

June

2019

Winter

EDITION



A newsletter bringing you up-to-date news

'Ear 'Tis

Newsletter for Audiometry Nurses

www.anaa.asn.au

Audiometry Nurses Association of Australia Inc.

'The professional association for Audiometry Nurses'

Welcome to the issue of the ANAA Inc. newsletter

Year: 2019 Volume: 30 Issue: 2

Presidents Report

Hi everyone,

The year is certainly underway and before we know it the conference will be upon us! I have had several trips to Melbourne to visit my daughter who is expecting our first grandchild. Life is a juggle with a foot in every direction! The work/social life balance feels like a game of Twister at the moment!

I am very thankful that the Taree girls are putting great effort into our next conference. We are looking at more time for hands on workshops and discussing clinical issues. Taree is a bit more remote from major city hospitals so we may not be able to get an ENT this year, but other speakers will truly make up for this.

We will be welcoming back a couple of life members who have found time to travel and do some audiometry testing as they go along. Looking forward to sharing their valuable experience.

The new website is almost ready to launch. At least now if there is anything that needs adding or changing we will have control over this. It will be a living document and open to discussion and change if required. There will be a members only section (no centrefolds sorry!). This will allow us to put more up on the website and a great way to communicate with each other. Thanks to Gisella for her tireless work on this.

There will be a new member invoicing system for renewal of membership starting in July. Note that there is a slight increase in fees, but this hasn't changed for many years so was probably overdue.

We are trying to keep the funds healthy in our association so we can support members for ongoing education, scholarships & conference costs.

The conference cost has gone up slightly in line with CPI and we have been mindful of a gradual increase so members are encouraged to attend each year.

I am currently looking into organising an education day at the Macquarie University Hearing Hub. I am networking with colleagues that I have met whilst working on the Hearing Health Roadmap. We will try to make it a yearly event in addition to the conference. This may be possible to hold in Feb or March starting 2020. We will even consider a webinar so that members from afar can link into it? Lots of opportunities, but unfortunately this all takes time and is a juggle with a full time position!

I would like to encourage you all to think about serving some time on the committee. Some of our members may be leaving it this year so will require some fresh minds to step up. If we don't get any volunteers, we don't have a committee for our association. We do cover your travel costs/flights to Sydney if required. It is a valuable experience and we will offer lots of support! Only 3 face to face meetings per year and one tele-conference. If anyone wants to have a chat with me about this please do.

Clinical Practice Standards are still open for comment or changes. We are trying to get evidence based information to provide best practice.

If you have any feedback or concerns please contact any one of us on the committee to have a confidential chat.

Take care, Tracy



Contents in this issue

Presidents Report	1-2
Letters to the Editor	2
Committee snippets	2
CoNNMO	4-5
Clinical Advisor information	5-6
Taree Conference	7-9
Position Vacant	10
Interesting articles and links	11-15
Tympanometer deal	16
Sound Scouts	17-18
What did ya say?	19
ANAA 2017-2018 Committee	20

Committee Snippets

Next CoNNMO meeting will be held in October in Waterloo

Clinical Practice Standards are due to be reviewed and updated, we welcome any feedback or comments please forward any suggestions to the ANAA Committee.

ANAA 2019 Conference this year will be held in Taree and 30,31st Oct and 1st Nov 2019

Website in the hands of the web developer

Membership please wait for your invoice to arrive before paying membership in July

Clinical Workshops the Committee are investing options at the Macquarie Hub

Letters to the Editor

This column provides a forum for discussion and an exchange of ideas. The letters page gives members the opportunity to comment on newspaper and journal articles. You are invited to submit clinical case studies, questions or queries for discussion. Send any comments or concerns that you would like to go to the committee to this column. Have a go and tell us your news! – Editor



Our new website is well underway and looking fresh and new, we hope to have it go live very soon. In the meantime the current website is still in operation where you can still find resources and information.

www.anaa.asn.au

Hello everyone!

This edition comes to you slightly earlier than usual due to my travel plans up north to Cape York next week!

If you know your colleague didn't receive the last 'Ear 'Tis, it maybe because their email has been changed, please remember to keep me updated with any changes of email addresses. I am still getting a few bounce back emails. If anyone is interested in taking over editor, please let us know, as this year will be my last year for now due to other commitments next year.



Cheers Gisella



CoNNMO meeting in Melbourne on Friday 3rd May 2019.

Debra Thoms (Commonwealth Chief Nurse Officer) updated us on current matters whilst being in caretaker mode until the election is over.

Debra Thoms will be retiring in June, not sure yet who will take her place.

Nursing and Midwifery Board of Australia – Tanya Vogt updated us on changes in terminology, endorsement process for RN providers and mentorship for newly endorsed RN's, changes to mandatory reporting guidelines & initial stages for the new model for International Nurses Award.

Margaret Gatling (Director - Australian Nursing and Midwifery Accreditation Council) spoke about the review every 5 years of the standards. The standards have been reduce from 9 down to 5 standards due to duplication. Students must be registered with NMBA.

EN return to practice standards will match re-entry standards for RN's.

Australian Digital Health Agency update- Angela Ryan.

Update on My Health Record- privacy rules for 14 years- parents are removed from file being authorised representatives for health care.

90% population have a health record. 23 Million People.

15,000 health care providers are registered.

15 Mill clinical documents have been uploaded.

39 Mill medical prescriptions & dispense records uploaded.

David Lee- Nurse Practitioner- presented on his NP clinics in Melbourne.

ACNP has provided submissions in response to the MBS review with a view of strengthening the role of nursing in health care and paving the way for the growth of the Nurse Practitioner and Advanced Nursing Practice roles.

Australian Primary Health Care Nurses Association nurse clinic programs- Karen Booth

Karen discussed the setting up of nurse clinics looking after Teens, wound care, Men's Health in Prisons & screening for chronic health conditions.

The programs have been evaluated to look at sustainability, effectiveness & efficiency, financial viability, feasibility and meeting local needs, evidence based, clinical expertise and organisational support.

Climate and Health Alliance- Fiona Armstrong- Executive Director

This was extremely interesting and enlightening presentation on how global warming is affecting our health and future needs.

www.ourclimate-ourhealth.org.au

Drug and Alcohol Nurses of Australasia-Adam Searby

Adam spoke about workforce mapping, exploring trends, qualifications, demographics, employment trends to increase recognition for nurses.

It was quite relevant for our organisation as we could find out exactly where our Audiometry Nurses are located and what the ongoing needs are in community health.

Research assistants were used to collect the data, so quite time consuming.

Results can be obtained through the government website- National Health workforce survey.

Our next meeting is at Waterloo in Sydney on 4th October 2019.

Full meeting minutes will be on the CoNNMO website soon.

connmo@connmo.org.au

Clinical advisors due this year 2019

Please consider updating your accreditation, we need and value your input

Biddle	Kirsten	Inverell
Cooper	Cathie	Scone
Wilkinson	Sharyn	Canberra
Rindo	Lucy	Tamworth
McDonald	Anne	Ballina
Messina	Linda	Croydon
Murray	Judy	Tweeds Head
Smith	Vanessa	Narellan
Darby	Susan	Newcastle
Lowry	Melinda	Newcastle

Please note for ease of printing and application the clinical advisors application form has been attached as a separate document with this edition of 'Ear 'Tis



Information for:

Clinical Advisors in Audiometry Nursing (CAAN) 2019

Please note that all delegates will be given information on the importance of the role of Clinical Advisors in Audiometry Nursing as advised on the conference timetable.

CAAN accreditation should be renewed every three years.

Criteria for accreditation as Clinical Advisor in Audiometry Nursing

- ◆ Evidence of Audiometry nursing qualification – **attach copy**.
- ◆ Preferable (not compulsory) to hold Certificate IV Workplace Training and Assessment or equivalent (current enrolment if recently applied) – **attach copy**.
- ◆ recent audiometry nursing experience equating to a minimum of 6 hours per week for a minimum of 3 years.
- ◆ Experience testing all age groups – where current job description does not include assessment of all age groups, please arrange to gain this experience with another accredited CAAN.
- ◆ Current financial member of ANAA Inc.
- ◆ Endorsed by ANAA Inc. if you are an audiologist.

CAAN applicants will be required to:

- ◆ Complete a case study which will be sent on receipt of your application.
- ◆ Attend 2 x 1 hour workshops at the ANAA Inc. Annual Conference, October 2019.
- ◆ Undertake assessment of competencies including masking and free field screening.
- ◆ be prepared to present your case study to conference delegates.

Please send CAAN application before the 1st September to: -

Kate Norton via email Kate.Norton@health.nsw.gov.au



**Audiometry Nurses Association of Australia Inc.
37th Annual Conference & AGM – Club Taree
30th, 31st Oct and 1st Nov 2019**

Day 1: Wednesday 30th Oct 2019

0830: Registration and Coffee

0900: Welcome to Country -Brogan Taylor

0915: Welcome & Official Opening- Tracy Hawes (ANAA Inc. President)

0930: Sound Scouts- Carolyn Mee (Founder-CEO)

1030: Hearing Conservation testing - Kathy Stoddart (Audiologist)

1100: Morning tea

1115: Speech issues in children 0-5 years – Amanda Waller (Speech Pathologist)

1200: Vestibular Health – Heather Scott- (Paediatric Physio)

1245: Lunch

1315: Central Auditory Processing Disorder-Australian Hearing- Louise Every

1415: Aboriginal Ear Health Update- Mark Mitchell (Hearing Health project officer)

1515: Afternoon Tea

1530: Just like you dolls -Jade Chislett

1600: Hearing Matters Australia - Christine Hunter (President-SHHH)

1630: Evaluations & Close

1800: Pre-Dinner drinks

1830: Conference Dinner

Day 2: Thursday 31st Oct 2019

0730: Clinical Supervisors Workshop- Kate Norton

0800: Registration & Coffee

0830: Clinical discussion Tracy Hawes/ Susan Darby

0900: Working in the Outback- Sue Hynes & Jan Wright (Audiometry Nurses)

1000: Morning Tea

1030: Mother, child and adult with cochlear implants

1100: Itinerant hearing teacher support /services - Robyn Herps

1200: Compassionate Self Care – Julie Williams- CNC Mental health

1300: Lunch

1330: Trade display presentation

1345: ANAA Inc. AGM

1530: Afternoon tea

1545: Workshops- Masking- Kathy Stoddart/ Video Otoscopy (Welch Allyn)

1700: Evaluations & Close and New Committee Handover

Day 3: Friday 1st Nov 2019

0730: Clinical Supervisors Workshop- Kate Norton

0800: Registration & Coffee

0830: Clinical Advisors case studies Kate Norton/ Susan Darby

0900: Immunisation - Patrick Cashman CNC Immunisation

1000: Genetic hearing loss - Bruce Hopper – Genetic Counsellor

1100: Morning tea

1115: Workshops –Masking – Kathy Stoddart/ Video Otoscopy (Welch Allyn)

1230: Otitis Media research update-OZMOZ conference Las Vegas-Sharron Hall (Scientist)

1330: Lunch

1300: QUOTA – Lyn Boyling- (President of Taree QUOTA club)

1330: Clinical advisors case studies.

1400: Afternoon Tea

1500: Evaluations & Close



ANAA Inc. would like to thank the following companies for their participation to make this another successful and informative Conference.

Dia-Tech, Otometrics, Australian Hearing, Phonak & to Welch Allyn for sponsorship of this event.

The Conference registration form has been attached to this edition of 'Ear 'Tis as a separate document for ease of downloading to print and complete

- **Program subject to change without notice.**





Accommodation Options

There are many options, here are just a few

Crescent Hotel, 4 Crescent Avenue, Taree - Phone: 02 6552 5244

<https://www.crescentmotel.com.au>

Riverview Motor Inn, 8 Crescent Avenue, Taree – Phone: 02 6552 2122

<http://www.thetareemotel.com.au/>

Mansfield on Manning, 95 Beauty Toad, Tinonee – Phone: 02 6553 1800

<http://mansfieldonthemanning.com>

Meridian Beachside Apartments, 32 Lewis Street, Old Bar – Phone: 02 6553 3441

(16kms from Taree)

<https://www.meridianresort.com.au>

Transport Options

Taree is a town on the Mid North Coast, New South Wales, Australia. Taree and nearby Cundletown were settled in 1831 by William Wynter. Since then Taree has grown to a population of almost 26,000, and is the centre of a significant agricultural district. It is 16 km from the Tasman Sea coast, and 317 km north of Sydney. Taree can be reached by train via the North Coast Railway, and by the Pacific Highway. Taree railway station is on the North Coast line of the NSW TrainLink network. It is serviced by six NSW TrainLink trains daily: three heading to Sydney, another three heading North to Grafton, Casino or Brisbane. Taree is within the local government area of Mid-Coast Council, the state electorate of Myall Lakes and the Federal electorate of Lyne.

Getting here		
NSW Trainlink	https://transportnsw.info/regional	131 500
Australia Wide Coaches	https://www.austwidecoaches.com.au/	02 6362 7963
Aeropelican	https://flypelican.com.au/	02 4965 0111
Private Car	3 hours from Hornsby via MI	

Deadly Ears is recruiting!

Please see below advertisement for the recruitment of a Clinical Nurse to the Deadly Ears Primary Health Team. Please forward this through any contacts and networks that you see as appropriate.

Applications close on the 27th of May.

https://smartjobs.qld.gov.au/jobtools/b_fileupload.proc_download?in_file_id=22199880&in_servicecode=CUSTOM_SEARCH&in_organid=14904&in_sessionid=0&in_hash_key=E8689C1E064994EE8C617BF3DC525B6E

Thanks,

Bradley Cox

Primary Health Team Leader

Deadly Ears Program

Children's Health Queensland Hospital and Health Service
Level 9, 199 Grey Street
South Brisbane 4001

T: 07 3310 7783

E: bradley.cox@health.qld.gov.au

W: www.childrens.health.qld.gov.au/deadlyears



Children's Health Queensland

Respect | Integrity | Care | Imagination

Children's Health Queensland acknowledges the Traditional Custodians of the land, and pays respect to Elders past, present and future.

Interesting links and articles

The high prevalence of ear disease among Aboriginal and Torres Strait Islanders is linked with poor education and social problems, writes Professor Cath McMahon, who is dedicated to transforming hearing health in indigenous communities.

You can read more of the article from <http://hearinghub.edu.au/>

Professor Jim Patrick AO awarded an Honorary Doctorate

17 April, 2019

Macquarie University are proud to award Professor Jim Patrick AO an Honorary Doctorate for his service to the field of hearing and cochlear implants.

He is recognised as a world authority on cochlear implants and is one of the original engineers who pioneered the hearing device. His accolades include having the Jim Patrick Audiology Centre named in his honour at the Royal Institute for Deaf and Blind Children and inclusion in the Australian Institution of Engineers Top 100 Most Influential Engineers.



Article taken from Australian Hearing Hub

'Great food, but please do something about the noise' – the battle for quieter restaurants

Article taken courtesy from Oneinsix deafness forum

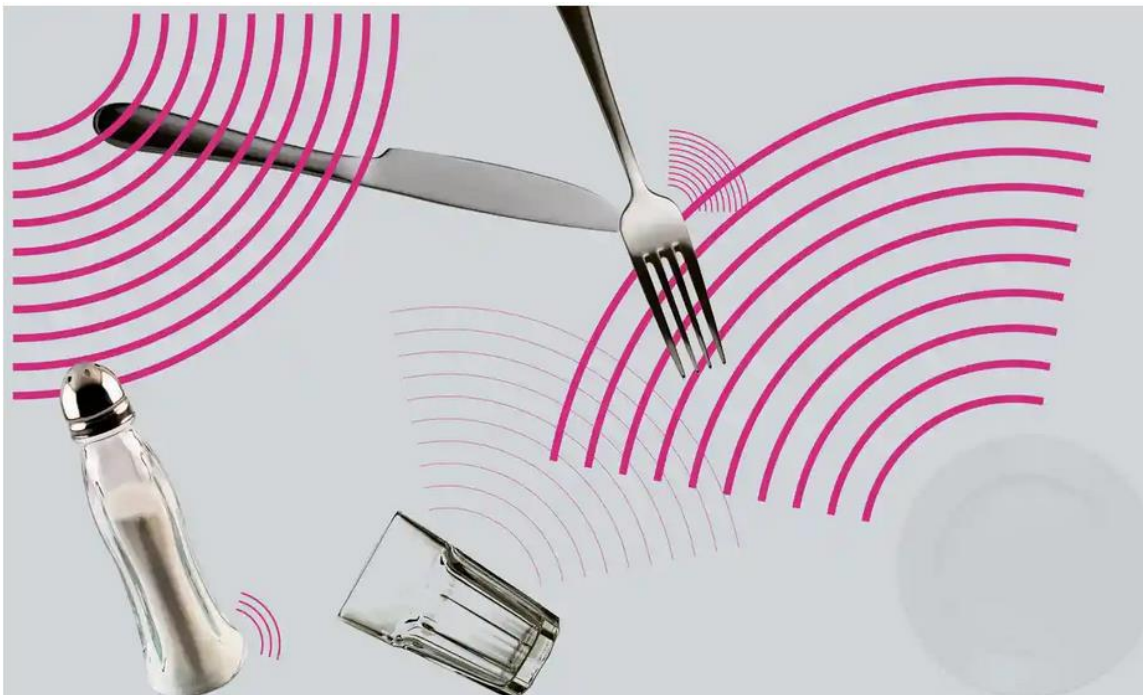
Background noise in some eateries can reach the equivalent of a lawnmower or a motorbike. It's enough to put you off your dinner.

Gregory Scott's friends have asked him to find a quiet restaurant for dinner. Until recently this would have been a challenge, given that Scott lives in New York. "It's known to be one of the noisiest cities in the world," he says. Now he feels confident that, although he has never been, a small borscht joint called Ukrainian East Village will fit the bill.

That's because last year Scott set up an app called Sound print – the "Yelp for noise". It allows users to search for restaurants conducive to conversation – and, in turn, asks them to record decibel (dB) levels (the app comes with a meter) in other establishments. It has had more than 60,000 submissions, with more than 500 coming from the UK. Ukrainian East Village has been measured four times by app users and averaged 74dB, a "moderate" level that Scott says is great for conversation.

As someone with permanent hearing loss, he has a particular interest in such places.

The dB levels at many restaurants far exceed this pleasant thrum. The average sound level recorded in UK restaurants on Sound print, taken between 6pm and 9pm, is 79dB. "I'm sure many of those are above 80, and I'm sure some are above 85," says Scott. "It's really loud for conversation." In 2017, the UK charity Action on Hearing Loss (AoHL) found that noise levels in some well-known chains, such as Patisserie Valerie, topped 90dB on busy evenings. That's the equivalent of munching your croissant next to a lawnmower or motorbike.



The knock-on effects are clear. According to AoHL, 79% of people, both those with and without hearing loss, had experienced difficulty holding a conversation while eating out. Eight out of 10 reported having left a restaurant, cafe or pub early because of the noise. Ninety-one per cent said they would not return to venues where noise levels were too high, and 43% have opted for a takeaway instead of going out and decibel-dodging.

Anecdotally, at least, it hasn't always been this way. "It certainly seems restaurants have got louder," says Roger Wicks, director of policy and campaigns at AoHL. "That's what people are saying to us." So why are they so loud? "The restaurant trade is 'a young person's game'," says the Observer's restaurant critic, Jay Rayner. Although a "mere 52" himself and with no hearing problems, he knows first-hand the impact they can have. "My dear late mother, Claire, loved restaurants, but eventually closed down on them because she couldn't hear conversation in them – it was massively distressing for her."

Thanks to the Lombard effect, which means that noise breeds noise, even limited background music can lead to shouted exchanges, as speakers raise their voices in order to be heard. Modern restaurant designers aren't helping. As Rayner puts it, they love "bare brick, filament light bulbs, and vaulted ceilings" rather than soft, sound-deadening surfaces.

Some commentators, including the FT food writer Alexander Gilmour, think ageism plays a part. "There is a theory that young people are cooler than older people, they eat faster, drink the bar and dig the music. And they yell," he wrote last year. "Why bother creating spaces in which people – beyond the drunken 20-year-old – can thrive?"

As a thirty-something with tinnitus and some associated hearing loss who, even as a twentysomething, was sometimes unable to hear in "younger" establishments, I find this take a little narrow. Who hasn't, 18 or 80, hearing problems or not, occasionally nodded along and pretended to hear? But, of course, "most people with hearing loss are older," as Wicks says. "Eleven million in the UK and increasing every year. By 2035 that will reach about 13 million." It will, according to the professor of auditory neuroscience Jennifer Bizley, increasingly become a problem, with younger generations "pretty doomed" because they are exposed to so much noise.

So what can be done to bring volume levels down? Some restaurants have called in acoustic experts. Stefano Meloni is the senior manager at Tozi in Victoria, central London, where the high ceilings and bare walls provoked Rayner to write in a review: "If you are one of those with hearing issues related to hard surfaces ... Tozi will not make you happy." It was a problem the restaurant was already aware of, Meloni says, and it has since had sound-dampening panels installed on the ceiling. "It improved a lot," he says.

This isn't something every restaurant will be able to afford. "To get a quieter restaurant may well cost you," Wicks acknowledges. However, there are cheaper fixes. Restaurateurs "could provide quiet areas, certainly away from the kitchen and speakers. And whenever they can, introduce soft furnishings, something that absorbs the sound."

Yet few restaurants seem to take noise seriously – despite the fact that noisy venues are more likely to have a lasting effect on their staff than on their patrons. "Some restaurants and chains have said the right thing," says Wicks, "but nobody's really engaged."

To make restaurateurs appreciate the value of bringing sound levels down, the perception that noise equals "everybody's having fun" needs challenging. "Noise doesn't create the atmosphere," Meloni insists. "The atmosphere is created by the waiters and the managers."

Ben Hancock is a director at Oscar Acoustics, which installs acoustic finishes. As he explains, noise reduction doesn't have to mean killing the vibe – recently, working with Ottolenghi, the brief was to absorb enough sound to make speech easy, but also “keep an atmospheric buzz”. The level of sound absorption depends on the thickness of Hancock's sprayed-on acoustic finish – what they went for “fine-tuned the acoustic so it was right on the edge”.

And what can diners do? For a start, we can complain when we find ourselves somewhere unacceptably noisy. If you find this embarrassing, take heart. I was emboldened recently while at a burger restaurant to ask for the music to be turned down. Granted it was only changed a smidge, but we were offered a quieter table – and I suspect the request had something to do with the free wine that was later brought over. More and more, people are using social media to feedback, too. TripAdvisor – where the now-quieter Tozi was once described as a “noise bomb” – and Open Table have become powerful weapons in diners' toolkits.

This is also where data from apps such as Scott's or the AoHL-recommended Decibel X comes in. “You're starting to hear a lot more from the users of the app that they feel empowered to let the venue managers know: ‘The food is great but please do something about the noise,’” says Scott. The more data on just how loud these places are, the easier it will be to make restaurants prick up their ears.

All this noise can't be good for business, particularly given that one recent study found that loud noise compromises taste. Many restaurateurs probably don't realise how bad things have got. For city-dwellers especially, life in general is extremely loud. I measured 104dB on the London underground the other night – that's louder than a jackhammer. “Lots of people will say, ‘The restaurant wasn't that loud,’” says Scott. “But go to a quiet place and acclimate yourself and you'll realise how loud a lot of them are.”

Finding quieter spots, even if you have tiptop hearing, might just make meals out more enjoyable. As Rayner says: “One of the joys of restaurants is that they're a brilliant place for disclosure. If you're going, ‘Sorry, what? You did what? To whom?’ you're going to miss out on the juicy details. What's the fun?”

Accesshub is now the central source of information on the range of communications options available to people who are deaf, hard of hearing and/or have a speech impairment, including the National Relay Service.

By subscribing to **Accesshub News and Alerts**, you will be informed about:

- Technical issues or outages affecting the NRS
- Changes to NRS services, such as technology upgrades
- The latest Accesshub information, such as new videos or instruction sheets
- New communication options to help people who are deaf, hard of hearing and/or have a speech impairment

You can sign up for **Accesshub News and Alerts** at [communications.gov.au/accesshub](https://www.communications.gov.au/accesshub)

<https://www.communications.gov.au/what-we-do/phone/services-people-disability/accesshub>



Special Offer

Timpani handheld tympanometer

Timpani is a handheld tympanometer offering automatic tympanometry and ipsilateral acoustic reflex testing, as well as screening pure tone audiometry. The speed of the pressure pump system, combined with the capacitive touchscreen display that grants an unprecedented intuitive interface, allow Timpani to complete fast and accurate exams of the patient's middle ear functions. A dedicated output for headphones and patient response switch also make Timpani the only handheld combined unit capable of performing impedance and audiometry examinations.

- Automatic tympanometry
- Ipsilateral reflex test (optional)
- Pure tone audiometry in AC (optional)
- Portable and lightweight
- Capacitive touch screen display
- Docking station to speedup download of data (optional)
- Bluetooth® thermal printer (optional)



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May and receive
a **BONUS** high
frequency 1 kHz
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To order, call **1800 809 321** or email equipesales@phonak.com



Once you have familiarised yourself with the detailed Screening Procedures document* please use the following Checklist at the start of each new test.

Remember all testing should be conducted in a **quiet room** and children should be well rested and have been to the bathroom. Do not allow children to eat or drink during the test.

IMPORTANT: Please ensure you are using decent quality **adult** headphones. (Eg Sennheiser HD 100 or HD 300)

- ✓ Wipe/clean the screen with antibacterial wipes
- ✓ Wipe the headphones or change the disposable headphone protectors
- ✓ **Reset the volume to maximum** or to the maximum comfortable listening level
(NB If the headphones have a volume control on the lead please ensure children **do not** inadvertently adjust the volume)
- ✓ Ensure the headphones are plugged in correctly
- ✓ Enter a contact email to enable Team Sound Scouts to provide further feedback regarding the results (only when necessary).
- ✓ Listen to the headphone check **carefully** to ensure the volume is similar in both ears
- ✓ The preliminary **adult test** is important so please complete it to the best of your ability. We recommend doing this each time to show the children how to interact with the game.
- ✓ Watch the child play. Ensure the child is engaged with the test. If the child is hesitant you can listen for the target noises and prompt them by tapping the screen (once or twice).
- ✓ To stop a test due to sustained loud noise, close the App and reopen using the method appropriate to the device.
- ✓ Don't show the child the results in the event they have failed.

*Available at <https://www.soundscouts.com/school-resources/>

For additional information and testing resources please visit our website:

www.soundscouts.com.au

If you have any enquiries please contact us on: team@soundscouts.com.au

In partnership with:



Sound Scouts HQ Pty Ltd
Ph: 61 2 9460 6768



We're happy to advise that Sound Scouts is now **FREE** for all children aged 4 - 17 years thanks to support from the Federal Government. (For a limited time adults can also test for free).

Sound Scouts is a hearing test incorporated into a mobile game. It checks for three different types of hearing issues:

1. Conductive hearing loss (middle ear issues)
2. Sensorineural hearing loss (inner ear issues)
3. Difficulties listening in noise (potentially caused by processing issues, attention or language issues including ESL)

Sound Scouts is an evidence based application developed in collaboration with the National Acoustic Laboratories and is supported by Australian Hearing.



To access the free sessions:

1. Download the Sound Scouts App on a mobile device from the App Store or Google Play - tablets/iPads are preferable when testing children however a phone can be used. Links are available at www.soundscouts.com.au (NB: If you have previously used the App you will need to update it to access the free sessions).
2. Use a good quality set of **ADULT** headphones eg. Sennheiser HD 100 or HD 300 – Please **DO NOT** use with children's headphones or poor quality headphones as they may impact the results. Headphones must be used.
3. Any responsible adult - ideally with good hearing - can set up and oversee testing.
4. Ensure the test is carried out in a quiet room.
5. WiFi is required to process the results and receive an immediate report. The report will also be sent to the email provided.

For additional information and testing resources please visit our website:

www.soundscouts.com.au

If you have any enquiries please contact us on: team@soundscouts.com.au

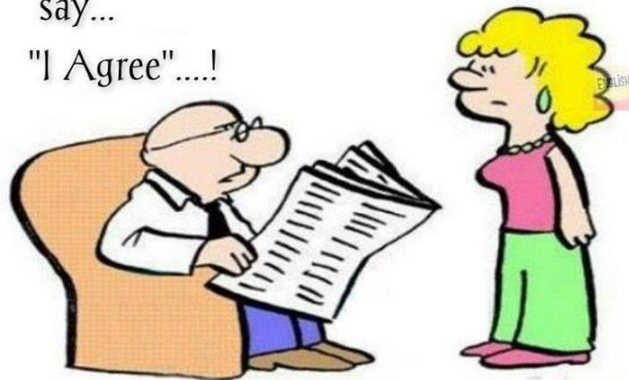
In partnership with:



Sound Scouts HQ Pty Ltd
Ph: 61 2 9460 6768

What did ya say?

Listening to wife is like reading
the terms & conditions of website.
you understand nothing, still you
say...
"I Agree".....!



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**"It's a special hearing aid. It filters out
criticism and amplifies compliments."**



ANAA Inc. Committee 2018/19

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