

'EAR 'TIS



Newsletter for Audiometry Nurses
Welcome to the issue of the ANAA Inc. newsletter
2020 Volume Issue

Autumn 2021 Issue 1



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President's Report



March 2021

Dear Members,

The year is rolling along fast & it's great to see restrictions easing with COVID-19 under control. Personally I still find it hard to make plans with the fear of being disappointed if things change in a hurry. After having a "milestone" birthday last week I was finally able to catch up with my Melbourne family, after a last minute change of plans at Xmas with borders closing stopping us from doing so.

I am pleased to say that we will be holding an Audiometry Conference this year over 2 days in Tamworth at the Pavillion Function Centre on 21st - 22nd October. This will be held with whatever COVID safe practices are required at the time. The venue will give us clear instructions prior to the event. More information regarding the program will go out to members as soon as we secure presenters. Due to difficulty with face to face presentations, we may have more case studies from members & workshop sessions. Of course the AGM & elections of the Committee positions are essential at this meeting.

If anyone is thinking of joining the Committee please let me know as several of us are due to change after being in positions for 4 years. Our organisation needs you!

I hope everyone has been able to celebrate Hearing Awareness day/week and provide hearing health education to the community? If anyone has any photos of anything they have done locally please send the information to our Editor to share with all members in the next Newsletter.

We are excited to be able to offer our yearly scholarship to Fiona Murphy from Moree who is undertaking the audiometry course this year. Congratulations to all our nurses that have completed the course recently and those that are completing it soon.

I am still working on our audiometry position statement to be sent to the Hearing Health Alliance & Minister Coulton to update the government & promote our audiometry nurses' role in the community. It is important to make sure that we are included in the workforce of the future & given support for succession planning. Like the Clinical Practice Standards, this is almost complete and will go on the website soon.

Thank you to Kate for taking over our financial management as Treasurer. Kate has been like a ruthless detective sorting out discrepancies that even the auditor hadn't found! Our Public officer and name of our organisation was incorrect with the ATO, but is now being updated.

If anyone is having trouble accessing the members section of the website please let Kate know as she will most likely be able to solve this.

Keep an eye out for additions like upcoming Webinars and links on the website as changes are regularly made. It is a great way to collect CPD hours with links to Rural Health Pro & other hearing health organisations which provide webinars.

Stay tuned for more information on the Conference soon.

Take care

Tracy

Anyone interested in helping to re-write
the Audiometry Nursing course?

Expressions of Interest to Kate Norton please

Phone: 02 6641 8702 Fax: 02 6641 8703

Email: kate.norton@health.nsw.gov.au



Tree changers– Bathurst Area

Expressions of Interest

Good morning Team.

I hope this email finds you all safe and well and avoiding the rising waters across our State.

I will be taking Long Service Leave until the end of the year and the Bathurst Community Health are committed in backfilling my Audiometry position which is two days/ week. The Chronic Care Position is two days/ week in Cardio Pulmonary Rehabilitation.

Would it be possible to put out an email out to our members, someone may be interested in a Tree Change to Bathurst. I am happy to discuss with anyone who is interested or they can contact the [Manager for Community Health -Elizabeth Jacobs](#) who is acting until the beginning of May when Melissa Belfanti will return following her knee replacement surgery.

My last day is Thursday the 6th May. I only see Children up until the age of eight years, a policy that has been in place since I began in June 2005.

Due to the number of Audiology Services in Bathurst that see Adults. I do hope someone will be tempted to enquire.

Thank you once again in anticipation of your support.

Catherine Horsburgh

Cardiopulmonary Rehabilitation Nurse

Mobile 0409 790 853

Audiometry Nurse 02 63305962

Phone Bathurst Community Health 02 63305677

Copy and Paste into Browser for info on the Beautiful Bathurst Area.

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





When it comes to hearing tests, once is not enough.

The newborn hearing test is important, but hearing loss can occur at any time. For children aged 4 years and older Sound Scouts is a FREE clinically proven app that enables hearing to be checked in any quiet place, efficiently and reliably. The app tests for hearing and auditory processing issues. Sound Scouts is also suitable as a hearing check for adults.

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

Education Fund

Reminder to all that the of

ANAA's Education fund is available to members who require financial assistance to attend or participate in learning opportunities.

Information on the website or give Kate Norton or Tracy Hawes a call.



[HOME](#)

[ABOUT](#)



AUDIOHEAD

Welcome to audio head where this edition you get to meet some of the committee and put faces to the Names. We've started the ball rolling here.

But we'd like to meet more of you all out there and put faces to names so.....

Please take 5 minutes of your day and send us a blub about yourselves OR your area and your latest glamour shot/s!



Tracy Hawes- President ANAA Inc.

I work in Western Sydney LHD as a full time Audiometry Nurse, responsible for 3 clinics as the sole audiometry nurse for at least the last 10 years. I have worked in audiometry since 2001.

I did my audiometry training at Meadowbank TAFE in 2001 as a Statement of Attainment in Community Audiometry Nursing.

I have been on the ANAA Inc. Committee in several positions over many years, starting as the Editor and then after having a break, elected in as President 4 years ago. I have represented our organisation in Parliament at the Hearing Health & Wellbeing Inquiry in 2017. This allowed me to network with Hearing Health Stakeholders throughout Australia. I am pleased to say that I was invited to attend the Hearing Health Stakeholder Forum in 2019 to develop the Roadmap for Hearing Health.

It was important to me to help lift the Profile of Audiometry Nurses in the hearing health workforce. Audiometry Nurses have been recognised as an integral part of the workforce in this document.

I was also invited to sit on an Expert Advisory Committee looking into research to secure better outcomes for hearing health in Aboriginal children. This research was to be undertaken by Macquarie University.

Outside of work I am lucky to live in a beautiful community in paradise! My social calendar is always full, although slightly set back during COVID! Going forward I'll be visiting my gorgeous grandson & family interstate and hopefully my daughter in Denmark as soon as allowed.

I still enjoy my work in the hearing clinic and retirement is not on the agenda yet!



My Name is Susan Darby, I am Secretary of the ANAA Inc. I have held this role since 2020. Prior to that I was a committee member.

I work in Newcastle as the Audiometry CNS2, 3 days per week. We offer Audiometry through Child and Family Health in Newcastle.

I am also a Clinical Advisor for this area. Newcastle runs clinic Monday to Friday across 4 centres with 6 Audiometry nurses.



Kate Norton

I am Kate Norton from the North Coast of NSW. As of early 2020 I became a Clinical Nurse Consultant Grade 2 in Audiometry. I am in this role full time.

In the 10 years since being elected onto our committee I have taken on a number of roles, most recently Treasurer. I endeavour to do my best for all our association members and for the profession of Audiometry Nursing. I am happy to be contacted anytime.

Kirsty Biddle

I completed my RN training in Brisbane in 1987 & have worked at RPA, Sydney Hospital & Inverell District Hospital.

Then after 10 years away from Health I completed my Audiometry Nursing Graduate Certificate in 2008.

I commenced working at Inverell Community Health in 2010.

I love audiometry Nursing – no two days are the same & wow we get to play with kids all day.

I am a Clinical Supervisor & am hoping to having a student in the future.

I am looking forward to helping arrange the Annual Conference in Tamworth for later this year.



Sharyn Wilkinson

I completed my Audiometry Certificate in 2008 when Margi Baulch retired from her position in Leeton. Previously I had worked in the Riverina region's hospitals and in Community Health Centres in several roles

I then moved to Canberra 10 years ago and have pretty much been working solely in Audiometry for the last 7 years. As it has been personally the most varied, challenging and rewarding nursing role I have experienced so far.

In the spare moments I put together Eartis, which has also challenged and expanded my audiometry world further and even become enjoyable!



HEARING MATTERS AUSTRALIA - EXECUTIVE OFFICER

Position Vacant. Applications welcome.

Location - Room 600, Ground Floor, Australian Hearing Hub, Macquarie University, NSW
Hours - 30 hrs per fortnight as employee or contractor. The position may be split or shared.
Remuneration - \$40,000 pa including superannuation, sick leave and annual leave.
The Executive Officer is a paid position within a volunteer organisation.



Hearing Matters Australia (HMA) is dedicated to helping Australians with hearing loss whose primary method of communication is through speech. We provide information and support to people with hearing loss and their families, and we advocate on their behalf to all levels of government and the corporate sector. We are a voluntary, self-funded, not-for-profit organisation incorporated in New South Wales. An important aspect of HMA is the publishing of a membership magazine four times per year.

The Executive Officer will provide continuity and efficiency to Hearing Matters Australia. They will be required participate in and support activities of the organisation including advocacy, co-ordination of volunteers, communicating with members, and membership drives. An awareness of issues concerning the Deaf and Hard of Hearing (D/HoH) community, insight into living with hearing loss, and ability to communicate effectively with D/HoH people is an essential criterion for this role.

The Executive Officer is expected to be on site at the Australian Hearing Hub at least two days per week as it is important for HMA to maintain an active presence within the Hearing Hub community and for visiting members. While the Executive Officer will work out of the HMA office for the majority of hours, some remote work arrangements may also be negotiated.

The Executive Officer will need to work independently some of the time, whilst maintaining a high level of communication and transparency via online communications, and document and task sharing. Familiarity with online document sharing platforms will be an advantage.

They will be proactive, enthusiastic about making changes, and demonstrate initiative to improve HMA's operations and membership interactions. Recruiting and driving membership will be an essential part of the role. Experience working in membership-based organisations would be an advantage.

In addition, the Executive Officer will need to be familiar with or willing to learn MYOB, Microsoft Office, social media and website software. The HMA office currently has both Apple and Windows 10 applications and training will be available in these systems if required for the right candidate.

The Executive Officer will:

1. Be the primary point of contact for HMA members, public enquiries and business contacts, and primary responder to any matters raised.
2. Work with the HMA Board, HMA members and prospective members and volunteers to support their activities on behalf of HMA
3. Advocate for and support D/deaf and hard of hearing people when the opportunity arises,
4. Manage the HMA website and social media, including updating and monitoring news and information pages, member communications, membership and payment systems.
5. Manage membership drives and renewals, including responding to membership enquiries
6. Administer the association including being responsible for banking, office management, account payments, and liaison with regulatory organisations such as ATO and Fair Trading NSW as required.
7. Work with and support the Board to develop and actualise a vision for HMA as a leading self-help organization.

HMA is committed to providing an inclusive and diverse workplace where all employees and volunteers are valued. We encourage applications from people from diverse backgrounds.

For further information or to apply, contact HMA President, Christine Hunter at christine.hunter@hearingmattersaustralia.org.
Applications should include a covering letter and CV.
Applications close on 28 February 2021.



**HEARING MATTERS
AUSTRALIA**
Support from real life experience

P | (02) 9878 6089 E | admin@hearingmattersaustralia.org
A | Ground Floor, Suite 600, The Australian Hearing Hub
16 University Ave, Macquarie University NSW 2109
www.hearingmattersaustralia.org

New recipe for antibiotic could prevent deafness



A new method of purifying gentamicin, a widely used antibiotic, reduces the risk that it will cause deafness, according to a Stanford Medicine-led study.

Science Daily

December 2020 Stanford Medicine

Gentamicin is used in U.S. hospitals to treat a variety of bacterial infections, including infections in newborns and in other susceptible patients, such as those with cystic fibrosis. It's a popular drug in developing countries because it is highly effective and inexpensive. Yet researchers estimate that up to 20% of patients who are treated with it experience some degree of irreversible hearing loss.

Now, researchers have found a relatively inexpensive way to reformulate the drug, which belongs to a class of antibiotics called aminoglycosides, to be safer. Their findings were published Dec. 7 in the *Proceedings of the National Academy of Sciences*.

"When a drug causes hearing loss, it is devastating, and it's especially disturbing when it happens to a young child, as they rely on hearing to acquire speech," said Alan Cheng, MD, a professor of otolaryngology at the Stanford School of Medicine. He shares senior authorship of the study with Anthony Ricci, PhD, also a professor of otolaryngology at Stanford and the Edward C. and Amy H. Sewall Professor II in the School of Medicine. Cheng is the Edward C. and Amy H. Sewall Professor IV in the School of Medicine. Postdoctoral scholar Mary O'Sullivan, PhD, is the lead author.

"We've developed a simple method of reformulating the drug that should be put to use as soon as possible," Ricci said. The researchers will be writing to the Food and Drug Administration to recommend changes to the organization's requirements for how drug companies make gentamicin.

"Currently, the FDA's instructions for how to make aminoglycosides are making people go deaf," Ricci said.



A dangerous recipe

Aminoglycosides have been in use since the 1950s. The drugs don't need to be refrigerated, which keeps the costs of storing them low. Despite new antibiotics, their use remains commonplace as they are cheap and potent.

"These drugs are used because they save a lot of lives," Ricci said. "We've stopped paying attention to their toxic side effects because living with hearing loss is better than dying."



The gentamicin used in hospitals today is a mixture of five different subtypes of the antibiotic grown together in the same mixture. The mixture also includes as much as 10% impurities. Using methods such as high-performance liquid chromatography and nuclear magnetic resonance imaging, the researchers tried to figure out how to chemically separate each of the subtypes so they could be tested separately. Once the researchers established methods of separating the different parts of the mixture, they tested these various subtypes of gentamicin individually on inner-ear tissues from animals. They identified the least toxic subtype as C2b, and the most toxic as sisomicin. Both C2b and sisomicin showed the same highly effective antimicrobial properties comparable to the mixture as a whole. The researchers also found that by removing impurities from the mixture, toxicity to the ear tissue was reduced.

"What this study shows is that the formulation that is currently in a hospital bottle of gentamicin is not optimized," Ricci said. The ingredients are required by both federal and international law; one of those is sisomicin, the subtype found to be most toxic to the ear tissue.

"If we just use the subtype that's less toxic or change the formulation of this bottle, we can make the drug much less ototoxic," Ricci said, referring to harm to the ear. Given that the subtypes are all approved by the Food and Drug Administration, new formulations don't necessarily need to be retested in humans and could get to patients fast.

The researchers are also working on plans to create a new aminoglycoside that could further reduce the risk of hearing loss, Ricci said. They've discovered that the inner-ear toxicity of the various subtypes highly correlates with the way they bind to the ion channels that open to the inner ear.

"This discovery lays the groundwork for the discovery of safer antibiotic alternatives and future drug development," he said.





Design Concept

Inspired by a patient's story, Hearing Birdsong unites user-experience and technology to encourage early diagnosis and raise awareness of hearing loss.

Working alongside the Dyson School of Engineering and Imperial College, we have developed a prototype of a more humane hearing loss screen that uses modulated bird-calls within an ambient soundscape replicating certain frequency bands of a traditional test, instead of pure tones and white noise.

Following a successful grant application to the World Health Organisation, a 3D audio, virtual experience of Hearing Birdsong can now be previewed by playing the video below.

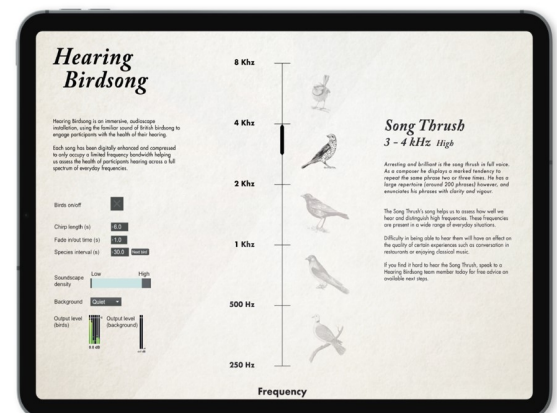


The Experience

Upon entering a Hearing Birdsong installation, participants are immersed in a richly detailed forest soundscape emitted from distinctive yellow bird boxes. This backdrop changes throughout the day, blending rolling thunderstorms, wind-rustled trees and flowing streams into a dynamic yet calming audio-experience.

Entering into the Birdsong installation might transport one back to a nostalgic childhood memory. Maybe it will bring a moment of much-needed tranquillity during a hectic city day.

What's certain, is that each participant will experience something unique, powerful and memorable.



The Technology

Five familiar birds call out across the forest soundscape. Each has been digitally altered to occupy a narrow band of frequencies matching those examined during a traditional pure-tone test. Together, the birdsongs provide each participant with performance indicators across their entire hearing range.

Up to six speakers can be interconnected to form the audioscape installation. Each Birdbox speaker functions independently, with its own battery power supply, loudspeaker and digital receiver.

Each box is controlled via a fully bespoke software interface that will both educate participants on the topic, and gather helpful design insights for the project's development.

Meet the cast



Wren 4 - 8 kHz *Very High* The wren's song is cheerful, clear and ebullient. A schoolboy striving to complete his homework is said to have complained of "that shattering wren". For the diminutive size of the bird it is one of the loudest of bird songs, and is also one of the highest-pitched ranging from about one full octave below to one full octave above the highest note on the piano.

Song Thrush 3 - 4 kHz *High* Arresting and brilliant is the song thrush in full voice. As a composer he displays a marked tendency to repeat the same phrase two or three times. He has a large repertoire (around 200 phrases) however, and enunciates his phrases with clarity and vigour.

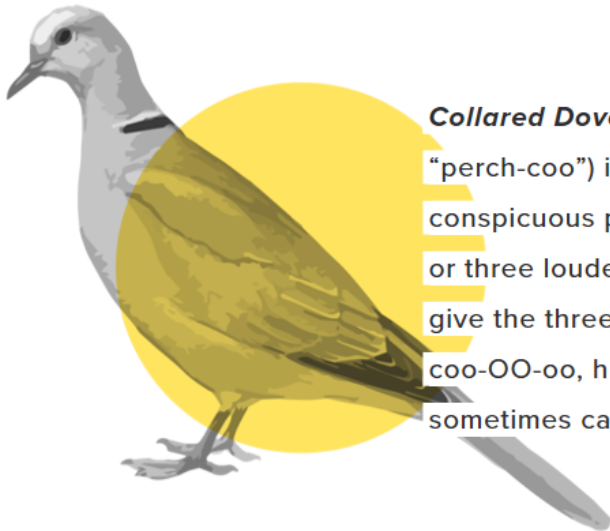




Blackbird 1 - 2 kHz Medium The blackbird has been called the Beethoven among birds. The Blackbird sings long, beautifully shaped phrases, well-defined in time and tone. The effect is mellow, flute-like and musical.



Cuckoo 350 - 750 Hz Medium Low Males give their distinctive song to defend territories and attract mates. Females advertise with a softer version of the song. Both sexes give a lower-pitched, slower version when searching for nest sites and building the nest.



Collared Dove 250 - 350 Hz Low The song (or "perch-coo") is given mainly by unmated males from a conspicuous perch. It's a soft coo-oo followed by two or three louder coos. You can often hear paired males give the three-parted "nest call" while nest-building: a coo-OO-oo, highest in the middle. Females sometimes call ohr ohr while sitting on the nest.

Many thanks to my colleague Anne-Marie Crowe for sharing Birdsong after learning of it on the who heard about

2021 Population Hearing Healthcare Conference (Webinar)

<https://www.hearingbirdsong.com/>

Education and Webinars

Please let us know about education days happening or that have happened in your local area

Encouraging all to join RURAL HEALTH PRO and
then select to join the

THE EAR AND HEARING HEALTH GROUP

You will then receive posts similar to these.



Samantha Rattos posted in Ear & Hearing Health group

**** FREE WORKSHOP ****

Otitis Media Guidelines Workshop

This is a fantastic opportunity to get training on the implementation of the 2020 Otitis Media Guidelines and OM App

Topics:

- How to navigate the OM App
- Prevention, diagnosis, management and referral pathways for otitis media
- Hands on training stations on...

an hour ago in Rural Health Pro •



Samantha Rattos posted in Ear & Hearing Health group

**** FREE RESOURCE ****

Otitis Media Guidelines for Aboriginal and Torres Strait Islander Children

The Menzies School of Health Research have launched the new 2020 Otitis Media Guidelines for Aboriginal and Torres Strait Islander Children. You can view the Otitis Media Guidelines via the website and mobile app, which...

08/03/2021 12:37 pm in Rural Health Pro •



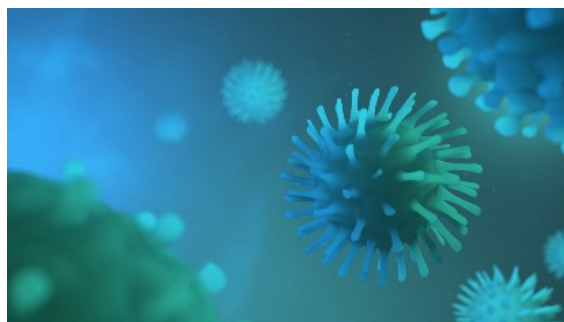
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<https://www.healthed.com.au/podcasts/womens-and-childrens-health-update-ear-infections-and-hearing/>

PLUM and HATS hearing assessment tools

The most common age for hearing aid fitting for Aboriginal and Torres Strait Islander children with chronic otitis media is much later than optimal. Hearing Australia and the National Acoustic Laboratories have worked with urban and remote Aboriginal primary health and early childhood services to co-design and validate a reliable way of identifying very young Aboriginal children needing to be prioritised for hearing assessment - the PLUM and HATS parent checklists. In this webinar you will learn why and how Hearing Australia and the National Acoustic Laboratories developed the tools, what they can do and how they can be used. This webinar is an initiative of the Ear Health Coordination Program, which is jointly coordinated in NSW and the ACT by NSW Rural Doctors Network and the Aboriginal Health & Medical Research Council.

Upcoming events and webinars



Getting your practice COVID-19 vaccine ready – Q&A

On Demand



Resilience, Recharge & Recovery

On Demand

Webinar Series

Each week the Australia Institute's tackles the big issues with Nobel laureates, current and former politicians, activists, academics, artists and other experts, with host Ebony Bennett.

[Subscribe to updates from the Australia Institute](#) to hear about future webinars.

Catch up on the latest video recordings of [previous webinars on our YouTube playlist](#) or in [our archive below](#) listen on our podcast [Follow The Money](#).

MARCH 2021

Thursday, March 18 2021

Noon AEDT

CLOSE THE GAP Report Launch 2021
Leadership & Legacy Through Crises: Keeping Our Mob Safe
HOSTED BY THE AUSTRALIA INSTITUTE
IN SUPPORT OF THE CLOSE THE GAP CAMPAIGN

JUNE OSCAR AO
CLOSE THE GAP CAMPAIGN
CO-CHAIR, ABORIGINAL
AND TORRES STRAIT
ISLANDER SOCIAL JUSTICE
COMMISSIONER

KARL BRISCOE
CLOSE THE GAP CO-CHAIR,
CEO OF NAATSINHP

DR JANINE MOHAMED
CEO,
LOWITJA INSTITUTE

SIR MICHAEL MARMOT
CHAIR,
WHO COMMISSION ON
SOCIAL DETERMINANTS
OF HEALTH

LOWITJA INSTITUTE
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Wednesday, February 24 2021

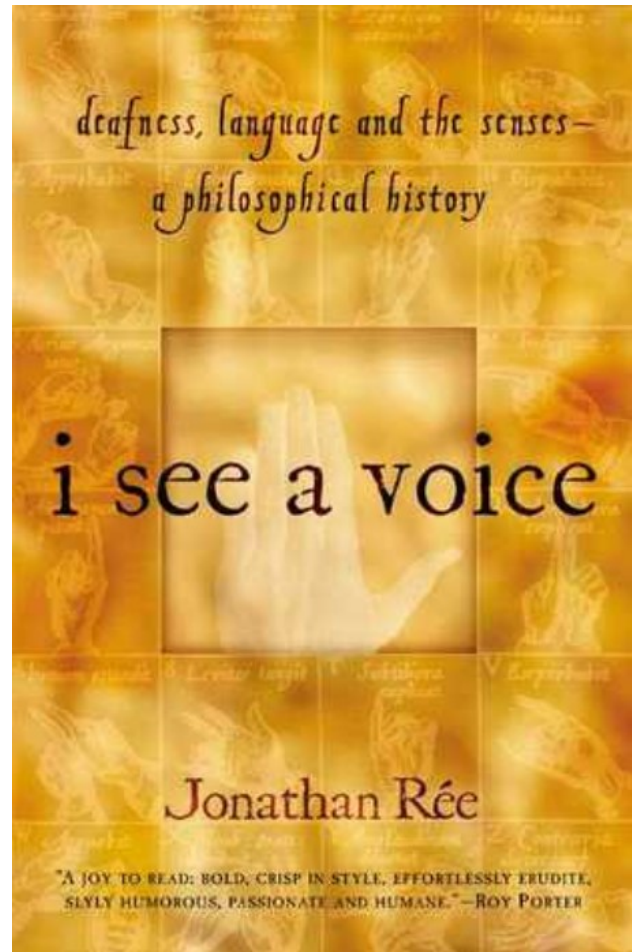
11AM AEDT

RESET
Restoring the Economy After
the Pandemic Recession
ROSS GARNAUT

THE AUSTRALIA INSTITUTE | WEBINAR SERIES
**Reset: Restoring Australia
After the Pandemic Recession**
PROFESSOR ROSS GARNAUT AC
IN CONVERSATION WITH DR. RICHARD DENNISS

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Research that matters.

Book Review



A ground-breaking study of deafness, by a philosopher who combines the scientific erudition of Oliver Sacks with the historical flair of Simon Schama.

There is nothing more personal than the human voice, traditionally considered the expression of the innermost self. But what of those who have no voice of their own and cannot hear the voices of others?

In this tour de force of historical narrative, Jonathan Rée tells the astonishing story of the deaf, from the sixteenth century to the present. Rée explores the great debates about deafness between those who believed the deaf should be made to speak and those who advocated non-oral communication. He traces the botched attempts to make language visible, through such exotic methods as picture writing, manual spellings, and vocal photography. And he charts the tortuous progress and final recognition of sign systems as natural languages in their own right.

I See a Voice escorts us on a vast and eventful intellectual journey, taking in voice machines and musical scales, shorthand and phonetics, Egyptian hieroglyphs, talking parrots, and silent films. A fascinating tale of goodwill subverted by bad science, *I See a Voice* is as learned and informative as it is delightful to read. - "Goodreads"



RIDBC, SCIC, the Renwick Centre and Taralye are now NextSense.

At NextSense, we believe that everyone should have the power to reach their potential. That's why we've been supporting people with hearing and vision loss for over 160 years.

Vision Services

→ Vision Assessments

→ Allied Health and therapy

→ Accessibility and Inclusion

→ School Services

Hearing Services

→ Cochlear Implant Services

→ Allied Health and therapy

→ Paediatric Audiology

→ School Services



The NextSense program

Our program promotes the development of listening, language, communication and social skills, in spoken language, Auslan or a combination of both to best meet your child's and your family's needs. For children who are deaf or hard of hearing, it's important to provide tailored opportunities for early learning. We give children quality support early in life to set the foundation for higher learning and critical life skills.

And we make sure they are happy and confident to interact with others, play, and explore the world.

Life is a succession of experiences which must be lived
to be understood

– Helen Keller



SRT • PTA • AuD • BC • AC • ART • RECD • ET • OAE • ABR • ENG • WRS • SNHL • dB • HL • SPL • APD • CI • Hz • WNL • NR

This is Your Brain on Audiology

Expert Multitaskers:
Presenting tones, masking, watching facial expressions, documenting results, reassuring parents, giving instructions and teaching externs simultaneously.

Translator
Translates audiology jargon and test results to Insurance Speak, Teacher Speak, Parent Speak, Spouse Speak, etc.

SPL-O-Meter
Instant alert to when environmental sounds may be too loud and cause risk of hearing loss.

Vocal Tuner
Expertly tunes voice to "loud and clear" mode based on listener, room acoustics and other variables for making oneself understood in all situations.

Cable Untangler Cortex:
Special brain power used to untangle massive amounts of cables in seconds flat without losing cool in front of patient.

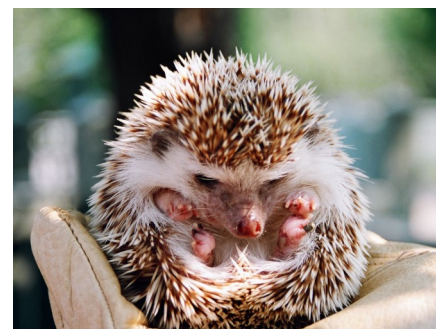
Happy Place
Loves helping people to hear and making lives better, one patient at a time.

AudiologyOnline

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COMMUNIQUE

CoNNMO Member Meeting – Friday 9 October 2020



Office of the Commonwealth Chief Nursing and Midwifery Officer

Frances Rice, Senior Nursing and Midwifery Advisor to the Commonwealth Chief Nurse and Midwifery Officer, Alison McMillan, provided an update. The plan to launch the nursing and midwifery workforce strategy has been delayed due to COVID-19. The CCNMO Office is still working on the document for consultation before the end of the year. A number of workforce strategies are under development. Department staff are working together to ensure strategies align with no duplication. The Department is also working on the development of the Primary Health Care 10 Year Plan, recently hosting a primary health care nursing and midwifery roundtable. The federal budget was announced this week. There were a number of positive initiatives for nursing and midwifery including: innovative models of primary care to address rural workforce shortages; Rural Health Multi-disciplinary Training Program infrastructure; programs for aged care particularly enhancing nursing skills and leadership capability; and the extension of telehealth items. CoNNMO member organisation, the Cancer Nurses Society of Australia, raised a question prior to the meeting in relation to the nursing and midwifery workforce survey completed annually when renewing registration. Frances informed members that the National Health Workforce Dataset (NHWDS) is collected by AHPRA and managed by the Department of Health. The 2019 data is available on the website in the form of fact sheets. The online data tool for the NHWDS is available at: <https://hwd.health.gov.au/>. Australia's Future Health Workforce series is available at: <https://www1.health.gov.au/internet/main/publishing.nsf/Content/australias-future-health-workforce-reports>.

Nursing and Midwifery Board of Australia

Tanya Vogt, NMBA Executive Officer and Petrina Halloran, NMBA Policy Advisor, provided an update. After 6 years, Professor Lynette Cusack's term as the Chair of the NMBA has recently ended. Tanya acknowledged Lynette's strong leadership and commitment to regulation. The official announcement for Lynette's replacement has not yet been made. The Graduate Campaign has commenced for graduates of nursing and midwifery programs. The NMBA, together with AHPRA, has opened the campaign a little earlier this year, so as to avoid the peak in November of over 30,000 applicants from all the health professions that AHPRA usually experiences. Information about the campaign is available on the NMBA website. Applications can be processed early, so CoNNMO members were asked to please encourage applicants to apply for registration at least 3 months prior to the date they are due to start their transition program. The new process for the Internationally Qualified Nurses and Midwives Outcome Based Assessment Program has started. There have been delays due to COVID-19 but it's hoped the testing centres will open before the end of the year or early next year at the latest. English Language Testing Centres are offering extra sessions to accommodate the backlog. The NMBA is working closely with the Office of Best Practice Regulation to develop a regulatory impact statement to progress designated registered nurse prescriber endorsement. The Board is currently reviewing the consultation feedback for the proposed revised *Recency of practice registration standard* and the *Nurse practitioner standards for practice*. An all Boards review of the English Language and CPD standards will be circulated for consultation early next year. The Department of Health has asked the Board to develop a database of nurses and midwives with an immunisation qualification to assist when COVID-19 vaccines become available next year. The Board is also updating their policy on offshore learning. Please visit the NMBA website for further information: www.nursingmidwiferyboard.gov.au.

Australian Nursing and Midwifery Federation

Annie Butler, ANMF Federal Secretary, provided an update. Although the International Year of the Nurse and Midwife has not progressed as planned due to COVID-19, it has placed nursing and midwifery at the forefront. Annie asked CoNNMO members to reflect on whether the recognition has assisted the professions to achieve our goals for 2020. Australia has done extremely well managing COVID-19 but our weakness is addressing the challenges of the residential aged care system. Approximately 70% of all deaths from COVID-19 have been in residential aged care. This is due to the lack of staffing, in particular the lack of skilled staffing, the lack of transparency, and the lack of funding for care. We need to consider how we can effect change when faced with ageism, care workforce issues and a female workforce that are not being listened to. Annie updated members on the Aged Care Royal Commission hearings. The final report will be released early next year. The ANMF has developed a joint statement with the AMA about the importance of qualified staffing in aged care. Annie asked CoNNMO members to consider developing a collective nursing and midwifery workforce statement on the key actions that need to be implemented in aged care. Please visit the ANMF website for further information on the national aged care campaign: www.anmf.org.au.



Australian Digital Health Agency

Angela Ryan, ADHA Chief Clinical Information Officer and Lee Woods, ADHA Digital Health Officer, provided an update. Angela and Lee provided a brief overview of the progress of the My Health Record (MyHR) since the launch over 18 months ago. There has been a substantial increase in the uptake and use since the beginning of the pandemic. People have been taking the opportunity to opt back in or register for the MyHR. There are over 23 million records, spread across jurisdictions, with a large volume of data going into each record. There has been an increase in clinical documents, medicines, pathology and diagnostics. Significant information regarding immunisations has been added. The top three documents are health summaries, notes and advance care directives. There have been changes to progress electronic prescribing under the COVID-19 Health Plan. Electronic prescriptions are not mandatory but are now available using tokens and/or an active script list. The National Digital Health Workforce and Education Roadmap is complete and the ADHA are about to start work on a detailed action plan. If CoNNMO members want to be part of the consultation for the Roadmap Capability Action Plan (CAP), please email: workforce@digitalhealth.gov.au. The National Nursing and Midwifery Digital Health Capability Framework will be launched at the end of October. Please visit the ADHA website for further information: www.digitalhealth.gov.au.

Australian Nursing and Midwifery Accreditation Council

Margaret Gatling, ANMAC Director of Accreditation Services, provided an update. ANMAC has 109 education providers delivering 190 NMBA approved programs. Despite COVID-19, it has been business as usual for ANMAC. The team has been undertaking virtual site visits. Education providers have been permitted to make minor changes to be able to deliver their programs. ANMAC is currently finalising the *Midwife Accreditation Standards* and have commenced reviewing the *Re-entry to the register standards for enrolled nurses*. The *Re-entry to the register standards for registered nurses* were released earlier in the year. Please visit the ANMAC website for further information: www.anmac.org.au/.

Impacts of COVID-19 on nursing and midwifery workforce and migration

Professor Jim Buchan, WHO Collaborating Centre and Advisor to the ICN, WHO and the Scottish Government provided a presentation on how COVID-19 has impacted the nursing and midwifery workforce, with a specific focus on international supply, policy responses and possible future directions. Jim provided a report to ICN in July on COVID-19 and the international supply of nurses. The report is available at: https://www.icn.ch/system/files/documents/2020-07/COVID19_internationalsupplyofnurses_Report_FINAL.pdf.

Professor Buchan's presentation is available on the CoNNMO website.

Council report by the CoNNMO Chair and Secretariat is available on the CoNNMO website www.connmo.org.au

Member reports and speaker presentations are available on the CoNNMO website www.connmo.org.au

Next CoNNMO member meeting to be confirmed, please check the website for updates.



Explaining Snake Hearing - The Spruce Pets

We now know that **snakes can** only **hear** what **we** would consider lower sounds. ... Since **we** know that the peak sensitivity of a snake's **hearing** is in the 200 to 300 Hz range and the average human voice is at about 250 Hz **we can** determine that a pet snake **can**, in fact, **hear you talking** to them. 5 May 2020



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like?**

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