

Ethical Considerations in Audiology Practice

AAA 2021 Virtual
Friday, April 16, 2021
12:30-1:30 pm

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Overview

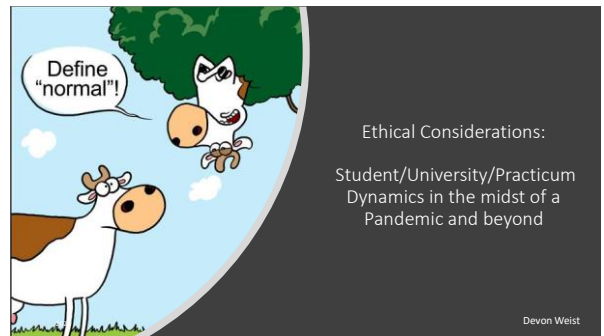
- Disclaimers
- Students and Global Pandemic
- Issues in Daily Practice
- Over-the-counter hearing aids
- Q & A

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Disclaimers

- The content of this presentation does not reflect or represent the views of the presenters' employer or professional affiliations.
- The presentation does **NOT** constitute legal advice. Please consult with your attorney if you have questions regarding legal practice and/or professional behavior in your area.
- The content of this presentation does not comprise an exhaustive representation of all professional or legal viewpoints.

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Presenter Disclosures



- Clinical Instructor and Hearing Clinic Director
 - University of South Florida Communication Sciences and Disorders Department
- American Academy of Audiology Executive Board, Member at Large
 - 2019-2022

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Framework for Ethics and Students

- Stakeholders
 - Universities
 - Students
 - Patients
 - Profession



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Where do we begin?

Dewane, C.J. (2007)

- Professionalism and Ethics
 - Are these one in the same?
 - How do we train students to be professional and ethical?
- **Professionalism** = the skills, competence, and conduct displayed by an individual of a certain profession
- **Ethics** = guidelines for individuals, which clearly state the dos and don'ts.



<https://www.audiology.org/sites/default/files/publications/resources/201910-CodeOfEthicsOf-AAA.pdf>

AAA Code of Ethics Review

- There is no Code of Ethics specific to precepting students
- However, you could argue that every principle in the Code of Ethics applies to the supervisory relationship in some way
 - Principle 2: Members shall maintain the highest standards of professional competence in rendering services
 - Rule 2d: Individuals shall provide appropriate supervision and assume full responsibility for services delegated to supportive personnel. Individuals shall not delegate any service requiring professional competence to unqualified persons.
 - Rule 2e: Individuals shall not knowingly permit personnel under their direct or indirect supervision to engage in any practice that is not in compliance with the Code of Ethics.

Ethics in a pandemic?

- New priorities and responsibilities
 - Safety
 - Patients and yourself
 - Limited supplies
 - Survival
 - Staying open and then reopening
 - Paying Bills when clinic has been closed
- Where do students fit in?
 - Clinical Policies
 - University Guidelines
 - FERPA



FERPA and University Policies

- What is FERPA? Federal Law that protects the privacy of student's education records University Memorandums of Agreement
 - Applying these rules during a Pandemic
 - Student vs Employee
 - Affiliation Agreements
- University Waivers
 - Many Universities required students upon returning to clinical practicum to sign waivers about potential COVID risks



<https://studentprivacy.ed.gov/>

How COVID Changed Everything....



- Costs of maintaining PPE when clinics were closed for months

Limiting number of people in the clinic

- Students are extra people
- Patients leery of working with students

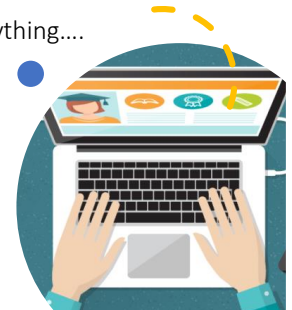
- Not seeing normal case loads

Telehealth capabilities

- Training on using online platforms

How COVID Changed Everything....

- **Offsite Placements (3rd year and externships)**
 - Clinics couldn't fulfill commitments made before the pandemic
- **Universities creatively began implementing alternative learning**
 - Virtual Clinic: case scenarios, simulations
 - Telehealth
 - Telesupervision
- **Ensuring patient-centered care**
 - Are simulations the same as the real thing?
 - Is it possible to still make connections when taking COVID precautions?



Modeling Ethical Behavior



Ethical Responsibilities outside of "Audiology Student Hours"

- Following CDC Guidelines for social distancing, avoiding groups, and wearing masks in public
- Choices have consequences: spreading the virus to classmates, faculty, preceptors, and patients

Vaccination Ethics

- Is it ethical as a healthcare provider to not get vaccinated?
- Vaccine was approved under Emergency Use Authorization
- Ethical principles of beneficence and nonmaleficence

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Future Directions and Take Aways

- Know your state licensing laws regarding tele-supervision
 - Work with the University clinical education coordinators so everyone is on the same page
- Simulation Based Clinical Learning has implications for the future
 - Inclement weather, patients cancel, preceptors are on medical leave HOWEVER it is not a substitute for the real thing
- Ethics of modeling best practices for COVID safety
- Open communication with students/Universities/practicums is key to having ethical conversations
 - Pandemic has been hard on everyone and things that we never thought of are suddenly part of everyday conversations

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How would you handle?



The Case of Weekend Jam Sessions

The student working with you this semester is a huge fan of music and tells you they have attended over 200 live concerts. It just so happens that the following week they show you pictures of attending an in-person concert in which no masks were worn, and social distancing was not happening. Your first patient that you see for hearing aid services happens to be an 85-year-old who is immunocompromised as he has just finished his last round of chemotherapy for lung cancer.

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How would you handle?



The Case of Supervision in Pajamas Bottoms

Your child tests positive for COVID and you are therefore required to a mandatory quarantine period. Your practice will need to reschedule the next 10 days worth of patients. However, you have an excellent 4th year extern who can certainly see most of the patients independently. Given how your practice is using Microsoft Teams for meetings and even patient appointments (it has a HIPAA compliant telehealth feature), you decide to work out a plan since you are "sitting at home" to be present in all the appointments via this teleconsulting feature.

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Tricky Issues in Daily Practice

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Important to Be Aware...

- Things that we must do
- Things that we should avoid/should not do ethically
- Things that we cannot do legally

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Use of Single vs Multiple HA Manufacturers

- Audiologist employed by manufacturer
 - Or has arrangement to sell X# of products
 - In exchange for pricing, other benefits
 - Quid Pro Quo?
- Expectation of which products will be dispensed
- Does your employer even PERMIT purchasing non-company products?

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What if There is NO Appropriate Product?

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First, Do No Harm

- The patient's needs must be met
- May need to refer elsewhere
- Attempt to get dispensation to purchase outside of the product line
- Educate the patient
 - And your employer

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How Do You Know that Hearing Aid is Appropriate for Specific Patient?

- Verification
- Validation

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Licensure Practice Act

- (In CA)
- HA Contract specifies that hearing aids are selected and fitted for the specific needs of the purchaser

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What Options Do You Have?

- Appeal to your employer to allow an alternative device
- Inform your patient that you cannot help her/him with the products you dispense
- Fit a company-approved, but less than optimal, device
- ?

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Cognitive Screening

- In our SOP?
- Permitted by State License?
- What do you do with the information?

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If Outcome of Cognitive Screening Doesn't Change Evaluation and Treatment Plan

- Should you even do it?

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What Do You Do with the Information?

- Make a diagnosis of cognitive decline?

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Insurance Authorization vs Best Practice

- Authorization is for a CPT code (92557)
- Lesser testing is performed
- OR More testing is needed
- Issues
 - Billing for services not rendered
 - OR failing to make accurate assessment/diagnosis

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Which of these 3 Issues Threaten Your License?

- All of the above

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Ultimately

- Put the needs of the patient first
- (First, do no harm)
- Be guided by your license and the professional standards that the Academy espouses.

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Ethical Considerations in Over-the-Counter Aids

Victor Bray, AuD

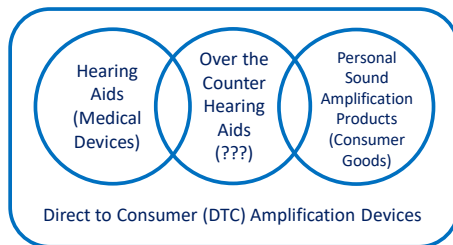
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Today's Perception?



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Today's & Tomorrow's Reality!



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Principle 1

1. Members shall provide professional services and conduct research with honesty and compassion, and shall respect the dignity, worth, and rights of those served.
1. (a) Individuals shall not limit the delivery of professional services on any basis that is unjustifiable or irrelevant to the need for the potential benefit from such services.

Communication Evaluation

Focus is on your Professional Services

Focus is on your Patient's Communication Needs

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Principle 4

4. Members shall provide only services and products that are in the best interest of those served.
4. (a) Individuals shall not exploit persons in the delivery of professional services.

Communication Strategy Plan

*PSAP → OTC → Hearing Aid → Cochlear Implant
The Lifetime Strategy is Independent of the Device*

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Principle 5

5. Members shall provide accurate information about the nature and management of communication disorders and about the services and products offered.
5. (a) Individuals shall provide persons with the information a reasonable person would want to know about the nature and possible effects of services rendered or products provided or research being conducted.

Communication Management Plan

*Hearing Ability → Amplification Target → Aided SII → Counseling
Audibility & SNR Management & Communications Access*

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