

Introduction:

The New Jersey Association of Hearing Health Professionals (NJAHHP), which is the largest organization representing hearing care specialists in New Jersey including audiologists and hearing aid dispensers, is greatly concerned with several aspects of the Report and Recommendations put forth by the New Jersey Department of Law and Public Safety pursuant to Governor Christie's Executive Order 15.

First and foremost, NJAHHP is troubled by the several distortions, errors and omissions in the report regarding the recommendation to "merge" the Audiology and Speech Language Pathology Board with the Hearing Aid Dispensers Examining Committee. While the Association may not be outright opposed to such a move, the specific language in the report indicates that the consolidation would really be a take-over with the Audiology and Speech Language Pathology Board "assuming the responsibilities of Hearing Aid Dispensers Committee." The report justifies this erroneous assumption of responsibilities through misinformation and falsely portraying hearing aid dispensers as a second-class profession to audiologists.

The Association is perplexed as to why this report was put forth without consultation with the professionals it will impact. The HADEC (Hearing Aid Dispensers Examining Committee), which is comprised of state licensed hearing aid dispensers that have the primary responsibility for regulating the licensed practice of both Audiologists and Hearing Aid Dispensers, were not conferred with on the report's recommendations. Neither, apparently, were any of our members on the Audiology and Speech Pathology Board. This doesn't make any sense.

Before plans move forward in the Legislature, NJAHHP is hopeful that the Department of Law & Public Safety will rectify the significant errors in the report regarding both audiologists and hearing aid dispensers. The following is NJAHHP's attempt to clarify the inaccuracies, so that should consolidation of the two boards occur, it is done in the best interest of both professions and most importantly, the people they serve.

Below in **bold** are direct quotes from the report that are incorrect or omit significant details about the practice, training and/or oversight of audiologists and hearing aid dispensers. These quotes are followed by NJAHHP's explanation in hopes of setting the record straight, so that quality is maintained and consumers are protected going forward.

Thank you in advance for your consideration. We look forward to being your partner as this important issue progresses.

NJAHHP Points of Clarification:

1). **"Audiologists are trained to test hearing and fit hearing aids. Since 1993 their Masters degree education includes the testing and fitting of hearing aids..."**

This statement about audiologist needs clarification. Audiologists who graduated prior to 1993 were not required to have hearing aid training as part of their Masters Degree education. Many of these audiologists are still practicing today. If any of these pre-1993 audiologists wish to hold a hearing aid dispensers license, they must, by regulation, either show two years of hearing aid dispensing experience in another jurisdiction or have supervised training with a hearing-aid license holder.

The report implies that audiology graduates are automatically trained at a sufficient competency level to negate the need to be examined for a Hearing Aid Dispenser License. Current pass/fail rates for the New Jersey licensing examination still indicate that approximately 30% of Audiologists are not passing minimal competency on the NJ HADEC licensing exam, even with the AuD Doctoral level for audiologist in place. In fact, the relatively high failure rate of both audiologists and hearing aid dispensers for the rigorous Hearing Aid Dispensers Exam underscores the continued need for the public protection through both Audiologists and Hearing Aid Dispensers taking and successfully passing a minimum State competency exam.

2). “Thus their (audiologists) training is provided in an academic setting and includes didactic and practical experience with patients specific to hearing aid testing and fitting. They take a national audiology examination.”

The report blatantly fails to mention that hearing aid dispensers in New Jersey must also meet some of the most rigorous standards in the nation to be licensed. These professionals must pass the International Licensing Examination, which is used in 39 other states, in addition to New Jersey, that utilizes psychometrics to ensure validity and reliability of the test. The comprehensive exam is based on role delineation studies of regulated hearing instrument specialists.

In addition, hearing aid license candidates in New Jersey need to pass a written exam addressing the State’s laws and regulation and undergo a rigorous, hands-on, practical examination of minimal competencies for hearing aid dispensing. If the Audiology and Speech-Language Pathology Advisory Committee were to assume the responsibilities of the Hearing Aid Dispensers Examining Committee, as implied in the report, NJAHP is concerned how this important hearing aid licensing exam would be administered and graded. The report fails to provide details on this critical factor.

As it stands now, the Audiology and Speech-Language Pathology Advisory Board is comprised of two audiologists, two speech pathologists, and two community members, none of which are required to have any hearing aid experience at all. Clearly, this Committee is not sufficiently experienced in the subspecialty of Hearing Aid Dispensing to properly administer the hearing aid dispensers’ exam. The examination was created to ensure quality and to protect consumers. Experienced practitioners in hearing aid dispensing must have balanced representation on any board that governs their licensing. It is vital to their profession and to the safety of the consumers they serve.

3). “In contrast (to audiologists) hearing aid dispensers...obtain an education which is not structured, is dependent on a relationship between an applicant and sponsor (who usually hires the individual once licensed) and involves an emphasis on sales techniques.”

This derogatory characterization demeans hearing aid dispensers; in addition, it disregards the HADEC requirement of minimum study that a hearing aid dispenser must undergo including both practical apprenticeship and study training regimen. Prior to licensure, hearing aid dispenser trainees are required to work alongside a licensed dispenser for a minimum of six months full time and have many hours of study in areas defined in the rules and regulations section of the New Jersey State Law regulating Hearing Aid Dispensers. During this supervised training of hearing aid dispensers, the candidates undergo extensive written and independent study centered on material that will be covered in the rigorous licensure examination. The statement that their training is focused primarily on sales techniques is totally off base. The truth is dispensing audiologists rely on hearing aid sales just as much as a traditional dispenser.

4). “There are no academic degree programs in New Jersey specific to hearing aid dispensers.”

This statement is simply incorrect. Burlington County College offers a two-year degree in hearing instrument sciences, and graduated their first class in 2009. The class of 2012 has begun their introductory courses this fall.

5). “No college education is required for Hearing Aid Dispensers.”

NJAHHP believes this statement has no bearing on the argument for board consolidation. Instead, it seems to be another angle to disparage dispensers and make them appear second to audiologists. The Association has worked for years in support of a college-program alternative to the training apprenticeship and the BCC program is a direct result of the Association’s efforts to provide this option.

6). “The responsibility of regulating hearing aid dispensers would probably be more logically assumed by the Audiology and Speech Language Pathologists Board.”

The overall tone of the EO-15 Report is one of consolidation and merger. This proposal, however, goes well beyond consolidation by recommending that the Audiology and Speech Language Pathology Board assume responsibility of regulating hearing aid dispensers—even though the current definition of the Audio/Speech board does not require expertise in hearing aids. Presently, the law states that as little as one member of the Audio/Speech board can be an audiologist, with three speech pathologists (45:3B-4). Speech pathologists have no requirements for hearing aid training, and are excluded from hearing aid fitting. As such, they lack the necessary skills to judge matters of hearing aid dispensing and should not be given oversight of the profession.

Moreover, the current law does not require the audiologists on the board to be dispensing audiologists, which means they are not required to have any hearing aid qualifications to serve. It is therefore illogical to give individuals with no experience or training in hearing aid dispensing governance over the practice. Not only are they ill-equipped to administer the dispensers’ licensing exam, they do not have the background to make properly informed decisions in the cases of license applicants, consumer complaints or regulatory changes. Simply collapsing the responsibilities of the Hearing Aid Dispensers Examining Committee into the Audiology and Speech Language Pathology Advisory Board would be damaging to the profession and erode consumer protection.

Going forward, NJAHHP is hopeful that hearing aid dispensers will be referenced as the highly-qualified practitioners they are, rather than the second-class citizens as unfairly portrayed in this report. Should a true merger of the Audiology and Speech Pathology Advisory Board with the Hearing Aid Dispensers Examining Committee take place, the Association strongly believes provisions need to be in place to ensure consumers are protected through equitable representation of licensed dispensers on any regulating board.

NJAHHP respectfully requests that our members be a part of the discussion as plans move forward on this important issue. As hearing health professionals, we have a lot at stake in the process. Please feel free to contact me at 609-392-3800 to discuss this matter further. Thank you again for your consideration of our thoughts and concerns.