

AVAA Amplifier

Fall 2020



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Special points of interest:

- President's Message
- Extern Website Launch
- Education
- JDVAC Update
- "A Day in the Life": Audiology Extern POV
- Pets of AVAA



President's Message by David Jedlicka, Au.D.

As VA audiologists, we have the distinct pleasure of working for an organization that supports clinical education. The VA provides the most externships in the country and often works with university partners to provide other clinical opportunities to AuD students. Many VA audiologists, myself included, were fortunate enough to complete our externship experience at a VA. Our investment in the profession of audiology also includes a responsibility to provide the highest level of clinical education and supervision to every AuD student that enters our clinic.

When we are considering the benefits of providing clinical supervision to students, we may tend to focus only on the outcomes for the student. Being a clinical preceptor has many benefits for the audiologists working directly with the students as well. Our profession requires us to continually update how we practice in order to meet evidence based standards. It can be easy for an audiologist to practice using the methods we were taught during our time as a student, however being a lifelong learner means that our clinical practice must change as the standards of care evolve. When we are supervising students, the best clinical education outcomes stem from providing evidence based practice methods which are consistent with what has been taught in the classroom. Avoiding inconsistencies between classroom and clinical education optimizes the learning experience for the student and ensures that the audiologist providing the clinical education is practicing using the most recent standards.

A few years ago at JDVAC, VA audiologists were asked to identify issues they felt were impacting their practice. These results were shown live in the form of a word cloud. One of the most common responses indicated burnout is an issue among VA audiologists. Serving as a clinical preceptor is a great way to avoid burnout in the clinic. There are times when all of us may feel that certain aspects of our daily work simply feels routine or mundane. Students have not been in the clinic enough to experience those same emotions. Students bring excitement and energy to the clinic because they can bring a refreshing (*con't*)

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perspective about the importance of audiology not only to their preceptors, but to the patients they engage with as well.

One of the main foundations of AVAA is to promote the highest quality of training by individual audiologists and programs. We are proud to work with the Council for Academic Programs in Communication Science and Disorders (CAPCSD) to provide VA Audiologists with tools that can help the effectiveness of the clinical education they provide. In addition, AVAA also introduced our Externship Webpage on MyAVAA.org that will serve as a hub to connect VA audiology departments with AuD students interested in completing their externship at a VA facility. Currently there are over 20 VA audiology departments listed on the AVAA Externship Webpage and we hope to have every site that accepts AuD externs represented on the webpage.

Lastly, we must remember that we are a helping profession. We are fortunate to have the opportunity to help people improve their ability to communicate every day. Our role as a helpers also extends to helping AuD students expand their knowledge, gain confidence, and ultimately have the skills needed to be independent and competent audiologists. While these individuals are students today, they will eventually become our peers and colleagues. Providing clinical education to students is a great way to give back to the profession, help prepare the next generation of audiologists, and most importantly, ensure that we are all providing the best hearing healthcare to those who need us.

AVAA Externship Webpage: The Bridge Connecting Students to the VA

Christine Ulinski, Au.D.

Finding the right externship placement is difficult for students, universities, and clinical placement sites. VA provides the largest number of externships in the nation; however no single resource exists to provide information regarding what locations are available and what the application process is. This sets up VA to potentially miss out on students with an interest in completing their externship at a VA. The Association of VA Audiologists now has an Externship Page on its website to provide a bridge between VA Externship sites and student/universities.

positions. Questions were developed to determine the type of information that should be gathered to create the posting of available positions. This approach allowed the committee to start identifying the information that which may be the most beneficial to share with prospective applicants as well as what information should be requested from those same student applicants.

The next step for the committee after determining what information should be provided and requested was to survey VA audiologists and AuD programs to identify what information they felt would be most valuable for the Externship Website to include. The Externship Webpage Committee created two surveys to gather information from the university perspective and from the VA placement perspective. The Council on Academic Programs in Communication Sciences and Disorders (CAPCSD) worked with AVAA to distribute the survey to their members. Responses showed a great interest in a VA externship webpage and as well as support of a standardized application deadline.



Thanks for your hard work, Christine!

The VA survey was posted on the AVAA website to allow all VA audiology clinics the opportunity to respond. This survey was similar to the CAPCSD survey but focused on having the VA respondents rank order the items that were the most important to their facility. Responses showed a great interest in the creation of a VA externship webpage as well as having a standardized application deadline.

The website opened for submissions on July 1, 2020 and currently there are 24 VA Externship sites posted. Universities have also reached out to indicate how pleased they were with this offering and are sharing the information with their students. Additionally, AVAA members have reported an increase of externship applications in 2020 following the creation of the AVAA website compared to previous years. It is the hope that this externship website will continue to connect quality students with great VA externship placements. We are excited about the initial response to the website and if your facility is not listed on there yet, we encourage you to submit your offering. Externship position postings can be submitted at MyAVAA.org. The AVAA website could not have been created without the support of VA audiologists and our university partners. This project required a significant time and financial investment from AVAA and the Externship Website Committee. The website development price was approximately \$500 for building the platform and has an estimated cost of \$2500 annually. The funding for this website will be provided from AVAA voluntary dues. This will ensure that the list of available externships is maintained and updated annually to provide the most up to date information for potential applicants.

We would like to give a big thank you to those who volunteered on the Externship Committee: Alyssa Coxwell, Au.D., Joseph Coskey, Au.D., Misty Dedeaux, Au.D., Susan Lloyd, Au.D., Dawn Martin, Ph.D., Shannon Powell, Au.D., Andrew Smith, Au.D., Danielle Stiles, Au.D., Christine Ulinski, Au.D., and J. Nicole Wiley, Au.D. for their hard work and enthusiasm in completing this project.

Precepting : Evidence Based Methods for Improving Clinical Education

Elaine Mormer, Ph.D.



Dr. Mormer is the Vice Chair for Clinical Education and Associate Professor at the University of Pittsburgh. She has presented nationally on the subject of evidence based clinical education, is the recipient of the 2020 AAA Outstanding Educator award, and serves on the board of CAPCSD.

In a typical AuD program, externship preceptors provide clinical instruction for either 1/3 or 1/4 of each students' total program time. Providing this instruction is a complex and personal activity for both students and preceptors. The start of a new externship is certainly a time of angst and trepidation for students. But it is reasonable for clinical preceptors to feel some anxiety as well! Incorporating a new student into your clinical space and workflow takes forethought and energy. And that is, of course, in addition to your already full schedule. So, what can clinical preceptors do to best serve students, and themselves, during an externship year?

In most of the student/preceptor breakdowns that occur, there are a few common themes. These themes have been explored in the clinical education research literature, and many of us recognize them from our own experiences. The most common theme is that of *misguided expectations* on the part of student, preceptor, or both. For example, a student may appear to have had extensive experience with hearing aid programming, but then you observe that an unexpected level of supervision is required for that activity. Likewise, a student could mistakenly expect that s/he could make clinical decisions and recommendations without the preceptor's approval, when this is not the preceptor's plan. It is easy to forego the conversations that address these details, especially in the frenzy of a packed clinical schedule.

The 2nd theme that is usually associated with precepting challenges, is the preceptor-student relationship. This relationship is complicated by issues of power, status, trust and the need for clear communication in all directions. Students may feel either insecure or overly confident in relating to a preceptor. This can further obscuring communication and the discussion of clear expectations!

A great way to open communication with students is to solicit their input on their own learning goals. Asking a student: "*what do you want to learn this month?*" prompts them to self-reflect on their own experience, skills, and knowledge. They can then be guided to self-define specific learning goals like: "by the end of 2 weeks I want to choose a hearing aid independently and do

all of the programming on my own". Specific learning goals have been shown to improve learning outcomes in clinical practice. The sharing and discussion of those goals, with the preceptor, increases the effectiveness of goal setting.

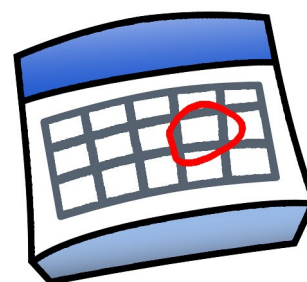
Perhaps the most valuable asset you can provide to students is your clear and objective feedback. This includes both positive reinforcement for tasks done well, and suggestions for improvement when performance is lacking. Research demonstrates that students often don't recognize a preceptor's comments as feedback! Whether your comments are positive or negative, it is effective to preface your feedback with the simple phrase: "I'm going to give you feedback now." This preface to your comments will make your intent clear and evidence suggests this will result in faster learning.

There are a number of online continuing education resources available to assist preceptors with clinical instruction. Both AAA and ASHA offer professional development courses for members. Additionally, the Council of Academic Programs in Communication Sciences and Disorders (CAPCSD) has developed a series of self-paced, online course modules focused on the process of clinical education. There are 4 courses, each containing approximately 2 hours of learning activities. Continuing education credits for these modules are available through ASHA and AAA at no cost to learners. For access to these modules, contact the university liaison for your extern(s).

*Note that the CAPCSD courses are currently being migrated to a new platform and are offline until mid-October.

JDVAC 2021 Update

You, the members spoke and we heard ya! JDVAC 2021 will be 100% virtual! "Join" your colleagues March 1-3, 2021 for a truly unprecedented conference. Our convention team is working hard and inventively to ensure our members a unique learning experience. One invited speaker is Dr. Lori Zitelli who will be providing a talk on recognizing signs of suicide and self-harm. Break-outs with vendors, speakers from other countries, and imaginative interactions with other attendees is also in talks. Mark your calendars!



A Day in the Life: An Extern's Point of View

Megan Tilley, B.S.

Our special feature for the Fall 2020 AVAA Newsletter will examine "A Day in the Life" of an extern at the VA. We hope that this article will show you what the externship experience is like for a student to better understand what the experience is like from their perspective as well as provide you with the opportunity to consider how you may include externs as part of your clinic. If you would like to share your story or have an idea for a special feature to be included in an upcoming newsletter, please contact AssnVAAuds@gmail.com

"New experiences can be intimidating, especially when trying to "prove yourself"

Completing my externship year at the Atlanta VAMC has afforded me to many opportunities both within audiology and across several disciplines. Because of the range of care, I've been able to go from observing a cochlear implant surgery in the morning to conducting hearing evaluations in the afternoon. Being an extern can be intimidating but being in such a supportive environment when working with so many different disciplines has made the learning process so much more rewarding.

A Day At the Atlanta VAMC

"...being in a supportive environment...has made the learning process so much more rewarding".

Today, I began my day by working alongside my supervisor on a cochlear implant candidacy for a patient with bilateral sudden SNHL. This appointment included not only the normal evaluation procedures for a cochlear implant, but we also had to conduct an ABR to confirm thresholds due to the complex nature of the patient's hearing loss etiology. A combination of longstanding and sudden sensorineural loss, his hearing loss was causing a lot of emotional stress which lead to extensive counseling on not only handling his hearing loss in his day-to-day life, but also what choosing a cochlear implant meant in appointment run much smoother. My supervisor and I worked together to come up with a solution and having my opinion valued made the appointment a lot less stressful for me and also helped me feel like I was involved in the appointment.

Once this appointment was completed, we moved on to an osseointegrated device appointment for a patient who has longstanding conductive hearing loss and had their surgery at the VA. We discussed some of the newer technology options available, should the patient decide to add a device to the opposite ear. From start to finish, being able to see the patient's journey allowed for extra insight into not only what would work best for them, but also made it

easy to see the improvement in quality of life the OID had provided the patient. New experiences can be intimidating, especially when trying to prove yourself with “new-ish” supervisors and I was admittedly nervous going into the appointment, especially after such a whirlwind first eval for the day. It was good to be able to assist but also step back and watch how someone with more experience handled the situation, both in rapport with the patient and in familiarity with the technology.

Being able to spend the required time with these patients really made all the difference. We are able to take the time to address their concerns as well as get the best information possible. Being able to get additional testing in, even when not scheduled, makes a huge difference in not only the success of the appointment, but the patient’s confidence in the clinical discussion—our patients were able to see the extra time and effort put into ensuring their care, which went a long way in making them feel not only comfortable but validated.

After these morning appointments, I moved on to a virtual visit with a patient. They were having difficulty adjusting to their new hearing aids. Because we aren’t able to see hearing aid fitting patients in person due to COVID-19 restrictions, we decided to perform a remote fitting through the hearing aid app. After some technical difficulties, we managed to get the patient set up and performed the necessary adjustments—he seemed much happier with the new settings, and relieved he didn’t have to travel to the hospital or satellite clinic to get adjustments during the pandemic.

The rest of the patients for the day were hearing evaluations. Being able to spend time with each of the patients helped in not only establishing a patient-provider rapport, but also helped us understand better their listening needs and ensure that our test results were fair and accurate. In addition, knowing that you can provide the best hearing interventions available to your patients is a really wonderful feeling: our patients have a variety of needs and being able to switch between manufacturers and get them what they need—whether its just a hearing aid or a hearing aid with an FM or a tinnitus masker—without them stressing about whether or not they can afford to have appropriate amplification and hearing care is fantastic as a provider. Being able to work with a variety of manufacturers is also so helpful as a student: I feel comfortable and confident working with each of the different software as well as understanding what features are available in the different aids. Between working with patients and spending time on repairs, we are able to have a broad range of amplification experiences.

It's also nice having other externs to bounce ideas off of and ask for help with things when you aren’t sure. There are three externs at the Atlanta VA and having someone to ask for real quick help with a hearing aid repair or see what they know about certain procedures is invaluable. We’re all thrown together so quickly that its really nice to have someone who knows exactly what you’re going through to talk with about your experience and to share knowledge with.

Completing an externship at the VA is a unique experience that has allowed me to not only give back to the Veterans of this country but also learn about different testing methodologies and equipment, hearing intervention strategies, and rehabilitation options. The patient-first, patient-centered healthcare mindset paired with cutting edge amplification options and assessment technology has created an invaluable learning opportunity that I’m thrilled to be a part of.

AVAA BOARD UPDATES

- The 2021 JDVAC Conference is looking for volunteers. If you're interested in volunteering, please contact Christa Johnson at CMMJohns@gmail.com.
- AVAA will be conducting a membership survey later this year. In order to reach as many VA audiologists as possible, please make sure your colleagues are registered to receive our emails by having them sign up with a non-VA email address at myavaa.org
- We want your feedback! If you have any thoughts regarding AVAA or JDVAC, please share them with us at AssnVAAuds@gmail.com

PETS OF AVAA

Delia Karahalios from the System Sepulveda VAMC shared her two rescues, Annie and Greta! Delia reports opposites attract: "Annie is fun-loving and goofy while Greta is serious and sweet. They are inseparable". Thanks for sharing, Delia!



Otis (L) and Gideon (R) are rescues of Erica Dombrowsky (Miami VAMC) and their lives are the cat's meow now that she has been teleworking. Gideon contributes by climbing up on the desk, sitting on the keyboard, and organizing Skype chats. They are both happy to participate in VVC appts but



more often than not they have more important things to do such as nap, look adorable, and require Erica to provide them with treats upon request. *Send us your pets!* AssnVAAuds@gmail.com