

**Job Class Profile:            Audiologist II****Pay Level:                      CG-46                      Point Band:                      1190-1253**

Factor	Knowledge	Interpersonal Skills	Physical Effort	Concentration	Complexity	Accountability & Decision Making	Impact	Development and Leadership	Environmental Working Conditions	Total Points
Rating	8	7	3	6	8	7	6	5	4	
Points	373	117	19	29	240	152	124	107	43	1204

**JOB SUMMARY**

The Audiologist II is responsible for the co-ordination and or supervision of audiology services within an organization which may include providing leadership/supervision over Audiologist I positions. In addition to the service co-ordination role, performs clinical work similar to the Audiologist I in identifying the nature, extent and impact of hearing loss and other related auditory/vestibular dysfunctions; providing and/or facilitating rehabilitative treatment for in-patients, out-patients and community based clients of all ages; and educating clients and the community on hearing loss prevention.

**Key and Periodic Activities****As Coordinator/Supervisor, performs the following duties:**

- Prioritizes and monitors clinical and non-clinical activities of other Audiologists; is available for consultation and direction on clinical methods, assesses clinical competence, reviews clinical reports, monitors caseload management and recommends alternative approaches to care. Reviews incoming referrals.
- Assists in the recruitment and selection of new staff and provides orientation to the service and the facility; identifies the need for service expansion and increased human resources.
- Recommends/approves staff leave, recommends the need for disciplinary action, and participates in performance evaluation.
- Participates in the formulation, implementation and evaluation of policies and procedures and in the formulation and control of the departmental budget.
- Provides clinical representation of the department at the administrative level; and plans and participates in the development of quality assurance risk management programs.
- Represents the service at the management level and provides leadership in the development of program goals and objectives.
- Assesses educational needs of staff and provides in-services and educational sessions as required.
- Compiles and evaluates workload statistics, reviews the waitlist and referral priority criteria, and recommends research activities.

**As a practicing Audiologist, performs the following duties:**

- Assesses the nature, extent and impact of auditory/vestibular dysfunction of the client. Reviews referral and related client information; takes a case history; instructs client on procedures and

### Key and Periodic Activities

- selects and performs a battery of behavioural and objective tests; interprets test results; writes reports, prepares referrals and possibly provides hearing aids or other assistive listening devices
- Provides rehabilitation for auditory disorders, including a variety of hearing loss types such as tinnitus and other related ear and balance problems which cannot be surgically resolved.
- Manages the ongoing cases of hearing loss and related dysfunction by setting a schedule for reoccurring appointments and procedures for the client.
- May also provide a specialized service such as Cochlear Implant Consultant.
- Conducts prevention counselling and provides advice to clients on prevention techniques of hearing loss.
- Attends continuing education seminars and conferences to maintain clinical certification credit hours for audiology.
- Supports audiology research initiatives and participates in projects aimed to increase the knowledge of hearing and balance disorders.
- Performs administrative duties such as statistics, correspondence and scheduling appointments.
- Gives presentations and other public relations activities to increase public awareness.

## SKILL

### Knowledge

#### General and Specific Knowledge:

- Various types of auditory assessment techniques such as Otoacoustic Emissions (OAE).
- Specialized areas such as diagnostics and rehabilitation.
- Current hearing assistive technology and programming software.
- Hearing aid mechanics.
- Eligibility and requirements of the provincial hearing aid program.
- Management and supervision of a program area.
- Current knowledge of research in best practices.

#### Formal Education and/or Certification(s):

- Minimum: Masters Degree in Science (Audiology) which includes a minimum of 350 hours of clinical practice under direct supervision of a qualified Audiologist; certification with the Canadian Association of Speech Language Pathologists and Audiologists (CASLPA). Work also performed in accordance with provincial legislation and regulations. If functioning as a consultant in a specialized area, may require some specialized training.

#### Years of Experience:

- Minimum: At least 3 years experience is required

#### Competencies:

- Client care and focus.
- Adaptability to a changing environment.
- Follow guidelines and processes to assess hearing loss.
- Develop creative solutions to problems.
- Design and develop a specific program for clients.

- Operation and repair of diagnostic equipment.
- Supervisory/co-ordination skills.
- Research techniques.
- Oral and written communications.

### **Interpersonal Skills**

- A wide range of interpersonal skills are used such as listening and asking questions of the client to assess issues; instructing and teaching the client on proper use of hearing aids, providing care, comfort and nurturing when delivering test results advising of a child diagnosis of permanent hearing loss; gaining the co-operation of others to complete work and develop care plans, providing expert advice and counselling, conducting formal interviews to obtain comprehensive history for diagnostic assessment and rehabilitation strategies and dealing with upset or angry people when explaining eligibility for various programs, communicating information to senior management on the Audiology department, making formal presentations to promote the service and advocate for resources, negotiating/collaborating with clients to select the most appropriate and beneficial style of hearing device, communicating complex information to insurance companies, and other benefit providers, and facilitating divisional meetings.
- Must be clear and concise in communicating as work is performed with a population that has communication impairments. Communicates with management levels in the program leadership role to ensure efficiency and effectiveness of the service.
- Communications occur with employees and managers within the immediate work areas, other employees of the department, clients, and caregivers and Ear, Nose and Throat (ENT) specialists to identify, measure, and describe patient hearing loss. May also communicate with external stakeholders (e.g. private companies selling hearing aids, and with hearing aid technical support to stay current with new technology), teachers of deaf and hard of hearing children and Speech Language Pathologists regarding continuum of care.

## **EFFORT**

### **Physical Effort**

- Work demands do not result in fatigue requiring periods of rest. There are, however, some situations which require physical exertion.
- Occasionally required to move equipment up to 25 lbs. and physical effort is required to open/close heavy doors to the sound booth during each patient assessment as well as move/position clients in wheelchairs, and to physically hold children in place to perform tests.
- Most physical effort is regularly required when assessing and treating clients and include using hand tools and other equipment that require accurate and precise movements (i.e. removing ear wax, inserting probes, cleaning small parts of hearing aids), controlled movement when testing newborns and kneeling to test children at their height level, standing or sitting to test clients, bending or being awkwardly positioned to examine or insert devices in children or clients with limited mobility, and kneeling or crouching to accurately insert ear mold impressions.
- Rapid responses are required to correct dangerously high volume levels when testing, to place earphones on clients and to initiate or restart testing.
- Fine finger precision and precise use of hand tools are required to manipulate pliers,

screwdrivers, drills, etc., and to fit and modify ear molds and hearing aids.

- There may also be a requirement to drive to visit certain clients.

### Concentration

- **Visual** concentration is required when conducting ear exams with or without the otoscope; observing clients for visual cues to indicate a variety of phenomena such as awareness of sound, lack of understanding, change in perception, inclination of exaggerate hearing loss; monitoring output level of signal presentation on computer monitor; monitoring waveform of electro-physiologic tests; examining very small devices; and performing administrative duties.
- **Auditory** concentration includes performing listening checks on hearing aids to complete performance evaluation; listening to a client's description of history and symptoms; listening for client feedback on hearing aid performance (i.e. translating client perceptions into measurable and adjustable parameters), listening to detect speech concerns during speech testing, and listening during departmental meetings for all pertinent information, as well as consultations with staff.
- Other sensory demands may be required such as **touch** to ensure there are no rough or damaged areas on hearing aids which could cause discomfort to the client and **smell** to detect ear infection.
- **Higher than normal levels of attentiveness** are required whenever assessing, treating and fitting a client's hearing aid as the audiologist is working directly in a client's ear and can cause injury or lifetime damage. **Repetition requiring alertness** occurs when conducting regular hearing and speech perception assessments. Both forms require repeated trials.
- Concentration effort may include accurate control and steadiness when using a drill to make fine modifications of ear mold shapes and vent; very controlled movements are required when inserting otoscope and probes into a client's ear, and when extracting ear wax so a client's ears are not damaged.
- **Time pressures and lack of control over the work pace** occurs to get assessments completed in a very tight session timeline, when preparing reports for other service providers, when completing administrative reports, and when balancing the needs of clients and the audiology department. Also, if involved in specialized work, such as cochlear implants, much work and testing must be performed in the short time frame during the performance of the surgery.
- There is a need **for exact results and precision** when testing hearing to optimize client treatment, when adjusting hearing devices, ensuring physicians carry out correct medical procedures, ensuring measurements result in perfect fitting size hearing aids, when completing documentation, detailing budgets, recording statistics, and preparing presentations.

### Complexity

- Performs a wide variety of activities that are different/unrelated and require the use of a broad range of skills and a diversity of knowledge.
- Problems are very complex as they relate to hearing loss or impairment, and they can be so varied even within a single client that considerable analysis is required to define the problem, and analyze the available options for a solution(s) that will maximize hearing quality for each client. Solutions are often diverse involving a wide range of presenting conditions.
- This profession has an increasing number of tools to aid in identification and localization of hearing loss and significantly increased treatment options. In addition to client based issues,

performs as departmental leaders; and therefore, face the challenges of balancing client needs with departmental concerns such as waitlist management, staffing issues, complaint resolution, professional practice concerns, and budget issues.

- There are best practice guidelines, current research and protocol literature that exist to assist in solving problems, as well as a national code of ethics, organizational policies and procedures and management.

## RESPONSIBILITY

### Accountability and Decision-Making

- Work tasks and activities are somewhat prescribed or controlled within the scope of practice.
- Generally works independently with managing the Audiology Division and caseload management and has full responsibility for assessment techniques and determining appropriate treatments based on diagnosis. Provides all the groundwork for any decisions within the Audiology Department.
- Formal approval must be given to post new positions, address grievances, large purchases, change policy and procedures, finalize operational and strategic plans, negotiate annual hearing device contracts, and for commitments outside of regular duties that require significant time (i.e. sitting on boards or committees).
- Exercises independent judgement in determining the most appropriate choice of amplification and prescribing the most suitable assistive listening devices to maximize client benefits. There is also independent functioning in waitlist management, prioritizing client referrals, and all other issues related to managing the Audiology division (i.e. payroll, purchasing, determining staffing levels, recruiting, performance reviews, orientation, etc.), implementing policy and procedures, dealing with staff concerns, and developing and delivering public education and information sessions. Independently refers clients to other health professionals, determines the selection of test batteries, appropriate adaptation of test techniques and approach, rehabilitation management plan, which hearing devices to use, and whether to consult other areas of the organization or community.
- A high degree of independent discretion and judgement is exercised with client related issues, determining whether to address staff conflict issues before engaging management, and issues related to managing the Audiology division.

### Impact

- Work tasks are generally not prescribed or controlled.
- Independently makes decisions regarding clinical practice, program development and evaluation, professional practice coordination and site supervision.
- Impacts are felt on clients (quality of care), the immediate work area (delivery of the service), within the department (scheduling, space allocation, participation in strategic planning), and on external stakeholders (information sessions).
- Can also impact equipment (modifications required to hearing aids not allowing others to use the equipment), processes (delayed review and prioritization of referrals impacts waitlist), information (incorrect information to clients impacts quality of care), finances (inaccurate recommendations on staffing and equipment needs, or ordering more expensive hearing aids than are necessary), material resources (overusing disposable rather than reusable resources)

and health and safety of clients.

- Positive impacts occur when clients receive the care they need, receive the proper hearing device and receive knowledge to improve quality of life, and the division is managed correctly to maximize the efficiency and effectiveness of audiology services.
- The most significant impact of errors or mistakes are on the client's ear and hearing capacity and steps are taken to mitigate any long term injury or damage within seconds of discovering the error. There is a requirement to follow incident reporting protocols. There can be detrimental impacts, if hearing loss within a newborn is not detected, retesting does not occur until the child is school aged and the child will have missed the critical period of language learning. These errors would normally be detected by a parent or public health nurse. As clinical leader errors of not addressing incidents or occurrences involving staff can dramatically affect the work environment, as can inaccurate payroll information, workload statistics, budget requests, etc..

### **Development and Leadership of Others**

- Responsible for supervision of a medium size work group (5 to 10 employees).
- Assumes team lead and project lead roles in areas such as accreditation teams or universal newborn hearing screening, is a subject matter expert in areas such as cochlear implants and provides leadership in hearing education and consultation with Speech Language Pathologists, itinerant teachers, etc., providing leadership in hearing loss to families and care-givers, trains nurses to perform OAE testing on babies, and takes on project leader roles in areas such as Universal Newborn Hearing Screening, and Speech and Hearing Month promotional activities.

## **WORKING CONDITIONS**

### **Environmental Working Conditions**

- Required to wear safety goggles, gloves and gowns when performing certain procedures and operating certain equipment and are required to follow universal safety precautions.
- There is moderate likelihood of incurring minor cuts, bruises, abrasions; however, the likelihood of any illness or injury beyond this level of severity is limited.
- Constantly exposed to glare from equipment monitors when they are in use; is regularly exposed to awkward or confined workspaces when working with clients to get accurate test results, and bodily fluids (ear wax, blood, saliva), infectious diseases, travel and adverse weather conditions from working with an outpatient population, and is occasionally exposed to unusual/distracting noise, dirt or filth, sharp objects (blades), glues and solvents, electric shocks, and physical danger and threats from clients with developmental or mentally health conditions.