

2014: A Year of Challenge and Gratitude 2015: A Promise for the Future of Audiology Education

By Lisa L. Hunter and Doris Gordon

As 2014 comes to a close, the ACAE Board of Directors would like to thank some visionary champions of audiology education, especially as we look forward to 2015—a crucial turning point in standards for the AuD.

ACAE could not have hoped for a more enthusiastic supporter of education than President Bettie Borton, AuD. Dr. Borton challenged ACAE to think about how we can promote the rigorous standards that our patients, students, and practitioners deserve. Dr. Borton has worked tirelessly to advocate for AuD education. She encouraged each of us to recognize the treasure we have in our own independent accreditation organization, created exclusively to develop a strong, respected audiology profession. We are thrilled to report that the Academy increased funding to ACAE by 15 percent in 2013. We are also pleased with the generous gifts contributed to ACAE from the American Academy of Audiology Foundation in 2014.

We are excited to announce that we received a significant grant from Starkey Hearing Technologies and Widex-USA over a three-year period, totaling \$160,000. These crucial funds will enable ACAE to continue our upward trajectory of bringing on new “programs of excellence” into the rigorous and innovative Web-based accreditation program ACAE

pioneered. We extend our sincere appreciation to Jerry Ruzicka, president, Starkey Hearing Technologies, and Rodney Schutt, former president, Widex-USA, Inc., for their generosity to audiology and their pioneering vision for audiology education.

Jeff Browne, JD, ACAE public board member and political strategist, challenged the ACAE board to identify tough questions about accreditation, education and the profession. Read more of what Jeff Browne thinks about this issue in his article, “Do Audiologists Want More?” *Audiology Today*, November/December 2013. In response, we have compiled our top 10 tough questions and answers.

1 How can we prevent complacency in audiology education?

ACAE has embraced a model of autonomous audiology practice, recognizing that with greater autonomy comes greater responsibility. We have pledged that, through our accredited programs, audiologists will be educated and trained to the full scope of hearing and balance care, using the best-available diagnostic and treatment methods and technology. Our accreditation standards and processes must reflect this best-practice attitude. A rigorous collaborative accreditation system that ensures new audiologists are

fully prepared to enter the profession is critical to the goal of autonomy.

2 Are there neglected aspects of audiology that need to be addressed in audiology education?

There are many areas that need to be addressed more rigorously in doctoral-level education, and the ACAE stakeholder survey last year identified many such areas including pharmacology, gerontology, rehabilitation science, and genetics. Business management practices, noise abatement, and prevention of hearing loss are crucial. Areas related to professional responsibility such as independence/autonomy, counseling and engagement with patients in treatment goals, and leadership skills must be strengthened, and these will be included in our new standards.

3 What proof do you have that audiology is, or is not, up to par?

Less than 40 percent of people in need of hearing help are seeking audiology services, and many of those are not satisfied with their outcomes (MarketTrak surveys over many years). Audiology still has not successfully differentiated itself from hearing instrument dispensers in the marketplace. Sadly, despite universal newborn hearing screening and success of available treatments,



only about 50 percent of infants with hearing loss are receiving timely intervention due to poor accessibility and inadequate systems.

4 What is audiology doing to keep up with rapid changes in technology?

Currently, not enough. The pace of technology is accelerating and could be harnessed to provide better hearing and balance for patients, but antiquated training models and lack of investment in new technologies mean today's students are often trained with yesterday's tools. ACAE is actively working to bring accredited "programs of excellence" on board that are capable of educating students with the technology of today and tomorrow, and with the critical thinking skills to continually stay at the leading edge.

5 Is the present state of audiology education able to meet the growing demand for high-level audiology services?

Not at this time! Audiology needs to supplement technical-level services with assistants, and needs educational models that teach us how to use them effectively and ethically. The U.S. Bureau of Labor Statistics estimates that opportunities for audiology careers will increase by 34 percent over the next 10 years (4,300 new audiologists needed). Under the current model of education, this would require almost a doubling of current graduation rates. ACAE standards and processes are designed to promote innovation in educational models, which could allow for higher numbers of students to become highly educated practitioners. Our new standards will address this need.

6 Why raise the bar in audiology education?

The purpose of accreditation, and the reason ACAE exists, is to protect consumers of hearing health care to insure that their insurance and private dollars are being spent on evidence-based diagnostics and treatment. We intend to do this by educating students to the higher level their investments deserve. In this time of health-care change, we must be viewed as independent, unique providers of a necessary service. We have to be correctly perceived as the profession that fully manages hearing loss and balance disorders. We are quite late in coming to this part of the game, so there is no time to waste.

7 Why should practicing audiologists be interested in accreditation (or education)?

The reputation of the profession depends on the competency of our members in the eyes of the public. Practicing audiologists seeking to hire new partners correctly want the most qualified graduates. Inadequately trained students cannot compete for the best positions. Rigorous accreditation drives programs to graduate fully competent professionals. This educational foundation plays a major role in developing a strong, viable profession that audiologists will take pride in for generations to come.

8 Why should consumers be interested in accreditation (or in the education of an audiologist)?

Rigorous and exacting standards, such as those ACAE advocates, signal to the public and marketplace high quality care and outcomes. An audiologist's education translates into patient care. With excellence in education, it is more likely the consumer will receive the reliable, efficient, cost-effective, high-quality care deserved.

9 Why is accreditation of interest and importance to the hearing industry?

Better-educated and trained students reduce variance of outcomes, and have the potential to create more demand for beneficial products and services. The core of the audiologist's scope of practice is to provide

hearing care that includes the selection, programming, and dispensing of hearing aid products. The manufacturer relies on the quality, and professional expertise, of the audiologist. The industry expects that the audiologist will have the requisite knowledge to effectively use its products and assist with feedback about how they can continually improve.

10 Who should fund audiology accreditation?

The profession of audiology—through our professional organization—bears the major responsibility—period. There is nothing more important than our educational underpinnings for clinical practice and our research base; therefore, accreditation is appropriately funded as a continuing investment in our future through membership dues. The hearing health industry relies on the excellence of research-and-development departments to produce hearing health products, and should be able to depend on the competence and creativity of audiologists who graduate from outstanding academic programs.

ACAE will not rest until audiologists are viewed as “the” choice providers for hearing and balance care.

Conclusion

All of these questions and answers are tough. But they must be addressed if the profession wants to be viable in the next five to 10 years. ACAE will not rest until audiology is a household word, audiologists are viewed as “the” choice providers for hearing and balance care, audiologists are appropriately compensated for their professional expertise, and hearing and balance treatment is embraced by consumers who need them. If audiologists can unite in this cause, we will make great progress. If we continue to divide our efforts across multiple educational standards, we will stall and slip backward. That is not an option! **AT**

Lisa L. Hunter, PhD, is the scientific director of audiology at the Cincinnati Children's Hospital Medical Center in Cincinnati, OH, and she is the chair of ACAE. Doris Gordon, MS/MPH, is the executive director of ACAE.