis Media screening. The two programs are considered complementary.

Otitis Media (commonly referred to as “glue-ear”) is an infection in the middle ear. Recurring and chronic middle ear infections can adversely affect health, learning ability, interaction skills and educational attainment.

The Otitis Media Screening Initiative is a program dedicated to the detection of middle ear infection in Aboriginal children aged from 0 to six years. Middle ear infection is significantly higher in Aboriginal children than non-Aboriginal children. The incidence of Otitis Media in Aboriginal communities is reported to occur at approximately ten times the rate found in the general population.

The Centre for Aboriginal Health of the NSW Department of Health is responsible for implementing the Government's Otitis Media screening initiatives for 0 to six year-old Aboriginal children across NSW. The total population of the 0 to six years age cohort in NSW is 22,800. The screening target for 2004-2005, the first year of the initiative, was 50 per cent or 11,400 children. The initiative was announced on 28 June 2004 and was followed by five months of consultation and planning activities.

Consultation process

The consultation process required the commitment and resources of many groups of people from diverse agencies. The process was undertaken through presentations, information sessions and a series of meetings with key stakeholders. The information gathered from those who contributed has been reflected in the Plan.

Screening

Screening for the first year of the initiative has been completed with over 9,300 Aboriginal children having been screened for Otitis Media infection. This equates to 82 per cent of the screening target for 2004-2005. While this represents some slippage from the target, it should be considered a very good result. With additional Aboriginal Health Workers now trained in screening, this number can only increase as the program moves forward. The incidence rate for infection was found to be approximately 33 per cent of those children screened.

Specialist services

The Centre for Aboriginal Health entered into a partnering arrangement with Dr Ted Beckenham, an Ear Nose and Throat specialist who works on a fee-for-service basis, to provide and develop outreach services in regional areas including Goulburn, Armidale, Bega and Penrith. Dr Beckenham will assist with the project, including the recruitment of other specialists to work on this initiative, and advise on the development of a screening database.

Community education

The Aboriginal Educational Consultative Group Inc is delivering community awareness and education sessions on the importance of screening for Otitis Media. This may encourage more parents to have their children checked for Otitis Media. The Centre for Aboriginal Health has entered into a partnering arrangement with the Aboriginal Programs Unit, through Dr Lisa Jackson Pulver at the University of NSW, to deliver improved State-wide community education from 2005-2006 to 2007-2008. This will include a comprehensive evaluation of their services.

Training services

The Centre for Aboriginal Health engaged Australian Hearing to develop and deliver three training courses to health workers in 2004-2005. The Royal Institute for Deaf and Blind Children hosted the training and supplied accommodation to students. Thirty-two health workers attended and successfully completed training to the end of 2005. A further five training courses are scheduled for 2005-2006 to train an additional seventy Aboriginal Health Workers. The enhanced capacity of the health system to screen more children should be reflected in the 2005-

2006 financial year screening figures. TAFE NSW will deliver the five training courses at regional venues throughout NSW in 2005-2006. It is anticipated that this training will further increase the number of trained screeners throughout NSW by approximately seventy.

Equipment

Otoscopes and tympanometers are the primary devices which are necessary to detect Otitis Media. NSW Health has bulk purchased 116 kits which are being issued to health workers as they successfully complete their training courses.

1.3 Cochlear implant program

The cochlear implant program provides screening, pre-operative assessment, surgical implantation, post-operative assessment and habilitation for children and adults with permanent bilateral sensory-neural hearing loss.

Historically, the program was provided by the Sydney Cochlear Implant Centre (formerly the Children and Adult Cochlear Implant Centre) in collaboration with The Children's Hospital at Westmead and Royal Prince Alfred Hospital. With enhancements from NSW Health in 2002, the Program now operates through collaborative partnerships between the Sydney Cochlear Implant Centre, the Children's Hospital at Westmead, Royal Prince Alfred Hospital, the Shepherd Centre, and Sydney Children's Hospital.

Over the three-year period from 1 July 2001 to 30 June 2004, 449 people underwent cochlear implantation. A one-off funding enhancement of 34 paediatric implants was announced late in the 2004-2005 financial year to reduce the waiting list.

In April 2005, the NSW Department of Health engaged the Centre for Health Service Development, University of Wollongong, to undertake a review of demand, supply and costings of cochlear implantation in NSW to the year 2008. The study was conducted by Dr Gary Eckstein and Mr Malcolm Masso.

The Terms of Reference for the consultancy were:

- To report on any variations in demand for paediatric and adult cochlear implantations in NSW (since 2001), and their associated reasons
- To report on any variations in costs for paediatric and adult cochlear implantations in NSW (since 2001), and their associated reasons
- To report on the current supply of cochlear implants in NSW hospitals
- To report specifically on the impact of SWISH on the demand for paediatric cochlear implants in NSW
- To project demand for cochlear implants based on the prevalence of profound hearing loss and current implantation rates – to the year 2008

The draft report *Projected Demand for Cochlear Implant Services in NSW* was completed and submitted to the NSW Department of Health in June 2005.

2. Website

A Hearing Health home page has been established on the NSW Health website at <http://www.health.nsw.gov.au/hearing/index.html>

The website is designed to assist people seeking information on hearing and hearing support services and includes links to a range of key service providers and support groups.

The website will continue to be updated as new information becomes available.

3. Mapping of hearing services

3.1 Service pathway

The hearing service pathway is a complex one, involving many different agencies and providers. There are also significant differences in the pathway depending on the age of the person with a hearing impairment.

The Standing Committee has mapped the hearing service pathway for both adults and children to articulate the range of options and assist with gap identification.

A flow chart outlining service pathways for children and adults is at Appendix 7. This document will serve as a front web page document, supported by details on access to relevant services.

3.2 Survey of hearing funders and providers

The Family Support and Adult Services Working Group have commissioned an in-depth survey to collect detailed information on hearing services across the State. The surveys have been sent to over 140 hearing service providers, funding agencies and support groups. Information being collected includes:

- Types of services offered
- Access to services
- Links between services
- Cost of services

The aim of the survey is to provide the Standing Committee with a detailed overview of the range of hearing services, and to assist with the identification of key issues and gaps. The results of the survey will be used to inform the Standing Committee's advice to the Minister in relation to gaps and strategic directions for hearing services.

The survey will be collated and analysed by October 2005.

3.3 Data audit

The Data Working Group has commissioned an audit of data collections related to hearing and hearing services, including epidemiological, service activity and client profile data. The results of this audit will be integrated with the results of the survey, and will be used by the Standing Committee to identify funding and service gaps, and to make recommendations for future directions of hearing services in NSW.

4. Consumer protection

The Adult Services Working Group identified a number of issues in relation to consumer protection. A range of marketing material has been obtained from private companies selling hearing amplification devices at markedly reduced costs.

Correspondence has been directed to relevant consumer and fair trading agencies regarding the rights and protection of consumers purchasing hearing aids, assistive listening devices and in-the-ear treatments for hearing impairment. The Standing Committee will continue to pursue this issue.

Similarly, information from hearing-related professional associations regarding the qualifications required by people fitting these devices will be analysed to determine clinical practice standards, minimum qualifications, professional development requirements, and complaints resolution practices which are in place to protect consumers.

Future priorities

In the next year 2005-2006, the Ministerial Standing Committee on Hearing will continue to address the Terms of Reference and provide advice to the Minister for Health with particular attention to the following issues:

- Identifying funding and service provision issues and strategies, including:
 - Commonwealth/State roles
 - Cochlear implantation
- Improving family support services for children and young people under 21 years
- Identifying data issues and strategies
- Improving the provision of consumer information
- Identifying consumer protection issues and strategies
- Addressing access and equity issues, particularly for adults aged 21 to 65 years, and people from culturally and linguistically diverse populations
- Identifying priorities for prevention activities
- Identifying research priorities

The Standing Committee will also continue to oversee and report on the SWISH, Otitis Media and cochlear implant programs.

*Appendix 1***Ministerial Standing Committee on Hearing membership**

The Hon Peter Anderson	Chair; former NSW Minister for Health; former Board Member, Wentworth Area Health Service; Board Member, The Children's Hospital at Westmead; former Chair, Greater Western Sydney Health Services Group-Western Quadrangle
Ms Leanne Wallace	Delegate of Director-General, NSW Health; Acting Director; Primary Health and Community Partnerships Branch, NSW Department of Health
Professor William Gibson	Professor of Otolaryngology/Head of Department Royal Prince Alfred Hospital
Mr Martyn Jones	General Manager The Shepherd Centre
Professor Greg Leigh	Assistant Chief Executive (Educational Services) Royal Institute for Deaf and Blind Children
Ms Barbara Nudd	Senior Audiologist, Gosford Hospital Northern Sydney Central Coast Area Health Service
Ms Robyn Philips	Coordinator, Otitis Media Program North Coast Area Health Service
Dr Tony Pun	Chair Ethnic Communities Council
Ms Alison Purcell	Speech Pathologist/Lecturer Faculty of Health Sciences, University of Sydney
Ms Sue Rayner	Parent of a deaf child
Mr Chris Rehn	General Manager Sydney Cochlear Implant Centre
Ms Sue Richards	Parent of a deaf child
Mr John Searl	Delegate of Australian Government Minister for Health; Director, Client Services Office of Hearing Services Department of Health and Ageing
Mr Brian Smyth-King	Delegate of Minister for Education and Training; Director, Disability Programs NSW Department of Education and Training
Ms Sue West	Former Senator; former Board Member, Mid Western Area Health Service; daughter of a deaf parent

*Appendix 2***Cochlear Implant Sub-Committee membership**

Ms Susan Richards
(Chair)
Parent of a deaf child

Mr Chris Rehn
Manager
Sydney Cochlear Implant Centre

Professor Greg Leigh
Assistant Chief Executive
(Educational Services)
Royal Institute for Deaf and Blind Children

Professor Bill Gibson
Professor of ENT Surgery
Royal Prince Alfred Hospital

Dr Catherine Birman
ENT Surgeon
The Children's Hospital at Westmead

Ms Jenny Smith
CNC Orthopaedics
Nepean Hospital

Ms Diane Gill
Executive Director
Royal Prince Alfred Hospital

Dr Patricia Mutton
Department Head
Deafness Centre
The Children's Hospital at Westmead

Dr Steevie Chan
Manager, Clinical Services Planning
NSW Department of Health

Professor Philip Newall
Professor of Audiology
Department of Linguistics
Macquarie University

Dr Philip Chang
St Vincent's Hospital

Dr Nigel Biggs
ENT Surgeon
St Vincent's Hospital

Dr Melville Da Cruz
Senior Lecturer in Surgery
University of Sydney
Westmead Hospital

Dr John Berryman
Chief Executive Officer
Royal Institute for Deaf and Blind Children

Mr John Dent
Senior Services Planner
Sydney West Area Health Service

Mr Martyn Jones
General Manager
The Shepherd Centre

Ms Maree Doble
Cochlear Implant Program Coordinator
The Shepherd Centre

Mr Rob McLeod
Community Participant
Greater Metropolitan Clinical Taskforce

Ms Sharan Westcott
Clinical Manager
Sydney Cochlear Implant Centre

Mr Steve Pascoe
Community Participant
Greater Metropolitan Clinical Taskforce

Appendix 2.1

Children's Cochlear Working Group membership

Ms Susan Richards
Chair
Cochlear Implant Sub-Committee

Dr Catherine Birman
ENT Surgeon
The Children's Hospital at Westmead

Mr Chris Rehn
Manager
Sydney Cochlear Implant Centre

Professor Bill Gibson
Professor of ENT Surgery
Royal Prince Alfred Hospital

Professor Greg Leigh
Assistant Chief Executive (Educational Services)
Royal Institute for Deaf and Blind Children

Ms Marie Doble
Cochlear Implant Program Coordinator
The Shepherd Centre

Mr Martyn Jones
General Manager
The Shepherd Centre

Dr Patricia Mutton
Department Head
Deafness Centre
The Children's Hospital at Westmead

Dr Phillip Chang
ENT Surgeon
St Vincent's Hospital

Mr John Berryman
Chief Executive Officer
Royal Institute for Deaf and Blind Children

Appendix 2.2

Adult Cochlear Working Group membership

Dr Catherine Birman
ENT Surgeon
The Children's Hospital at Westmead

Mr Chris Rehn
Manager
Sydney Cochlear Implant Centre

Professor Bill Gibson
Professor of ENT Surgery
Royal Prince Alfred Hospital

Dr Melville Da Cruz
Senior Lecturer in Surgery
University of Sydney
Westmead Hospital

Mr Steve Pascoe
Community Participant
Greater Metropolitan Clinical Taskforce

Appendix 3

Family Support Working Group membership

Ms Sue Rayner
Chair;
Parent of a deaf child

Professor Greg Leigh
Assistant Chief Executive (Educational Services)
Royal Institute for Deaf and Blind Children

Ms Margaret Dewberry
Executive Manager
Community Service Obligations
Australian Hearing

Ms Leigh-Erin Radford
SWISH State-wide Coordinator
NSW Department of Health

Dr Patricia Mutton
Department Head
Deafness Centre
The Children's Hospital at Westmead

Dr David Starte
Senior Staff Specialist in Developmental Paediatrics
Hearing Support Service, Sydney Children's Hospital;
Service Director
Chatswood Assessment Centre

Ms Anne Porter
Aussie Deaf Kids

Ms Sandra Carroll
Senior Development Officer
Deaf Society of NSW

Ms Heidi Taylor
Hearing Support Social Worker
Sydney Children's Hospital

Ms Linda Wilson
Parent Council for Deaf Education

Mr Geoff Muir
Assistant Chief Executive (Educational Services)
NSW Department of Education and Training

Ms Robin Birchell
Itinerant Support Teacher-Profound Deafness

Disability Programs
NSW Department of Education and Training

Appendix 4

Adult Services Working Group membership

Ms Sue West
Chair;
Daughter of a deaf parent

Ms Margaret Colebrook
Chair
Let Us Hear Committee
Deafness Council of NSW

Dr Jenny Rosen
Head, Department of Audiology
Hornsby Kuring-gai Health Service

Ms Irene Truscott
President
Deafness Council of NSW

Mr Bill Hick
Deafness Forum

Mr Andrew Stewart
Consumer

Ms Linda Wilson
Consumer

Ms Mary Caruana
Consumer;
Member, Let Us Hear Committee
Deafness Council of NSW

Ms Sue Rayner
Consumer;
Parent of a deaf child;
Chair, Family Support Services Working Group

Appendix 5

Data Working Group membership

Ms Leanne Wallace
Chair;
Acting Director, Primary Health and Community Partnerships Branch
NSW Department of Health

Mr Martyn Jones
General Manager
The Shepherd Centre

Professor Greg Leigh
Assistant Chief Executive (Educational Services)
Royal Institute for Deaf and Blind Children

Ms Barbara Nudd
Audiologist, Gosford Hospital
Northern Sydney Central Coast Area Health Service

Ms Margaret Dewberry
Executive Manager
Community Service Obligations
Australian Hearing

Ms Leigh-Erin Radford
SWISH State-wide Coordinator
NSW Department of Health

Appendix 6

State-wide Infant Screening-Hearing (SWISH) Program: second year statistics (Dec 2003 to Nov 2004) corrected for month of birth

Former Area Health Service	Live births	Died prior to screen*	Number screened	Declined screen	Number unscreened	% Screened	% Declined	% Unscreened	Number bilateral refer	Rate Bilat. refer (per 1,000 births)	Period reported
Central Coast	3,415	0/NR	3,401	5	9	99.59	0.15	0.26	5	1.5	Dec03-Nov04
Central Sydney	5,456	6	5,369	5	76	98.41	0.09	1.39	7	1.3	Dec03-Nov04
Far West	303	1	286	4	12	94.39	1.32	3.96	2	6.6	Dec03-Nov04
Greater Murray	3,196	0/NR	2,949	7	240	92.27	0.22	7.51	5	1.6	Dec03-Nov04
Hunter	6,906	26	6,646	19	215	96.24	0.28	3.11	21	3.0	Dec03-Nov04
Illawarra	4,165	21	4,094	10	40	98.30	0.24	0.96	2	0.5	Dec03-Nov04
Macquarie	1,450	1	1,401	5	43	96.62	0.34	2.97	2	1.4	Dec03-Nov04
Mid North Coast	2,519	0/NR	2,501	13	5	99.29	0.52	0.20	5	2.0	Dec03-Oct04
Mid West	2,040	0/NR	1,993	5	42	97.70	0.25	2.06	5	2.5	Dec03-Nov04
New England	2,244	0/NR	2,214	1	29	98.66	0.04	1.29	3	1.3	Dec03-Nov04
Northern rivers	3,164	1	3,054	77	32	96.52	2.43	1.01	4	1.3	Dec03-Nov04
Northern Sydney	4,820	5	4,762	6	47	98.80	0.12	0.98	9	1.9	Jul04-Nov04
Southern	1,476	0/NR	1,448	16	12	98.10	1.08	0.81	5	3.4	Dec03-Nov04
South Eastern Sydney	11,731	0/NR	11,652	10	69	99.33	0.09	0.59	21	1.8	Dec03-Nov04
South Western Sydney	10,641	48	10,493	19	81	98.61	0.18	0.76	13	1.2	Dec03-Nov04
Wentworth	5,016	0/NR	4,928	36	52	98.25	0.72	1.04	7	1.4	Dec03-Nov04
Western Sydney	10,745	9	10,704	13	19	99.62	0.12	0.18	30	2.8	Dec03-Nov04
Total	79,287	118	77,895	251	1,023	98.24	0.32	1.29	146	1.8	

*NR = not reported, as some AHSs are unable to report neonatal deaths.

Total Number of Babies Screened

Dec03 - Nov04[^]
84,886

Number of babies referred to diagnostic audiology for bilateral refer

145

Number of babies diagnosed with permanent bilateral significant hearing loss

70

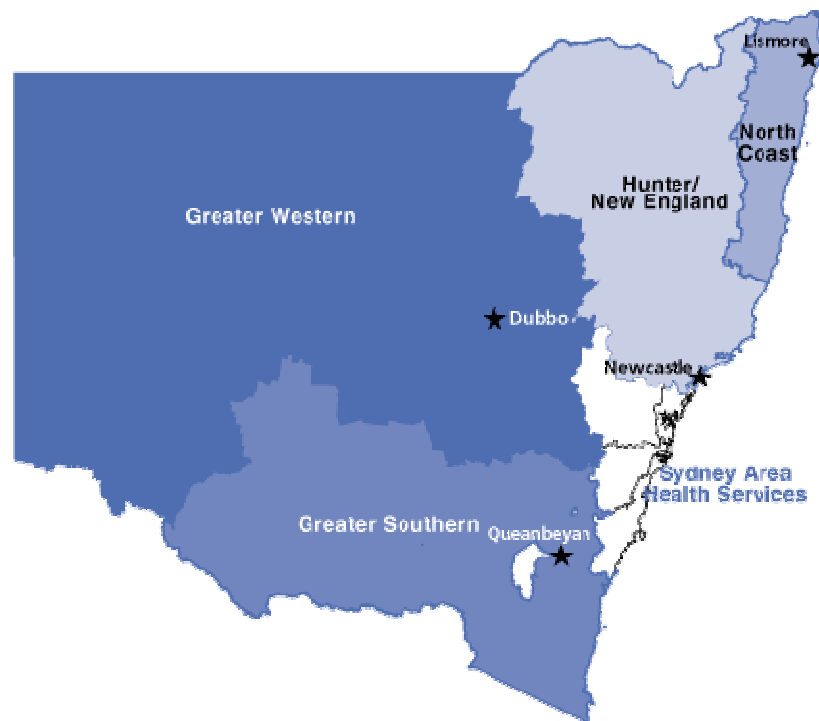
True Positive Rate

48%

[^] These figures are derived from raw (not corrected for month of birth) AHS data

Area Health Services boundaries were revised in January 2005. The reported data is for 2004 and reported for the former boundaries. The map and key below aligns the former boundaries with the current Area Health Services

Rural Area Health Services



Metropolitan Area Health Services



Former Area Health Services

- RURAL**
- Greater Western
- Far West
- Macquarie
- Mid West

- Greater Southern
- Greater Murray
- Southern

- Hunter and New England
- Hunter
- New England
- Taree area of former Mid North Coast

- North Coast
- Mid North Coast
- Northern Rivers

- METROPOLITAN**
- Northern Sydney and Central Coast
- Central Coast
- Northern Sydney

- South Eastern Sydney and Illawarra
- Illawarra
- South Eastern Sydney

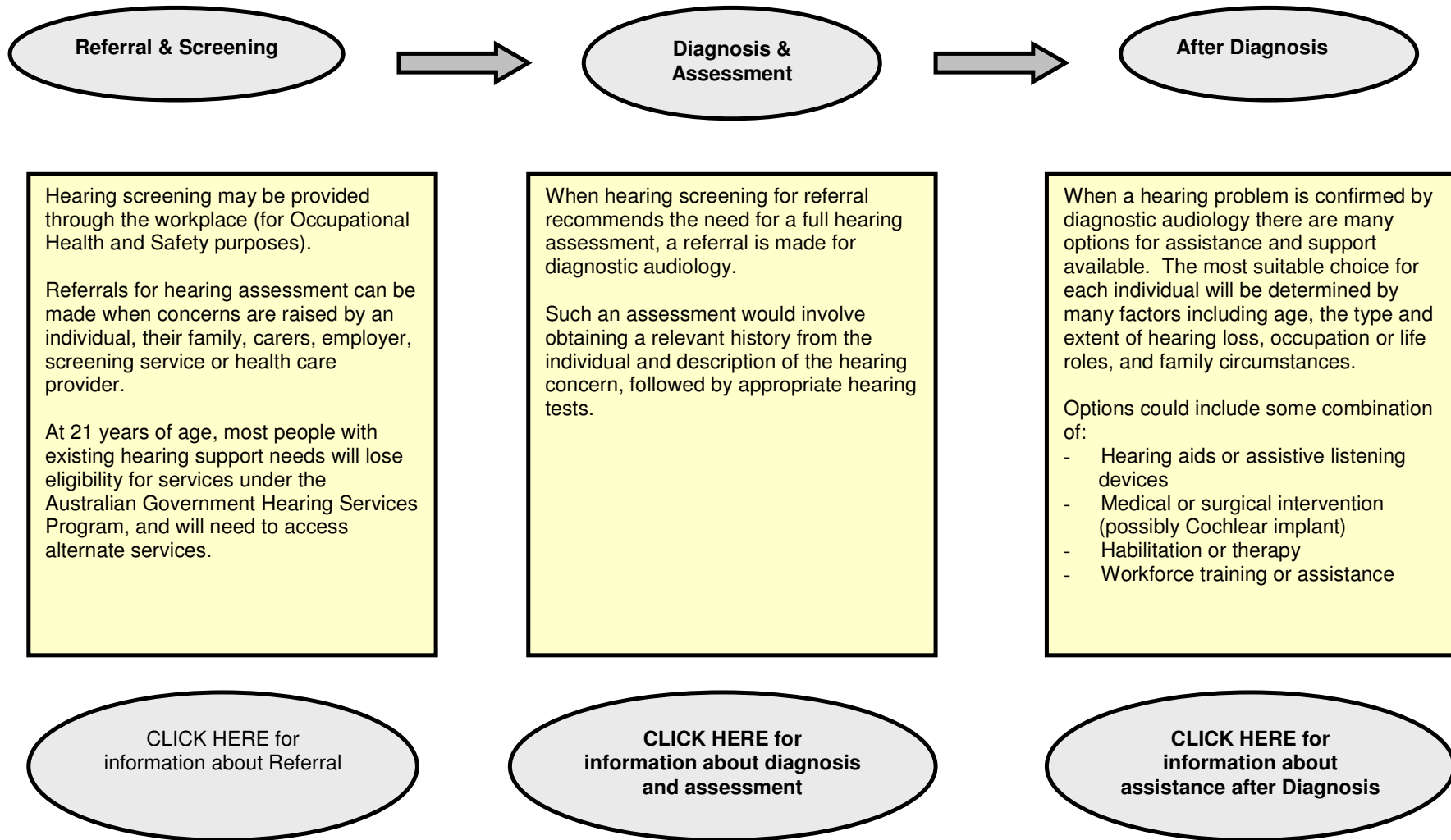
- Sydney South West
- Central Sydney
- South Western Sydney

- Sydney West
- Lithgow area of former Mid West
- Wentworth
- Western Sydney

- STATE-WIDE**
- The Children's Hospital at Westmead

Appendix 7

**HEARING SERVICES PATHWAY
FOR ADULTS 21 YEARS AND OVER**



HEARING SERVICES PATHWAY FOR CHILDREN AND YOUNG PEOPLE UNDER 21 YEARS

