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| **Priority for Access to Hearing Aid Funding****Please attach to your Hearing Aid Funding application in Enable Online 0800 362 253** |
|  |
| **CLIENT / AUDIOLOGIST** |
| Client Name |       | NZAS member |       |
| Date of Assessment |       |  |  |
| **DURATION OF HEARING LOSS (*Select 1 only*)** | **Score** |
| Since childhood | [ ]  | 20 |
| Sudden and severe | [ ]  | 20 |
| Other | [ ]  | 0 |
| **OTHER DISABILITY (*Select 1 only)*** | **Score** |
| Significant visual disability | [ ]  | 20 |
| Significant physical or intellectual disability that impacts on the person’s ability to communicate effectively and safely | [ ]  | 20 |
| Not applicable  | [ ]  | 0 |
| **FINANCIAL STATUS (*Select 1 only*)** | **Score** |
| CSC holder [ ]  | CSC #11       | Expiry Date:       | 10 |
| SGC holder with CSC Card [ ]  | CSC #12       | Expiry Date:       | 10 |
| Not applicable | 0 |
| **HEARING LOSS (3FA13) (*Select 1 only per ear*)**  |
|  | **Better ear** | **Score** | **Worse ear** | **Score** |
| Severe (>70 dB) | [ ]  | 15 | [ ]  | 5 |
| Moderately severe (56-70) | [ ]  | 15 | [ ]  | 5 |
| Moderate (41-55) | [ ]  | 10 | [ ]  | 5 |
| Mild (26-40) | [ ]  | 7 | [ ]  | 3 |
| Slight (16-25) | [ ]  | 3 | [ ]  | 2 |
| Normal | [ ]  | 0 | [ ]  | 0 |
| **HIGH HEARING NEEDS (*Select 1 only*)** | **Score** |
| Education14  | [ ]  | 10 |
| Communication at work (paid / unpaid) | [ ]  | 10 |
| Safety at work (*if hearing aid use feasible in work environment*) | [ ]  | 10 |
| Care of dependents | [ ]  | 10 |
| Not applicable | [ ]  | 0 |
| **PERCEIVED DISABILITY15 (*Select 1 only*)** | **Score** |
| HHI score > 25 | [ ]  | 10 |
| HHI score 10 - 24 | [ ]  | 5 |
| HHI score 0 – 10  | [ ]  | 0 |
| Could not test | [ ]  | 0 |

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| **EXPECTED OUTCOME / PREVIOUS USE (*Select 1 only*)** | **Score** |
| Good capacity and motivation to benefit / high use in past | [ ]  | 10 |
| Medium benefit / historical use | [ ]  | 5 |
| Poor benefit / use | [ ]  | 0 |
| **HEARING AID/S USE AND FUNCTION (*Select 1 only*)** | **Score** |
| Both (or only) aid/s currently not functioning and / or beyond economic repair | [ ]  | 10 |
| 1 of 2 aids currently not functioning | [ ]  | 8 |
| Never worn aids before | [ ]  | 8 |
| Frequent breakdowns | [ ]  | 6 |
| Aids inadequate for current hearing level | [ ]  | 4 |
| Hearing aids functioning normally / or adequate | [ ]  | 0 |
| Date current hearing aid/s provided |       |
| **EDUCATIONAL, OCCUPATIONAL OR PSYCHOLOGICAL STATUS (*Select 1 only*)** | **Score** |
| Immediately threatened | [ ]  | 1016 |
| Threatened but not immediately | [ ]  | 8 |
| Not threatened but more difficult | [ ]  | 6 |
| Comment:       |
| *Note: Prioritisation will be based upon the needs of the client – the threshold score for Priority 1 or Priority 2 may vary according to demand for services and budget availability.* |
| **PRIORITISATION: Score**  |       |

11 CSC # and expiry date

12 Or # and expiry date of Super Gold Card with CSC certification

13 Average hearing loss over 3 worst frequencies of 500 Hz, 1 kHz, 2 kHz and 4 kHz

14 *Enrolled in formal tertiary education*

15 *Score on HHI-ES or HHI-AS (of maximum 40)*

16 *Provide written evidence*