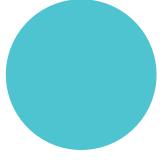
900 - 200 Granville Street Vancouver, BC Canada V6C 1S4 Phone: 604.742.6380 Toll-free: 1.888.742.6380 Email: enquiries@cshbc.ca

## Summary Of Clinical Practicum Hours

HEARING INSTRUMENT DISPENSING PROGRAM (AF-43)







### **OVERVIEW OF REQUIREMENTS**

1. A minimum of 150 hours total SUPERVISED CLINICAL PRACTICUM HOURS required.

#### **DEFINITIONS**

"Client Contact" means a supervised practical learning experience where the student clinician actively participates in patient/client service. The patient/client or significant communication partner (i.e., spouse, parent, work colleague) need not be present for all activities, but these should be focused on the client's specific needs (e.g., team meetings, discussion with supervisor). This category is not meant to capture activities that are of a general nature (e.g., delivering a presentation on a disorder type).

### Client contact may be undertaken in person, or virtually:

- a. In-person care is the in-person provision of services to clients
- b. **Virtual care** is where health care services are provided at a distance, using information and digital communications, technologies and processes. It is the responsibility of the student's clinical supervisor to ensure that virtual care is appropriate for the clinical services being provided. See the **CSHBC** *Virtual Care* **Standard of Practice** for further information.

**"Practicum"** means a supervised practical learning experience conducted in connection with a post-secondary institution education program in audiology or hearing instrument dispensing.

"Supervision" means the process by which a supervisor oversees a supervisee's practice of a health profession. Supervisory oversight may include a supervisor monitoring, reviewing, guiding, directing, training, evaluating, or providing formal or informal feedback about a supervisee's activities, performance, or competencies, in accordance with professional standards and guidelines. See the **CSHBC Supervision Standard of Practice** for more information.

### **Applicant Information**

SURNAME:	FIRST NAME:	POST-SECONDARY INSTITUTION:

#### **CLINICAL PRACTICUM HOURS LOG**

Where possible, in addition to this form, applicants are requested to have their Program Director provide to the CSHBC a copy of their clinical practicum hours record or log. Such documentation is likely to assist the Registration Committee in their review of the application.

### **Summary Of Clinical Practicum Hours (HIP)**

ESSENTIAL TOPICS	CLIENT CONTACT HOURS	
Your Clinical Practicum Hours MUST include each of the following topics <sup>1</sup>	Assessment (Diagnosis)	Intervention (Treatment)
ASSESSMENT:	Client Contact HOURS	Client Contact HOURS
Case History		
Questionnaires		
Otoscopy		
Pure Tone Audiometry		
Speech Audiometry		
Tympanometry		
Interpretation		
Recommendations		
When to Refer		
INTERVENTION:	Client Contact HOURS	Client Contact HOURS
Hearing Aid Selection		
Earmolds		
Fitting		
Verification		
Validation		
Hearing Aid Troubleshooting		

ESSENTIAL TOPICS	CLIENT CONTACT HOURS	
Your Clinical Practicum Hours MUST include each of the following topics <sup>1</sup>	Assessment (Diagnosis)	Intervention (Treatment)
CLIENT MANAGEMENT:	Client Contact HOURS	Client Contact HOURS
Communication Skills and Strategies		
Hearing Loss Prevention		
Infection Control		
Documentation (Including Informed Consent)		
Assistive Listening Devices		
Selling and Offering to Sell Hearing Instruments		
When/How to Refer Out		
SUBTOTALS:	A. Subtotal client contact hours:	B. Subtotal client contact hours:
TOTAL HOURS (minimum 150 hours): Client Contact Hours (A+B):		

<sup>&</sup>lt;sup>1</sup>Applicants must demonstrate clinical practicum hours in each of the essential topics; however, there is no prescribed minimum number of hours that must be completed in each.

# I verify that the summary of clinical practicum hours above was completed within the program of:

NAME OF DEGREE- OR DIPLOMA-GRANTING INSTITUTION:	DEGREE/DIPLOMA/NAME OF PROGRAM
PROGRAM DIRECTOR'S NAME (PLEASE PRINT)	PROGRAM DIRECTOR'S WORK EMAIL ADDRESS & TELEPHONE NUMBER:
PROGRAM DIRECTOR'S SIGNATURE	DATE (YYYY/MM/DD)

### CLINICAL PRACTICUM HOUR DEFINITIONS | ESSENTIAL TOPICS

**Assessment:** Conduct interviews, obtain informed consent and case history. Basic hearing assessment appropriate for adult population (otoscopy, pure-tone assessment, tympanometry, speech testing, masking, tolerance testing), interpretation of results, clinical decision analyses and clinical counselling. Provide recommendations and make referrals, as appropriate.

**Intervention:** Assess hearing needs and appropriate hearing aid selection for adults, earmold impressions, appropriate earmold selection, fitting and verification of hearing aid fittings, hearing aid follow-up/adjustments, validation/outcome measures. Earmold and hearing aid shell modification, hearing aid troubleshooting. Provide information counselling.

**Client Management:** Demonstrate professional communication skills, employ appropriate communication strategies, infection control measures, conduct aural habilitation/rehabilitation, assistive listening devices, document all verbal and written interactions including informed consent, identify need for referral. Hearing loss prevention, counselling, selling or offering to sell hearing instruments and/or ALDs. Equipment calibration and troubleshooting.