

Australian Association of Audiologists in Private Practice Inc

Annual Report

1 July 2012 – 30 June 2013



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Quality. Integrity. Independence.

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Mission Statement

The mission of the Australian Association of Audiologists in Private Practice (AAAPP) is to promote and support clinical practices owned by Audiologists.

About AAAPP Inc

AAAPP Executive Members during 2012 – 2013

President:	Dr Ross Dineen
Vice President:	Mr Steve Grayson-Riley (to 30 June 2013)
Past President & Acting Vice President:	Mr Peter Altidis
Treasurer:	Ms Robin Laing
Secretary:	Ms Barbara Cooper (to December 2012) Rachel Deane
Councillors:	Mr Peter Cichello Dr Celene McNeill Ms Myriam Westcott
Executive Officer:	Dr Louise Collingridge

AAAPP Details

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**AAAPP is a not for profit professional
association incorporated in the
State of Victoria.**

**AAAPP has national membership and holds
activities across Australia.**



President's Message

Dr Ross Dineen

I am privileged to have served a second term as President during the financial year 2012 - 2013, during what has been a challenging and exciting time for AAAPP. Our focus was equally divided between offering excellent ongoing educational opportunities to our members and colleagues, and advocating for the profession of Audiology.

Our excellence in education programme provided in depth investigations of topics directly relevant to the practice of audiology, and in particular to the independent practice of audiology within business models that place audiologists in decision making positions. The seminars we offered included a two day hands on seminar/master class in Sydney on the topic of vestibular function, and a members only seminar held in Canberra on funding of audiology services – both private and public. In addition, we developed a clinically focussed three day seminar on the topic of hearing and cognition, which we will take place in September 2013.

Our seminar in Canberra on public and private funding of audiology in Australia included discussions with representatives of the Office of Hearing Services, which lead to a submission by AAAPP on proposed reforms to the way hearing aids are supplied, as well as to the regulations that apply within OHS. Our submissions to OHS were sent to the advisor on hearing to the Minister for Ageing and Mental Health. Our feedback to the advisor on hearing was welcomed and encouraged, with the detail provided by AAAPP noted for being balanced and including explanations of the complexities and contradictions within existing legislation.

As part of our commitment to promote and influence the practice of audiology, AAAPP has renewed membership Shhh and Better Hearing Australia, both consumer bodies, and this year also joined Deafness Forum, a body that brings together a range of associations that work in the field of deafness and hearing.

Our representation to government and other funding bodies serves to promote the independent practice of our profession. This aspect of our work is an ongoing process and we continue, wherever possible, to raise concerns that apply to independent practices run by our members.

I would like to thank all those who have contributed to the success of AAAPP over the past year, acknowledging in particular our industry partners, speakers at our seminars, members who have served on our Executive, members who have convened AAAPP seminars, and our Executive Officer, Dr Louise Collingridge

A handwritten signature in black ink, appearing to read 'Ross Dineen', written over a faint, stylized graphic element.

Dr Ross Dineen
AAAPP President, 2012 - 2013
30 June 2013



Treasurer's Report

Robin Laing, Treasurer

Income to AAAPP is derived from membership subscriptions, seminar fees and industry partners.

Funds available to at the start of this financial year (1 July 2012) amounted to \$ 122,901.00. Income received (to 30 June 2013) was \$ 129,618.00

Fixed expenses that AAAPP is liable for are:

- Executive Officer (salary, IT allowance and Superannuation)
- Insurances (Public Liability, Business and WorkCover)
- Subscriptions (BHA, SHHH and Deafness Forum)
- Website
- Banking / Merchant Fees

Variable expenses relate to:

- Seminar expenses
- Travel
- Postage and stationary
- Telephone

The total expenses incurred during this period was \$74 963.00.

As a not-for-profit association, all surplus funds are used for association purposes, and income tax is not payable. AAAPP is registered for GST.

AAAPP's financial record keeping involves reconciling the bookkeeping records in Cashflow Manager, an accounting software programme, and internet banking. Reconciliation is done on a monthly basis or more frequently if required. Profit and loss and transaction statements are reviewed each month. Bruce Tanner from Accounting Business and Taxation Services provides advice on accounting processes and reviews AAAPP records at regular intervals.

Legislation adopted by Consumer Affairs, Victoria requires the association to undergo an audit only where the income exceeds \$250 000 in any year. AAAPP is not obliged to undertake an audit this year. The AAAPP Executive has agreed that even if the income for AAAPP remains below the threshold requiring an audit, an audit will be requested every 5 years.

Cash is held in an interest bearing savings account and in a cheque account – both at Westpac. Two signatories are required to authorise any payment from AAAPP's accounts.

Income and Expenditure Statement for the Year Ended 30 June 2013	
Income	\$
Interest Received	3,451
Seminar Income	27,636
Subscription Income	34,818
Industry Partner Income	63,613
Sundry Income	100
Total Revenue	129,618
Expenses	
Accountancy	570
Advertising and Promotion	3,632
Amortisation Expense	1,050
Audit Fees	2,850
Bank Fees and Charges	193
Seminar Expenses	20 093
Honorarium	3,500
Insurance	1,244
IT Allowance	1,500
Merchant Fees	409
Printing and Stationary	1,392
Subscriptions	215
Sundry Expenses	956
Superannuation	2165
Telephone	916
Travel	6,203
Website	575
Wages	27,500
Total Expenditure	74,963
Net Profit	54,654
Retained Profit as at 30 June 2013	154,543



Membership & Advocacy

Dr Louise Collingridge, Executive Officer

Membership

To be eligible for membership of AAAPP, tertiary qualifications in Audiology and ownership or part ownership of an audiology business that is at least 50 % owned by Audiologists, is required. Members are also required to be of good reputation. Applicants are nominated and seconded by existing members, and applications meeting the basic criteria are circulated to the membership, whose objections may be raised for a period of 7 days, after which the membership is processed and finalised upon receipt of the membership fee.

Membership applications require evidence of meeting eligibility criteria and supporting documentation is required to demonstrate business ownership. Membership is renewable on 1 July each year, for the duration of the following financial year.

The total membership at 30 June 2013 was 66 members, four of which are life members, so recognised for their contribution to the establishment of the association in its earliest years. Life members are: Neil Clutterbuck, Sue Clutterbuck, Marie-Louise Hekel, and Janice Milhinch.

AAAPP seeks input from members on all issues. Members have access to all the association's records and documents and the Executive encourages dialogue with all members.

Benefits of membership include:

- Access to the AAAPP network of independent audiologists
- Members fees for all Excellence in Education seminars and workshops
- Access to resources (including all seminar presentations) in the members only section of the AAAPP website
- Public access to clinic contact details via the AAAPP website
- Policy and position statements issued by AAAPP that highlight needs of independent private audiology practices.
- Representation by AAAPP to regulators on matters pertinent to independent private audiology practice.

A survey of AAAPP members was undertaken in August 2012. Some key characteristics of the AAAPP membership as reported on that survey are as follows:

More than half of AAAPP members own their own practices in full and a quarter of members own 50 % of the practices they operate. Where practices are co-owned, the co-owner is usually the spouse or life partner of the member. Very few members have partners that are medical specialists or other professionals.

All members undertake diagnostic assessments and rehabilitation, with most extending the rehabilitation services they offer beyond hearing aid fitting to include counselling and training. Most members also offer paediatric diagnostic audiology services, and a third of members offer auditory processing assessment. Less common are group therapy and tinnitus rehabilitation, cochlear implant support. Vestibular services are offered by only a small number of clinics.

More than 80 % of members hold Office of Hearing Services (OHS) contracts and seek support from AAAPP when negotiating with OHS. Almost all are Medicare providers and value AAAPP's discussions with Medicare.

AAAPP members are employers as well as clinicians. Some clinics operate as sole owners and clinicians, but most employ receptionists, office staff, other audiologists and a few employ audiometrists.

Advocacy

Medicare changes were under discussion during 2011 and 2012 lead to the introduction of Medicare funding for diagnostic audiology in November 2012. Procedures undertaken by Audiologists, when referral for specific procedures is made by either an Ear Nose and Throat Specialist or a Neurologist, for the purpose of a medical diagnosis, now is funded by Medicare. AAAPP had negotiated with Medicare and considered the allocation of item numbers to Audiology to be a positive step. Restrictions currently placed on the use of the Audiology item numbers is a poor reflection of current professional practice. Inequitable remuneration (with medical specialists paid more by Medicare to undertake audiological procedures than audiologists, either when conducting the procedures themselves or when employing anyone, regardless of any training) remains a source of concern for AAAPP. Submissions and representations to Medicare and associated regulators by AAAPP highlight the progress made by allocating items to Audiology, as well as ongoing concerns about the inequalities and discrimination within the current system.

In February 2013, the Manager of the Office of Hearing Services (OHS), Tracey Duffy, participated in the AAAPP seminar on Private and Public Funding of Audiology in offering a presentation, participating in a Question and Answer session, and meeting with AAAPP members informally. Following that contact, an extensive submission was made to OHS related to their Regulatory Review.

Submissions were also provided to OHS on the Rehab Plus items and the deed of standing offer that applies to manufacturers and the supply of hearing devices for the scheme.

Audiology in Australia remains outside of the registration system under AHPRA – the Australian Health Practitioner Registration Authority. Professional associations therefore carry an important role in promoting the profession and AAAPP in particular has a unique role in advocating for the independent practice of the profession of Audiology.



Excellence in Education Programme

Dr Ross Dineen, President & Chair of Education

AAAPP offers an Excellence in Education Programme (EEP) that provides in depth and advanced ongoing education through a series of seminars and master classes. The EEP programme offers between 35 and 45 hours of education each year so that members who are able to attend two thirds of the programme would have accumulated hours of ongoing professional education that is equivalent to the registration requirements of most similar professions in Australia.

The AAAPP EEP programme is made up of combination of business seminars, clinical seminars and master classes. AAAPP members who participate in the AAAPP EEP are awarded certificates annually that indicate the number of hours of ongoing education that was accumulated as part of the AAAPP EEP programme.

Quality is ensured through detailed planning of all seminars and master classes, according to the following principles:

1. AAAPP's Executive appoints a Chair of Education to oversee all decisions related to the EEP.
2. Seminar topics arise from contemporary themes that emerge at international conferences and in international peer reviewed publications, and which are determined by the Executive, to be relevant to local needs.
3. Seminar convenors are appointed to assist with seminar arrangements at the discretion of the Executive and the Chair.
4. All seminar contributors are invited on the basis of their academic, research and/or clinical record and reputation.
5. Seminar contributors are required to submit detailed abstracts before seminar programmes are finalised.
6. Seminar programmes are carefully compiled to ensure maximum learning opportunities, introducing theoretical bases, current research findings, and clinical applications for each topic.
7. Seminar programmes allow sufficient time for each contributor to offer in depth and advanced knowledge on their specific topic.
8. Programmes build in discussion and question time to ensure that the relevance of each topic is made known within each seminar.
9. Pre-seminar reading lists and post-seminar access to presentations and resources are available to all AAAPP members, and to seminar delegates who are not members of AAAPP.
10. Feedback is sought after all EEP activities to ensure optimal learning and development opportunities.

AAAPP's EEP programme is available to all AAAPP members. Non-members are able to participate in those events that are open to non-members. Events that are open to non-members are advertised through other professional associations. Some members and non-members who attend AAAPP EEP events use their attendance to fulfil requirements set by other professional associations. AAAPP does not monitor its members participation in any other events available via other professional associations, private companies or educational institutions. However, AAAPP recognises that many members will engage with ongoing professional activities that extend beyond those offered as part of the EEP.

AAAPP's EEP programme is made possible through the support of AAAPP's industry partners, whose contribution to AAAPP ensures that leading experts are invited to participate in AAAPP events and that all EEP events set the standard of excellence for ongoing education in the field of Audiology in Australia.

Two EEP activities were held during this financial year – one on the topic of Vestibular Function, and the other on the topic of Public and Private Funding of Audiology in Australia.

**Vestibular Function: Order & Disorder
Cochlear Ltd, Sydney
October 2012**

Twenty two delegates, all members of AAAPP, their representatives or invited delegates attended the two day workshop on vestibular function convened by Dr Celene McNeill. In depth explanations of vestibular physiology and pathology were offered. Equipment used to assess vestibular function was on display and hands-on demonstrations and practice sessions were included in the programme.

Presenters included:

Professor Ian Curthoys, Neuropsychologist, University of Sydney

Dr Myriam Welgampola, Neurologist, University of Sydney

Ms Megan Richards, Physiotherapist, Equilibrium Rehab

Dr Maxwell Fraval, Cranio-Osteopath

Ms Rachael Taylor, Audiologists, University of Sydney

Dr Sally Rosengren, Neuroscientist, University of Sydney

Comments from Delegates

“Great ideas and contacts for future practice”

“I liked the up to date content as well as the mix of theoretical and practical sessions”

“The level of lectures and knowledge was excellent”

Public and Private Funding of Audiology in Australia
East Hotel, Kingston ACT
March 2013

Fifty five delegates (AAAPP members, representatives, industry partners or presenters) attended a two day seminar in Canberra, convened by Dr William Vass. The seminar focus was on sources of both public and private funding of Audiology in Australia.

Presenters included:
Georgina Sanderson, Cochlear Ltd

Tracey Duffy, Office of Hearing Services

Mary Edquist, CBP Lawyers

Ian Hallett, Halletts Chartered Accountants

Rhys Caldwell-Bastion, Rightway Insurance

Rob MacDougall, The Leadership Factor

Comments from Delegates

“I liked the co-ordination of topics and speakers – able to view the same issue from different perspectives”

“The conference handouts were very good”

“Excellent speakers, I felt very privileged to be able to speak directly to the manager of OHS”

“Excellent to have a presentation and advice from a highly skilled lawyer at a AAAPP seminar”



Governance

Rachel Deane, Secretary

AAAPP is incorporated as a not for profit in the State of Victoria. This means that the rules of the association are lodged with Consumer Affairs, in Victoria. The rules of Association are updated as changes are voted in by the membership.

The 2012 AGM was held in Sydney on 28 September 2012.

	2012 – 2013
President	Dr Ross Dineen
Vice President	Steve Grayson-Riley
Treasurer	Robin Laing
Secretary	Rachel Deane
Councillors	Peter Altidis Barbara Cooper (to January 2013) Dr Celene McNeill Peter Cichello Myriam Westcott

Association rules cover the following:

- Mission of AAAPP
- Membership Criteria
- Subscriptions
- Database of members and associates
- Resignation from the association
- Complaints against members
- Election of the Executive
- Rules for meetings of the Executive, Special General Meetings, and Annual General Meetings
- Office bearers – duties
- Employees – duties
- Industry Partnerships
- Excellence in Education Programme
- Communication with members
- Disputes and mediation within the association
- Record keeping
- Winding up and cancellation

Being incorporated in the state of Victoria, but with national membership, requires AAAPP to have a physical address in Victoria, and a contact officer / secretary, who is resident in Victoria. AAAPP members are from across Australia, and the Excellence in Education programme operates across all states.



Industry Partnerships and Affiliations

Dr Celene McNeill, Councillor

AAAPP has held ongoing partnerships with the following companies since 2010:

- Cochlear Ltd
- Phonak
- Starkey Laboratories
- Unitron Phonak

Partnership agreements are established for a fixed period of one financial year which sets the same sponsorship level for all industry partners. All industry partners renewed their agreements for the financial year ending 30 June 2013. They have also indicated their intention to maintain the industry partnership in the longer term.

The relationship with industry partners has been productive in sharing resources, knowledge and industry experience. Industry partners are regular presenters at our seminars and workshops.

During the period ending 30 June 2013, funds obtained from industry partners were specifically dedicated to support the Excellence in Education programme. Funds were used to ensure new members could attend the business seminar, with their registration fees covered by the association.



AAAPP is affiliated to Self Help for the Hard of Hearing (NSW), Better Hearing Australia (Victoria) and Deafness Forum (ACT)



Excellence in Education in 2013 – 2014

The next financial year presents challenges to AAAPP to continue to offer a programme of education, advocacy and support for independent private practice that is relevant to our membership.

The Excellence in Education programme is committed to offering the following:

- Front Office Staff Training
Melbourne
2 – 3 August 2013

An opportunity for front office staff employed in AAAPP members clinics to network and share information about appointment programming, interacting with hard of hearing patients, hearing aid repairs, hearing aid ordering, and practice management tips.

- Hearing & Cognition: Theory, Research and Practice
University of Sydney
20 – 22 September 2013

An in depth examination of current theory, research and practice as applied to adults with acquired communication disorders associated with hearing, processing, language and cognition.

The seminar will be open to members and non-members of AAAPP.

- Promoting Audiology in the Digital Era
Melbourne
22 – 23 February 2014

An up to date account of promoting the profession and independent practice using online resources to maximum effect, electronic health records and reporting, paperless clinic solutions and the role of professional associations in our modern era.

Incoming Executive 2013 - 2014

At the 2013 AGM, held on 21 September 2013, a new Executive Committee was formed, which will take AAAPP through the next financial year.

AAAPP Executive Appointed for 2013 - 2014

President:	Dr Ross Dineen
Vice President:	Dr Celene McNeill
Treasurer:	Ms Robin Laing
Councillors:	Mr Peter Cichello Mr Grant Collins Mr Anthony Crittenden Ms Rachel Deane Ms Elaine Melville Ms Tricia Sharples Ms Myriam Westcott