# **'EAR 'TIS**



Newsletter for Audiometry Nurses
Welcome to the issue of the ANAA Inc. newsletter
2022 Winter Issue

## **ANAA Inc**

Conference 2022
20-21st October
Tamworth

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# President's Report

We are getting very busy here in the New England area. People are coming out of the wood work and in a hurry to get their kids tested after the COVID lockdowns. I'm sure you are all getting busy too.

We have also been busy getting the Audiometry Nurses Association Conference organised. It will be held at The Pavillion, at Tamworth this year on 20th & 21st October, 2022. A draft program will be in this newsletter. So be sure to register soon.

Melanie Dowling, Paediatric audiologist from John Hunter Hospital is wanting to do a workshop at the conference. Melanie would like look at Audiometry and Audiology services and how they can work better together and improve referral pathways between services. If you could send me information regarding the area and client groups that your services cover, that will help to inform the workshop prior to the conference. <a href="mailto:Purna.sweetman@health.nsw.gov.au">Purna.sweetman@health.nsw.gov.au</a>

We are looking for more clinical supervisors, to help our audiometry students become qualified. If you would like to do this please contact Kate Norton.

Kate.norton@health.nsw.gov.au





Membership invoices will be emailed to you on the 1<sup>st</sup> of July. Keep an eye on your emails for your invoice.

Please remember to notify the treasurer with any change in contact details, especially your email address.

Treasurer:

kate.norton@health.nsw.gov.au



# Clinical Advisors

It's that time again girls!



Everyone please consider becoming a clinical advisor.

Easy CPD time.

We need you all accredited pleeeease!

Our numbers are declining.

Please drop Kate a line

kate.norton@health.nsw.gov.au

for further information.

This years nominees up for renewal are..

Anna Dyer, Tracy Hawes, Kirsty Biddle, Cathie Cooper,

Vanessa Smith, Susan Darby, Melinda Lowry, Purna Sweetman and last but not least ...Lucy Rindo....

Yay, big applause for these girls. Here's hoping we see all your gorgeous faces in Tamworth this year !!!!

P.S. girls (and new applicants) your paperwork is over the next 2 pages. Yaaay!!!!



#### **Audiometry Nurses Association of Australia Inc.**

Information for:

#### Clinical Advisors in Audiometry Nursing 2022

A Skype workshop will be provided to those who wish to maintain or become an accredited Clinical Advisor for Audiometry Nursing students studying with the Australian College of Nursing.

Clinical advisors are essential to assist Audiometry nursing students in their clinical placement and to deem them competent to practice as an Audiometry Nurse.

Accreditation should be renewed every three years.

#### Criteria for accreditation as Clinical Advisor in Audiometry Nursing

- Evidence of Audiometry nursing qualification attach copy for new application
- ◆ Preferable (not compulsory) to hold Certificate IV Workplace Training and Assessment or equivalent (current enrolment if recently applied) – <u>attach copy</u>.
- Recent audiometry nursing experience.
- Experience testing all age groups where current job description does not include assessment of all age groups, please arrange student to gain this experience with another experienced/competent Audiometry Nurse.
- Current financial member of ANAA Inc.
- Endorsed by ANAA Inc if you are an audiologist.

#### Applicants will be required to:

- Complete a case study which will be sent on receipt of your application.
- ♦ Attend a 2 hour workshops via Skype, Thursday 13<sup>th</sup> October 2pm to 4pm.
- ♦ Present your case study to ANAA Inc. members at the ANAA Inc. Conference 21st October 2022 (negotiable)

Please send in application ASAP, but before the 1st September to: -

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





#### Application for accreditation as a Clinical Advisor in Audiometry Nursing 2022

Applicant		
Name:		
Address:		
Phone: (H)	(W)	
Mobile:		
Email: (please print clearly)		
I meet the criteria and wish to apply for accreditation with ANAA Inc. as a <i>Clinical Advisor in Audiometry Nursing</i>		
Signed:		
Manager:		
I, (name & position)		
Of (Local Health District name)		
Verify that (applicants name)		
Meets the criteria and is supported by the service to attend the Clinical Advisor's workshop for audiometry nurses to be held via <b>Skype for Business on Wednesday the 13<sup>th</sup> October 2pm to 4pm</b> , and then <b>present a case study at the ANAA Inc. conference 21<sup>st</sup> October</b> .		
Signed:	Date:	

Please send Clinical Advisor application before the 1st September to: -

Kate.Norton@health.nsw.gov.au

# Save the date ANAA Inc



# Tamworth Conference 2022



October 20th -21st

# The Pavillion

FUNCTION CENTRE & GARDENS





# Audiometry Nurses Association of Australia Inc. 38th Annual Conference & AGM – The Pavillion, Tamworth Thursday 20th, Friday 21st October 2022



#### Day 1: Thursday 20th Oct 2022

0830: Registration and Coffee

0900: Welcome to Country - Len Waters

0915: Welcome & Official Opening- Purna Sweetman (ANAA Inc. President)

0930: CMV case studies - Carol McKinnon

10:15: Morning tea

10:45: Paediatric Hearing Cases- Infection and congenital diseases- Dr Genaro Paediatrician TRRH

11:45: 2020 Otitis Media Guidelines – ATSI Overview and Practical tips for Use. Prof Kelvin Kong(ENT)

& Melanie Dowling (audiologist)- via pre-recorded video

12:45: Lunch

13:30: Audiometry/Audiology Referral pathways/scope of practice workshop- Melanie Dowling JHH Paediatric audiologist

14:30: Play audiometry equipment demonstration- Jan Pollard (Sonic)

15:15: Afternoon Tea

15:30: All about Tinnitus – Hearing Australia- Gary Dubier (Audiologist)

16:15: HAPEE program- Markeeta Marr / Plums and Hats- Michelle Campbell- Hearing Australia

1700: Evaluations & Close/ New Committee meeting handover

18:00: Pre dinner drinks

18:30: Dinner under the Stars



Day 2: Friday 21st Oct 2022

08:00: Registration & Coffee

08:30: Clinical Supervisor's case studies

09:30: Cholesteatoma/Mastoidectomy - Dr Ghazavi (ENT-TRRH)

10:30: Morning Tea

11:00: Personal Story- Vicki Brandy

11:30: "Looking through OT Lense- Sensory Processing" - Bec Hoy/Mikaela Fletcher OT-TCHC

12:15: Lunch

13:00: ANAA Inc. AGM- all members

14:45: Hearing loss & speech development- Laura Hill – (Speech Pathologist-TCHC)

15:30 Afternoon tea

15:45 Next Sense- Cochlear Implant Zoom presentation (Topic to be advised)

17:00: Evaluations and close

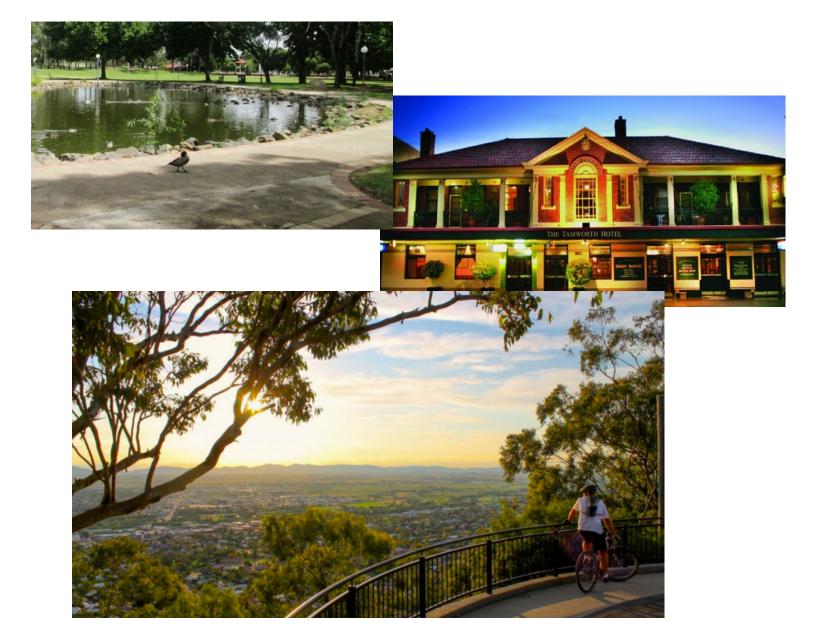
ANAA Inc. would like to thank the following companies for their participation to make this another successful and informative Conference.

- Natus
- Sonic

- Welch Allyn
- Hearing Australia



Program subject to change without notice.





# **Tamworth**



# Spatial Processing DisorderAccessing help remotely

We recently had an education session with a senior clinician from Hearing Australia. She was able to provide us with some useful information around Spatial Processing Disorder assessment which has undergone changes in recent times for Hearing Australia.

Her advice was once that hearing levels have been assessed as normal. To advise parents to watch the Catalyst episode on Spatial Processing Disorder. If this rings alarm bells for parents then it can be discussed further with Hearing Australia 134 432.

Other options open to parents can also be to access the sound scout free hearing assessment on line which has an element of spatial processing testing to it.

Then further on from that is if elements are identified -intervention therapy in the form of a Sound Storm application which can be downloaded at a cost of \$279.99.

I have included links (cut and paste in a browser if required) to these three elements below for your further education and to share with parents/carers.

### 1. View Catalyst special on Spatial Processing Disorder (6 minutes)

Spatial Processing Disorder - Catalyst (abc.net.au)

### 2. Sound scouts - online hearing assessment

Free Online Hearing Test App For Kids | Supported by Department of Health (soundscouts.com)

## 3. Sound storm (\$279.99) - downloadable therapy

### application

Sound Storm | Spatial Processing App | Download Now

This process ideally would be done under audiological or professional guidance. However this is not always available. The downside of the process is the cost of the application, which may not be affordable to some of tour clients. There may be ways that schools or some other form of donation could assist in meeting this cost.



# For Youngsters, Getting Ear Tubes No Longer Involves Surgery

Small Children With Recurring Ear Infections Can Receive Ear Tubes During a Quick, In-Office Procedure

For Youngsters, Getting Ear Tubes No Longer Involves Surgery (newswise.com)

Click on link or copy ands paste into browser for You-Tube demonstration.

Newswise — LOS ANGELES (June 1, 2022) -- Like a lot of young children, from the time she was a year old, Cassidy Clapp was plagued by one ear infection after another.

Usually, an ear infection diagnosis meant Cassidy would undergo a round of antibiotics. But when her Orange County paediatrician noticed the fluid wasn't draining out of Cassidy's ear, he recommended inserting tubes into the toddler's ears.

"I think her hearing was 70% affected, by the fluid build-up" said Cassidy's mother, Brittany Clapp. "She always sounded like she was underwater and she didn't have a lot of speech."

Brittany and her husband, Charlie, tried as many natural remedies as they could to clear Cassidy's ears--including acupuncture--but nothing worked. Still, the family was hesitant to have Cassidy undergo surgical anaesthesia at such a young age.

"It just seemed like a lot of risk and my mom had bad reactions to anaesthesia and I didn't want Cassidy to go through that," Brittany said.

After numerous calls and doctor visits, the parents made their way to Gene Liu, MD, at Cedars-Sinai Guerin Children's. Liu, an ear, nose and throat specialist who is also the president of the Cedars-Sinai Medical Group and the director of Academic Otolaryngology for Cedars-Sinai Medical Centre, says fluid that gets trapped in the middle ear can sit there for months.

"It can muffle the hearing and delay speech and language development," Liu said.

Liu routinely places ear tubes in young children's ears. Traditionally, the placement is done under anaesthesia in an operating room. Surgeons poke a hole in the eardrum, drain all the excess fluid and insert the small plastic tube to lessen the pressure and give the fluid a different pathway out of the ear.

Despite the fact that the actual procedure is quick, surgery is often a full-day ordeal for the young child, with no eating or drinking, an early check-in, post-anaesthesia grogginess and, often, nausea.

#### A New Device

A device called the Hummingbird is a game changer for parents, Liu said. "The entire process, by the time we get the child into the room, into position, clean out the ears and put in the tubes is four to five minutes," said Liu.

The best part, according to Liu: The child is feeling and hearing better within minutes.

The Hummingbird is shaped like its namesake bird and is a single-pass device, meaning that when the needle enters the ear canal, the tube is automatically inserted.

Although the Hummingbird was approved two years ago, the pandemic prevented many parents from learning about this new option. Cedars-Sinai was one of the initial eight institutions across the country involved in clinical trials of the Hummingbird and now the Food and Drug Administration is looking at expanding the approval to older children as well.

Liu performed a Hummingbird procedure on Cassidy in April.

"They wrapped her up kind of like an extreme swaddle and I was holding her hand and he went in and super-fast one ear was done and then the other and we're done," mom Brittany Clapp said. "She cried for about a minute and then was high-fiving Dr. Liu as we left the office."

The change in Cassidy was immediate. "She heard birds chirping for the first time and was so excited," Brittany said.

But the best part? When her daughter said, "Mama."



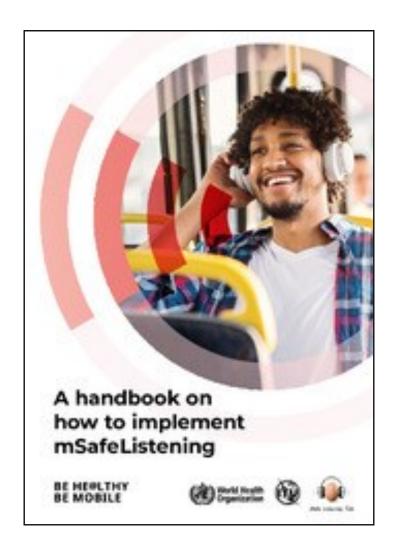
# Be he@lthy, be mobile: a handbook on how to implement mSafeListening

Click on link or copy and paste into browser to download the handbook.

Be he@lthy, be mobile: a handbook on how to implement mSafeListening (who.int)

### Overview

The mSafeListening handbook provides evidence-based message2022 libraries for the promotion of safe listening behaviours and prevention of hearing loss. It includes guidance on how to develop, integrate, implement and evaluate a national mSafeListening programme.





#### WHO TEAM

Sensory Functions, Disability and Rehabilitation

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World Health Organization

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## Non-auditory effects of noise in the classroom

By Pam Millett, PhD for Canadian Audiologist



The detrimental effects of noise on speech perception for a number of different populations (e.g., students with hearing loss, English Language Learners, students with learning challenges, etc.) have been well documented. However, we should not forget the other ways in which high noise levels may impact student and teacher health, and well-being at school.

The number of studies on the non-auditory effects of noise continues to grow. While there is a small literature on the effects of environmental noise on classroom teachers, most classroom noise consists of speech, so non-auditory effects of noise may look different for classrooms than for other settings.

A second difference is that much of this research has come as a by-product of reducing the impact of the noise (i.e., the implementation of sound field system, or classroom audio distribution systems), where anecdotal comments after the installation of these systems has highlighted problems of which people were previously unaware.

Of course, research on sound field systems investigates the effects of improving the classroom listening environment by improving signal to noise ratio, rather than investigating the effects of reducing classroom noise. However, we can still find clues there.

Issues which have been extensively studied in other research on the non-auditory effects of noise (such as annoyance, blood pressure changes, health problems and stress) have received almost no attention for classroom teachers. This may be related to the fact that classroom noise is "relatively" low in comparison to, for example, construction noise, or to the fact that any annoyance factor may be minimised since the noise source is primarily student voices. In fact, in one study the authors noted that "Noise disturbance attributed to traffic noise and ventilation and machinery in the schools...received very low disturbance ratings from most of the respondents" and found that student talking was the most prevalent and most annoying type of noise. This study indicated that

approximately 82% of the teachers reported being exposed to disturbing noise for at least ¼ of the workday, and that annoyance reports regarding noise were highly correlated with reverberation times in classrooms.

Teacher vocal fatigue and absenteeism can be considered an indirect effect of classroom noise, but they are important nonetheless. Research on teacher absenteeism due to vocal problems suggests that vocal problems may be the most common reason for teacher absenteeism. The societal cost of voice problems in teachers alone may be of the order of about \$2.5 billion annually in the US.



While some of the vocal problems in teachers are attributable simply to the amount of talking they do during the school day, high noise levels exacerbate this problem because of the need to project one's voice over the noise, not just occasionally to get students' attention, but on an ongoing basis throughout the day.

Vocal effort is related to individual factors such as fatigue, but also to environmental factors such as listener-speaker difference and background noise. Several studies have theorised that physical education teachers and kindergarten teachers are at highest risk because they teach in the highest noise levels and therefore have more vocal strain.

Unsurprisingly, research has noted that voice power levels are related to room size and reverberation time, such that the same vocal effort will result in lower voice power levels and poorer speech intelligibility in a highly reverberant room (such as a gym) than in a smaller, less reverberant classroom.

What is more surprising to me is the very meagre body of research on the effects of simply improving the acoustical environment of the classroom so that teachers do not have to strain their voices. A 2002 study of teachers and students from both elementary school and college/university classrooms, noted that without amplification, 70% of teachers reported throat discomfort prior to trial of sound field amplification. This decreased to 27% after sound field installation.

The COVID-19 pandemic has offered us an interesting perspective on this approach of addressing vocal problems by improving the acoustical environment. A systematic review of the effects of masks on vocal production during the pandemic reported that masks result in results in increased vocal effort, vocal fatigue, discomfort, and perceived voice problems. However, there has been a *decrease* in reported vocal problems among teachers during the pandemic with remote learning, which is theorised to be due to decreased background noise levels.

## The problem with Bluey's new Deaf character

By A. James for Daily Mail Australia



The ABC's much-loved animated children's TV series Bluey introduced its first character, a little dog Dougie, who uses Auslan to communicate with his mother.

But viewers pointed out on social media that Auslan uses five fingers to sign - Dougie, being a dog, only has four.

The producers say Dougie only uses simple signs that can be made with either four or five fingers, and can be easily understood by Auslan users.

Fans of the show gave moving accounts on Facebook of how the introduction of Dougie had made a positive impact on their family.

One mother with a profoundly deaf son posted also posted: 'I started crying at the inclusion of Auslan.

"I looked at my son and he was grinning from ear to ear! At the end he came and gave me a hug."



# New nano-gel to protect children receiving chemotherapy from hearing loss



PERTH: Researchers will test a new nano-gel they have created to protect children receiving chemotherapy treatment from the common side effect of hearing loss, as part of a new project with Ear Science Institute Australia and supported by funding from the Channel 7 Telethon Trust.

Lead researcher Associate Professor Hani Al-Salami, from the Curtin Health Innovation Research Institute (CHIRI) based at Curtin University, said 90 per cent of children survive cancer but about half will have some degree of permanent hearing due to toxic effects of chemotherapy drugs.

"There is currently no proven prevention or cure for this hearing loss, so this new research will test the effectiveness of a nano-gel that is injected into the ear before chemotherapy to prevent the possible side effect of cancer treatment among children," Associate Professor Al-Salami said.

"The bile acid-based nano-gel has been developed at Curtin by a group of clinicians, pharmaceutical scientists, ENT (ear, nose and throat) surgeons, cochlea physiologists and synthetic chemists using cutting-edge technologies.

"Human bile extract is put through specialised systems to produce a gel, which is capable of being injected into the human ear and can potentially protect children from the side effects of chemotherapy, which targets and destroys cancer tissues and can also kill other healthy tissues resulting in problems including hearing loss.

Ear Science Institute Australia CEO Sandra Bellekom said it was a very exciting time for ear and hearing medical research in Western Australia.

"The Telethon grant will allow Ear Science to further develop an established and proven nano-gel, improving efficacy and making it safer for use in our children," Ms Bellekom said.

Associate Professor Al-Salami is involved in several other new projects also funded by Telethon and led by scientists at Ear Science Institute Australia and Lions Eye Institute, to develop an inner ear cell culture system that will benefit children with Usher syndrome, a scaffold to repair perforated eardrums in children and new systems for eye drug and gene delivery.

From My Science

This contribution from our secretary Kirsten is a timely reminder to carpe diem.

Or maybe perhaps better times are ahead.

However you may choose to look at it.



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