Preparing audiologists to effectively practice today and for the future is the common goal of every professor of audiology, every preceptor who mentors audiology students, and every organization dedicated to audiologists’ continuing education and growth. With the Bureau of Labor Statistics predicting that the number of audiologists will grow by 34 percent by 2022—much faster than the average for all occupations—this goal is more critical than ever.

Learning to practice in one’s chosen field is a critical part of preparation for actual professional practice in that field. Apprenticeships have morphed into internships, mentor/mentee relationships, and, in the field of audiology, into preceptor/student relationships.

Audiologists who commit their time to precepting tomorrow’s professionals are passionate about audiology and patients. But, as these preceptors well know, teaching the professionals of tomorrow requires expertise in audiology, as well as an ability to communicate that expertise effectively, and to impart wisdom about patient relationships, managing patient loads and casework, and many other activities.

Currently, however, there is no formal infrastructure or uniform guidance to prepare those who guide and teach audiology students in their field placements.

“Preceptors in audiology today often proceed with limited training and may or may not possess essential non-clinical skills, such as mentoring, teaching, and management that they need to confidently embrace their role,” Mindy K. Brudereck, AuD, Board Certified in Audiology® and chair of the American Board of Audiology (ABA) Board of Governors, said.

“There is no centralized system in place to ensure that students can find field experiences and externship opportunities aligned with their needs and preferences,” Brudereck said.

The ABA is working to fill that void with the first-ever Preceptor Training Program for the audiology profession—a voluntary standards-driven, assessment-based program that fully integrates the Clinical Education Guidelines for Audiology Externships issued by the American Academy of Audiology.

According to Brudereck, the ABA Preceptor Training Program will help preceptors by creating the best training opportunities for them. In addition, the program will help students who want to identify the best teaching environment possible for their studies, and it will help the profession by ensuring that students have greater access to well-prepared preceptors they can trust to deliver quality clinical placement experiences that will prepare them for their audiology careers.

Topics covered in the Preceptor Training Program curriculum will include the essential knowledge, skills, and resources to apply adult learning theory and learning styles that promote optimal learning outcomes.

Through the ABA training program, preceptors will learn to set clear expectations and reasonable learning targets, manage student clinical experiences, stimulate critical thinking, provide constructive feedback, and conduct efficient evaluations.

Students selecting an audiologist who has earned the Preceptor Certificate can be confident that their
Several participants commented that their only guide for conducting themselves as preceptors was their own experience with supervisors when they had been students.

Clinical placements will ground them in the knowledge, clinical skills, and professional competencies they need to be practice-ready audiologists in their selected area of focus.

**Learning More**

The first step in creating the ABA Preceptor Training Program was a detailed survey of audiologists who work in a variety of settings, to determine where current gaps in areas such as training, skills, and activities may exist.

This comprehensive gap analysis was conducted during the spring of 2014 and includes findings from a detailed survey of experienced preceptors who have provided student supervision in a variety of clinical assignments, ranging from short-term field experiences and practicums to fourth-year externships.

The Experienced Preceptor Survey included 20 questions in four topical areas: preceptor background, preceptor selection, student matching experiences, and the exploration of training needs.
Survey respondents reported working as preceptors at 44 audiology programs in 22 states and four countries. The time they dedicated to precepting ranged from two to 20 years, with the average length of service being 11 years. Experienced preceptors reported working in academic medical centers, pediatric hospitals, hospital outpatient settings, university clinics, and private practice. They supervised groups of students ranging in size from three to more than 400.

According to the analysis report, most respondents reported overseeing traditional one-on-one preceptor/student experiences. Several also led short-term student observations and shadowing experiences for larger groups of students, while some had served as preceptors for large numbers of students in university clinic settings.

There was a range in the types of extended activities in which students were required to participate, as well. Three of the respondents reported that they did not require any extended activities for students. Respondents who required additional activities listed the following: grand rounds, research and clinical projects, community outreach activities, case presentations, visits to clinics and schools, didactic course supplements, labs, participation in monthly video conferences, and participation on a vestibular and cochlear implant multidisciplinary team.

**Defining the Gaps**

Despite being charged with supervising students across many settings, the survey respondents indicated a lack of standardization in preceptor training and qualifications, and a wide disparity in requirements to become a preceptor. In fact, 25 percent of the preceptors reported having been selected to serve as preceptors without being asked to meet any requirements.

“Clearly the audiologists who participated in our gap analysis understand the importance of their role as mentors, educators, and role models,” Brudereck said. “They felt that any preparation was better than none, so several of them reported pursuing training on their own to prepare themselves.

“In several cases, audiologists serving as preceptors conducted independent study in adult learning, leadership skills, and other areas, such as networking with experienced preceptors in informal mentorships,” she said.
Have you served as a preceptor for students from more than one audiology program?

Respondents reported working with 44 audiology programs, including 22 states and 4 countries. Only one respondent had not worked with students from multiple AuD programs.

1. Arizona State University
2. A.T. Still University
3. Auburn University
4. Baylor University
5. Central Institute for the Deaf
6. Central Michigan University
7. Colorado University-Boulder
8. Gallaudet University
9. Indiana University
10. Lamar University
11. Michigan State University
12. Minnesota State University
13. Missouri State University
14. National University of Singapore
15. Northeast Ohio University
16. Northwestern University
17. Nova Southeastern University
18. Ohio State University
19. Pacific University
20. Purdue University
21. Rush University
22. Salus University
23. San Diego State University
24. Towson University
25. University College of London
26. University of Colorado-Boulder
27. University of Connecticut
28. University of Florida
29. University of Florida (Distance Program)
30. University Kebangsaan Malaysia-Bangi Selangor
31. University of Maryland
32. University of Memphis
33. University of Michigan
34. University of Nebraska
35. University of North Texas
36. University of Texas at Dallas
37. University of Texas Medical (Not shown on map because this campus has multiple locations.)
38. University of Washington
39. University of Western Australia, Perth
40. University of Wisconsin
41. Utah State University
42. Vanderbilt University
43. Wayne State University
44. West Chester University
said. “They did anything they could to bolster their skills to help prepare themselves to teach the next generation of audiologists.”

A few of the survey respondents received formalized training for their precepting roles, and there was a wide range in the depth and scope of that training. Examples of the required preceptor training programs included:

- A three-hour preceptor training course,
- A six-hour preceptor training course,
- A preceptor training course offered “at the hospital level,”
- A multi-day preceptor training program modeled on the Credentialed Clinical Instructor Program (CCIP) offered through the American Physical Therapy Association (www.apta.org/ccip), and
- A preceptor course required to supervise a fourth-year, provisionally licensed audiology student.

“The current lack of uniformity in preparation and guidelines for preceptors could set the stage for disparity in how well students are prepared for their roles as audiologists when they complete their clinical education, not because the preceptor isn’t a great audiologist, but because precepting is not necessarily a skill that all audiologists possess,” John Coverstone, AuD, Board Certified in Audiology, and vice chair of the ABA Board of Governors, said.

Knowing this, the ABA experienced-preceptor survey asked respondents to offer suggestions for everything from how to create the most productive and positive learning experience possible to the areas of focus that are most vital in a field placement.

Respondents were asked about criteria that should be built into the preceptor/student matching process to ensure the most productive learning experience for the student and the most positive experience for the preceptor. Answers included:

- Expectations should be clearly defined and communicated regarding the student and university goals, the work environment, the clinical opportunities that will be available, and the methods the preceptor will use to assess student performance and progress.
- Clinical educational experiences should be designed to strengthen areas where the student needs to build competency.
- A review of the courses the student has completed should be conducted to ensure that they are matched with clinical experiences in which they have some academic grounding.

As important as it is to make the best student placement possible, it is equally important to create a uniformity of training areas across clinical education experiences and ensure that future audiologists are entering the field with a similar set of skills and background.

Respondents were questioned about priority areas of focus for a variety of field-placement settings, including all placements, short-term practicums, third-year clinical experiences, and fourth-year externships.

Respondents were asked to identify the specific skills and knowledge they believe are priority areas on which students should focus as they progress through field placements during each year of the doctoral program. Respondents were asked to specify skills along a developmental path, beginning with the short-term practicums to which students are assigned earlier in their education, moving forward to third-year clinical experiences and final-year externships. A total of 25 skills were identified as priority learning areas, spanning all field experiences across the doctoral program.

A sampling of the skills identified by respondents includes:

- Building foundational clinical services through application and repetition.
- Developing an interdisciplinary approach to patient care.
- Conducting behavioral testing, electrophysiology, hearing devices, professional behavior standards, evidence-based practice, etc.
- Gaining broad exposure to a variety of clinical focus areas.
- Refining the clinical focus to align with the student’s area of clinical interest.
- Mastering masking and acoustic reflex interpretation.
- Building clinical testing skills, including reporting and follow-up.
- Building rapport with colleagues.
- Gaining case management and counseling experience.
- Building interpersonal communication skills.
- Learning to work on interdisciplinary teams.

Along with the progressive acquisition of a range of professional skills, respondents also identified skills students should continue to focus on acquiring and refining throughout all field placements. These skills encompassed general professional skills as well as clinical expertise, and fell into five major categories: critical thinking; professionalism; learning how to communication empathetically and professionally with patients, parents, and significant others; taking initiative for ongoing learning; and receiving constructive feedback.

“As we knew intuitively, but learned definitively through this gap analysis, being a preceptor involves so much more than being a great audiologist,” Coverstone said. “When I look at the list of areas on which our participants felt students should focus, it becomes very clear that this is about so much more than the practice of audiology.

“These dedicated preceptors have much to teach students for the future, and the range of topical areas is great. Imparting knowledge about audiology is challenging enough—we have entire programs at institutes of higher education that are dedicated to doing that for our profession.

“But, in addition to sharing their expertise and experience as audiologists, these preceptors also must impart wisdom about how to be a team player, how to communicate well with colleagues and patients, how to counsel patients and families of patients, and many, many other things,” he said.

“I can’t imagine how difficult that would be for someone who is not necessarily trained to be a teacher, which has its own set of highly specific skills. Just because you are an incredible and highly skilled machinist doesn’t mean you automatically know how to teach others to be the same,” Coverstone said. “This survey has revealed that preceptors know this and want more for audiology students and the profession.”

“When you look at the ‘wish’ lists provided by our survey respondents, you can see that they surround teaching, not audiology,” Coverstone said. “These preceptors already are skilled and passionate audiologists. What they need is to know more about effective teaching techniques in order to impart their knowledge and expertise to students.”

To support that “wish list,” respondents identified several potential tools and resources that would be valuable...

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**Do students you oversee engage in any extended activities, such as grand rounds, research, etc.?**

Three of the respondents did not require any extended activities. Those who did listed the following activities:

- Grand rounds
- Research and clinical projects
- Community outreach activities
- Case presentations
- Visits to clinics and schools
- Didactic course supplements
- Labs
- Participation in monthly video conferences
- Participation on vestibular and cochlear implant multidisciplinary team

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**Looking back to your first experience serving as a preceptor, what knowledge/skills/resources do you WISH you’d had then?**

Several respondents commented that their only guide for conducting themselves as preceptors was their own experience with supervisors when they had been students. One respondent commented that, “Just about anything would have helped.” Of those that offered specifics, the following knowledge, skills, and resources were listed as those they wished they had:

- How to apply adult learning styles
- How to give effective feedback
- How to facilitate critical thinking
- How to ask effective questions
- Strategies for maximizing acquisition and retention of knowledge
- Support from an experienced preceptor willing to serve as a mentor
- Understanding the differences in supervising and precepting/mentoring/teaching
- How to calibrate expectations for students as they begin clinical rotations
- How to role play
- How to design an effective learning experience

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**A Road Map to Preceptor Training from the ABA**
To gather input from stakeholders across the profession, surveys also have been conducted with faculty in audiology education programs and with recent audiology graduates.

in the ABA Preceptor Training Program. These included everything from applying adult learning styles and giving constructive feedback to goal-setting skills and setting appropriate expectations.

“Clearly, preceptors want to be the most effective teachers and mentors they can be,” Brudereck said. “Their thoughtful responses to our question about tools and resources included 15 different examples of possible ways to learn more about training and education.

“These preceptors have already demonstrated their passion by volunteering to prepare the audiologists of tomorrow, and they want more than anything to do it well,” she said.

Next Steps
The ABA Preceptor Training Program is being designed to meet that need for teachers, students, and the profession.

The experienced-preceptor gap analysis was the first of three analyses that have been completed by the ABA in preparation for its Preceptor Training Program. To gather input from stakeholders across the profession, surveys also have been conducted with faculty in audiology education programs and with recent audiology graduates.

“We want to be sure that we are listening to, and addressing the interests of, all the important stakeholders in audiology to create the best training program possible and one that will include comprehensive educational training, as well as state-of-the-industry best practices,” Brudereck said.

Survey results from the three stakeholder groups will be compiled, and a focus group of leading audiologists and educators will review the findings and make recommendations on the training program. Training modules will be developed for a pilot launch as a Learning Lab during AudiologyNOW! 2015 in San Antonio, Texas.

“We want this voluntary preceptor certificate to become the industry standard,” Brudereck said. “It will demonstrate that the audiologist who completed the ABA Preceptor Training Program is the best possible educator and mentor. It will help audiology programs ensure that their students are placed with skilled preceptors and it will help students rest assured they are receiving their precepting from highly qualified mentors in the best possible environment for them.”  

If you are interested in serving as a subject-matter expert for the ABA Preceptor Training Program, contact Torryn Brazell at tbrazell@audiology.org or 800-881-5410.

Torryn P. Brazell, MS, CAE, is the managing director of the American Board of Audiology®. She is a credentialing practitioner with extensive experience in association management, including the development and implementation of professional certification and assessment-based certificate programs: initial concept, practice analyses, subject matter expert facilitation, program delivery, item writing, and recertification.

LiLi Taylor is the program director and consulting instructional designer for the American Board of Audiology’s Preceptor Training Certificate Program. She holds degrees in communication sciences and disorders and instructional systems design. She has conducted cross-industry training needs analyses and produced curriculum for professional development initiatives in the public and private sectors.

About the American Board of Audiology® (ABA)
An autonomous organization, the American Board of Audiology (ABA) is dedicated to enhancing audiological services to the public by promulgating universally recognized standards in professional practice. The ABA encourages audiologists to exceed these prescribed standards, thereby promoting a high level of professional development and ethical practice. To help meet that goal, the ABA administers the Board Certified in Audiology® credential, the Pediatric Audiology Specialty Certification (PASC®), and the Cochlear Implant Specialty Certification (CISC®), all of which are voluntary certification programs.

Note