



2018 ANNUAL REPORT

EARBUS FOUNDATION OF WA



VALUES, MISSION & VISION

Earbus Foundation of Western Australia's Mission is to reduce the incidence and impact of middle ear disease (Otitis media) in Aboriginal and at-risk children in Western Australia to achieve parity with non-indigenous children.

The Foundation exists to support all children and their families who may be at risk of developing Otitis media or hearing loss.

Our Vision is that current and future generations of Indigenous children can succeed at school unhindered by the debilitating effects of Otitis media and its impacts

upon their ability to learn and achieve their full potential.

Our vision also extends to early detection, prevention and access to diagnostic services of hearing loss for newborn babies.

Our Core Values are the centre of all our internal and external interactions and are fundamental to everything we do. These values are the non-negotiable, unchanging heart of our organisation. We stress the critical importance of all employees living these values and representing these values to the public we serve.

Be Open & Honest

- We raise internal and external matters/issues in a positive and constructive way
- We value open and honest discussion with a view to improving our services, processes and procedures in the best interest of our clients.
- We are not afraid to try new and creative ideas – even though they may not succeed. And we always own up to our actions so that everyone can learn from each other.

Be Loyal and Supportive

- The Foundation works as a team. We look after each other and support the families we serve, the people we work with and our colleagues.
- We assume the best in each other

Be Brilliant

- Our team values excellence and passion about the work that we do.
- We all give our best at work and do whatever it takes to get the job done properly.
- We try to be the best program delivering services to children
- We have high levels of competency in what we each do
- Our words are consistent with our actions

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Chairperson's Report

Carol Dowling, Earbus Foundation Board Chair

"Being a genuine ally involves a lot of self-reflection, education and listening. It means knowing we're often coming into this space from a position of power and privilege. Privilege that we've gained through unjust systems that marginalise the groups we seek to ally with. It's not enough to show up in solidarity and speak out against the unjust system, we have to do what is within our power to dismantle the system and differentiate ourselves from the opponents of these groups. We have to change our own behaviours and be mindful that we are not contributing to keeping that system going."

Gary Radler, Amnesty International Australia, 2018

With every year of my involvement with Earbus Foundation of WA, I become more proud and humbled by the achievements made for the children and communities which it services. However, particularly this last year has proved to be more so as I see the manifestation of cross-cultural collaborations from board level to throughout this important organisation's staff dynamic. We should consider ourselves to be an important demonstration of how non-government organisations (NGOs) can bring about real and lasting change for Aboriginal and Torres Strait Islander peoples and under-privileged people in this state.

Recently, I was asked to examine a Masters by research in the area of human rights. This thesis focused on why Australia needs Aboriginal self-determination. It was heartening to see this work researched and argued by a non-Indigenous Australian student with such candour and rigorous focus. This student's main argument rested on the way real action for equality for my people could happen only when a rights-based approach was applied to policy by those in power. Being realistic, this thesis said such a reality was almost impossible in the current political climate. Instead, this student suggested that the private sector and indeed, non-government

organisations (NGOs) were the real agents for change with potentially revolutionary energy and commitment. As I read and examined this thesis, I smiled a lot. The assertions by this higher degree student were simply expressing what I have already witnessed with Earbus Foundation.

It is essential for NGOs to engage in Indigenous activism and drive systematic change. NGOs have a stronger relationship with local Indigenous communities and therefore are in a greater position to help facilitate 'bottom-up' community-developed solutions to local problems. Indigenous communities require to translate their solutions to the problems their communities face into practical action. Collaboration and support, rather than superseding local community government structures, is more likely to lead to the execution of new and sustainable solutions. Earbus Foundation of WA is doing this and more.

In this last year, we have successfully moved into the Kimberley and the South West. Our organisation continues to deliver highly effective ear health services in the Goldfields and Pilbara and with our new Program Manager, Emma Cahill we have seen greater

coordination with considerable support from primary schools and Aboriginal Medical Services throughout these regions. I was so pleased to see that we now have a Program Coordinator, Caris Jalla, for the Perth metro and south-west which reflects the real need for Noongar people to have quality services in the Perth metropolitan area as we often do not receive consistent quality ear health care in the city and the great southern.

I can remember when our small team of staff began to work in many of these locations with limited resources. Now we see the foundation employ over 32 staff members meaning our service is far more sophisticated, resourced and adaptive. I have stood with staff members and board members this last year as we have received some very significant awards which was highlighted at the WA Telstra Business awards when we won the highly competitive Social Change Maker award. Indeed, the Foundation makes real change through our continued focus on quality services and outcomes within all the partnerships, collaborations and relationships we have forged. With all the parents, families, carers, schools, health partners and Aboriginal Medical Services, we have strived to listen and develop partnerships to stamp out chronic ear disease – an entirely preventable affliction affecting far too many children in this state.

To all our financial supporters, I can only express my sincere gratitude in preventing poverty and disadvantage for my people. Debilitating chronic ear disease is created by poverty and in turn, creates poverty. It is with such generous support our service can continue to be there for my people and to break the cycle of poverty.

With persistent passion, belief and the ability to really listen to members of the Aboriginal communities in which Earbus Foundation of WA works, simply brings to life the aspirations and beliefs of the people it has formed relationships with. It is these relationships with Aboriginal people in this state that the foundation prides itself on. Patients and families are consistently treated as precious in the delivery of services. As an Aboriginal (Badimia) woman and as long-standing chair of the foundation, I am always honoured by the way staff and management really listen and value my input and opinion. They are the epitome of allies for Aboriginal people in this state.





CEO REPORT

In 2018 the Earbus Program expanded into two new regions of Western Australia - the Kimberley and South-West. The impact on Earbus Foundation was profound - more than doubling our staff numbers, ramping up the logistical challenges and triggering a re-think of multiple internal systems.

Our core Goldfields and Pilbara team was reassigned to spearhead the Kimberley development, which necessitated the hiring of replacement personnel for Pilbara and Goldfields. It also required new program leadership which saw Emma Cahill join as Program Manager, Outreach. Emma's previous experience in managing the initial partnership between Earbus and Starlight Children's Foundation (from the Starlight end) proved a huge asset and allowed her to settle into her new role remarkably quickly.

Later, as the SW Program rolled out, Caris Jalla joined as Program Coordinator (Metro and SW Programs). For the first time since Earbus started in April 2013 we have a full Executive cohort to manage the Foundation. By the end of 2018 we had 32 staff on board. As in any start-up business, the initial staff carry a disproportionate burden and cover many roles; I pay tribute to my colleagues Lara Shur, Konrad Mills and Dee Parker for four years of doing whatever was necessary to make the Foundation a success and our programs effective. Our business growth and commitment to excellence

was bolstered by winning the WA Telstra Business Award in the highly contested Social Change Maker category. One of our organisational core values is around "brilliance"; submitting our business to exhaustive and rigorous evaluation via the Telstra Awards provided external assessment and feedback on how we are living this particular value. Following our Emerging Business Excellence Pinnacles Award in November 2017 this is reassuring for supporters, sponsors and funding entities to know that Earbus Foundation runs to a consistently high business standard with externally validated performance.

We again received strong financial support from trusts and foundations throughout 2018 but I want to especially mention the generous investment by the Neilson Foundation. The Neilson family has renewed its amazing generosity with another \$100,000 grant and has been a major force behind the success of Earbus and our growth as an organisation. This is the third year of their valuable contribution and it allows us the luxury of seed funding new initiatives with confidence

and minimal risk. I also acknowledge with gratitude Ian Potter Foundation's underwriting of the SW Program for 3 years and the Stan Perron Charitable Trust which also invested as a 3-year major sponsor. In the Goldfields the generosity of Minara Community Foundation, supported by our long time sponsor AngloGold Ashanti, funded a new customised Earbus for the region.

The expansion programs brought important new partnerships with regional Aboriginal Medical Services in Halls Creek (Yura Yungi) and Kununurra (OVAHS) as well as a pleasing renewal of our collaboration with Bega Garnbirringu in Kalgoorlie. Our longest running alliance is with Wirraka Maya in South Hedland and the support from June and her staff continues to underpin our important work in this region. I thank all the AMS staff and managers for their wonderful support of our teams.

Our strong and productive partnership with Starlight Children's Foundation is about to enter its 5th year - a remarkable collaboration that plays to the strengths and experience of both organisations. Our thanks to Meg, Paul and the amazing people who make up the team of Starlight Captains - they make our regional trips so much more enjoyable and successful.

Our hospital-based Newborn Hearing Screening contract was extended by the WA Health Department in late 2018 and the fine work of the team led so ably by Suzie Costello continues into 2019. Suzie also led our social media mentorship - sponsored by Bankwest and delivered by Hancock Creative - an initiative that

produced a major leap in our social media presence and reach.

Our 2018 financial performance continued the strong trend of previous years. It allows us to plan our relocation with confidence. At year's end we confirmed the move into new premises in Northbridge which will accommodate our expansion and give us central, highly accessible facilities from which to continue to grow. We enjoyed our time in Wembley but by mid-year had well and truly outgrown existing facilities.

Our Board has provided strong governance and support under Chair Carol Dowling 's leadership and I thank them for their support and wise counsel. Our volunteers are both highly valued and respected; they genuinely lift administrative burdens from program staff. Our consultant clinicians - GPs, NPs, ENTs, Audiologists - are critical to our success. Our patron, Professor Harvey Coates AO, continues to join Earbus regional trips and provide strong, experienced clinical leadership. Schools across four regions of WA have made us welcome and supported our work enthusiastically.

Earbus Foundation is built on non-negotiable core values - honesty, loyalty and brilliance. This year those values have stayed strong and undiluted in the face of a big influx of new staff, structural changes and new locations. To be surrounded each day by this remarkable group of colleagues infused with shared values is a deeply gratifying personal and professional experience. It is an extraordinary privilege to lead such a remarkable team and such a unique organisation.

Key Facts on Otitis Media

Why we do what we do.

Aboriginal children have the worst ear health of any people in the world, with prevalence rates 10 times that of non-Indigenous children.¹ Ear disease often results in an avoidable hearing loss in early childhood, and children who can't hear, can't learn.

The World Health Organisation (WHO) specifies that rates of Otitis media above 4% in children constitutes a "massive public health problem" requiring urgent attention (WHO/CIBA Foundation, 1996).

Costs to the community of middle-ear disease (OM):

- lost well-being (estimated between \$1.05b and \$2.6b a year);
- productivity and other non-financial costs (\$67 m annually); and
- the total top-down health system expenditure on OM (\$391.6m a year in 2008).²

Costs to WA education systems arise from children suffering educational and developmental delays, low levels of literacy and numeracy, school absences, behaviour issues and disengagement, leading to increased risk of contact with the juvenile justice system. Around 74% of juveniles in detention in WA are Aboriginal children, a massive over-representation. High rates of recidivism can lead to life-long entanglement in the justice system.

Aboriginal children in Australia experience an average of 32 months of middle-ear infections between the ages of

0 and 5 years, compared to just three months for non-Aboriginal children.³

OM is highly treatable, but left undiagnosed and untreated it has multiple flow-on effects that ultimately perpetuate the very poverty that gives rise to the disease in the first place, thus continuing the cycle. With effective treatment, children can avoid sustained hearing loss and have their opportunities to learn and succeed at school fully restored.

"...hearing impairment is a significant contributor to the causal pathway that represents a failure basically of education and health to deal with those issues and they get picked up by the justice system...hearing loss may not cause criminal activity, when considering the stigmatizing effects of hearing impairment on self-concept, educational attainment and social skills, there is a causal link to criminal activity."⁴

"There is a crisis in Aboriginal ear and hearing health in Australia. Aboriginal people suffer ear disease and hearing loss at up to ten times the rate of non-Aboriginal Australians, and arguably the highest rate of any people in the world"⁵

REFERENCES:

- 1 - Senate Inquiry of the 42nd Australian Parliament – "Hear Us: Inquiry into Hearing Health in Australia" 2010 p xv
- 2 - Report by Access Economics Pty Ltd for Glaxo Smith Kline, The Cost Burden of Otitis Media in Australia, February 2009
- 3 - Australian Bureau of Statistics, 2008, p134
- 4 - http://www.aph.gov.au/senate/committee/clac_ctte/hearing_health/report/c08.htm#anc4
- 5 - Senate Community Affairs References Committee, 2010, p.xv



"Our aim is to eradicate the impacts of hearing loss in every community in Australia so that every young person can reach their full potential through listening and learning"



Newborn Hearing Screening

The Newborn Hearing Screening (NBHS) program is an integral part of the clinical services offered by Earbus Foundation. The private NBHS program forms part of the National Neonatal Hearing Screening Framework under administration of the WA Child and Adolescent Health Service; it is guided by National Performance Indicators that consider Participation, Screening, Assessment and Intervention.

The program operated from our Wembley premises in 2018 and continues to be managed by Ms Suzie Costello with Clinical oversight from Lara Shur, Director, Clinical Services. Suzie is supported by a dedicated team of highly skilled Screeners working across the program - Deborah Howe, Jammima West, Lauren Costello, Lucy Mitchell, Ros Lander, Ailish Lawrie, Shohreh Meshgin, Janine Tassicker, Marie Stagoll and Mandy Del Dosso. The success of the newborn hearing screening program is testament to the commitment of this team of Screeners and their drive to deliver a great service.

The program continues to operate in 7 private hospitals in Perth, Geraldton and Bunbury. These include SJOG Subiaco, SJOG Murdoch, SJOG Mt Lawley, Ramsay Health Joondalup Hospital, Ramsay Health Glengarry Hospital, SJOG Bunbury and SJOG Geraldton. Collaboration has been key in establishing effective operational practices that enable the Earbus NBHS program to continually meet the KPI targets of >97% of

eligible infants completing a hearing screen before one month corrected age'.

In 2018, 8080 babies were screened across the NBHS program with 0.3% diagnosed with Sensorineural Hearing Loss by 3 months corrected age, aligning with National targets. Meeting this target is a key focus for Earbus as we understand the importance of early intervention and the impact on speech and language development – sooner is always better!

In September 2018, Earbus NBHS program accepted the offer of a contract extension from the Child and Adolescent Health Service, Department of Health. This takes the Earbus private program into its fourth year of service delivery.

The program is well established and ready to continue to deliver this essential, free service to West Australian families.

Hear Today Clinic

Our Wembley Clinical service expansion continued in 2018 with 3 Audiologists joining the team at the beginning of the year. Senior Audiologist Nicola Linton commenced in a part-time capacity to assist in the Clinical Supervision of 2 new graduate Audiologists Belinda Porte Garcia and Rachel Meddings. Belinda and Rachel both have a passion for rural and remote work, in particular with Aboriginal Communities. Nicola Linton works part-time at the University of Western Australia and provided an ideal synergy between Earbus and the University program.

In the second half of the year Audiology students have undertaken rural and remote Outreach trips to the Goldfields and Pilbara regions to expand their knowledge and understanding of Aboriginal children and hearing techniques.

The Hear Today Clinic continued to provide services to children of all ages following newborn hearing screening. This clinic saw an increase in the number of families attend for appointments to have their children's hearing checked. Many of these children had risk factors for hearing loss identified at birth or have ongoing middle ear pathology which warrants hearing assessment to ensure speech and language development is not adversely affected.

Mr Anton Hinton-Bayre (ENT surgeon) continued to provide infant diagnostic services to families who have referred from newborn hearing screening. 85 babies were referred for diagnostic services in 2018 and 24 babies were diagnosed with a permanent hearing loss. An additional 11 babies identified with conditions needing ongoing surveillance.

In May this year Earbus presented at National Audiology Australia Conference in Sydney showcasing Outreach services in the Pilbara and Goldfields regions as well as highlighting some issues unique to Western Australia in terms of Diagnostic services for newborns. These papers were well received and promoted understanding of the distinctive issues facing Aboriginal people across Australia.

In addition to these services Earbus Audiologists supervised a Speech Pathology student from Curtin University, provided Audiology services to Hedland Health Campus ENT and Community Health, and Audiology services to Newman township. Earbus Audiologists also provided over 15 weeks of Audiology services to WA Country Health services in the Kimberley. These services have been provided since 2015 and assist in ensuring that children who move around the regions are more easily located.

A busy year made possible with the help of many hands on deck!



Kimberley

In September 2017 the WA State Government confirmed a budget allocation to expand the Earbus Program into the Kimberley region of Western Australia. The funding through the Royalties for Regions (RfR) comprises a once only capital payment in the first financial year and recurrent funding for three financial years. WA Country Health Service (WACHS) Kimberley is responsible for the management and delivery of this commitment via a Grant Management Agreement with Earbus Foundation Western Australia. An initial planning workshop with members of the Kimberley Aboriginal Health Planning Forum (KAHPF) including Aboriginal Medical Services (AMSs) was held in Broome on 5 October 2017. Partnership meetings between KAHPF Ear Health Co-ordinating Panel and EFWA have considered principles of service provision, care pathways, electronic clinical record systems and the Kimberley Regional Ear Health Strategic Plan 2016-2018.

Earbus services officially commenced in East Kimberley in May 2018. The target communities were Wyndham, Halls Creek, Kununurra, Yiyili and Ringers Soak. A locally-based Screening Team was recruited and trained and in place for the commencement of regular screening in July supplemented by monthly clinical visits from Perth-based nurses, audiologists and GPs. In the remaining 6 months of 2018 over 550 Aboriginal children accessed the program and we expect this number to double as the program rolls out to all sites.

As the most remote and challenging region in WA, the Kimberley has presented some special challenges for a Perth-based Outreach service but we have received wonderful support from both of our partner Aboriginal Medical Services (Yura Yungi in Halls Creek and OVAHS in Kununurra). We also acknowledge the warm welcome from schools, daycares and playgroups across the East Kimberley. Wherever we have been able to consult with Aboriginal Elders and communities we have had uniformly generous welcomes, strong engagement and unstinting support.

The Kimberley Earbus is a highly collaborative project and we have appreciated the guidance and local knowledge of WACHS Regional Director, Bec Smith. Bec has worked hard to smooth the pathway for Earbus to be an effective provider in the region. KAMS CEO Vicki O'Donnell who is a fearless and forthright advocate for her people has been very clear about how the Earbus needs to align with local service providers in order to add value to the regional ear health focus. East Kimberley Ear Health Coordinator Steve Italiano has been an important link and an invaluable sounding board. I also thank Carol Guerts at Catholic Education office in Broome who has strongly promoted the Earbus to schools across the Kimberley.

Rotary Club of Karrinyup funded, co-designed and commissioned the building of the Kimberley Earbus and it has been very satisfying to deploy the bus which has now become a familiar sight on the roads in our far north. Our continuing thanks and respects to our Rotary friends for their remarkable support and donation. We look forward to contributing more to the Kimberley ear health landscape in the year ahead.



Pilbara

As with all our programs, collaboration has again this year been fundamental to our continued success in the Pilbara. Of particular note, our partnership with Wirraka Maya Health Service, who continue to offer their local support both clinically and logistically. We were also delighted to participate in their NAIDOC event this year and enjoyed the opportunity to connect with families outside of the usual clinical setting. Collaboration and partnership with schools, playgroups and child care centres has also remained strong and has resulted in a year-end consent rate of 81% - a good result given the inherent transience in school populations in the region.

The Pilbara team encountered a year of change and transition but as with the Goldfields, Dee Parker supported the team throughout the year as they found their feet. Belinda Porte Garcia joined the team as Audiologist and nurses Taliesha Peckham, Tracy Darby and Michelle Andrew joined the team at various points throughout the year. The team were supported by Clay Walker and joined by a range of visiting clinicians. A nursing student from Marr Mooditj and audiology students from UWA joined the team for trips, supporting the program and learning from our clinicians. The team were also joined by photographer Lisa White, who donated her time, documenting the trip and producing a wonderful suite

of images for Earbus to use to demonstrate the impact of our programs.

As always the team needed to remain adaptable and flexible this year – weather conditions, cultural business and school activities raised challenges to itineraries but armed with contingency plans the team ensured that the time spent on the ground was maximised to provide services to as many children as possible. Special thanks to the schools, playgroups and child care centres who are always as accommodating as possible to any last minute changes!

Goldfields

This year we introduced a new, purpose-built clinical bus to the Goldfields. Adorned with local artwork by students from Leonora DHS and Laverton School, the new bus is a child-friendly, culturally inclusive space from which we can deliver clinics in any location. The bus has enabled the team to increase their efficiency as it eliminates the need for constant packing and unpacking of equipment and materials at each site. The bus was officially launched at an event at Laverton School in May with coverage from the Kalgoorlie Miner and ABC Radio.

It was a year of transition for the Goldfields outreach team. Special mention must be made of Dee Parker, who helped steward the team through a time of change, stepped in as needed and kept things running smoothly. Rachel Meddings stepped into the role of Audiologist this year and took on the Goldfields as her primary outreach focus. Nurses Taliesha Peckham, Tracy Darby and Sarah Watson joined the team at various points throughout the year and the team were supported by Clay Walker in the role of Outreach Admin Support Officer. The team were joined by a range of visiting clinicians as well as a nursing student from Marr Mooditj and audiology students from UWA.

Earbus continued to participate in the Goldfields Ear Health Stakeholder Group, contributing to service

mapping and sector discussions. Local service delivery partners such as Bega Garnbirringu Health Service, Leonora Pharmacy, Wizard Pharmacy, Leonora and Laverton Hospitals alongside many Community Health Nurses and School Health Nurses helped us to ensure continuity of care for patients and supported us with logistics.

The team delivered 10 trips to the region over the year. It is a testament to the strong relationships in the region that the year ended with a consent rate of 84% for Aboriginal and at-risk children at the sites Earbus visits. As always, engagement with schools was strong and Earbus were delighted to participate in additional activities such as the NAIDOC Day event at East Kalgoorlie PS.



South West

In 2018 Earbus Foundation of WA continued its pro bono support for Djidi Djidi Aboriginal School in Bunbury and from Term 2 expanded throughout the South West region. Existing team members Jammima West (screener); Dee Parker (Nurse Audiometrist); and Lara Shur (Director Clinical Services and Audiologist) developed the School Program to a total reach of 15 schools over the year. The South West Earbus features a colourful design created by Year 6 Djidi Djidi students Kassie Allan and Deakin Williams. Displaying local Noongar art places a unique stamp on the purpose built vehicle. In Term 3 Djidi Djidi Principal Tegan Piacentini and Deputy Principal Bronwyn Mumme opened their doors to provide a permanent office space for the Earbus Program on the school grounds. The South West team also added Nurse Practitioner Victoria Thomas to the clinical team.

This specialised ear health program is delivered at no cost to any schools and was able to be delivered thanks to a list of generous sponsors including Alcoa, PEACH, Stan Perron Charitable Foundation, the McCusker Charitable Foundation, donor Brad Piacentini, Aurizon, MZI Resources and the Ian Potter Foundation. With the donations and resources from these partners the Earbus Foundation of WA School Program increased its Total Number of Screens from 271 (in 2017) to 1179 screens – over a 400% increase in service provision. The total number of children screened also increased from 106 to 1095 and this was attributed to the high consent rates across many schools. Six South West schools achieved consent rates of 100% for their Aboriginal students. These included Glen Huon Primary School, Coinda Primary School, Parkfield Primary School, College Row School, South Bunbury Education Support Centre and Djidi Djidi Aboriginal School. Principals of these schools were formally acknowledged by CEO Paul Higginbotham at an award ceremony held at the new Earbus office.

In Term 4, Metropolitan and South West Services Coordinator, Caris Jalla, joined the team to support the growth of the South West Program to include the Peel region, with Waroona District High School added to the

program. This milestone was celebrated with a morning tea launch with local stakeholders and sponsored by the Alcoa Community Partnership team. An art competition, with prizes distributed by Starlight Captains, made this event a memorable day for the students.

As in previous years Earbus Foundation of WA maintains collaborations with South West Aboriginal Medical Service (SWAMS) and the WA Country Health Service's Nurses. The Earbus Audiologist and Nurse Practitioner provided additional supports and services for children who have limited access to Primary Health Care services. Audiologists also worked closely with the SWAMS ENT Clinic to provide additional specialists for the region. At the end of 2018 the rate of Otitis Media (OM) in the School Program was 7.6% and the rate of chronic suppurative otitis media (CSOM), known as "runny ears" had dropped to 0.59%. This rate is higher than national prevalence of just 0.1% (among non-Indigenous children) but lower than the World Health Organisation's public health emergency prevalence rate of 4%. Over the new year the Earbus Foundation of WA will work towards reducing this further and continue to work towards healthy ears and appropriate hearing for Aboriginal and at-risk children.

Regional Statistics

GOLDFIELDS DATA SUMMARY 2018

Table 1: Summary of services during the reporting period – Goldfields

Trip	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
Total Screens	157	172	127	170	128	145	179	132	123	182		1515
Average Screens Per Day	31.4	43	31.75	34	32	36.25	35.8	33	30.8	36.4		34.4
Total Consults	450	389	317	388	268	291	443	259	256	474		3532
Consent Rate	74%	80%	81%	83%	83%	84%	84%	84%	84%	-		84%
Under 4's Screened	7	9	4	1	4	2	5	2	3	17		54
As a %	4.5%	5.2%	3.1%	0.6%	3.1%	1.4%	2.8%	1.5%	2.4%	9.3%		12.3%
HL	31	28	19	16	14	24	32	20	11	35		230
OM	30	22	21	26	19	23	38	18	15	42		254
OM %	19.1%	12.8%	16.5%	15.3%	14.8%	15.9%	21.2%	13.6%	12.2%	23.1%		17%
CSOM	10	5	6	6	4	11	10	1	3	3		59
CSOM %	6.4%	2.9%	4.7%	3.5%	3.1%	7.6%	5.6%	0.8%	2.4%	1.6%		3.9%

PILBARA DATA SUMMARY 2018

Table 2: Summary of services during the reporting period – East Pilbara.

Trip	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
Total Screens	130	88	131	105	108	176	120	138	101	116	128	1341
Average Screens Per Day	32.5	22	32.8	26.3	27	44	30	34.5	25.3	29	32	31.2
Total Consults	358	214	288	276	233	387	238	367	206	248	238	3053
Consent Rate	76%	79%	82%	81%	84%	84%	81%	82%	82%	-	-	82%
Under 4's Screened	27	21	18	28	5	24	13	16	23	16	23	214
As a %	20.8%	23.9%	13.7%	26.7%	4.6%	13.6%	10.8%	11.6%	22.8%	13.8%	18%	16%
HL	10	15	23	15	11	8	16	32	13	28	13	184
OM	8	15	9	28	12	18	21	31	36	26	38	242
OM %	6.2%	17%	6.9%	26.7%	11.1%	10.2%	17.5%	22.5%	35.6%	22.4%	29.7%	18%
CSOM	3	9	1	13	5	2	9	17	11	7	16	90
CSOM %	2.3%	10.2%	0.8%	12.4%	4.6%	1.1%	7.5%	12.3%	10.9%	6.0%	10.2%	7%



SOUTH WEST DATA SUMMARY 2018

Table 3: Summary of services during the reporting period – South West

Trip	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	YTD
Total Screens		72		48	126	45	250	149	156	271	62	1179
Average Screens Per Day		36		24	42	22.5	83.3	74.5	52	67.8	31	54
Total Consults		110		48	157	45	314	202	206	391	93	1566
Consent Rate		85%		86%	85%	88%	78%	77%	79%	75%	75%	81%
Under 4's Screened		1		7	18	5	36	19	12	31	6	135
As a %		1.4%		14%	14%	11%	14%	12%	7%	11%	9%	11%
HL		18%		0%	5%	0%	4%	8%	2%	0%	0%	4%
OM		7		3	7	2	13	16	21	17	3	89
OM %		9%		6%	5%	4%	5%	10%	13%	6%	4%	7%
CSOM		0		0	0	0	0	1	4	2	0	7
CSOM %		0.00%		0%	0%	0%	0%	0.7%	2.6%	0.7%	0%	0.6%

Where We Operate:

Pilbara

South Hedland:

1. Baler Primary School
2. Cassia Primary School
3. South Hedland Primary School
4. Treloar Early Learning Centre
5. Rose Nowers Early Learning Centre

Port Hedland:

6. Port Hedland Primary School

Other:

7. Warralong Remote Community School
8. Strelley Remote Community School
9. Yandeyarra Remote Community School
10. Nullagine Remote Community School
11. Marble Bar Primary School

Summary Outcomes & Activity Data:

Total children screened (unique)	565
Total number of screens	1341
Average screens per day	29
Total consults	2957
Average consults per day	71
Consent rate	82 %
New children seen in 2018	179
Children under 4 yrs	214
Avoidable hearing loss	14 %
Diagnosed otitis media	18 %
Chronic ear disease (CSOM)	7 %

Where We Operate:

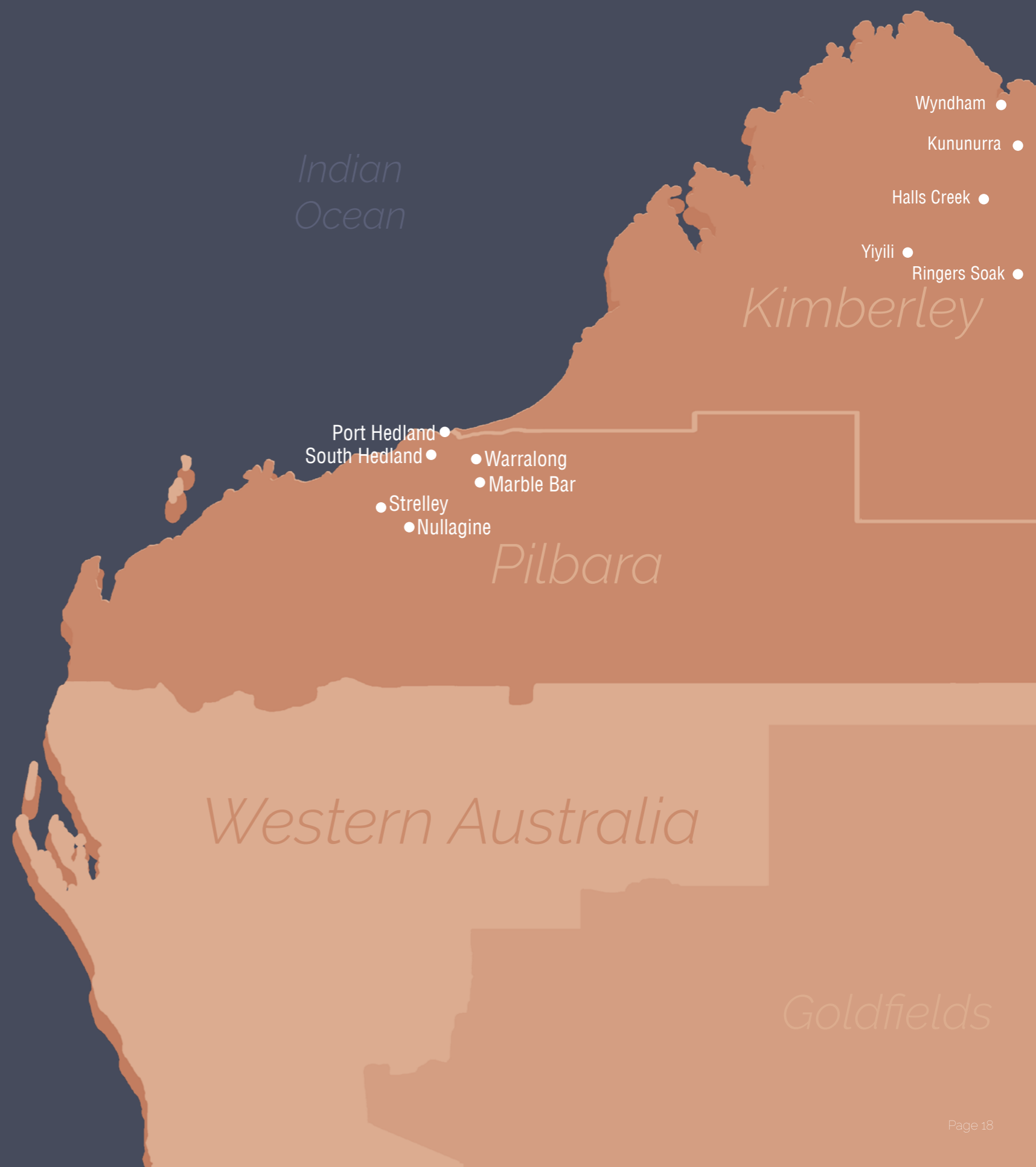
Kimberley

Kimberley

1. Wyndham
2. Kununurra
3. Halls Creek
4. Yiyili
5. Ringers Soak

Summary Outcomes & Activity Data:

Total children screened (unique)	552
Total number of screens	1101
Average screens per day	19
Total consults	1897
Average consults per day	60
Consent rate	75%
New children seen in 2018	549
Children under 4 yrs	161
Avoidable hearing loss	20 %
Diagnosed otitis media	29.3 %
Chronic ear disease (CSOM)	7.1 %



Where We Operate: Goldfields

Kalgoorlie-Boulder:

1. South Kalgoorlie Primary School
2. East Kalgoorlie Primary School
3. Boulder Primary School

Kambalda:

4. Kambalda West District High School
5. Kambalda Primary School

Esperance:

6. Nulsen Primary School
7. Wongutha CAPS

Coolgardie:

8. Coolgardie Primary School
9. Coolgardie CAPS

Other:

10. Menzies RCS
11. Leonora DHS
12. Laverton DHS
13. Kurrawang Community
14. Mt Margaret

Summary Outcomes & Activity Data:

Total children screened (unique)	947
Total number of screens	1515
Average screens per day	32
Total consults	3532
Average consults per day	80.3
Consent rate	84 %
New children seen in 2018	205
Children under 4 yrs	54
Avoidable hearing loss	15 %
Diagnosed otitis media	17 %
Chronic ear disease (CSOM)	3.9 %

Where We Operate: South West

Bunbury:

1. Capel Primary School
2. Carey Park Primary School
3. College Row School
4. Cooinda Primary School
5. Dalyellup Primary School
6. Djidi Djidi Aboriginal School
7. Eaton Primary School
8. Glen Huon Primary School
9. Kingston Primary School
10. Parkfield Primary School
11. South Bunbury Primary School
12. South Bunbury Education Support Centre
13. Treendale Primary School
14. Tuart Forest Primary School

Waroona:

15. Waroona District High School

Summary Outcomes & Activity Data:

Total children screened (unique)	478
Total number of screens	1179
Average screens per day	19
Total consults	1566
Average consults per day	71
Consent rate	81 %
New children seen in 2018	411
Children under 4 yrs	135
Avoidable hearing loss	4.1 %
Diagnosed otitis media	7.5 %
Chronic ear disease (CSOM)	0.6 %

Indian
Ocean

Pilbara

Western Australia

● Laverton

● Leonora

● Menzies

Goldfields

● Kambalda

● Kalgoorlie - Boulder

Coolgardie ●

● Esperance

Perth

● Waroona

● Australind

Bunbury ●

● Capel

South
West

Clinical Patron and Board Profiles

Professor Harvey Coates AO

Clinical Patron

Professor Harvey Coates AO was the recipient of the Inaugural Aboriginal and Torres Strait Islander Health Medal from the Royal Australasian College of Surgeons to recognise his outstanding contribution to closing the Indigenous health gap. After more than three decades treating children in remote locations, Professor Coates has seen the damage that chronic otitis media causes in Aboriginal children in regional Western Australia. In 2005 he was awarded the Order of Australia for his lifetime's contribution and outstanding achievements. Earbus Foundation is honoured to have Professor Coates as our Clinical Patron.



Pictured: Professor Harvey Coates AO

Dr Carol Dowling

Board Chair

Carol Dowling is a Badimaya/Yamatji woman whose family comes from Coodingnow & Wydgee Stations in the Central West of Western Australia. She is the long serving Chairperson of Dumbartung Aboriginal Corporation and former Chair of Noongar Radio 100.9FM in Perth. Carol is also an award winning radio documentary producer.

Carol holds a Masters in Indigenous Research and Development from Curtin University and her doctorate was conferred in 2018. Her research focuses on the impact

of colonialisation upon five generations of women in her family. Her twin sister is Julie Dowling, one of Australians prominent portrait painters.

Carol is a long-term foster mother with three sons – two school aged and a baby under 12 months. In 2011/12, Carol completed a major documentary series for the federal health department on Aboriginal child ear health in her community. Her series is a two time finalist in the National Community Broadcasting Association of Australia

awards and winner of this award in 2013. The documentary series highlights the lived experience of Aboriginal families in Noongar country (south west of Western Australia) who live with the impact of Otitis Media in the lives of their children while promoting its prevention and treatment to Aboriginal audiences in Western Australia. Carol won the Australian Human Rights Commission award for radio for this series in 2013.

Dr Robyn Williams

Board Member

Dr Robyn Williams is a Nyoongar woman with extensive experience as a FASD trainer, advocate and researcher. This expertise includes International FASD training in North American/Canada and many years' experience working with families. Since 2008, Robyn has worked in an advocacy role supporting families caring for children with FASD. In 2014, Robyn presented at International conferences on FASD in Canada and North America. This trip also included an intensive five-week study tour

where she was trained and continues to be mentored by leading international experts in FASD. Robyn completed her PhD on FASD in the South West region of WA, and has developed a FASD training package for professional development and families caring for children with FASD. This training has been rated highly by participant feedback and evaluations from participating agencies. Robyn's professional roles have included working at various health agencies, among them Derbarl Yerrigan Health Service,

Aboriginal Alcohol and Drug Service, Edith Cowan University and the Office of Aboriginal Health (Western Australia). She currently works at Curtin University's Centre for Aboriginal Studies.

Lara Shur

Director of Clinical Services

Lara Shur has an undergraduate Honours degree in Speech & Hearing Therapy, a Masters degree in Audiology and a Graduate Certificate in Business Management. She joined the Earbus Foundation of WA (EFWA) as Director, Clinical Services in 2013.

Lara was previously Manager of Clinical Support WA & NT for the Department of

Health & Ageing's Office of Hearing Services. Before joining the Earbus Foundation, Lara was responsible for running the newborn hearing screening program in WA's private hospital sector. She also managed private audiology services and cochlear implant programs for children.

Lara was responsible for the design brief

and roll-out of the Pilbara Earbus as well as the Perth South Metro Earbus and managed Perth East Metro and Bunbury Earbuses for 3 years prior to joining EFWA. She began her career in Audiology in South Africa, reaching the position of Senior Audiologist and Speech Therapist at a large public hospital in Soweto.

Steve Shur

Board Treasurer

Steve is an Insurance Broker with 39 years' experience in the industry. From 1989 to 2000 he operated Stephen Shur Investments in South Africa. This was a general insurance brokerage that he started and was successful in the Johannesburg area.

He holds a Diploma of Financial Services (Insurance Broking) and responsible for the day to day administration and providing advice to his clients on insurance cover and what is required to protect their legal obligations and risks.

Steve was a member of Toastmasters

International for over 20 years, and achieved DTM status which is the highest level of recognition for public speaking and education provided within the programme.

Steve enjoys keeping fit and training at the gym, he is a keen supporter of the Wallabies and follows the Australian cricket squad.

Dr Michelle Pearce

Board Member

Dr Michelle Pearce has a background in primary and secondary teaching. She has a Masters degree and a PhD in Special Education. Her research focussed on preparing secondary school teachers to teach every student.

Originally trained as an English and History teacher, Michelle has dedicated much of her career to teaching children with disabilities

and learning difficulties in NSW. She was Principal of Tamworth Base Hospital School before moving to WA in 1999. Michelle was the K-12 Special Education consultant for gifted and talented students, and those with disabilities and learning difficulties in 140 schools that were members of the Association of Independent Schools WA, including independent Aboriginal schools in remote areas.

Michelle has lectured in special education at Curtin and Notre Dame Universities, and is currently contracted to Edith Cowan University. She has worked on research projects such as Helping Children with Autism: Positive Partnerships (national); A project to improve the learning outcomes of students with disabilities in early, middle and post compulsory years of schooling (ACT); Better Beginnings and KindiLink (WA).

Wendy Duncan

Board Member

Former Member for Kalgoorlie, Wendy Duncan, was born in Kalgoorlie and grew up on a pastoral station in the goldfields. She was educated by School of the Air and recalls times when she went out gathering bush tucker with the local Aboriginal women as among her most precious memories. Wendy's passion for politics and concern for human rights was awakened by a year on a Rotary Exchange scholarship in South Africa during the apartheid era. She cites Nelson Mandela as one of her strongest influencers. After completing a degree in politics and Australian history at the University of Western Australia Wendy undertook post-graduate studies in Canberra and worked with the National Farmer's Federation on its formation. On her return to Western Australia Wendy and

her husband ran their own business in the pastoral industry and farming in Esperance. During that time Wendy had four children, worked with law firms, local government and small rural enterprises while studying externally through Curtin to gain a Graduate Diploma of Business.

Seeing the neglect of regional areas by government, Wendy became involved in the Nationals rising to be its first female State President. Working alongside Brendon Grylls, she helped develop the Royalties for Regions policy. She entered Parliament in 2008 and successfully held three seats – two in the Legislative Council and one in the Legislative Assembly, retiring at the 2013 election. Wendy was the first female Leader of the Nationals in the Legislative Council,

Parliamentary Secretary to the Minister for Regional Development, and Deputy Speaker in the Legislative Assembly. More recently Wendy graduated from the Institute of Company Directors Course.

During her time in Parliament Wendy was a passionate advocate for regional development with a particular focus on the health and well-being of those in more remote areas, and the mining industry and mining education. She was the founding chair of headspace Kalgoorlie-Boulder and actively campaigned on issues of FASD and aboriginal child health and has been a passionate supporter of Earbus Foundation since its inception.



ONE

Earbus Foundation wins WA Telstra Business Award in Social Change Maker category

Social Media mentorship with Hancock Creative boosts internet presence and reach

TWO

Kimberley Earbus program commences in East Kimberley region

Full Executive Team recruited for organisational leadership

THREE

SW Earbus program underway with major funding from Ian Potter Foundation and Stan Perron Charitable Trust

Earbus agrees Head Office move to new premises in Northbridge

FOUR

Minara Community Foundation and AngloGold Ashanti fund new Earbus for Goldfields

Neilson Foundation continues support with another \$100,000 donation

FIVE

Newborn Hearing Screening contract extended

MOU signed with Bega Garnbirringu Aboriginal Medical Service in Kalgoorlie

SIX

SEVEN

EIGHT

NINE

TEN

Financial Snapshot

Operating Results

In 2018 Earbus Foundation returned a net surplus of \$603,000, well in excess of a budget projection for the year of \$200,500. There was an abnormal item contribution to the surplus from WA State Government Kimberley funding for 2017 being received mid-year 2018 and thus providing a higher than expected result.

Total income for the year was \$2,943,000 with expenses of \$2,340,000. Overall revenue was around 50% up on 2017 due to expanded operations in the Kimberley and SW regions of Western Australia. Earbus Foundation sets a budget Profits to Earnings Ratio of 7%; this year's P/E ratio was 18.8%.

In all five years since clinical services commenced Earbus Foundation has returned annual surpluses in line with, or exceeding, budget projections. Surplus accumulated funds are held as contingency to support long term stability, business reinvestment and eventually providing an option of establishing operational headquarters in proprietary premises. Current accumulated cash assets stand at \$1,295,000.

Capital Assets

The acquisition of the Goldfields Earbus added to the Foundations' asset base in 2018, as did the purchase of two 4WD vehicles in the Kimberley. Significant

equipment purchases included a full suite of audiology and medical equipment for each of the two new regions as well as other audiology and medical equipment funded by grants and donations. Non-current assets stand at \$657,000.

Funding Sources

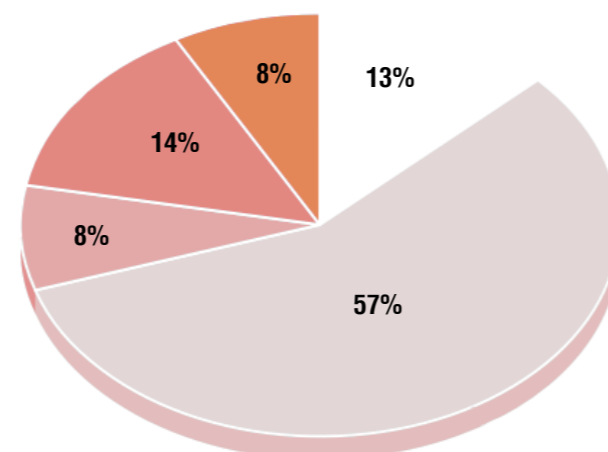
Earbus holds contracts with both state and federal governments, provides contracted audiology services to WACHS, generates significant fee income from testing and assessment services at its Wembley office (and elsewhere) and attracts philanthropic support from individuals and charitable trusts. The Neilson Foundation has been the largest individual contributor with donations of \$100,000 in each of the past three years.

In 2018 Earbus Foundation submitted 24 grant applications of which 14 were successful. Among our new multi-year sponsors in 2018 we welcomed ALCOA, MZI Resources and Ian Potter Foundation.

Earbus Foundation's Annual Audited Financial Statements are lodged with the Australian Charities and Not-for-profit Commission and can be downloaded from their website at www.acnc.gov.au

Funding Sources

Australian Government Funding	13%
WA State Government	57%
Fee for Service	8%
Grants and Donations	14%
Sponsorships	8%



Sponsors & Thanks



Donors 2018

ATCO
 Fortescue Community Grants
 Department of PM and Cabinet
 Easternwell Community Grant
 Fortescue Metals Group FMG
 Honda Foundation

McCusker Charitable Foundation
 Minara Foundation
 Non-Government Centre Support
 Norton Gold Fields Limited
 Sisters of Charity
 Aurizon
 Brad Piacentini
 Fortescue Community Grants

PEACH Alcoa.

Funders 2018

WA Royalties for Regions
 WA Health Department



**HEAR
TODAY
SHINE
TOMORROW**

Above: CJ Walker (Earbus Data Officer) on Outreach trip

Earbus Team

BOARD OF DIRECTORS

Dr Carol Dowling – Chair
Wendy Duncan – Vice Chair
Stephen Shur – Treasurer
Dr Michelle Pearce – Secretary
Lara Shur
Dr Robyn Williams

STAFF

LEADERSHIP

Emma Cahill – Program Manager, Outreach
Suzie Costello – Program Manager, Newborn Screening
Paul Higginbotham - Chief Executive Officer
Caris Jalla – Program Co-ordinator, SW & Metro Programs
Konrad Mills – IT and Data Management
Lara Shur – Director, Clinical Services

Administration

Silvana Principe - Office Administration
Shirley South – Office Administration
Marijana Taras - Office Administration
CJ Walker – Data Officer

AUDIOLOGY

Lydia Lai – Audiologist
Nicky Linton – Senior Audiologist
Rachel Meddings - Graduate Audiologist
Belinda Porte Garcia – Graduate Audiologist

Screening & Treatment

Michelle Andrew – Registered Nurse, Pilbara
Lauren Costello – NBHS Screener
Amanda Del Dosso - NBHS Screener

Grahame Gould – Kimberley Data and Administration
Deb Howe - NBHS Screener
Symone Ishak - NBHS Screener
Ros Lander - NBHS Screener
Ailish Lawrie - NBHS Screener
Alessandra Melis – Kimberley Screener
Shohreh Meshgin – NBHS Screener
Dee Parker – Training & Quality Standards
Breanna Roberts - Kimberley Screener
Marie Stagoll - NBHS Screener
Janine Tassicker - NBHS Screener
Sarah Watson – Registered Nurse, Goldfields
Jammima West – SW Screener

CONSULTANCY SERVICES

Altheon Ink – Design Services
Diane Boyce Bookkeeping
Joan Garaffolo – Cleaning Services
Orba Travel
Stephen Parker – Electrical Design

Publis – PR and Media

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