



Section A – Websites for Standards Organisations

The web addresses for the main standards organisations are given below. We recommend that members refer to these websites for the most current information as Standards are continually updated.

1. **ISO (International Standards Organisation)**
 - Audiological Testing
 - Reference Levels
 - Noise Measurement/Hearing Conservation

Web Address www.iso.ch/

2. **IEC (International Electrotechnical Commission)**
 - Audiological Equipment
 - Calibration Equipment
 - Hearing Aids

Web Address www.iec.ch/

3. **ANSI (American National Standards Institute)**
 - Reference levels
 - Noise measurements
 - Hearing Conservation
 - Calibration.
 - Hearing Aids

Web Address www.ansi.org

4. **Australian and New Zealand Standards**
 - Audiological Testing
 - Reference Levels
 - Noise Levels/Hearing Construction

Many of these have been replaced by international standards revisions.

Web address www.standards.co.nz

The Society is represented by a member of the Sub-Committee on Standards
New Zealand's Acoustic Standards Coordination Group (ASCG)

Section B- Standards of Practice

i) INTRODUCTION

These Standards of Practice have been produced by the Society to provide guidance for acceptable standards of clinical practice. They have been drawn very closely from the Standards of Practice of the Audiological Society of Australia¹. We wish to sincerely thank the Audiological Society of Australia for their generosity in allowing us to base our clinical standards very closely around their documents.

The standards provide an informational base to assist in enhancing client/patient care. They are general and flexible enough to permit both innovation and acceptable



practice variation, yet sufficiently definitive to guide practitioners in decision making for appropriate clinical outcomes. These standards reflect current practice based on the best available knowledge at the time of preparation. Because audiology is currently developing future advances are expected to change current practice patterns. As new clinical, scientific and technological developments take place these standards will be reviewed and updated to reflect these changes.

The standards are designed to be used in conjunction with:

- The Guiding Principles in Section B*
- The Fundamental Concepts in Section C*
- The NZAS Code of Ethics contained in this folder*

Further more detailed guidelines on service provision and current clinical protocols in New Zealand are provided by the following documents:

- NZAS Position Statement on the Audiological Management of Children who are Hearing Impaired or Deaf in New Zealand – April 2002*
- Guidelines for the Fitting of FM Hearing Aids, Paul Peryman Van Asch College Christchurch*
- NZ Cochlear Implant Protocols for Adults and Children, New Zealand Cochlear Implant Programme*
- University of Auckland, Master of Audiology, Clinical Checklist 2001. These are the clinical protocols recommended by the University for students in training.*

ii) GUIDING PRINCIPLES

Principles around which all Standards of Practice should be applied.

- 1. Keep paramount the welfare of clients/patients served in all clinical decisions and actions.*
- 2. Identify the procedures performed by audiologists.*
- 3. Address the clinical indications for performing any given procedure.*
- 4. Define appropriate environmental factors related to procedures (e.g. setting, equipment and materials).*
- 5. Address demographic factors (e.g. age, development, education, occupation, cultural, ethnic, linguistic and social factors).*
- 6. Consider risk as it relates to health, safety and welfare of clients/patients and audiologists.*
- 7. Consider outcomes including improvement and/or maintenance of communication and listening skills.*
- 8. Consider the importance of liaison with related professionals where appropriate and where permitted by the client/patient.*
- 9. Recognise the dignity of individuals and consider client/patient rights, expectations, needs and preferences.*
- 10. Recognise the importance of documentation.*
- 11. Recognise a variety of appropriate service delivery models and procedures (eg. collaborative consultation, use of support personnel, and new and advanced technologies).*
- 12. Consider involvement of client/patient in decision-making.*



13. *Adhere to the specifications and intent of the Code of Ethics.*

iii) FUNDAMENTAL COMPONENTS OF STANDARDS OF PRACTICE

Basic requirements for safe and appropriate Practice which apply to all Clinical Procedures

Clinical Process

- *Procedures are conducted in the client/patient's chosen communication mode and linguistic system (including access to interpreters where required).*
- *An essential component of each procedure is client/patient and/or family/carer counselling.*
- *Procedures address client/patient and family/carer preferences, goals and special needs. Materials and approaches used and products dispensed are appropriate to the client's/patient's chronological and development age, medical status, physical and sensory abilities, education, vocation, cognitive status and cultural/ethnic, social and linguistic background.*

Setting/Equipment Specifications

- *Equipment is maintained according to manufacturer's specifications and recommendations. Audiological instruments and also the rooms used for sound field testing are properly calibrated at recommended intervals and calibration records are maintained.*

Safety and Health Precautions

- *All procedures ensure the safety of the client/patient and clinician and adhere to universal health precautions (e.g. prevention of bodily injury and transmission of infectious disease).*
- *Decontamination, cleaning, disinfecting and sterilisation of multiple-use equipment before re-use is carried out according to facility-specific infection control policies and procedures and according to manufacturer's instructions.*
- *There is a monitoring procedure to ensure all clinical and ancillary staff follows these procedures.*

Documentation

- *Audiologists prepare, sign and maintain, within an established time frame, documentation that reflects the nature of the professional service. When appropriate and with written consent, reports are distributed with all necessary identifying information.*
- *Except for screenings, documentation addresses the type and degree of hearing loss and associated conditions.*
- *Documentation includes identification information, relevant history, and results of previous screening, assessment and rehabilitation if available.*
- *Results of assessment and proposed management are discussed with the client and reported to the referral source when the referrer is another professional. They may also be reported to the client's family or carer (if appropriate).*