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SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY & HEARING AID DISPENSERS BOARD 1601 Response Road, Suite 260, Sacramento, CA 95815





MEMORANDUM

DATE	February 23, 2023
ТО	Audiology Practice Committee
FROM	Marcia Raggio, Committee Chair Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 4: Update, Discussion, and Possible Action Regarding Audiology Licensing Requirements Related to Supervised Clinical and Professional Experience as stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, CCR sections 1399.152.2

Background

Business and Professions Code (BPC) Section 2532.25(b)(2) requires the submission of evidence of no less than 12 months of satisfactorily completed supervised professional full-time experience (RPE) or its part-time equivalent obtained under the supervision of a licensed audiologist.... " This experience shall be completed under the direction of a board-approved audiology doctoral program. The RPE shall follow completion of the didactic and clinical rotation requirements of the audiology doctoral program.

For current hearing and balance healthcare training this statutory requirement creates restrictive aspects for program completion, thereby creating hardships for audiology doctoral students and programs that may not support adequate consumer protection for audiology and balance services.

At the Board's November 2020 Meeting, the Board approved a 2021 legislative proposal that would have modified BPC Section 2532.25 to allow some supervised clinical rotation hours to be counted toward the 12-month supervised professional experience.

This legislative proposal was included as part of the Board's Sunset Review process in 2022.

At the August Board meeting, Board staff reported that after considerable discussion and negotiation with Board staff, the Assembly Business and Professions Committee and Senate Business, Professions and Economic Development Committee (Committees) agreed to accept some of the Board's proposed amendments, which

were included in the Board's Sunset Bill AB 2686 which went into effect on January 1, 2023, as follows:

Business and Professions Code Section 2532.25

- (a) An applicant seeking licensure as an audiologist shall possess a doctorate in audiology earned from an educational institution approved by the board. The board may, in its discretion, accept qualifications it deems to be equivalent to a doctoral degree in audiology. The board shall not, however, accept as equivalent qualifications graduation from a master's program that the applicant was enrolled in on or after January 1, 2008.
 (b) In addition to meeting the qualifications specified in subdivision (a), an applicant seeking licensure as an audiologist shall do all of the following:
 - (1) Submit evidence of the satisfactory completion of supervised clinical practice with individuals representative of a wide spectrum of ages and audiological disorders. The board shall establish by regulation the required number of clock hours of supervised clinical practice necessary for the applicant. The clinical practice shall be under the direction of an <u>audiology doctoral program at</u> <u>an</u> educational institution approved by the board.
 - (2) Submit evidence of no less than 12 months of satisfactorily completed supervised professional full-time experience or its part-time equivalent obtained under the supervision of a licensed audiologist or an audiologist having qualifications deemed equivalent by the board. This experience shall be completed under the direction of a board-approved an audiology doctoral program. The required professional experience shall follow completion of the didactic and clinical rotation requirements of the audiology doctoral program. program at an educational institution approved by the board.
 - (3) Pass an examination or examinations approved by the board. The board shall determine the subject matter and scope of the examination or examinations and may waive an examination upon evidence that the applicant has successfully completed an examination approved by the board. Written examinations may be supplemented by oral examinations as the board shall determine. An applicant who fails an examination may be reexamined at a subsequent examination upon payment of the reexamination fee required by this chapter.
- (c) This section shall apply to applicants who graduate from an approved educational institution on and after January 1, 2008.

Effective January 1, 2023, the statute will allow audiology doctoral students the ability to start their 12-month professional full-time experience before the completion of the didactic and clinical rotation requirements. Board staff will await guidance from the

Board on how to implement this provision due to the need to clarify the statutory language.

To determine how best to clarify the new statutory provisions, the Audiology Practice Committee developed an online survey for audiology doctoral programs to provide the Board with programmatic information pertinent to the potential guidance and regulatory changes. The survey questions were sent out before the October Board meeting. AuD Program and Clinical Directors were requested to complete the survey by December 31, 2022.

The attached Doctoral Audiology Program (AuD) Survey Responses document is a summary of the survey responses from the following programs: San Diego State University/University of California, San Diego; University of the Pacific; San Jose State University; California State University Los Angeles; California State University Northridge; and California State University Sacramento.

Action Requested

Staff recommends the Committee review and discuss the Doctoral Audiology Program (AuD) Survey Responses and determine next steps to develop regulatory language that will implement statutory changes.

Attachment: Doctoral Audiology Program (AuD) Survey Responses

Doctoral Audiology Program (AuD) Survey Responses

At present, Business and Professions Code (BPC) Section 2532.25(b)(2) states the following: "Submit evidence of no less than 12 months of satisfactorily completed supervised professional fulltime experience or its part-time equivalent obtained under the supervision of a licensed audiologist or an audiologist having qualifications deemed equivalent by the board. This experience shall be completed under the direction of a board-approved audiology doctoral program. The required professional experience shall follow completion of the didactic and clinical rotation requirements of the audiology doctoral program."

Per the 2022 Sunset Review process, this BPC would be allowed to undergo statutory amendments related to the nature of the 12-month required professional experience. These amendments were expected to assist AuD programs and students so that they might more easily meet the time requirements of their externship programs. Thus, per the negotiated amendments, "...the statute will allow audiology doctoral students the ability to start their 12-month professional full-time experience before the completion of the didactic and clinical rotation requirements of the audiology doctoral program."

To begin to address any potential statutory changes (and later regulatory changes), board staff, in coordination with the Audiology Practice Committee Chair, developed draft survey questions that were sent to both the Program Directors and Clinic Directors of all California Audiology Doctoral (AuD) programs with the goal of their responses facilitating these potential changes. The survey questions addressed programmatic information involving a number of issues related to the timeline for accrual of the Required Professional Experience (RPE), experience verification methods, number of pre-program completion clinical rotations and a variety of other issues.

Responses to the survey were provided by representatives of the following California AuD Programs under Section 1 of the survey:

San Diego State University/University of California, San Diego University of the Pacific San Jose State University
California State University Los Angeles
California State University Northridge
California State University Sacramento

Section 2 – Your Program's Perspective on Clinical and Professional Experience Requirements for California Licensure. This section contained a number of questions for which a consensus response, when possible, is provided below.

6. Should the Board remove the "three different clinical settings" requirement for clinical rotations in current regulations and allow for the programs to determine the number of different settings?

Consensus Response: No; students already work in more than three settings; keep on Clinical Verification Form

7. Without a specified number of different settings requirements, how would your program verify the clinical rotations provide sufficient clinical practice with individuals representative of a wide spectrum of ages and audiological disorders?

Consensus Response: Follow accreditations (CAA) requirements; use Calipso to track

8. How many clinical rotations are required prior to the start of the student's externship? List the clinical nature of those rotations.

Consensus Response: 7-9; Types: vary

9. How many clinical hours are earned in each rotation? Describe the percentage of supervision for each rotation by year.

San Diego: Y1 = 135 hours, 100% supervision Y2 = 150+; 100% supervision

Y3 = 416, 75-100% supervision

Y4 = 1736, 8 hours per month supervision; 2434 hours total

Consensus Response: Supervision % varies, but matches San Diego for the most part; CSUS-100% supervision in house

- 10. Should the Board remove the allowance that 25-hours of supervised clinical rotations in a field other than audiology be counted toward licensure?

 Consensus Response: Keep this requirement
- 11. Should supervised clinical rotation hours and externship hours be tracked and reported to the Board for verification?

Consensus Response: No

12. Should tracking of supervised clinical rotation hours and externship hours distinguish when the hours are performed via tele-practice?

Consensus Response: Tracked internally; hours distinguished but not counted differently

13. Should tracking of supervised clinical rotation hours and externship hours distinguish when the hours are performed via simulation?

Consensus Response: Follow accreditation requirements, i.e., no more than 10% of hours

14. For the clinical rotation hours, should the regulations limit the number of hours allowed for certain activities? For example, non-direct patient contact, audiology-related practice (i.e., shift hours), audiology simulations.

Consensus Response: No, decided by accreditation bodies

15. For the supervised professional experience, or externship, should the regulations limit the number of hours allowed for certain activities? For example, non-direct patient contact, audiology-related practice (i.e., shift hours), audiology simulations.

Consensus Response: No, decided by accreditation bodies

16. Should the regulations allow some of the time and hours of clinical rotations to count towards the 12-month professional experience (RPE) required for licensure? Responses:

San Diego#1 11-12 month RPE, Y1-Y3 not counted; CAA allows all hours to be counted
San Diego#2 Count all student hours over the four-year program
UoP No; hours are part of the program requirements
SJ No hours requirement; count all supervised hours
LA #1 All supervised hours should count, no hour count; only 12 month experience
LA #2 No; earlier rotations are not part of the RPE
Sac All hours should count with a 12 month requirement

17. At what year in your program would it be appropriate to begin allowing clinical rotation hours to count towards the 12-month RPE professional experience and total clinical clock hours?

Consensus Response: No hours requirements; only 11-12 month requirement: Sac-year one if student is supervised during clinic hours

18. Is a 12 consecutive month experience required by your accreditation body? If yes, please specify the accreditation body.

Consensus Response: No, experience over the program years; ACAE (LA) neither 12 month nor consecutive; Sac-especially if student is on medical leave (12 month leave allowed)

19. Should the regulations restrict the ability to accrue RPE hours until after preliminary clinical rotations are completed, e.g., after the second year in the program?

Responses:

San Diego
No hours requirement, 11-12 month RPE, 4th year only
No; RPE begins 3rd year, no hours counted, only 11-12 month experience
SJ
RPE begins year 4; no hours requirement, 12 month experience
RPE begins year 4; no hours requirement, 12 month experience
Hours are accrued from first supervised clinical experiences

20. Should the regulations further clarify when an RPE license is required? Applicants from out of state doctoral programs have expressed confusion regarding the requirements and some audiology program students may have similar questions.

Consensus Response: All students understand the need for a temporary license in final year

Section 3

Your AuD Program's Supervised Professional Experience Requirements (Externship)

21. Are there any special considerations for students from out-of-state programs or students with federal visas that make it difficult for them to meet program experience requirements or state licensure requirements? If so, please explain what considerations exist and any potential solutions to those considerations.

Consensus Response: N/A

22 a. How does your program handle students coming from out of state who have not participated in a 12-month externship (RPE)?

Consensus Response: N/A; students not accepted

22 b. Does your program enroll these types of students to allow them to finish the 12 months of professional experience?

Consensus Response: No

23. How does your program handle students on Federal Visa's that limit the number of months of experience they can accrue during their doctoral program?

Consensus Response: Not an issue; no limit; Sac-would assist students in extending their visas

24. Is the 3rd or 4th year externship under the direction of your program? Consensus Response: Yes

25. What is the average level of supervision provided during the externship? Consensus Response: 8 hours of direct supervision per month; some variation

26 a. What types of activities constitute the externship, e.g., direct patient contact, non-direct patient contact, audiology-related practice (i.e., shift hours), audiology simulations?

Consensus Response: All of the above; Sac- no data yet

26 b. Are there limitations on the total number of hours that would be acceptable for the different types of activities performed in the externship, e.g., limitations on telehealth or simulation hours?

Consensus Response: No exception simulation hours at 10%

26 c. If any, are these restrictions required due to accreditation body restrictions and what accreditation body restricts it?

Consensus Response: Yes

27. Does the type of clinical activity during the externship dictate the percentage of supervision? Please explain.

Consensus Response: No; Site-determined

28. When in the program does the externship begin?

Consensus Response: 3rd or 4th year depending on the individual program length

29. Does your program use a software tracking program to log student clinical experience hours over the course of your program?

Consensus Response: Yes, often Calipso

30. Does your program track externship hours to verify that all externship hours have been completed per program requirements?

Consensus Response: Yes, but no hours counted, only 12-month clinical experience

31. Does your program distinguish the hours by activity type and are tele-practice hours or simulation hours tracked separately?

Consensus Response: Yes

32 a. Considering your answers above, were there issues that arose during the COVID-19 pandemic that temporarily changed your program's structure, requirements, externship activities, or MOUs with externship sites that are no longer in practice or significantly changed?

Consensus Response: Yes, more simulations and tele-practice used; no program requirements changed

32 b. Were some of these changes beneficial? If yes, what are the reasons they are no longer in use or changed?

Consensus Response: Yes, simulations very helpful; will continue to use

Section 4

Your AuD Program's Supervised Clinical Practice Requirements (Clinical Rotations)

33. How does your program define clinical rotation experiences?

Consensus Response: Provision of clinical audiology services to patients under the supervision of a CA licensed audiologist.

- 34. Does your clinical program include any hours of clinical observation prior to supervised clinical practice? If yes, how many hours of observation are allowed in your program and do they count toward the clinical rotation hours required for your program? Consensus Response: No; exception SJSU and CSUS = 25 observation hours
- 35. How many clinical hours are earned in each rotation?

Consensus Response: Varies, depends on the site and student experience/skill level

36. What is the percentage of supervision for each rotation and by year?

Consensus Response: See response to Questions #9 and #25

37. How many different clinical rotations does your program require?

Consensus Response: 7-9; Sac - They are enrolled in a clinic every semester. However, the same site, such as the on-campus clinic, may have more diagnostics one semester than another or may add new services depending on who is supervising. In this case, the site is the same, but the experiences are different.

38. Please describe the types of clinical tasks performed in the program's clinical rotations.

Consensus Response: Site Specific; see Question #8

San Diego: include diagnostic audiology, evoked potentials, vestibular testing/rehab, cochlear implants, pediatrics, adults, hearing aid dispensing, tinnitus, APD, and aural rehab.

39. How long are each of these clinical rotations? How many days per week do students spend doing these clinical rotations?

Consensus Response: One rotation per semester - 2-3 days/week; or $\frac{1}{2}$ day per week on campus and two or more full days per week during four off-campus rotations

- **40.** What are the maximum hours of clinical rotations a student could earn? Consensus Response: No maximum
- **41.** What is the average level of supervision provided during these clinical rotations? Consensus Response: See Question #9
- 42. What types of activities constitute clinical rotation hours, e.g., direct patient contact, non-direct patient contact, audiology-related practice (i.e., shift hours), telehealth, audiology simulations?

Consensus Response: See Question #26; all of the above with simulations capped at 10%

43 a. Are there limitations on the total number of hours that would be acceptable for the different types of activities performed during the clinical rotations, e.g., limitations on telehealth or simulation hours?

Consensus Response: See Question #26; all of the above with simulations capped at 10%

43 b. If any, are these restrictions required due to accreditation body restrictions and what accreditation body restricts it?

Consensus Response: See Question #26

44. How many of the pre-RPE clinical hours would be appropriate as part of the total number of required clinical hours for your program.

Consensus Response: All of them; require the 300 pre-RPE hours state requires

45. How much and what type of supervision should be provided for the different types of activities performed in supervised clinical practice?

Consensus Response: Depends on the student level of competency; insurance coverage, site policies

46. Does your program utilize a gradual decrease in the amount of supervision as students gain clinical experience? Please explain.

Consensus Response: Generally, yes; depends on student progress and supervisor assessments of student capabilities

47. When in the program do supervised clinical rotations begin (i.e., 1st, 2nd, or 3rd year)?

Consensus Response: First year

48 a. Does your program track supervised clinical rotations in a separate report that could be sent to the Board for verification?

Consensus Response: No; Sac-Yes, but not sent to the board

48 b. Does your program distinguish the hours by activity type? Consensus Response: Yes

48 c. Does your program track telepractice hours or simulation hours separately? *Consensus Response: Yes*

49 a. Considering your answers above, were there issues that arose during the COVID-19 pandemic that temporarily changed your program's structure, requirements, clinical rotation activities, or clinical rotation sites that are no longer in practice or significantly changed?

Consensus Response: See Question #32a

49 b. Were some of these changes beneficial? If yes, what are the reasons they are no longer in use or changed?

Consensus Response: See Question #32b

Preliminary Survey Response Summary

PRIMARY FINDINGS:

- 1) California's AuD programs would prefer to eliminate any particular clinical or clock hour requirement. Rather, since all programs are accredited by the Council on Academic Accreditation (per ASHA), which does not require or stipulate a fixed number of clinical hours for an AuD program, the programs would like to require only that students complete an 11-12-month experience over the course of their programs in order to meet the RPE requirement. The Accreditation Commission on Audiology Education (per AAA) requires neither a stipulated number of hours nor clinical time experiences over the course of an AuD program. Tom Muller, past chair of CFCC recommends the following language, "...students must complete the equivalent of 12 months of full-time clinical experience."
- 2) The programs would prefer to count all of the clinical time during which students are involved in supervised activities, by licensed audiologists, as time counted toward the 11-12-month experience requirement over the course of an AuD program.
- 3) A program's clinical activities are designed to meet accreditation requirements. The amount of time during which students are performing these activities are tracked by the programs. Generally, more supervision is provided for the earlier clinical experiences rather than the later clinical activities when students have gained experience and can operate more independently. The externships sites determine the clinical time and type of activity depending upon the complexity of the tasks and the site policies.
- 4) Since students gain experience in essentially every aspect of clinical audiology throughout the time in their programs, stipulating a fixed number of required clinical settings is no longer relevant, however, this requirement can remain and be required on the Clinical Verification Form. The number and type of settings are tracked by the programs to meet accreditations requirements if stated.
- 5) Simulations, tele-health and general clinical experiences are tracked by the programs such that accreditation stipulations for time requirements are met (CAA). The board does not need to maintain any tracking records of student activity.
- 6) Allowable, non-direct patients time is determined by accreditation standards.

December 2, 2022

Dear Dr. Raggio,

Thank you for the recent survey regarding the RPE process for AUD students enrolled in a California doctoral program. Our answers to the survey are informed by our adherence to our accrediting bodies and will be submitted by the individual recipients.

The leadership of the below signed academic programs would like to summarize our thoughts regarding the RPE requirements. As a collective body charged with educating the audiology graduate students:

- We are in agreement that the Board continue to require 300 clinical clock hours prior to the start of the RPE.
- We recommend the current requirement of a 12 month RPE be amended to reflect the suggested 11-12 month full-time equivalent, addressing the concerns raised previously regarding international students.
- We propose no additional requirement as to clock hours be adopted as part of the RPE regulations.

The current regulations protect the rights and welfare of the California consumer and we see no benefit to the consumer by adding additional clock hour requirements.

Respectfully submitted,

