

# AIMING HIGH

First Voice National Best Practice Policy for Children with Hearing Loss Using  
Listening and Spoken Language

08 June 2011



First Voice has been established to provide a national voice for member organisations whose primary focus is the provision of listening and spoken language therapy services in Australia and New Zealand. Its six member organisations are internationally-recognised as leaders in the provision of listening and spoken language therapies for children who are deaf or hearing impaired. Collectively, First Voice member organisations deliver services to more than 650 pre-school children and 1,200 families in Australia and New Zealand, making it the largest single grouping of early intervention service providers in the region.

## **AIMING HIGH: FIRST VOICE NATIONAL BEST PRACTICE POLICY**

Key elements of a national best practice policy for deaf and hearing impaired children using spoken language

### **National Policy**

1. All children to have equitable access to newborn hearing screening (NHS)
2. All children to have equitable access to diagnostic referral and testing
3. All children to have equitable access to hearing technology appropriate to their needs
4. All children to have equitable access to accredited service provision for early intervention (EI) regardless of family demographics, cost, location or other barriers
5. All children to have on-going support to achieve their innate potential in all areas of early childhood development – language, speech, cognitive development, social/emotional well being, physical development

### **National Strategic Goals**

1. All children with Permanent Childhood Hearing Impairment (PCHI) detected within 1 month of birth
2. All children with PCHI diagnosed as early as possible and fitted with hearing aids within 3 months of birth
3. All children with PCHI enrolled in an accredited locally-available early intervention program by no later than 6 months of age
4. Age appropriate spoken language (in-line with population norms) for children with PCHI at school entry
5. Age appropriate levels for all children with PCHI at national benchmark testing points under NAPLAN (Years 3, 5, 7 & 9)
6. All children identified as suitable for cochlear implantation to be fitted with appropriate technology within 6 months of initial identification and diagnosis
7. Training and support for professionals in the workforce to ensure adequate labour supply and professional training with a focus on world's best practice

### **Identified Outcomes**

1. Measurable improvements in literacy and numeracy for all children with PCHI
2. 95% minimum coverage for NHS
3. 99% entry of children screened through NHS into E I before 6 months of age
4. Reduced welfare dependency over time of adolescents and adults with PCHI
5. Higher levels of entry into university and TAFE
6. Improved mental health measures for children with PCHI
7. Family engagement with service provision