

PRESIDENT'S MESSAGE

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All professions have certain essential characteristics that set them apart from other occupations. These characteristics include a body of expert knowledge, a high degree of self regulation embodied by stringent academic standards and a code of ethics, a commitment to life long learning and most importantly, a fiduciary responsibility to place the needs of clients ahead of the self interest of the practitioner. Many believe that the most important assumption underlying the interaction between health care professionals and their clients is that the advice and treatment provided is not influenced by practitioners' self interests. The values of professions include honesty, altruism, service to others, commitment to excellence and accountability.

Throughout its history, the American Academy of Audiology has focused on improving audiologists' ability to provide hearing health care services by stressing our role and identification as autonomous "diagnosing and treating" professionals. In this vein, our efforts to change the SOC codes for audiology, to change Medicare and other third party payer regulations to permit direct access to our services, and to change the Medicaid definition of audiology and to identify licensure as the critical entry level credential are all ongoing. In keeping with our identification with the critical characteristics and values of other diagnosing and treating healthcare professionals, two important Academy goals have come to fruition this year, and will continue in the coming years.

ETHICS TASK FORCE

The Ethics in Audiology Presidential Task Force, established by David Fabry, presented its first report to the Board at its January meeting. The Task Force (Lu Beck, Dennis Van Vliet, Fred Bess, Patti McCarthy, Gail Gudmundsen, David Hawkins and Brian Walden, chair, was charged with providing a "written report to the Board that identifies areas that require updated or new ethical standards in response to changes that have occurred within audiology, the health care professions, government regulations and industry." Among the areas that the Task Force identified as needing study were issues such as the relationship between industry and researchers, unethical practices in the conduct of human research and violations of patient confidentiality. The Task Force chose to examine the relationship between practitioners and industry for its first report.

The report was a thorough and sobering examination of this issue, and of a number of common business interactions between audiologists and the hearing aid industry that must be examined to protect our identity as a profession. For example, a survey completed by the Task Force indicated that there are significant differences in the way consumers and audiology practitioners view these interactions with the hearing aid industry. Consumers always viewed the activities as greater conflicts of interest than did



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practitioners, a perception that has the potential to harm the underlying trust our patients must have in their interactions with audiologists.

We are not the only profession re-examining our relationship to industry.

The American Medical Association has embarked on an ambitious long-range plan to improve ethics education, particularly as it applies to the interactions between physicians and the pharmaceutical industry. A recent article in the *Journal of the American Medical Association* indicated that physicians' prescribing practices do change based on gifts such as meals, conferences, and other perks received from drug companies.

These findings, as well as other ethical concerns, have led the AMA to form a joint effort between medical societies and industry to improve ethics education and to examine and change the interaction between physicians and the pharmaceutical industry.

The Academy Board has begun deliberating on the recommendations of the Ethics Task Force. Most certainly, we intend to engage in serious dialogue with our members, with other audiology professional associations and with our industry colleagues to arrive at the best way to carry out our responsibilities as professionals. Throughout the year, I will be presenting the Task Force report and recommendations at audiology meetings across the country. I look forward to the discussion and member input that will result. As with the medical profession, our interaction with the hearing aid industry is necessarily intimate, because we use their products to treat our patients. The industry has been enormously generous in its support of our conferences and other educational and professional efforts. We are all invested in making sure that our relationship meets the highest ethical standards.

ACCREDITATION

The American Academy of Audiology is supporting the formation of a new vehicle for accreditation of academic programs granting AuD degrees in audiology. The new independent organization, conceptualized in cooperation with The Academy of Dispensing Audiologists, is called the Accrediting Commission on Audiology Education (ACAE). The Commission had its first meeting in Atlanta on January 26 and 27, and has begun the process of preparing for recognition by the Office of Post-Secondary Accreditation of the US Department of Education. The new accrediting body is specifically focused on professional education culminating in the AuD degree. The Academy is committed to the need for an independent AuD accrediting body, and we are confident that the Commission will enhance our identification as autonomous diagnosing and treating professionals.

As we start another year of challenges for our profession, I look forward to the input, opinions and advice of the members of this Academy and to seeing all of you in Philadelphia for "History in the Making." 