

# ***Auditory-Verbal Therapy***

## ***Scope of Practice***

### **I. PURPOSE**

The purpose of this document is to define auditory-verbal therapy by its scope of practice. This document outlines those goals, skills, responsibilities, and activities that are within the specialty of auditory-verbal therapy. This Scope of Practice statement is intended to be used by auditory-verbal therapists, allied professionals, educational personnel, consumers of auditory-verbal services, parents, and the general public. It serves as a reference for issues of service delivery, certification, third-party reimbursement, legislation, consumer education, regulatory action, and inter-professional relations. This document is not intended to be an exhaustive list of activities in which auditory-verbal therapists engage. Rather, it is a broad statement of professional knowledge and practice. Periodic updating of any Scope of Practice is necessary.

### **II. DEFINITION OF AN AUDITORY-VERBAL THERAPIST**

The central theme of auditory-verbal practice is that therapists educate and support parent(s)/caregivers to provide children with hearing impairment opportunities to maximize auditory learning. Such opportunities include making habitual and optimal use of amplified residual hearing or electrical stimulation (e.g., cochlear implant) in order to develop spoken communication and become independent, participating members of mainstream society.

An auditory-verbal therapist is a professional who, by virtue of academic and clinical training and appropriate certification, is uniquely qualified to:

- A. Support programs for the early detection and identification of hearing impairment and the auditory management of infants, toddlers, and children so identified;
- B. Provide/support the earliest use of the most appropriate technology in order to obtain the maximum acoustic benefits possible;
- C. Instruct parent(s)/caregivers in ways to provide optimal auditory stimulation within meaningful contexts and support the development of the most favorable auditory learning environments for the acquisition of spoken language;
- D. Seek to integrate listening into the child's total personality;

- E. Support the view that communication is a social act and seek to improve verbal (spoken) interaction within the typical social dyad of infant/child and parent(s)/caregivers;
- F. View parent(s)/caregivers as the primary models for the development of a child's spoken communication through one-on-one teaching;
- G. Ensure that the child's speech will be self-monitored through audition to the greatest extent possible;
- H. Use natural sequential patterns of auditory, speech, perceptual, linguistic, and cognitive stimulation to develop spoken language;
- I. Provide ongoing evaluation of progress and the prognosis for the development of a listening function and spoken communication skills as an integral part of (re)habilitation;
- J. Support integration of children with hearing impairment into regular education classes with appropriate support services and to the fullest extent possible.

The auditory-verbal therapist is a practitioner who provides services in private practices, schools, hospitals, clinics, universities, and in other settings.

### **III. SCOPE OF PRACTICE**

The scope of practice of auditory-verbal therapists is defined by the training and knowledge base of professionals who are certified by Auditory-Verbal International, Inc. Auditory-Verbal therapists must be competent in the following areas: knowledge of hearing and audiology, enhancement of auditory functioning, knowledge of spoken language communication, skills in the provision of auditory-verbal techniques and procedures, knowledge of child development, skills in parent guidance, knowledge of the history and philosophy of auditory-verbal practice, and a familiarity with current professional issues.

#### **A. Hearing and Audiology**

The auditory-verbal therapist has knowledge of hearing science such as anatomy of the ear, physiology of hearing, physics of sound, causes of hearing impairment, conditions that present in addition to hearing impairment (e.g., mental retardation, other physical impairments, learning disabilities), and early identification and high risk factors.

Auditory-verbal therapists must be familiar with hearing technology such as amplification devices (e.g., hearing aids, FM Systems, digital speech processors, vibro-tactile, speech transposers) and earmolds. They must

also be familiar with procedures for evaluating amplification system function, assistive listening function, TDDs, closed caption decoders) and cochlear implants.

The auditory-verbal therapist has knowledge of audiograms and audiogram interpretation, and the AVI protocol for audiological and hearing aid evaluation.

### **B. Auditory Functioning**

Specifically, enhancement of auditory functioning includes knowledge of the concepts critical to understanding listening function, concepts of auditory experience critical to the habilitation of a child with hearing loss, knowledge of emerging auditory development, and techniques and strategies for the assessment of listening skills.

### **C. Spoken Language Communication**

Spoken language communication includes the two primary areas of language and speech production.

Specifically, language includes knowledge of the general anatomy and physiology of the speech mechanism, the general sequence of speech development (e.g., articulation, phonology, and intelligibility), assessment of speech production, and teaching techniques in speech production.

### **D. Auditory-Verbal Techniques and Procedures**

The auditory-verbal therapist is the professional who develops the child's maximal use of amplified residual hearing through the application and integration of knowledge areas (e.g., audiology, child development, speech acoustics, and language), employs learning to listen strategies and formal auditory-verbal assessment procedures, assesses the ongoing effectiveness of auditory-verbal intervention, develops procedures for stimulating spoken language development, employs techniques to integrate listening skills into daily routines and experiences, and develops procedures for integrating the child into hearing/speaking society

### **E. Child Development**

The auditory-verbal therapist has knowledge of the following areas of child development: stages of motor, social, and emotional development; stages of cognitive and communication development (e.g., sensory

integration, cultural, community, family); play development; and educational mainstreaming.

### **F. Parent Guidance**

Parent guidance includes family guidance techniques, understanding the impact of hearing impairment on the family (e.g., coping mechanisms, family functioning, stages of grief), awareness of the influence of associated factors on parent guidance (e.g., cultural, economic, lifestyle, and community), skills in behavior management, and parent education.

### **G. History, Philosophy, and Professional Issues**

The auditory-verbal therapist needs to have a knowledge of the history of habilitation and the education of children with hearing loss, and the principles of the auditory-verbal approach.

The areas of professional issues include: current legislation and regulations concerning specialists working with individuals with hearing impairment (e.g., licensure, certification); current legislation and regulations concerning persons with disabilities; assessment of appropriate resources; ethical issues; responsibilities to colleagues and to the professional and professional associations and organizations concerning deaf education and rehabilitation (state, national, and international).

### **I. Additional Expertise**

Some auditory-verbal therapists, by virtue of education, experience and personal choice, may specialize in a particular area of practice and thereby extend their skills, knowledge and abilities to that specialty and/or to activities outside of those defined in this Scope of Practice. Nothing in this document shall be construed to limit individual freedom of choice in this regard provided that the activity is consistent with The Principles and Rules of Ethics that Apply to Individuals who are Professional Members of AVI.

*This document will be reviewed and revised periodically.*

**From Auditory-Verbal International, Inc.**