SIDE-BY-SIDE COMPARISON 2020 ASHA AUDIOLOGY CERTIFICATION STANDARDS

Implementation: January 1, 2020 Updated: January 1, 2022

Original 2020 Audiology Standards	Updated 2020 Audiology Standards effective 1/1/2022	Rationale for Change
Standard I: Academic Qualifications	Standard I: Academic Qualifications	The green text added to clarify that the degree and degree program must be in Audiology
Implementation Paragraph 2 Applicants from non—CAA-accredited programs (e.g., PhD programs, internationally educated, etc.) with a doctoral degree and audiology coursework will have their application evaluated by the CFCC to determine substantial equivalence to a clinical doctoral degree program accredited by the CAA. Individuals educated outside the United States or its territories must submit official transcripts and evaluations of their degrees and courses to verify equivalency. These evaluations must be conducted by credential evaluation services agencies recognized by the National Association of Credential Evaluation Services (NACES). Evaluations must (a) confirm that the degree earned is equivalent to a U.S. clinical doctoral degree, (b) show that the coursework is equivalent to a CAA-accredited clinical doctoral program, (c) include a translation of academic coursework into the American semester-hour system, and (d) indicate which courses were completed at the graduate level.	Implementation Paragraph 2 Applicants from non–CAA-accredited programs (e.g., PhD programs, internationally educated, etc.) with a doctoral degree and audiology coursework will have their application evaluated by the CFCC to determine substantial equivalence to a clinical doctoral degree program accredited by the CAA. Individuals educated outside the United States or its territories must submit official transcripts and evaluations of their degrees and courses to verify equivalency. These evaluations must be conducted by credential evaluation services agencies recognized by the National Association of Credential Evaluation Services (NACES). Evaluations must (a) confirm that the degree earned is equivalent to a U.S. clinical audiology doctoral degree, (b) show that the coursework is equivalent to a CAA-accredited clinical doctoral program in audiology, (c) include a translation of academic coursework into the American semester-hour system, and (d) indicate which courses were completed at the graduate level.	
STANDARD II: KNOWLEDGE AND SKILLS OUTCOMES Applicants for certification must have acquired knowledge and developed skills in the professional areas of practice as identified in Standards II A–F, as verified in accordance with Standard III.	STANDARD II: KNOWLEDGE AND SKILLS OUTCOMES Applicants for certification must have acquired knowledge and developed skills in the professional areas of practice as identified in Standards II A–F, as verified in accordance with Standard III.	No change to standards; however, updates to knowledge and skills have been made to reflect current terminology and grammatical changes.
A6	A6	Added Center for Disease Controls (CDC)
A8	A8	Changed "Other Interested Parties" to "Significant Others"
A15	A15	Added "Habilitation"
A22	A22	Added "Client"
A23	A23	Added "Clinical Education"
C1	C1	Removed the term "Gathering"

C2	C2	Updated "Obtaining" to "Completing"
D1	D1	Updated "Hearing Impairment" to "Deaf or Hard of Hearing"
D6	D6	Added "Clients" and "Techniques"
E3	E3	Added "with sensitivity to differences in culture, identity, and language"
E5	E5	Updated "hearing problems" to "hearing loss"
E8	E8	Added "(i.e., standard, bone, osseointegrated, and implantable devices)
E13	E13	Added "and wireless technology orientations"
F2	F2	Added "with sensitivity to differences in culture, identity, and language"
F11	F11	Added "self-identity" and "with sensitivity to differences in culture, identity, and language"
Standard III: Implementation Verbiage Implementation: The applicant's doctoral program director or designated signatory must verify that the applicant has acquired and demonstrated all of the knowledge and skills identified in Standard II.	Standard III: Implementation Verbiage Implementation: The applicant's doctoral program director or designated signatory must verify that the applicant has acquired and demonstrated all of the knowledge and skills identified in Standard II.	Added "up to 50% of the supervised clinical practicum may be acquired through telepractice (patient is at a distance), provided that the prevailing regulatory body permits telepractice and the patient consents."
Clinical instructors and supervisors must have:	Clinical educators, instructors, and/or supervisors must	Several updates have been made to the implementation language as a result of the above addition.
 current CCC-A certification, a minimum of 9 months of full-time clinical experience* of direct patient care after earning the CCC-A, and completed at least 2 hours of professional development (2 certification maintenance hours [CMHs], or 0.2 ASHA continuing education units [ASHA CEUs]) in the area of clinical instruction/supervision after earning the CCC-A. Clinical instruction and supervision within a doctoral program	 have earned, and kept current, their CCC-A certification; have completed, at minimum, 9 months' full-time clinical experience¹ of direct client/patient care after earning the CCC-A; and have completed at least 2 professional development hours (PDHs)—formerly known as certification maintenance hours (CMHs)—or 0.2 ASHA continuing education units (ASHA CEUs) in clinical instruction/education/supervision after earning the CCC-A. 	The definition of "clinical simulations" was shortened, and a hyperlink to an ASHA webpage was added that contains greater detail about clinical simulation.
 be conducted for a variety of clinical training experiences (i.e., different work settings and with different populations) to validate knowledge and skills across the scope of practice in audiology; 	The knowledge and skills outcomes listed in Standard II require that the majority of the supervised clinical practicum be acquired on-site and in person; however, up to 50% of the supervised clinical practicum may be acquired through telepractice (patient is at a distance), provided that the	

- include oversight of clinical and administrative activities directly related to client/patient care, including direct client/patient contact, consultation, recordkeeping, and administrative duties relevant to audiology service delivery;
- be appropriate to the student's level of training, education, experience, and competence;
- include direct observation, guidance, and feedback to permit the student to (a) monitor, evaluate, and improve performance and (b) develop clinical competence; and
- be provided on site.

Any portion of the applicant's supervised clinical experience that was not completed under an audiologist meeting the requirements above can be completed post-graduation. The applicant's post-graduation clinical instructor/ supervisor must also meet the above requirements will also verify that the applicant has demonstrated and acquired the knowledge and skills for ASHA certification following completion of the required supervised clinical experience.

Applicants who apply for certification without completing a full, supervised clinical experience under a clinical instructor/supervisor who meets the requirement above within their degree program will have 24 months from their application-received date to initiate the remainder of their experience and will have 48 months from the initiation date of their post-graduation supervised clinical experience to complete the experience.

Clinical simulations (CS) are distinct from labs and may include the use of standardized patients and simulation technologies (e.g., virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). These supervised CS experiences under a CCC-A can be synchronous simulations (real-time) or asynchronous (not concurrent in time) simulations. Up to 10% of an applicant's supervised clinical experience for ASHA certification can be obtained through CS. CS experiences for ASHA certification can only count when obtained within the doctoral program. Experience may be acquired through telepractice by the CCC-A audiologist when the audiologist and student are "shoulder to shoulder" with the patient at a distance, provided telepractice is permitted by the prevailing regulatory body and the patient consents.

If clinical instruction and supervision are completed postgraduation, they must comply with the requirements above with the exception of on-site clinical instruction and prevailing regulatory body permits telepractice and the patient consents.

The supervised clinical practicum within a doctoral program must

- include a variety of on-site and in-person clinical practicum to validate knowledge and skills across the scope of practice in audiology, including clinical and administrative duties;
- be appropriate to the student's level of training, education, experience, and competence; and
- include direct on-site and in-person observations, guidance, and feedback to permit the student to (a) monitor, evaluate, and improve performance and (b) develop clinical competence.

The supervised clinical experience should include interprofessional education and interprofessional collaborative practice (IPE/IPP). Under the supervision of their audiologist supervisor, students/applicants should seek experiences that include working with allied health professionals who are appropriately credentialed in their area of practice to enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive health care delivery setting.

The supervised clinical practicum within a doctoral program may permit the following:

- Telesupervision of graduate students, provided that the prevailing regulatory body permits it and the client/patient consents to it.
- Multiple applicants/students participating in the same session and counting the full experience/time of the session, provided that they are actively engaged in the session.
- An applicant obtaining up to 10% of an their supervised clinical experience for ASHA certification through clinical simulation (CS) in accordance with the <u>guidelines for audiology CS</u> <u>experiences</u>. An applicant can count their CS experiences for ASHA certification only when obtained within the doctoral program.

Any portion of the applicant's supervised clinical practicum that was not completed under an audiologist meeting the

requirements above can be completed post-graduation. The supervision. Remote supervision or telesupervision methods may be used, provided they are permitted by the employer(s) applicant's post-graduation clinical instructor/supervisor, and by local, state, and federal regulations. who must also meet the above requirements, will verify that the applicant has demonstrated and acquired the knowledge The supervised clinical experience should include and skills for ASHA certification following completion of the interprofessional education and interprofessional collaborative required supervised clinical experience. practice (IPE/IPP). Under the supervision of their audiologist supervisor, students'/applicants' experience should include Applicants who apply for certification without completing a experiences with allied health professionals who are full, supervised clinical practicum under a clinical appropriately credentialed in their area of practice to enhance instructor/supervisor who meets the requirements above the student's knowledge and skills in an interdisciplinary, within their degree program will have 24 months from their team-based, comprehensive health care delivery setting. application-received date to initiate the remainder of their experience and will have 48 months from the initiation date *Individuals with experience as a clinical educator may count of their post-graduation supervised clinical practicum to their experience as being "clinical" (1) if they have worked complete the experience. directly with clients/patients, and (2) if they have been the patients' recognized provider and have been ultimately ¹Individuals with experience as a clinical educator may count responsible for the care of the clients/patients. Individuals their experience as being "clinical" if they meet the following whose experience has been limited to classroom teaching, criteria: (a) if they have worked directly with clients/patients research/lab work, or working with only clinical simulations, and (b) if they have been the clients'/patients' recognized cannot count this experience as clinical. provider and have been ultimately responsible for their care. Individuals whose experience has been limited to classroom teaching, research/lab work, or working with only CSs cannot count this experience as clinical. STANDARD V: MAINTENANCE OF CERTIFICATION Standard V: Maintenance of Certification The addition of "2 PDHs in cultural competency, cultural Individuals holding certification must demonstrate (1) Individuals holding certification must demonstrate (a) humility, culturally responsive practice, or diversity, continuing professional development, including 1 hour of continuing professional development (including 1 PDH in equity, and inclusion" is needed and shows the continuing educations in ethics; (2) adherence to the ASHA ethics); (b) 2 PDHs in cultural competency, cultural importance of these areas in CSD practice. This Code of Ethics; and (3) payment of annual dues and fees. humility, culturally responsive practice, or diversity, equity, requirement will go into effect with the 2023-2025 and inclusion; (c) adherence to the ASHA Code of Ethics; certification maintenance interval. and (d) payment of annual dues and fees. Implementation: Individuals who hold the CCC-A must Implementation: Individuals who hold the Certificate of Implementation language has been revised to include accumulate and report 30 certification maintenance hours Clinical Competence in Audiology (CCC-A) must accumulate the new cultural competency, cultural humility, (CMHs) (or 3.0 ASHA CEUs) of professional development, which and report 30 professional development hours (PDHs) culturally responsive practice, and/or DEI requirement (formerly CMHs) or 3.0 ASHA CEUs during every 3-year must include 1 CMH (or 0.1 ASHA CEU) in ethics over each 3which goes into effect with the 2023-2025 interval. year certification maintenance interval. Individuals will be certification maintenance interval. Beginning with the 2023subject to random audits of their professional development 2025 interval, the 30 PDHs (or 3.0 ASHA CEUs) must include activities. a minimum of 1 PDH in ethics and 2 PDHs in cultural competency, cultural humility, culturally responsive practice, Individuals who hold the CCC-A must adhere to the ASHA Code or diversity, equity, and inclusion. Individuals will be subject of Ethics ("Code"). Any violation of the Code may result in

professional discipline by the ASHA Board of Ethics and/or the CFCC.

Annual payment of certification dues and/or fees is also a requirement of certification maintenance.

If certification maintenance requirements are not met, certification will expire. In order to regain certification, individuals must meet the reinstatement requirement that is in effect at the time they submit their reinstatement application.

to random audits of their professional development activities.

Individuals who hold the CCC-A must adhere to the ASHA Code of Ethics. Any violation of the Code of Ethics may result in professional discipline by the ASHA Board of Ethics and/or the CFCC.

Annual payment of certification dues and/or fees is also a requirement of certification maintenance. If <u>certification maintenance requirements</u> are not met within the 3-year interval, then <u>certification will expire</u>. Individuals who wish to regain certification must submit a reinstatement application and meet the certification standards that are in effect at that time.