#### **AuD Education Summit**

October 27-28, 2016 ASHA Conference Center Rockville, MD

Facilitated by Transformation Strategies, Inc.

#### **AuD Education Summit**

# Tomorrow belongs to those who hear it coming

**David Bowie** 

#### Ad Hoc Committee

- Ruth Bentler, Chair, University of Iowa
- Radhika Aravamudhan, Salus University
- Joan Besing, Montclair State University
- Robert Hanyak, University of the Pacific
- Lisa Lucks Mendel, University of Memphis
- Michelle Menendez, VA
- Lisa Rickard, University of Maryland
- Anne Marie Tharpe, Vanderbilt University
- Maureen Valente, Washington University
   Craig Champlin, University of Texas at Austin

## Ad Hoc Committee, continued

- From ASHA office
  - Neil DiSarno, Chief Staff Officer for Audiology
  - Loretta Nunez, Director, Academic Affairs & Research Education
  - Barbara Cone, VP for Academic Affairs in Audiology
  - Stacey Travers, Administrative Support
  - Natalie Wilson, Administrative Support

## Committee Charge

 To structure and implement an audiology education summit to examine the pros and cons of current and alternative doctors of audiology (AuD) education so that future directions for audiology can be identified and advanced.

#### Who/what came before us?

- Summit 1: A Collaborative Approach, 2005
- Summit 2: Strengthening Partnerships in Clinical Education: 2006
- "Summit 3": Gold Standard Summit, 2009
- Report of the Academic Affairs Board on Critical Issues in AuD Education (2015):

## Why the summit focus?

- Clear issues:
  - Standardization of externship process
  - Quality control of externship sites
  - Preceptor qualifications
  - Student debt/ROI
  - Student training/readiness
- Only two days; outcome not pre-determined, but we hope to educate ourselves in this one (narrow?) arena
- Voice of the committee

#### Summit is *not* about:

- Accreditation process (or bodies)
- Outcomes of current academic programs
- Certification versus Licensure

#### Who is here?

- A representative from
  - Every AuD (75) program
  - ASHA
  - AAA
  - CAPCSD
  - ADA
  - ABA
  - ACAE
  - CAA
  - CFCC
  - NCSB
  - VA
  - SAA, NSSLHA, and SDA

## Agenda & Logistics

## Agenda

#### Today - 8:30

- Opening & Overview
- History of AuD
- Current AuD Model Overview

#### **Break 10:00**

Top Challenges Discussion

Lunch - 12:00

- Residency Model Presentations
- Panel Discussion Q&A

#### **Break - 2:00**

Implications for Our Profession

**Closing – 5:00** 

#### Tomorrow 8:30 - 3:30

- Opening & Reflections
- Building & Testing Our Consensus

#### **Break 10:00**

 Generating Strategies for the Way Ahead

#### Lunch - 12:00

Report Outs - Plenary
 Dialogue on Strategies & the
 Way Ahead - Open Mic Time

**Closing – 3:30** 

## Welcome Online Participants

A committee member will be checking the Summit email box regularly for your questions and input.

Please submit your questions during the Residency Briefings (1-2pm) for the panel discussion that follows – we'll combine them with those gathered from participants in the room to guide the panel.

Please email questions and input to AuDEducationSummit2016@asha.org

#### **Table Introductions**

- Your name institution role
- Why you are here today your interest
- A fun fact something other's wouldn't necessarily know about you.

1 minute each

## Thinking About Change

Implications for the work at hand

## The Dynamics of Change

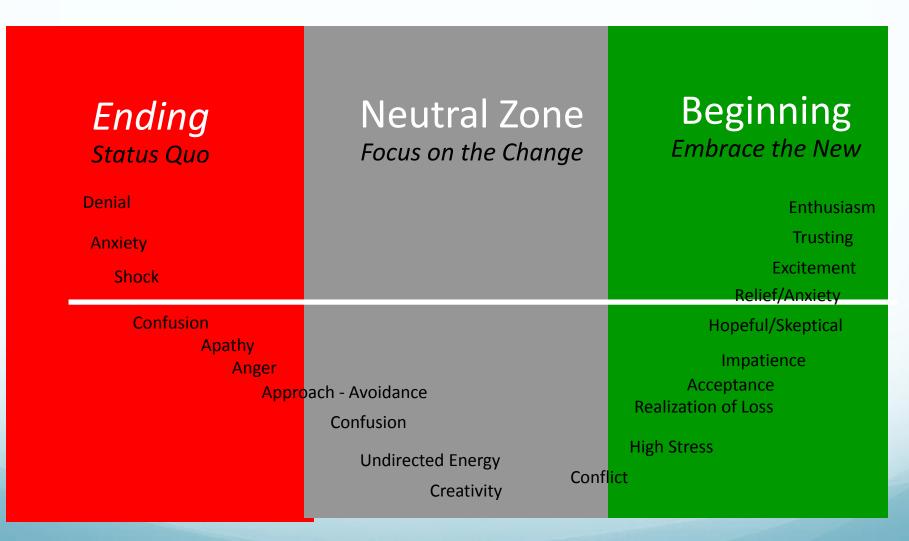
#### Excitement ...

- Creating a compelling future
- Addressing challenges that we care about
- Finding new opportunity

#### Fear...

- Loss comfort, status, relevance, competence
- Unknown what the future will bring
- Mess changing things that work well
- Failing risk that we'll end up worse off
- Getting There hassles of implementation

### The Dynamics of Change



Sources: Bridges, Lewin and others

## The Dynamics of Change

#### **Best Practice Says We Need ...**

- Committed leadership (priority & resources)
- A problem or opportunity (clear focus)
- Energy in the system (mobilized people)

#### Guidelines for the Summit

- Truthful Useful Unifying Kind
- Be succinct draw others out
- Start & end on time
- Think big picture future of the profession
- Electronics please limit to summit materials during sessions

## History of the AuD

Dr. Fred Bess

## Setting the Context

## Perspectives on the Current AuD Model

Dr. Ruth A. Bentler

## How did we prepare?

- Surveyed every program
- Read everything related to AuD educational model, specifically related to themes from AAB report
- Met face-to-face and via conference call for past 12 months to brainstorm what and how to address most critical issues
- Surveyed AuD Students
- Surveyed Preceptors

## What did you tell us?

- Survey of all 75 AuD Programs
- Conducted in Spring 2016
- Open-ended

# What challenges do you perceive and/or experience relative to the AuD externship, first in preparation:

- 133 concerns (67 programs); 8 programs had none
- Themes:
  - No standardization of process for application, deadlines, etc.
     (19)
  - No real interface between universities and sites requiring each program to expend considerable time and resources (11)
  - Lack of standardization of experiences (26)
  - CCC requirement (15)
  - Other
    - Student perception of quality based on "salary"
    - Affiliation agreements are becoming more challenging; licensing laws as well

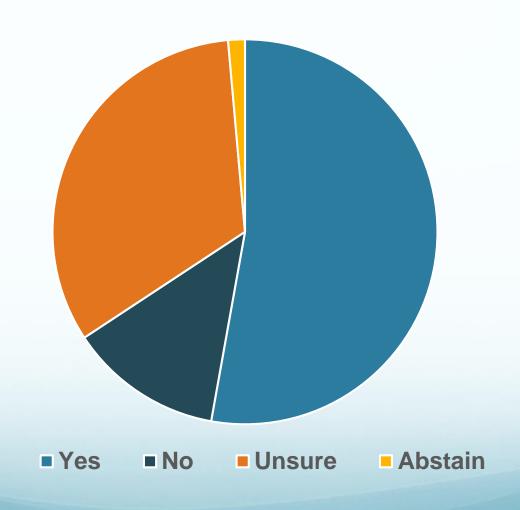
# What challenges do you perceive and/or experience relative to the AuD externship, during:

- Loss of university control/oversight (29)
- Preceptor qualifications/training (27)
- Lack of quality control over site (similar to first slide)
   (26)
- Stipends inconsistent (8)
- Other (similar to previous slide)
  - Licensure issues
  - Cheap labor occurrences
  - Confusion of students as to role

#### Any alternatives you are considering?

- 85 responses (75 programs);
- Current model is working well (2)
- Not really (15)
- Considering a 3+1 model (4)
- Training for preceptors (5)
- Reduce tuition for externs (4)
- Other
  - "Some mechanism that allows student to be paid"

## What about a post-graduation model as posed by dentistry, optometry, medicine?



#### Why or why not? If yes (n=45):

- Better quality control; control consistency across sites (8)
- Reimbursement, billing, education licensing issues resolved (6)
- Reduce student debt (5)
- Relieve faculty of "enormous amount of time spent working on sites, figuring out what they can provide to students, getting contracts, etc." (4)
- Other
  - Current model needs to be "fixed" (2)
  - Allows for specialization (2)
  - ("We should have done this already.")(1)

#### Why or why not? If no (n=11):

- Loss of oversight (5)
- Loss of tuition (5)
- Feels like the old CF model (4)
- Licensure issues (2)
- Other
  - Unprepared students (2)
  - Would make AuD as entry degree impossible (1)

## What are implications for your program?

- Positives (n=62):
  - Reduce faculty load (19)
  - Reduce student debt (12)
  - Better quality control (10)
  - Larger classes/easier to recruit (4)
- Negatives (n=68)
  - Loss of tuition (30)
  - Loss of quality control (10)
  - Less prepared students (7)
  - Would require curriculum change (4)

#### Are the negatives insurmountable?

- No: 34 programs
- Don't know/possibly: 18
- Probably: 1
- Probably not: 5
- It would be difficult 1
- Not interested: 2
- Unrelated responses: 2

## Finally, debt....

- 0-\$70,000/year
- Current estimates

#### In our survey of AuD students

- ASHA mailing to 1013 audiology students on September 1, 2016
  - N=78
  - 44% (n=34) finished 3<sup>rd</sup> year
  - 36% (n=28) graduated

#### Data?

- 64% agree a central site should be created with standardized deadlines;
- 86% report that there is a designated faculty member who maintains contact with extern and site;
- 66% report requirements during externship experience;
- 81% will pursue certification when completed;
- 52% took (or will take) out student loans for the final year (mean = \$19,922, range \$1,000-\$60,000);
- Total student debt: \$5,000-\$225,000 (mean \$93,205)

#### Data?

- Perhaps most interesting were the open comments (n= 39)
  - 24 related to costly endeavor, university taking tuition, sites not paying (well), financial burden of degree, etc.
    - I do not think the extern year should require tuition credits;
    - I feel the externships should be paid with a stipend commensurate to the cost of living in that area...
    - My externship experience felt like free labor;
    - There is nothing good about the externship experience.
       It is basically slave labor and unethical in my opinion.

#### Data?

- Perhaps most interesting were the open comments (n= 39)
  - 22 related to process, e.g., application deadline non-uniformity, site requirements, etc.
    - My first deadline was September 30, which means I turned in a second year application and my letter writers had to comments on my second year skills;
    - The process should be standardized like medical students and "matching";
    - Many things are unknown to preceptors and students;
       the whole thing is a mess.

#### In the survey of preceptors (CAuDP)

#### What are advantages of externship (n=254)?

- Real world experiences in supervised setting leading to independent practice (n=103)
- Brings new ideas/perspectives to sites (n=57)
- Potential new hires (n=39)
- Valuable part of training (n=13)
- Involvement in university important (n=5)

#### In the survey of preceptors (CAuDP)

What are *disadvantages* of externship (n=161)?

- Increased workload (n=35)
- Financial burden on student (n=31)
- Student skill level (n=20)
- Legislative/billing requirements (n=15)
- Students' personalities/attitudes (9 n=8)
- Type of extern site (n=8)
- University requirements (n=7)
- Impact on revenue (n=4)

#### In the survey of preceptors (CAuDP)

What are your recommendations for improvement? (n=200)?

- Students need better preparation (n=39)
- Need for preceptor training (n=38)
- Need for uniform externship standards (n=37)
- Prescreen/evaluate students (n=26)
- Need for improved communication between university and site/student (n=13)
- Compensation (students and/or sites)

#### Why the focus?

- Clear issues:
  - Standardization of externship process
  - Quality control of externship sites
  - Preceptor qualifications
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  - Student training/readiness
- Only two days; outcome not pre-determined, but we hope to educate ourselves in this one (narrow?) arena
- Voice of the committee

# Tomorrow belongs to those who hear it coming

**David Bowie** 

## Break

# Top 5 AuD Challenges with the Immersion Experience

(residency/externship/4<sup>th</sup> year)

- Standardization of the externship process
- Quality control of externship sites
- Preceptor qualifications
- Student debt/ROI
- Student training/readiness

### **Table Conversations**

Discuss the preceding presentation and the top challenges

- Reactions...
- Your main concerns with respect to the issues presented...
- What areas cause the most pain ...
- Where are the greatest opportunities ...

Choose a reporter – <u>Capture the 'big two' items</u> from your discussion – where you had the most energy, concern or excitement

Create Flip Chart - Write BIG

## Lunch Break

## Residency Briefings

Medicine Optometry Physical Therapy

## Capturing Questions

- Write questions on the cards provided on your table.
- Identify presenter by name (if relevant)
- We will collect your questions and consolidate them to facilitate the panel discussion

Online Participants – email your questions during the presentations and we'll include them as well.

## **Panel Discussion**

Q&A

### Post Panel Table Discussions

- How might these models help address some of the challenges we face?
- What might we adopt from the models presented?
- What would be the benefits?

<u>Choose a Reporter - capture the 'big two' items</u> from your discussion Create Flip Chart – Write BIG

### **AuD Education Summit**

Welcome to Day 2

## Today's Agenda

#### 8:30 - Opening & Reflections

- Thinking About Change
- Urgency, Building & Testing Our Consensus
- Generating Strategies for the Way Ahead

#### **Lunch - 1200**

 Strategies Report Outs, Plenary Dialogue & Open Mic Time

#### 3:30 - Closing

### **Table Discussions**

What stands out from yesterday?

# Best Practice Model for Leading Change

Implications for the Way Forward

### **Eight Steps to Transformation**

(Kotter)

- Establishing a Sense of Urgency
  - Forming a Powerful Guiding Coalition
- Creating a Vision
  - Communicating the Vision
  - Empowering Others to Act on the Vision
    - Planning for and Creating Short Term Wins
    - Consolidating Improvements & Producing Still More Change
    - Institutionalizing New Approaches

### Sense of Urgency

- How critical is it that we address the immersion experience controlled by the individual academic program?
- What's at risk if we don't?
- Must we act on this sooner than later? Why/why not?
- Other considerations about urgency...

### Forming a Guiding Coalition

- Who (what organization) should lead this and who needs to be involved to ensure that our plans are thoughtful, thorough and comprehensive?
- This will take resources time, materials and money what ideas do you have for funding this effort?
- Other input relevant to forming a guiding coalition...

## **Creating a Vision**

- What is our vision for the future of AuD education with respect to the immersion experience?
  - What will it include?
  - What specific challenges will it address?
  - What great benefits will it provide?
- Making our vision work for all
  - What do we need to be sure to work through for this to work for all of our constituents?
- Other thoughts or input on vision...

## Communicating the Vision

- How do we communicate what we've discussed here?
   existing forums & mechanisms, new channels ...
- Who should own communication to our broader world now and going forward?
- Other considerations, recommendations related to communicating

## Empowering Others to Act on the Vision

- How should the guiding coalition engage the broader community that will be impacted?
- What role should existing organizations or bodies have in this process?
- Considerations for enabling our various constituents to take productive action...

## Planning for and Creating Short Term Wins

- What are the concrete, visible, compelling next steps that need to be taken? – by when?
- What specific transition issues need particular attention to ensure we're successful?
- What deal breakers must be worked out early in the planning process?

# Challenges, Benefits & Transition Issues

# Top Challenges With the AuD Immersion Experience

- Standardization of the externship process
- Quality control of externship sites
- Preceptor qualifications
- Student debt/ROI
- Student training/readiness
- Additions from yesterday's discussion?

# Transition Issues in Adopting a Residency Model

A preliminary list generated in planning committee discussions

- Different state licensure laws
- Not enough sites/slots
- Types of sites clinics, schools …
- University program approval changes & timeline – end date for full implementation

- Ensuring student readiness for residency
- Mandatory optional? timeline?
- What will our roadmap to the future look like?
- Who will lead the effort what organization should own this?
- Audiology Professional Organizations working together toward the same goal...

# Exploring our Sense of Urgency

## Sense of Urgency Table Conversation

- Criticality: How critical is it that we address the immersion experience controlled by individual academic programs?
- Risk: What's at risk if we don't act on this?
- Urgency: Must we act sooner than later? Why/why not?
- Other considerations about urgency...

20 discuss & 20 report

## Testing our Consensus

#### Question #1

Are <u>you</u> in favor of moving to a residency model for AuD education?

- **5 Definitely**, convene implementation group to plan and move out strongly now (there's a sense of urgency)
- **4 Yes**, convene planning group and get started and further build on the emerging consensus from today
- **3 Maybe**, good idea many challenging issues involved need to answer important questions before fully committing move toward it but longer term
- 2 Not so much, issues are important and call for a coordinated effort but residency may not be the solution
- 1 No, issues not so important & can be addressed without a coordinated effort

#### Question #2

## Answer the question below that corresponds to your numerical rating on the previous question (only one please!)

- If you answered 4 or 5
  - What's the most critical issue that needs to be addressed to move forward with the residency model?
- If you answered 3
  - What would it take for you to move to a yes?
- If you answered 2
  - What alternatives would you offer (other than the residency model)?
- If you answered 1
  - What needs the most attention at this time?

## Providing Your Input Online

Instructions for accessing the polls will be provided on-site during the Summit

Take a break

## Generating Strategies

Our Input for the Way Ahead & Table Guidance

## **Key Topics**

Table 1 - Standardization of the externship process

Table 2 – Quality control of externship sites

Table 3 – Preceptor qualifications

Table 4- Student debt/ROI

Table 5 – Student training/readiness

Table 6 – Guiding coalition

Table 7 – Communicating to our world

Table 8 – Transition issues & deal breakers

Table 9 – Specific next steps

Additional Tables – Open topics

## Table 1 - Standardization of the Externship Process

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

## Table 2 – Quality Control of Externship Sites

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

#### Table 3 – Preceptor Qualifications

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

#### Table 4 – Student Debt/ROI

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

### Table 5 – Student Training/Readiness

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

# Should Own this Process Going Forward

- What is the ideal group, organization or mechanism to move this process forward?
- Who needs to be involved to ensure that our plans are thoughtful, thorough and comprehensive?
- Who should be on the Planning Group going forward? (sign yourself or others up on a chart in front of the room)

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

#### Table 7 - Communicating to Our World

How do we communicate what we've discussed at this summit?

- Name key constituencies & how best to reach each
- Existing forums & mechanisms ... new channels

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

#### Table 8 - Specific Next Steps

 What are the concrete, visible, compelling next steps that need to be taken? – by when?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

## Table 9 - Transition Issues & Deal Breakers

- What specific transition issues need particular attention to ensure we're successful?
- What deal breakers must be worked out early on in the planning process?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

#### Additional Tables – Open Topic

#### Generate considerations & strategies for your challenge/topic

- What are the key considerations for this topic or question?
- What strategies do you recommend?
- What best practices exist in our profession or others that apply?
   Consider yesterday's briefings.
- Any specific next steps?

- Print large letters use multiple pages if needed title on each page
- Sufficient detail so when transcribed we'll understand the specifics and the spirit of your conversation
- Choose a briefer to present to the group

## **Group Composition**

Choose three topics you would like to have input to

Go to your first choice

Ensure you have a convener to record and report

Group composition – max/mix

- 10 people max per table
- Good mix of perspectives

OK to move to other groups

## Closing