



SUBMISSION:

Modernising WA's Workers  
Compensation Laws –  
Workers Compensation and  
Injury Management Bill 2021  
(Consultation Draft)

NOVEMBER 2021

Audiology Australia (AudA) welcomes the opportunity to provide a response to WorkCover WA's consultation on the Workers Compensation and Injury Management Bill 2021 Consultation Draft (the Draft Bill).

AudA is the peak professional body for the profession of audiology, representing over 3,000 audiologists across Australia, including 321 audiologists in WA. Our members work to minimise the effects of hearing loss on the individual, their families and the community through rehabilitation and hearing conservation. As such, workplace noise-induced hearing loss is a subject of concern to AudA.

AudA's submission has been developed based on feedback provided by WA members of AudA, including members who provide audiometry equipment, training and consultancy for compliance with national occupation health and safety regulations including WorkCover WA and who previously worked at WorkCover and were directly involved in the development and implementation of the original 1991 WorkCover procedures and processes.

Overall, we support the Draft Bill and the provision of key aspects of the testing and assessment of noise induced hearing loss to be set out in regulations, to the extent that this will allow WorkCover WA to enforce previously non-enforceable processes and procedures. We note that the proposed Bill will set out the fundamental entitlement and basic structure of the new noise induced hearing loss process in legislation and leave the assessment for noise induced hearing loss to the regulations.

Our submission focuses on the testing and assessment of noise induced hearing loss and references the 2014 Review of the Workers' Compensation and Injury Management Act 1981 Final Report. We would support the following to be included in the regulations of noise induced hearing loss, as outlined below, and seek confirmation from WorkCover WA in regard to the expected consultation period for the regulations.

## OVERSIGHT OF AUDIOMETRIC OFFICER

AudA would support the continued oversight of equipment by WorkCover and recommend that WorkCover be empowered to audit the compliance of equipment and calibration standards. Both best practice and Australian Standards require the regular calibration of equipment, and we believe the vast majority of clinics involved in hearing comply. It is the experience of some of our members, however, that smaller healthcare practices that do not include hearing assessment as a core part of their work may be less stringent when it comes to equipment maintenance and calibration. We believe that, without central oversight, the incidence of poorly maintained equipment will increase at practices on the periphery of the hearing sector. This has the potential to increase the prevalence of inaccurate test results.

In particular, we are most concerned regarding the potential for poorly performed baseline tests, for which there will be little recourse when future compensation claims are made. For clarity, we recommend explicit reference to compliance with Australian Standard 1269.4 - Occupational noise management - Auditory assessment in the regulations.

## CAPACITY TO REQUIRE AUDIOMETRIC TESTING

We recommend the regulations stipulate that workplaces be prescribed on the basis of an independent noise survey or some other objective, criteria based measurement. In addition, it is our position that, without exception, all noise exposed workers should have a baseline hearing test, and that WorkCover can enforce the lodging of audiometric tests with WorkCover. It is the experience of some members that there are many workers with occupational noise exposure who do not have audiometric tests, including baseline tests, lodged with WorkCover. This has led to a significant number of workers disputing claims, incurring unnecessary costs to employees, employers and WorkCover, and arguably reducing employees' access to compensation.

## PROCESSING NOISE INDUCED HEARING LOSS CLAIMS

Lastly, we recommend the involvement of audiologists in subsequent audiometric testing. We note that should audiologists be removed from the automatic subsequent audiometric test pathway, there is a risk of significant increases in false positive and false negative assessments, with increased cost (in dollar terms, expense and lost productivity in resolving false claims to employers, insurers, WorkCover, and the employees). A full diagnostic audiological assessment battery is required to accurately separate likely noise from non-noise components of a hearing loss, and to identify people who may not have noise induced hearing loss and other hearing and ear conditions. It is AudA's view that Audiometric Officers do not have the skills and knowledge required to perform the necessary full diagnostic assessment.

Further to this, we believe that the requirements for 'approved audiometric officer – Tier 3 Clinical registration with WorkCover' should be brought into line with the requirements for 'Hearing Services Program Approved Membership Categories for Qualified Practitioners'. This would bring the requirements for audiologist registration with WorkCover WA into line with that of other Australian states and would improve workers' and employers' access to audiometric testing by increasing the number of practitioners who can register with WorkCover WA. We would not support any provision that allowed medical practitioners including ENTs to perform full audiometric assessments for WorkCover, as this is something that falls within the scope of practice of audiologists.

### References

Audiology Australia (2014). Submission to WorkCover WA on Review of the Workers' Compensation and Disability Act 1981 Discussion Paper.