

Audiology Services in the Schools

Prepared for the Center on Personnel Studies in Special Education

EXECUTIVE SUMMARY

by

Susan J. Brannen

Nancy P. Huffman

Joan Marttila

Evelyn J. Williams

American Speech-Language-Hearing Association

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COPSSE research is focused on the preparation of special education professionals and its impact on beginning teacher quality and student outcomes. Our research is intended to inform scholars and policymakers about advantages and disadvantages of preparation alternatives and the effective use of public funds in addressing personnel shortages.

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INTRODUCTION

The American Speech-Language-Hearing Association (ASHA) is the professional, scientific, and credentialing association for more than 109,000 audiologists, speech-language pathologists, and speech, language, and hearing scientists. ASHA's mission is to ensure that all people with speech, language, and hearing disorders have access to quality services to help them communicate more effectively. ASHA and its members advocate for and serve the needs of approximately 28 million Americans who have hearing loss. Many of these are children who receive audiology services in the schools. *Educational audiologists* providing services in and for schools typically have extensive experience with pediatric populations and comprehensive knowledge of the effects that hearing loss and (central) auditory-processing disorders [(C)APDs] can have on communication, academic performance, and psychosocial development. Educational audiologists also have a unique understanding of legislation related to audiology service provision to children (birth to 21 years) and the processes of state education agencies (SEAs) and local education agencies (LEAs). This paper addresses issues related to professional preparation, certification/licensure, and supply/demand that are of critical importance to audiologists and the children, SEAs, and LEAs they serve.

PROFESSIONAL PREPARATION FOR AUDIOLOGISTS IN THE SCHOOLS

Changes in Professional Preparation in Audiology

Audiology services in the schools are affected by changes in the field of audiology since the late 1990s.

Transition to the Doctorate

The audiology profession has developed and implemented a specialized doctoral program of study. Features of new standards developed by the Council on Professional Standards in Speech-Language Pathology and Audiology (Standards Council) of ASHA are:

- Applicants for the certificate of clinical competence must complete a minimum of 75 semester credit hours of post-baccalaureate study that culminates in a doctoral or other recognized academic degree.
- The requirement for 75 post-baccalaureate semester credit hours becomes effective for persons who apply for certification after December 31, 2006. The requirement for a doctoral degree is mandated for persons who apply for certification after December 31, 2011.
- Graduate education in audiology must be initiated and completed in a program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association.
- The program of study must include a practicum experience that is equivalent to a minimum of 12 months of full-time, supervised experience.
- The standards include a maintenance of certification requirements (Standard VI) that went into effect on January 1, 2003.

The profession is in a time of transition. Not only is ASHA requiring a doctorate, the American Academy of Audiology (AAA) also has doctoral-level requirements for certification. Audiologists in all practice settings are evaluating whether or not they will obtain a doctoral degree, and individuals entering or currently enrolled in training programs are evaluating their doctoral degree options in order to meet certification requirements. When the new standards go into effect, audiologists holding ASHA certification will not be required to obtain a doctoral degree as long as their certification remains current. To facilitate the acquisition of doctoral degrees, especially the clinical Doctor of Audiology (AuD) degree, distance-learning programs have been established to meet the academic and clinical needs for practicing audiologists.

Necessity of Continuing Education

Audiologists wishing to maintain their ASHA Certificate of Clinical Competence (CCC-A) must obtain and document continuing professional development. This mandate, which began on January 1, 2003, will be phased in according to initial certification dates. The renewal period will be three years. This standard will apply to all certificate holders, regardless of the date of initial certification. For audiologists with masters degrees who already possess their ASHA CCC-A, continuing education is essential to continue practicing audiology and to have a certificate that is portable across work sites and state boundaries. For audiologists who have obtained their doctorate through distance-learning programs or the newly established on-campus doctoral programs, continuing education is essential as they continually improve their knowledge and practical skills.

Impact of Changes in Audiology Standards

Two major areas that will have an impact on future audiology services in and for the schools are financing and knowledge:

Financial impact. One of the basic tenets of advocates for the AuD and other doctoral-level degrees is that audiologists who possess a doctorate can expect to see salary improvements. Their increased salaries may result in a decreasing number of audiologists directly employed by LEAs and increased use of audiology support personnel (e.g., technicians) to balance the LEA budgets.

Knowledge impact. The audiology doctorate will broaden the knowledge base and the clinical skills of audiologists. The audiology doctorate can meet the needs of audiologists providing services in the schools if one or more of the components of the doctoral program focus on audiology practice issues specific to educational settings. The need for continuing education will also affect audiologists in the schools. The importance of ASHA's CCC-A will increase as LEAs strive to meet the 1997 Individuals with Disabilities Education Act (IDEA) qualified provider provisions. The preservice and continuing professional development requirements attached to acquisition and maintenance of the CCC-A will ensure that audiologists have current knowledge about and skill in the practice of audiology.

PROFESSIONAL PREPARATION NEEDS OF AUDIOLOGY PRACTITIONERS IN SCHOOLS

New Standards

Various professional organizations have helped define the role of the audiologist in the schools. ASHA's *Guidelines for Audiology Service Provision in and for Schools* has provided information about the legal mandates and the critical components of audiology service delivery in the schools. The Educational Audiology Association (EAA) developed the *Minimum Competencies for Educational Audiologists* that describes the knowledge that is necessary for practitioners to work in the school setting. The *Recommended Professional Practices for Educational Audiology* also describes skills that the competent school practitioner needs in the areas of identification and assessment, amplification, hearing loss management, conservation and consultation, program management, and professional leadership and development.

What Needs To Be Done

The impetus for the audiology doctorate sprang from the needs of audiologists working in private practice and hospital settings to have increased autonomy and an expanded knowledge base. Indeed, the vast majority of audiologists are employed in hospitals or private practice settings. Audiology services in the schools have always been provided by a relatively small number of audiologists. As audiology doctorate programs are developed, it is critical that the needs of the school practitioner be incorporated into the doctoral program. Pediatric audiology courses will need to include areas relating to identification, assessment, amplification, and audiologic intervention. Educational/legal course work should examine federal legislation such as IDEA, the Americans with Disabilities Act (ADA), and Section 504 of the Rehabilitation Act of 1973 (Section 504). Client/family/student course work should stress the importance of counseling and

including parents as part of the educational team and increase the audiology student's understanding of and sensitivity to cultural diversity and socioeconomic issues.

CERTIFICATION AND LICENSING FOR AUDIOLOGISTS PRACTICING IN THE SCHOOLS

National Credentials

Audiology, like many other education and health-related professions, has national certification that is often required for employment, reimbursement, and career advancement. ASHA's Certificate of Clinical Competence in Audiology (CCC-A) is the national credential held by most audiologists seeking national-level recognition. Approximately 13,000 audiologists currently hold this credential. The American Board of Audiology (ABA), an affiliate of the AAA, has a national credential that is held by approximately 700 audiologists.

State Credentials

Licensure is required for the practice of audiology in most states. Forty-seven (47) states regulate audiologists, 44 through licensure and 3 through registration or certification. Twenty-one (21) of the licensure states model licensure credentials on ASHA's CCC requirements. Another 20 states have a special audiology credential for the practice of audiology in the schools. In addition, many states also require registration or licensing that allows otherwise licensed or registered audiologists to train to dispense hearing aids through continuing education. Some LEAs prefer that the audiologist also hold a teaching credential.

Issues Facing the Credentialing Agencies

Credentialing agencies within states as well as national certifying agencies have their own unique requirements and must ensure that their credentials reflect the new standards.

Issues Facing the State and Local Education Agencies

SEAs, LEAs, and administrators will need to examine carefully job descriptions, supervision requirements, and budgetary issues as they relate to audiologists. Additionally, collective bargaining units will need to examine their contracts carefully to represent best the needs of this small, but important, category of professionals. Which credential is best suited for the audiologist in the schools is a common question for discussion. For some audiologists, credentials currently include: a teaching certificate, a license, and/or a registration for dispensing. The educational audiologist is also able to assist school personnel in gaining more knowledge on how to work with children who have hearing loss and/or auditory disorders.

Issues Facing Families and Children

Parents of young children first being identified with hearing loss are often without the supports necessary to appropriately manage their child's intervention services and education. Audiologists in the schools can assist parents in managing the educational experiences of their child with a hearing loss. Children with hearing loss and/or auditory disorders may consider themselves academic failures, isolated, and/or singled out. School personnel often become the primary witnesses of the student's frustration, fatigue, and anger; but staff do not always recognize that the behaviors they see are a result of the child's hearing loss and/or auditory disorder.

Issues Facing the Audiologist

The paper discusses the following issues related to the audiologist practicing in the schools:

- Professional isolation is a risk, because fewer than 1,300 audiologists work in the schools nationwide.
- Determining which credentials are needed is the audiologist's responsibility.
- Continuing professional development can be overwhelming.
- Technology, research, instrumentation are changing rapidly, while children in schools have increased listening and hearing needs at a time of shrinking LEA budgets.

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- Audiology services are clearly delineated in IDEA, although many parents and teachers do not know of their availability.
 - The role of the audiologist in the schools is critical, mandated public law, and should be recognized as a permanent and integral part of the educational process.

AUDIOLOGIST SUPPLY AND DEMAND

Needs Estimates

Estimates of the number of students in schools requiring audiology services. Estimating the number of students in schools requiring educational audiology services is a difficult task. Combining many available sources and given the resident population of children 3–21 years old as 74,453,685 as reported in 2001 by the U. S. Department of Education, this paper estimated that 5% to 15% of all children in the U. S. have hearing loss and approximately 1,489,073 to 2,233,611 have an auditory-processing disorder.

Estimates of the number of audiologists currently employed in schools. Using the total resident population figure for 1999–2000 of children 3 to 21 years, 74,453,685, the paper estimated that there is approximately 1 educational audiologist for every 70,840 students in the United States.

Current and suggested ratios of educational audiologists to children. To serve the needs of children in educational settings adequately, ASHA's *Guidelines* recommend 1 FTE audiologist for every 10,000 children. However, audiologist roles have continued to expand, which suggests that the recommended ratio may be inadequate and should be improved.

The following is a list of factors that will affect and influence the audiologist's case load:

- itinerancy/excessive travel time
- number of schools and LEAs served
- student placements with an LEA
- number of children with hearing loss and/or (C)APD
- number and age of children with other disabilities requiring audiologic assessment and intervention services
- number of hearing aids, cochlear implants, and HATs (hearing-assistive technology systems) in use
- number of tests provided, including auditory test batteries
- number and age of students receiving direct, ongoing audiologic intervention services
- number of infants and preschoolers receiving assessment and intervention services
- EHDI (early hearing detection and intervention) program responsibilities
- hearing loss identification/prevention/conservation program responsibilities
- scope of audiologic services provided (e.g., assessment, intervention, hearing aid dispensing)
- extent of supervisory and administrative responsibilities
- number of multidisciplinary team meetings and reporting requirements
- in-service training and counseling responsibilities
- other duties assigned that are outside the audiologist's scope of service delivery.

Factors Influencing the Demand for Educational Audiologists

The paper discusses the following important factors affecting the demand for audiology services in schools:

- legislative mandates
- healthcare regulations
- unique hearing and listening disabilities of children in schools that require specialized and frequent audiology services and technology
- new federal initiatives in education
- expanded roles of audiologists in schools beyond those associated with hearing loss
- value placed on audiology services by a school district in the absence of mandates.

Factors Influencing the Supply of Educational Audiologists

Desire to work in a public school. Audiologists work in a number of employment settings including healthcare (hospitals, nursing homes, home health, private physician's offices); clinics and agencies (speech and hearing centers); colleges and universities; private practice; industry; and schools (special schools, preschools, elementary and secondary schools, and intermediate units).

Availability of employment. Regarding demand, small school districts may not necessarily hire audiologists. They may use intermediate education agencies or cooperatives to provide audiology services or contract with a local agency, clinic, university, or private practice for specified audiology services. Regarding supply, there may be geographical "pockets" where universities in close proximity produce audiology candidates for certification, resulting in an oversupply of available audiologists. In other geographical regions (e.g., rural areas), there may be an under-supply. Before recent changes to the audiology standards were made, the number of audiology students seeking doctoral-level degrees was declining. Therefore, audiology programs transitioning to the doctoral degree are faced with a shortage of doctoral-level faculty, thus limiting the number of students who can be admitted to programs. This may ultimately lead to an initial reduction in the number of audiologists entering the profession and a need for LEAs to increase recruitment and retention efforts.

Salary. ASHA's 2001 Omnibus Survey Salary Report reports median academic-year salaries in school settings as \$42,600 per year for audiologists. Median calendar year salaries for audiologists in private practice are \$50,000. Audiologists working in LEAs are often covered by collectively bargained salary and benefits packages that may have immediate and long-term appeal. On the other hand, as audiologists begin to command higher salaries based on their doctoral degrees, salaries offered by LEAs may not be appealing or will have to be negotiated differently or outside of collective bargaining units.

Credentialing requirements. Credentialing requirements are in transition. Many audiologists, including those currently employed in schools, are in the process of obtaining an AuD or other doctoral degree. Individual states have requirements for licensing and teacher certification, which may or may not include a doctorate requirement for schools.

Critical Questions

To aid the study of issues of supply/demand for audiologists in the schools, the paper details a number of critical questions related to:

- professional preparation requirements and supply/demand of audiologists
- certification/licensure requirements and high-quality services
- the increasing number of uncertified personnel employed to do audiology
- limited funding and service availability
- the audiologist's role in federal initiatives.

CONCLUSIONS

It is essential that children with hearing loss and/or (C)APD receive comprehensive audiologic services to reduce the possible negative effects of the loss or disorder and maximize their auditory learning and communication skills. Furthermore, all children in educational settings can benefit from audiologic services in terms of the development of listening skills, instruction in prevention of hearing loss, and the provision of accessible acoustic environments. It is clear that the preparation of audiologists who provide services in educational settings will be impacted by: (a) changes in audiology standards facilitating a need for SEAs and LEAs to evaluate and to modify the way in which they access and provide audiology services in the schools and (b) continuing professional development for LEA-based audiologists. As national credentialing standards change, it is imperative that states, SEAs, and LEAs examine and perhaps modify their licensure,

registration, and/or certification requirements to accommodate provisions of the new audiology standards.