



Australian College of Audiology Inc.

**Australian College of Audiology (Inc ACT)**

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### *Notes to Help You Complete the Report*

1. So you have just had your plan approved or have you just been accepted as a supervisor?
2. Work your way through the report completing each section as per examples.
3. When your first report is complete AND YOU WANT TO SAVE TIME make one complete photocopy for your records then;
4. Make another photocopy of all except the first and last pages, put a new first and last page onto the photocopied report and you now have a partially completed report ready for the next quarter. All you need to do is complete the first and last page and go through the middle pages initialing any new competencies gained. Repeat this process ready for next time.



**= ONE NEW REPORT PARTLY COMPLETE JUST FILL IN THE BLANKS**

5. You have the log book sample so make sure your own log books have the same information as the sample
  - a) Only the **approved supervisor/s and supervisee** are to sign log books. If you are supervised for purposes other than the ACAud supervision period you may not count this supervision or have this person sign your ACAud log books unless they have been acknowledged in writing, as an approved supervisor.
  - b) Supervisor and Supervisee to sign/initial on a daily basis
  - c) Mark what type of supervision was completed e.g. “At Elbow” or “General Supervision”  
A legend can be used but be sure the code used is clearly shown eg Elb = At Elbow,  
GS = General Supervision.
6. At the end of each level of supervision (Level 1, Level 2, Level 3) rule off the log book, tally up the various hours of supervision (at elbow, general, % of case files reviewed) and both parties sign/initial as an agreement.
7. Please note that typewritten names or initials are not acceptable for areas requiring “signature/initials” this must be completed by hand.



		Supervisor	Supervisee
i)	Establish contact with resource.	... <i>BB</i> .....	..... <i>JJ</i> ...
ii)	Provide key information to resource.	.....	.....
iii)	Discuss relevant issues and concerns with resource.	.....	.....
<b>5.4</b>	<b>Monitor and follow up referral</b>		
i)	Liaise with resource to ensure continuity of case management.	... <i>BB</i> .....	..... <i>JJ</i> ...
ii)	Maintain channel of communication with client.	... <i>BB</i> .....	..... <i>JJ</i> ...
iii)	Review outcomes of referral with client.	.....	.....
iv)	Identify the need for further assessment or other referral.	.....	.....
<b>6.</b>	<b>PROFESSIONAL CONTACT</b>		
<b>6.1</b>	<b>Report writing</b>		
i)	Write comprehensive reports that demonstrate a comprehensive understanding of results obtained.	.....	.....
ii)	Make appropriate recommendations for further assessment or treatment.	.....	.....
iii)	Hearing aid fitting and expected outcome, both long and short term.	.....	.....
<b>7.</b>	<b>HEARING AID MAINTENANCE AND REPAIR</b>		
<b>7.1</b>	<b>Manual check of hearing aid</b>		
i)	Check wax.	..... <i>BB</i> .....	... <i>JJ</i> ...
ii)	Check tubing.	..... <i>BB</i> .....	... <i>JJ</i> .....
iii)	Check switch.	..... <i>BB</i> .....	... <i>JJ</i> .....
iv)	Check volume control.	..... <i>BB</i> .....	... <i>JJ</i> .....
v)	Check operation of remote control.	..... <i>BB</i> .....	... <i>JJ</i> .....
<b>7.2</b>	<b>Use of test box</b>		
i)	Check gain.	..... <i>BB</i>	... <i>JJ</i> .....
ii)	Check power.	..... <i>BB</i> .....	..... <i>JJ</i> ...
iii)	Check distortion.	..... <i>BB</i> ...	... <i>JJ</i> .....
iv)	Check battery consumption.	..... <i>BB</i> ...	... <i>JJ</i> .....
<b>7.3</b>	<b>Minor hearing aid repairs</b>		
i)	Remove wax.	..... <i>BB</i> .....	..... <i>JJ</i> ...
ii)	Replace hook.	..... <i>BB</i> .....	..... <i>JJ</i> ...
iii)	Replace tubing.	..... <i>BB</i> .....	... <i>JJ</i> ...
iv)	Reboot an ITE.	..... <i>BB</i> .....	... <i>JJ</i> ...
<b>7.4</b>	<b>Major hearing aid repairs</b>		
	Know the system for obtaining hearing aid repairs.	..... <i>BB</i> .....	... <i>JJ</i> ...



## QUARTERLY SUPERVISION REPORT

FOR THE PERIOD ..... TO .....

Document is current at time of printing but Subject to change

**SUPERVISEE'S NAME:** ..... **SUPERVISOR'S NAME:** .....

*By signing this document you also give permission for the final report of the supervisory period to be made available to the examiner/s for the ACAud Examination for Ordinary Membership if so required and as confirmation of the necessary training.*

<b>CHECK LIST</b>	<b>Mark EACH item in EACH section</b> "C" = Competent Or "N/C" = Not Yet Competent" <b>Both Parties to Initial</b>		<b>Comments</b> <small>(Comments are at the discretion of the parties completing the report and are not mandatory. If insufficient space attach comments clearly marked with appropriate sections and Supervisee &amp; Supervisor's name)</small>
<b>Section 1: Assessment &amp; Evaluation of Client's Needs:</b> <ul style="list-style-type: none"> <li>• History</li> <li>• Equipment</li> <li>• Testing</li> <li>• Interpretation of results</li> <li>• Plan</li> <li>• Reporting</li> </ul>	<b>Mark</b>	<b>Initials</b>	<b>Supervisee:</b>
			<b>Supervisor:</b>
<b>Section 2: Device Fitting &amp; Evaluation:</b> <ul style="list-style-type: none"> <li>• Device Selection</li> <li>• Selective/Evaluation of Electro-acoustic Characteristics</li> <li>• Training</li> <li>• Follow-up</li> </ul>			<b>Supervisee:</b>
			<b>Supervisor:</b>
<b>Section 3: Counseling &amp; Evaluation</b> <ul style="list-style-type: none"> <li>• Auditory Communication</li> <li>• Other Devices</li> <li>• Advice</li> <li>• Outcome Assessment</li> </ul>			<b>Supervisee:</b>
			<b>Supervisor:</b>

Name of Supervisee: ..... Name of Supervisor: .....

In order to gain the competency of Basic Hearing Aid Dispensing an Associate must be competent in the areas listed below:

*(As an indication of agreement both parties initial each item in which student is considered now competent - meaning fully capable of working alone in this area. It may be helpful to copy this competency section at completion of each quarter and insert into the report for the next quarter, add any new competencies attained, in the period, complete the new first and last page of the report and lodge with ACAud )*

	Supervisor	Supervisee
<b>1. THEORY</b>		
<b>1.1 Anatomy of the ear</b>		
Describe the major components and functions of the peripheral auditory system.	.....	.....
<b>1.2 Causes of hearing loss</b>		
List the common causes of hearing loss.	.....	.....
<b>1.3 Types of hearing loss</b>		
Define a conductive, mixed and sensori-neural hearing loss.	.....	.....
<b>1.4 Knowledge of the profession</b>		
Describe the major areas in which the profession is involved, including all the various competencies that can be obtained and the various specialities.	.....	.....
<b>1.5 Assessment conditions</b>		
i) Describe the physical environment required to perform audiometric assessments for suitability of hearing aids.	.....	.....
ii) Be aware of any applicable Australian or international standards that apply to the conduct of a hearing assessment.	.....	.....
iii) Have copies, or direct access to copies, of applicable standards.	.....	.....
<b>1.6 Hearing aid prescription systems</b>		
i) Demonstrate knowledge and understanding of at least one of the recognized prescription techniques (eg NAL R, Fig6, POGO).	.....	.....
ii) Demonstrate knowledge of ear mould acoustics.	.....	.....
iii) Demonstrate knowledge and understanding of compression strategies available.	.....	.....
iv) Demonstrate knowledge of power management strategies available.	.....	.....
<b>1.7 Knowledge of hearing aids</b>		
Demonstrate a comprehensive knowledge of the range of hearing aids available from at least one hearing aid manufacturer.	.....	.....
<b>2. CLIENTCONTACT</b>		
<b>2.1 Rapport with client</b>		
Introduce self and role to client.	.....	.....

	Supervisor	Supervisee
i) Establish appropriate rapport with client.	.....	.....
ii) Overview the sequence of initial interview and assessment.	.....	.....
iii) Outline practice/hearing services administrative procedures.	.....	.....
<b>2.2 Take case history</b>		
i) Gather relevant background information.	.....	.....
ii) Establish a systematic questioning format.	.....	.....
<b>2.3 Use effective communication strategies</b>		
i) Demonstrate effective use of interactive techniques.	.....	.....
ii) Identify client communication difficulties and issues.	.....	.....
iii) Demonstrate ethical practice and procedures when dealing with client.	.....	.....
<b>2.4 Identify client concerns</b>		
i) Determine areas of client concern.	.....	.....
ii) Discuss concerns with client.	.....	.....
iii) Address client concerns.	.....	.....
<b>2.5 Explain outcome of investigations</b>		
i) Explain results of investigations to client.	.....	.....
ii) Explain degree of hearing loss and its implications in the day to day life of client.	.....	.....
<b>2.6 Determine a course of action</b>		
i) Consider available options that support client needs.	.....	.....
ii) Discuss and explain options and issues with client.	.....	.....
iii) Explore alternatives suitable to client.	.....	.....
iv) Determine a course of action.	.....	.....
v) Gain informed consent from clients where applicable.	.....	.....
vi) Establish a sequence of steps to achieve the outcome.	.....	.....
<b>3. CLIENT ASSESSMENT</b>		
<b>3.1 Client history</b>		
Identify significant features of client history.	.....	.....
<b>3.2 Determine test format</b>		
i) Select a range of suitable tests.	.....	.....
ii) Explain processes and procedures to client.	.....	.....

		Supervisor	Supervisee
<b>3.3</b>	<b>Pure Tone Audiometry</b>		
i)	Perform a quick acoustic calibration and integrity check of an audiometer.	.....	.....
ii)	Instruct client on the task of audiometry.	.....	.....
iii)	Perform air thresholds assessment.	.....	.....
iv)	Perform bone thresholds assessment.	.....	.....
v)	Use appropriate masking.	.....	.....
vi)	Perform MCL assessment.	.....	.....
vii)	Perform UCL assessment.	.....	.....
<b>3.4</b>	<b>Speech Audiometry</b>		
i)	Instruct client on the task of speech audiometry.	.....	.....
ii)	Perform speech discrimination testing using at least one of the commonly recognized basic speech tests.	.....	.....
iii)	Use appropriate masking.	.....	.....
<b>3.5</b>	<b>Otoscopy</b>		
i)	Hold an otoscope correctly.	.....	.....
ii)	Identify excessive cerumen.	.....	.....
iii)	Identify a discharging ear.	.....	.....
iv)	Identify atresia.	.....	.....
v)	Identify a perforation.	.....	.....
vi)	Identify a grommet.	.....	.....
vii)	Identify the major landmarks on the tympanic membrane.	.....	.....
<b>3.6</b>	<b>Impedance Audiometry</b>		
i)	Instruct client on the task of impedance audiometry.	.....	.....
ii)	Perform screening impedance audiometry.	.....	.....
<b>3.7</b>	<b>Interpretation of results</b>		
i)	Identify a conductive hearing loss using PTA results.	.....	.....
ii)	Identify a sensori-neural hearing loss using PTA results.	.....	.....
iii)	Identify a mixed hearing loss using PTA results.	.....	.....
iv)	Identify normal middle ear function using IA results.	.....	.....
v)	Identify abnormal middle ear function using IA results.	.....	.....
vi)	Demonstrate an understanding of results obtained.	.....	.....
vii)	Determine if further testing is required.	.....	.....
viii)	Determine degree of hearing loss.	.....	.....
ix)	Demonstrate an ability to compare test results to ensure they are cohesive.	.....	.....

		Supervisor	Supervisee
<b>4.</b>	<b>CLIENT TREATMENT</b>		
<b>4.1</b>	<b>Prescription of hearing aids</b>		
	Using an appropriate recognized technique, and in consultation with the client prescribe hearing aids.	.....	.....
<b>4.2</b>	<b>Impression taking</b>		
	Using appropriate safety techniques, take an ear impression.	.....	.....
<b>4.3</b>	<b>Fitting of hearing aids</b>		
i)	Fit hearing aid using real ear assessment techniques.	.....	.....
ii)	Fit hearing aid using free field assessment techniques.	.....	.....
iii)	Assess the occlusion effect and take appropriate action to minimise its effects.	.....	.....
iv)	Determine power output is acceptable to client.	.....	.....
v)	Demonstrate modification techniques to ensure a comfortable fit of the earmould.	.....	.....
vi)	Demonstrate a working knowledge of feedback management techniques.	.....	.....
vii)	Appropriately instruct a client on the use of hearing aids.	.....	.....
viii)	Ensure client expectations are realistic.	.....	.....
<b>4.4</b>	<b>Follow up procedures</b>		
i)	Inquire as to the benefits and limitations that a client derives from the use of hearing aids.	.....	.....
ii)	Ensure comfort of fit.	.....	.....
iii)	Modify acoustic performance of hearing aids as required.	.....	.....
iv)	Organise ongoing arrangements with client that are mutually acceptable.	.....	.....
<b>5.</b>	<b>CLIENT REFERRAL</b>		
<b>5.1</b>	<b>Identify the need for referral</b>		
i)	Demonstrate an understanding of the limits of own abilities and the need for appropriate referral to other sources of assessment and treatment.	.....	.....
ii)	Identify those times when other facilities and/or equipment may be required.	.....	.....
iii)	Discuss referral with client.	.....	.....
iv)	Explain process with client.	.....	.....
<b>5.2</b>	<b>Identify appropriate source</b>		
i)	Demonstrate a knowledge of appropriate agencies and individuals to whom a client might be referred if required.	.....	.....
ii)	Refer client to appropriate agency or individual.	.....	.....
<b>5.3</b>	<b>Liaise with source</b>		
iv)	Develop an appropriate relationship with the above agencies and individuals.	.....	.....

		Supervisor	Supervisee
v)	Establish contact with resource.	.....	.....
vi)	Provide key information to resource.	.....	.....
vii)	Discuss relevant issues and concerns with resource.	.....	.....
<b>5.4</b>	<b>Monitor and follow up referral</b>		
v)	Liaise with resource to ensure continuity of case management.	.....	.....
vi)	Maintain channel of communication with client.	.....	.....
vii)	Review outcomes of referral with client.	.....	.....
viii)	Identify the need for further assessment or other referral.	.....	.....
<b>6.</b>	<b>PROFESSIONAL CONTACT</b>		
<b>6.1</b>	<b>Report writing</b>		
iv)	Write comprehensive reports that demonstrate a comprehensive understanding of results obtained.	.....	.....
v)	Make appropriate recommendations for further assessment or treatment.	.....	.....
vi)	Hearing aid fitting and expected outcome, both long and short term.	.....	.....
<b>7.</b>	<b>HEARING AID MAINTENANCE AND REPAIR</b>		
<b>7.1</b>	<b>Manual check of hearing aid</b>		
vi)	Check wax.	.....	.....
vii)	Check tubing.	.....	.....
viii)	Check switch.	.....	.....
ix)	Check volume control.	.....	.....
x)	Check operation of remote control.	.....	.....
<b>7.2</b>	<b>Use of test box</b>		
v)	Check gain.	.....	.....
vi)	Check power.	.....	.....
vii)	Check distortion.	.....	.....
viii)	Check battery consumption.	.....	.....
<b>7.3</b>	<b>Minor hearing aid repairs</b>		
v)	Remove wax.	.....	.....
vi)	Replace hook.	.....	.....
vii)	Replace tubing.	.....	.....
viii)	Reboot an ITE.	.....	.....
<b>7.4</b>	<b>Major hearing aid repairs</b>		
	Know the system for obtaining hearing aid repairs.	.....	.....





# SUPERVISORY LOG BOOK

NAME OF ASSOCIATE: .....

As each level is achieved rule off the log book, tally as shown below, initial and continue on for next level. Do not cease log book until advised of successful exam

WEEK	DAY	DATE	HOURS	TYPE	LOCATION	DUTIES PERFORMED Complete on a daily basis	TRAINEE'S INITIALS	S/VISOR'S INITIALS
1	Thurs	2/7/09	1 3 2	Gen Elbow Elbow	Syd Syd Syd	Assessment (Specific Tests) Follow-up	<i>JJ</i>	<i>BB</i>
1	Fri	3/7/09	2 half hr half hr	Gen Gen Elbow	Oakley Oakley Oakley	Fitting, etc Adjust Aid Counsel	<i>JJ</i>	<i>BB</i>
						Continue as above to Week 12		
						END LEVEL ONE		
						48 hours (4 hrs x 12 weeks) at Elbow Supervision 192 hours (16 hrs x 12 weeks) General Supervision 100% of Case Files reviewed	<i>JJ</i>	<i>BB</i>
13	Mon	6/7/09	3 1.5 3	Elbow Gen Elbow		Write a brief general description of tasks performed at appointment Write a brief general description of tasks performed at appointment Write a brief general description of tasks performed at appointment	<i>JJ</i>	<i>BB</i>
13	Tue		1 2 2.5	Gen Gen Gen		Write a brief general description of tasks performed at appointment Write a brief general description of tasks performed at appointment Write a brief general description of tasks performed at appointment	<i>JJ</i>	<i>BB</i>
14	Mon	13/7/09	1	Elbow		Write a brief general description of tasks performed at appointment Continue as above to Week 52	<i>JJ</i>	<i>BB</i>
						END LEVEL TWO		
						22.5 hours (9.5 months x 8 hrs per mth) at Elbow Supervision 76.5 hours (9.5 months x 2 hrs per mth) General Supervision 25% of Case Files Reviewed	<i>JJ</i>	<i>BB</i>

### Start New Section for Level 3

SUPERVISOR'S SIGNATURE: .....

PRINTED NAME: .....

NOTE: Column 4 "Type" refers to type of supervision and/or review - "General" or "At Elbow" Supervision. It is sufficient to use abbreviations such as "Site", "Elbow" or "Review" to denote type of supervision. At the end of each level of supervision rule across the page and give totals.

For example END LEVEL 1, TOTAL HOURS OF SUPERVISION, TOTAL HOURS AT ELBOW, ----% OF CASE FILES REVIEWED

# SUPERVISORY LOG BOOK

(Suggested Format Only – Ensure your log contains same information)

**NAME OF ASSOCIATE:** .....

As you achieve each level of the supervision table rule off the section and tally hours to correspond with guidelines

WEEK	DAY	DATE	HOURS	TYPE	LOCATION	DUTIES PERFORMED	TRAINEE'S SIGNATURE	S/VISOR'S SIGNATURE
1								

**SUPERVISOR'S SIGNATURE:** .....

**PRINTED NAME:** .....

**NOTE:** Column 4" Type" refers to type of supervision and/or review - "On Site" or "At Elbow" Supervision and should also show " File Review" it is sufficient to use "Site", "Elbow" or "Review" to denote the activity. At the end of each level of supervision rule across the page and give totals.

For example END LEVEL 1, TOTAL HOURS OF SUPERVISION, TOTAL HOURS AT ELBOW, ----% OF CASE FILES REVIEWED



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**DECLARATION OF COMPLETION OF LEVELS 1 & 2 OF SUPERVISION TABLE**  
**(For completion no sooner than twelve months after commencement of ACAud Approved supervision)**

I, .....(name of Supervisor) being the Supervisor for .....(name of Supervisee) under an ACAud Approved Supervision Plan, confirm that I have supervised .....(name of Supervisee) strictly within the ACAud guidelines and under the provisions of Appendix 1 “Supervision” of By-Law 98.1 to the completion of levels one and two of the supervision tables (Appendix 1 to By-Law 98-1 Supervisor paragraph 3.5 tables 1 & 2) for a period **From** .....(dd)/.....(mm)/.....(yy) **to** .....(dd)/.....(mm)/.....(yy) and further guarantee that .....(name of Supervisee) has now completed the minimum number of weeks required and attained sufficient knowledge to progress to level three. During level three I guarantee, in particular, that I will be accessible to my supervisee for consultation as required and take charge of his/her cases where necessary. I will, whilst the supervision agreement remains in place, continue to abide by the By-Law 98-1, Appendix 1 Supervision and Appendix 3 Ethics Guidelines and the “ACAud Guidelines for the Supervision & Examination of Associate Members in the Basic Competencies”.

Signed ..... (**Supervisor**)  
 Full Name (Print).....  
 Date .....

**In the presence of a Justice of the Peace:**  
 Signed .....  
 Full Name (Print).....  
 Date .....



Seal



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**DECLARATION OF COMPLETION OF SUPERVISION**  
**(Prior to examination)**

I, .....(name of Supervisor) being the  
Supervisor for .....(name of Supervisee) under an  
ACAud Approved Supervision Plan, confirm that I have supervised .....

.....(name of Supervisee) strictly within the ACAud guidelines and under the  
provisions of Appendix 1 “Supervision” of By-Law 98.1 for a period

**From** .....(dd)/.....(mm)/.....(yy) **to** .....(dd)/.....(mm)/.....(yy) further  
guarantee that .....(name of Supervisee) has now  
gained full knowledge of each and all of the competencies required under By-Law 97.5 Appendix 1,  
Part B Hearing Aid Dispensing, is capable of working alone within each and all of these competencies  
and is now ready to sit the examination for Basic Hearing Aid Dispensing (BHA) in order to obtain  
Full/Ordinary Membership of ACAud.

Signed ..... (Supervisor)

Full Name (Print).....

Date .....

**In the presence of:**

Signed ..... (Witness)

Full Name (Print).....

Date .....

(Witness should not be the Supervisee)

## *Notes*

*A Guide  
for Examiners and  
Examinees  
to the  
ACAud Examination for  
Basic Hearing Aid Dispensing (BHA)*

Current at the time of printing and subject to change  
Before proceeding to examination ensure currency of copy dated: May 2009

**Background Information to the Examination Process**

An Associate Member of ACAud will have obtained the current minimum educational requirement for Associate member status in accordance with the By-Law. In the years since becoming an Associate, the Member will have been working under supervision to ensure that they have attained all the competencies required to become an Ordinary Member of ACAud and to work unsupervised.

The purpose of the ACAud Clinical Examination is to assess the knowledge and understanding of the competencies required for Membership and for the Associate to work as an independent professional clinician.

**Examination Process**

Three examiners will have been appointed. They may be Audiometrists or Audiologists; they may be from your home state or other states. **Both the Written Report and the Two Case Studies will form the basis of your Oral/Aural Examination**

**Part One – Written Examination:** On entering the examination room the examinee will choose one envelope from a selection. The envelope will contain a case history and battery of associated test results. The candidate will be given one hour to assess the case history, complete a written report to the general practitioner and write a plan of action for the client (dot point is acceptable for plan of action). At the end of the allotted one hour the report will be collected and the examinee will be shown to the second examination room.

**Part Two – Oral/Aural Examination:** You will have prepared and brought with you two case studies as per the guidelines. The content of the casework presentation will also be considered a written component of this examination. An independent observer nominated by ACAud may sit in on the proceedings.

The results of the examination will be released by ACAud to each examinee. ***Examinees are not to contact examiners either prior to or after examination in any matter regarding the examination. Should this occur examiners will not accept the communication and will refer the examinee to the Secretariat. Any examinee who attempts contact with an examiner in relation to the examination may jeopardise the examination result.***

The case studies should be the candidate's own work and clearly demonstrate the candidate's knowledge of Audiometry and understanding of the clinical competencies set out in this guide and in the *ACAud Constitution and By-Laws 97.5 Appendix 1 – Clinical Practice*.

*These case studies and written report may be read and assessed by the examiners following which the candidate may be questioned on any or all of the cases as well as Audiometry practices in general to determine the candidate's knowledge of Audiometry and the clinical competencies.*

## **Instruction for Candidates**

### **Purpose:**

Carefully read all information in this guide and be familiar with the Clinical Standards.

The purpose of the casework presentation and written report is to give the candidate an opportunity to display their knowledge and expertise in all three sections as below:

- Section 1:** Assessment and evaluation of clients' needs - History, Equipment, Testing, Interpretation of Results, Plan, Reporting
- Section 2:** Device fitting and evaluation; - Device selection, Selection/Evaluation of electro-acoustic characteristics, Training, Follow-up and
- Section 3:** Counselling and rehabilitation - – Auditory communication training, Other devices, Advice, Outcomes assessment.

- The emphasis is on practical skills and how the candidate would handle the needs of the client in a clinical setting.
- The casework presentations and case history report allows the candidate to demonstrate their knowledge and expertise to a fuller extent than can be achieved in an oral/aural or written examination alone.
- The aim is to demonstrate the candidate's knowledge, clinical skills and how they manage the hearing health care needs of the client.
- The candidate must pass all three sections *in both Part 1 And Part 2* of the examination process to be credited with a pass for the examination in Basic Hearing Aid Dispensing.

### **Assessment Criteria:**

The candidate is expected to demonstrate:

- Practical case managements skills
- Problem solving
- A breadth of knowledge relevant to the clinical standards
- Rehabilitative skills
- An ability to focus on the needs of the individual.

### **On the Day**

- Present in smart casual business attire
- Bring the examination confirmation letter. It contains useful contact and address information should it be required.
- Ensure mobile phones are switched off prior to entering the examination room.
- Arrive at the examination centre at least 15 minutes before the time set out for examination and ensure personal comfort has been attended to prior to entering the exam room.
- Case studies are to be handed to the *ACAud* secretariat representative upon request.
- The Secretariat representative will conduct the candidate to the first examination room where they will select the case history and tests results for assessment and subsequent written report.
- The candidate ***may not leave*** the examination room once the exam has commenced except in an emergency situation, in which case the candidate will either be monitored by a secretariat representative during the absence or the examination may be cancelled. An absence may not cause an extension of the exam time.

- After completion of the Written Report examination the candidate will be shown to a second examination room.
- The panel will have commenced an appraisal of the candidate's case studies prior to commencing the oral/aural examination.
- Once the examination is complete the candidate should leave the venue.

### **How you will be examined:**

- The case written report examination is, of course, a written examination and a period of one hour will be allowed.
- The report should closely follow clinical notes and include a synopsis of the case including but not limited to the items listed on Page 5 of this document "A Guide to Preparing the Casework Presentations and Case History Report".
- The casework presentation examination is scheduled for one hour but may be completed sooner or take longer depending on the time taken by examiners' to determine competency.
- With both examinations the candidate's skill and knowledge will be assessed, not their presentation skills. However the resultant paperwork must be clearly legible.
- At commencement of the Casework Presentation Examination the candidate will be invited to the examination room, introduced to the examiners and observers (if present).
- The candidate will be asked to select one case study to commence the examination.
- The examination panel will ask questions about the studies, e.g. Why did you choose a particular case? How did you perform the testing? Why did you choose a particular hearing aid? The areas of questioning may be on areas such as but not limited to;
  - \* The audiogram, speech testing, impedance results and loudness discomfort assessments, relevant case history, any medical or
  - \* Allied health referrals you may have performed and any medical clearances relevant to the client's clinical presentation at time of assessment.
  - \* Evaluation including discussions with the client about their hearing health needs and the agreed outcome of those deliberations as to the type of device which will be appropriate to their needs (where a device is chosen) and rehabilitation program decisions.
  - \* A detailed and current knowledge of any chosen device, including ALDs. This will include a knowledge of gain and MPO requirements, technical specifications of the aid including internal noise issues, knowledge of compression ratios and knee points, feedback management technologies and any and all other features present in the device.
  - \* Evaluation of fitting and rehabilitation process. The candidate will need to demonstrate knowledge of technologies to appropriately fit and evaluate the performance of the devices, such as:
    - *Real ear insertion gain*
    - *Hearing instrument testing*
    - *Functional gain*
    - *Aided speech testing*
    - *Assessment of loudness discomfort issues*
  - \* Counselling the client on managing the aid and care of the aid and setting realistic targets and goals, assessment of those targets and goals over the rehabilitation period (using appropriate tools such as client outcomes measures e.g. COSI). Assessment of any and all outcomes measures used during this rehabilitation period and a final sign off that these have been met by clinician and client.
- The panel will be sensitive to the nature and requirements of an oral presentation.
- You may be questioned on each or any of your presentations and Audiometry in general.

- You should be prepared to give full and detailed descriptions of technique, an accurate interpretation of results, the method used for prescribing the hearing aid, and how the rehabilitation was evaluated.

**On Completion of Your Examination.**

- Having completed their examination, candidates, out of consideration for others awaiting examination, should not discuss their examination and should leave the immediate vicinity of the candidates’ waiting area.
- ACAud will inform you of the result in writing as soon as correlation for the round of exams is complete.

All casework presentations and case history reports will be marked with a Pass/Fail grade only.

**A Guide to Preparing the Casework Presentations**

The panel will assess the candidate against the criteria addressed in the Clinical Standards. Understanding the Clinical Standards and their relationship to the casework presentations is extremely important.

The candidate must prepare two (2) casework presentations to demonstrate their clinical skills and clinical practice. Delete all client identification, as this is not required and would breach client confidentiality.

The case studies must be derived from the candidate’s own actual cases.

The candidate must write their name on the front of each document and number each case study.

Use A4 size paper. Do not insert individual pages in plastic sleeves.

Each case study should contain an index with page numbers and section titles for easy reference to the various sections, subsections and test results.

Example:

**Section 1: Assessment & Evaluation of Client’s Needs**

• <b>History</b> .....	<b>Page 5</b>
• <b>Testing - Audiogram</b> .....	<b>Page 6</b>

Photocopy four (4) copies including an original copy of each case study – a copy for the candidate plus one for each of the three examiners of these three copies the original will be held for ACAud records. ***If an observer is to be present, please bring an additional copy.***

The candidate is to ensure the case studies are neatly typed, not handwritten, with the exception of audiograms.

In preparing the case studies and case history report, concentrate on the following topics, but feel free to include any additional information you think may be relevant or further demonstrate your skills:

**1. Assessment and evaluation of clients’ needs**

***History:***

Provide a complete history of the client’s hearing requirements.

***Equipment:***

Detail the equipment used in the various test procedures undertaken.

***Testing:***

Detail the client’s audiogram and any other tests performed. For example, any other tests required for the chosen hearing aid selection procedure or suprathreshold test to determine MPO selection.

***Interpretation of results:***

Indicate how the results would be explained to the client. Was a report sent to anyone? How is it decided if binaural is appropriate? When is the choice made not to fit a device?

***Plan:***

Indicate how a program was planned that suited the individual client’s needs.

**Reporting:**

Provide an example of a report written to a referring agency. (This could be written for the purposes of the casework presentation.)

**2. Device fitting and evaluation****Device selection:**

Indicate the device and ear mould chosen for the client and outline the process undertaken to arrive at this decision.

**Selection/evaluation of electro acoustic characteristics:**

Detail the method by which the hearing aid gain, frequency response and MPO were selected, set and evaluated

**Training:**

Describe the steps taken to instruct the client in the use of the device and any other advice given to the client.

**Follow up:**

Detail what action was undertaken at the follow up.

**3. Counselling and rehabilitation****Auditory Communication Training:**

Detail the various hearing tactics/communication strategies covered with the client.

**Other devices:**

Were any other devices discussed or demonstrated?

**Advice:**

What other information or recommendations were provided to the client?

**Outcomes Assessment:**

Indicate how the decision of whether the fitting was successful or not was made and what follow up action was necessary.

## **COMPETENCIES**

The candidate will need to demonstrate a thorough knowledge of the competency requirements.

**Appendix 1 to By-Law 97.5 Clinical Practice****PART B - HEARING AID DISPENSING****1. THEORY****1.1 Anatomy of the ear**

Describe the major components and functions of the peripheral auditory system.

**1.2 Causes of hearing loss**

List the common causes of hearing loss.

**1.3 Types of hearing loss**

Define a conductive, mixed and sensori-neural hearing loss.

**1.4 Knowledge of the profession**

Describe the major areas in which the profession is involved, including all the various competencies that can be obtained and the various specialities.

**1.5 Assessment conditions**

Describe the physical environment required to perform audiometric assessments for suitability of hearing aids.  
Be aware of any applicable Australian or international standards that apply to the conduct of a hearing assessment.  
Have copies, or direct access to copies, of applicable standards.

## **1.6 Hearing aid prescription systems**

Demonstrate knowledge and understanding of at least one of the recognised prescription techniques (eg NAL R, Fig6, POGO).

Demonstrate knowledge of earmould acoustics.

Demonstrate knowledge and understanding of compression strategies available.

Demonstrate knowledge of power management strategies available.

## **1.7 Knowledge of hearing aids**

Demonstrate a comprehensive knowledge of the range of hearing aids available from at least one hearing aid manufacturer.

## **2. CLIENT CONTACT**

### **2.1 Rapport with client**

Introduce self and role to client.

Establish appropriate rapport with client.

Overview the sequence of initial interview and assessment.

Outline practice/hearing services administrative procedures.

### **2.2 Take case history**

Gather relevant background information.

Establish a systematic questioning format.

### **2.3 Use effective communication strategies**

Demonstrate effective use of interactive techniques.

Identify client communication difficulties and issues.

Demonstrate ethical practice and procedures when dealing with client.

### **2.4 Identify client concerns**

Determine areas of client concern.

Discuss concerns with client.

Address client concerns.

### **2.5 Explain outcome of investigations**

Explain results of investigations to client.

Explain degree of hearing loss and its implications in the day to day life of client

### **2.6 Determine a course of action**

Consider available options that support client needs.

Discuss and explain options and issues with client.

Explore alternatives suitable to client.

Determine a course of action.

Gain informed consent from clients where applicable.

Establish a sequence of steps to achieve the outcome.

## **3. CLIENT ASSESSMENT**

### **3.1 Client history**

Identify significant features of client history.

### **3.2 Determine test format**

Select a range of suitable tests.

Explain processes and procedures to client.

### **3.3 Pure Tone Audiometry**

Perform a quick acoustic calibration and integrity check of an audiometer.

Instruct client on the task of audiometry.

Perform air thresholds assessment.

Perform bone thresholds assessment.

Use appropriate masking.

Perform MCL assessment.

Perform UCL assessment.

### **3.4 Speech Audiometry**

Instruct client on the task of speech audiometry.

Perform speech discrimination testing using at least one of the commonly recognised basic speech tests.

Use appropriate masking.

### **3.5 Otoscopy**

Hold an otoscope correctly. Identify excessive cerumen.

Identify a discharging ear.

Identify atresia.

Identify a perforation.

Identify a grommet.

Identify the major landmarks on the tympanic membrane.

### **3.6 Impedance Audiometry**

Instruct client on the task of impedance audiometry.

Perform screening impedance audiometry.

### **3.7 Interpretation of results**

Identify a conductive hearing loss using PTA results.

Identify a sensori-neural hearing loss using PTA results.

Identify a mixed hearing loss using PTA results.

Identify normal middle ear function using IA results.

Identify abnormal middle ear function using IA results.

Demonstrate an understanding of results obtained.

Determine if further testing is required.

Determine degree of hearing loss.

Demonstrate an ability to compare test results to ensure they are cohesive.

## **4. CLIENT TREATMENT**

### **4.1 Prescription of hearing aids**

Using an appropriate recognised technique, and in consultation with the client, prescribe hearing aids.

### **4.2 Impression taking**

Using appropriate safety techniques, take an ear impression.

### **4.3 Fitting of hearing aids**

Fit hearing aid using real ear assessment techniques.

Fit hearing aid using free field assessment techniques.

Assess the occlusion effect and take appropriate action to minimise its effects.

Determine power output is acceptable to client.

Demonstrate modification techniques to ensure a comfortable fit of the earmould.

Demonstrate a working knowledge of feedback management techniques.

Appropriately instruct a client on the use of hearing aids.

Ensure client expectations are realistic.

### **4.4 Follow up procedures**

Inquire as to the benefits and limitations that a client derives from the use of hearing aids.

Ensure comfort of fit.

Modify acoustic performance of hearing aids as required.

Organise ongoing arrangements with client that are mutually acceptable.

## **5. CLIENT REFERRAL**

### **5.1 Identify the need for referral**

Demonstrate an understanding of the limits of own abilities and the need for

appropriate referral to other sources of assessment and treatment.  
Identify those times when other facilities and/or equipment may be required.  
Discuss referral with client.  
Explain process with client.

## **5.2 Identify appropriate source**

Demonstrate a knowledge of appropriate agencies and individuals to whom a client might be referred if required.  
Refer client to appropriate agency or individual.

## **5.3 Liaise with source**

Develop an appropriate relationship with the above agencies and individuals.  
Establish contact with resource.  
Provide key information to resource.  
Discuss relevant issues and concerns with resource.

## **5.4 Monitor and follow up referral**

Liaise with resource to ensure continuity of case management.  
Maintain channel of communication with client.  
Review outcomes of referral with client.  
Identify the need for further assessment or other referral.

# **6. PROFESSIONAL CONTACT**

## **6.1 Report writing**

Write comprehensive reports that demonstrate a comprehensive understanding of results obtained.  
Make appropriate recommendations for further assessment or treatment.  
Hearing aid fitting and expected outcome, both long and short term.

# **7. HEARING AID MAINTENANCE AND REPAIR**

## **7.1 Manual check of hearing aid**

Check wax.  
Check tubing.  
Check switch.  
Check volume control.  
Check operation of remote control.

## **7.2 Use of test box**

Check gain.  
Check power.  
Check distortion.  
Check battery consumption.

## **7.3 Minor hearing aid repairs**

Remove wax.  
Replace hook.  
Replace tubing.  
Reboot an ITE.

## **7.4 Major hearing aid repairs**

Know the system for obtaining hearing aid

## *Helpful Information for Candidates*

- Examinations are **generally** held on the first Wednesday and Thursday of February and August each year, usually in Sydney and Brisbane. Be aware this is a general rule only and dates, places and frequency may differ according to circumstances.
- By the last day in November, for the February exams and by the last day in May, for the August exams, applicants must have lodged their application to go to exam in the form of a simple letter accompanied by the current examination fee of \*\$860.00. The application letter must state the candidates preferred city for examination and include a statement that the candidate understands that they may be examined by examiners from their home state.
- By the last day in September for the February Exams and by the last day in June for the August exams applicants must have lodged all required documents, in the correct format, with the Secretariat. (see checklist for examinations)
- Once an exam fee is paid it is not refundable unless for a serious medical reason confirmed by a report from a medical doctor. Should a request for examination be refused by ACAud on initial application the fee will be refunded.
- Where practical local residents are examined in the first and last places of the day, examinees with limited travel opportunities are placed next, followed by all other applicants.
- Yes, you may make a special request for examination on a particular day and time but please bear in mind **this is a request only and is granted on availability and at the discretion of the Secretariat.**
- Following examination, the examiners' reports are forwarded to the Secretariat for collation and the result notified in writing to the candidates. The Secretariat attempts to release all results at the one time however for various reasons this may not always be possible so do not be alarmed if other examinees have received their results on a certain day and you have not.
- **Under no circumstances are examinees to contact examiners either prior to or post examination. Attempting to do so may jeopardise the examination result.**
- Successful candidates intending to work within the OHS program should contact OHS to advise of their changed status and provide the required paperwork.
- Where a candidate has special requirements due to health or disability this should be communicated to the Secretariat in writing at least four months prior to the intended examination in order that appropriate arrangements may be put in place to accommodate the candidate as deemed necessary by the Executive Committee or its delegates. It is the candidate's responsibility to ensure receipt by the Secretariat of this communication.
- The Secretariat is your Association and is here to assist you – please be sure to make contact regarding any queries or concerns regarding your proposed examination.

\* Subject to Chang

# *NOTES*

## INSTRUCTIONS FOR COMPLETING YOUR CEP RETURN

PERIOD ENDING 30<sup>th</sup> JUNE 2009

- 1. MOST IMPORTANT – Please note it is YOUR RESPONSIBILITY to monitor your return. If you have not received a certificate confirming Membership and Competency and you have not been informed of a problem with your return then it may not have been received. Last day for receipt of returns is 30<sup>th</sup> September after this date members may have their membership downgraded to “Affiliate” status until such time as a correctly completed return is received by ACAud. Any alteration in status will be notified to OHS as per the MOU.**
- 2. Are you an Ordinary Member/Fellow? Then complete the entire form.  
Are you an Associate or Student Member? Complete Name, Membership Number and Employment details then go directly to CEP Summary section**
- 3. Ordinary Members & Fellows & Associates - must attain a minimum of 30 CEP Points unless they have  
written approval for a reduction**
- 4. Student Members must attain 15 CEP Points and complete a return for the period 1<sup>st</sup> July 2008 to 30<sup>th</sup> June 2009.**
- 5. Ordinary Members -Check your green Competency Certificate from the last year. These are the only competencies you are able to claim unless you have been granted a new competency by ACAud in the past twelve months.**
- 6. Ordinary Members & Fellows - If you are claiming a competency then some of your CEP activities must be relevant to each of those competencies claimed. Your return should reflect this. If you have not attended any activity relevant to a competency then that competency may not be renewed.**
- 7. At this stage, there are only FOUR ACAud Approved Conferences; ACAud Congress, EUHA, AAA and the ASA for this collection period. Once in every three year cycle (2006-2007 is the first year of a new three year cycle) you must attend one of these conferences. If your mandatory conference was attended in a period other than the present collection period, list the conference to advise of your attendance but do not claim any points e.g. If you attended your 3 year mandatory conference in the collection period July 2007 – June 2008 and you are presently completing your return for July 2008 – June 2009, then list the conference (to show you have attended “one approved conference in three years”) but do not claim points – the points should have been claimed in the year you attended.**
- 8. If you attended another of these four conferences, apart from the “one in three years mandatory one”, claim the points for your attendance under “ACAud Approved Conferences” for the collection period in which you attended. Do not claim any conference other than an approved one here – the points will not**

be allowed. You can claim conferences not listed under “Approved Conferences” in the “Independent Activities” section but be aware of the points ceiling for this section.

9. Under “ACAud Approved Seminars and Workshops” you may only claim those events which have been submitted by the organizers to ACAud and subsequently approved. These events must have been available to all ACAud Members and must have been assessed by ACAud in advance of their presentation. The ACAud CEP Days are ACAud Approved Activities. Manufacturers’ Workshops are now listed under “Independent Activities” and are not required to be approved.
10. Any other Activity related to the maintenance of your skills may be claimed under “Independent Activities” – a non-approved conference, seminar or workshop (be sure to only claim for the actual educational content, no fellowship, meal breaks, question time, etc. – 1 point per hour – and be sure to keep documents describing the event and your attendance certificate), reading (keep a diary/journal note), internet study (keep a diary/journal note and printout of the course content), Supervision of a Non-ACAud Member (keep a copy of the signed log books and diary/journal notes)
11. Reading and Multi Media Studies is a new section and covers reading, internet research and study, educational DVDs and Videos.
12. Students may not claim study associated with their course for continuing education and Associates may not claim supervision for continuing education.
13. Rural Levy – As of 1<sup>st</sup> July 2006 Members wishing to claim the levy must apply each year for approval of their status. On Approval you will receive written confirmation of your status. Members with approval for Rural Levy may claim a 20% loading on ONLY those activities to which Rural Members alone must travel e.g. a conference would not attract the levy as the majority of Members must also travel to attend. Members with “Rural” status can also claim up to 25 points under “Independent Activities” to allow for a greater portion of reading, videos and internet study in their points collection. There is no travel involved for these activities so therefore the 20% loading would not apply.
14. Your CEP Working Paper is for your records only, to progressively prepare for your CEP return. You will note that each category has a points limit to allow for diversity of continuing education. Further copies of the working paper are available from the Secretariat. Do not use this for your actual return.
15. Invalid Returns – The following may cause your return to be invalid
  - Failing to check the appropriate boxes on pages one and two of the return
  - Neglecting to allocate points to each competency claimed
  - Neglecting to specify an activity eg stating “various workshops” is insufficient information
  - Insufficient points – please ensure your points total at least the minimum requirement
  - Date and sign the return



**Full/Ordinary Members Only** - For the year ending 30 June 2010,  
I have been working in each extended competency claimed for a minimum of 20 hours per year .....

**Full/Ordinary Members Only** - I Hold the *Extended Competency* of:

Advanced Diagnostic Assessment (EAD)  YES  NO

Advanced Rehabilitation (EAR)  YES  NO

Consultant Clinician (ECC)  YES  NO

Clinical Advisor (ECA)  YES  NO

Hearing Conservation (EHC)  
and Compensation  YES  NO

Paediatric Assessment (EPA)  YES  NO

Tinnitus Assessment and Management (ETA)  YES  NO

**CHECK COMPETENCY CERTIFICATE FOR PREVIOUS YEAR. DO NOT CLAIM A NEW COMPETENCY UNLESS EXAMINED AND ACCREDITED BY ACAud**

**Full/Ordinary Members Only** - For the year ending 30 June 2010,  
I have been working in each specialist competency claimed for a minimum of 20 hours per year .....

I Hold the *Specialist Competency* of:

Clinical Educator  YES  NO

Diagnostic Specialist (SDE)  YES  NO

General Practice Specialist (SGP)  YES  NO

Paediatric Specialist (SPS)  YES  NO

Rehabilitation Specialist (SRS)  YES  NO

**CHECK COMPETENCY CERTIFICATE FOR PREVIOUS YEAR. DO NOT CLAIM A NEW COMPETENCY UNLESS EXAMINED AND ACCREDITED BY ACAud**





<b>SECTION 10 Reading &amp; Multi Media Studies Max=10 *****</b> ( or 20 for Approved Rural Mbrs. which requires written approval of status at commencement of each collection period)			
<b>READING &amp; MULTI MEDIA STUDIES</b> <b>Evidence: Precise Diary Notes &amp; Copies/Précis of articles/multi media study, etc.</b>			
<b>SECTION 11 Full Time Employment Max=5</b>			
<b>FULL TIME EMPLOYMENT AS A CLINICIAN for an entire period</b> <b>1<sup>st</sup> July to 30<sup>th</sup> June in this collection period</b> <b>Evidence: Written Confirmation by Employer, Letter of Appointment plus copy of Group Certificate (amounts deleted), Other satisfactory evidence as approved by ACAud</b>			
<b>SECTION 1 Rural Member's Levy</b> <b>RURAL MEMBER'S LEVY – 20% For those events to which <u>ONLY</u> a Rural Member must travel for 2 or more hours to attend (eg MOST Members must travel to a conference so no levy is allowed but MOST do not travel to a CEP Day or Manufacturer's Presentation so you may claim the levy)</b> <b>Evidence: Obtain written confirmation from ACAud of status each year</b>			
<b>TOTAL POINTS CLAIMED</b>			

ENSURE POINTS ARE ENTERED AS RELEVANT TO EACH COMPETENCY CLAIMED – WITHOUT CEP IN THAT AREA THE COMPETENCY MAY NOT BE GRANTED

.....  
**STUDENT MEMBERS: MINIMUM 15**  
**ASSOCIATES: MINIMUM 30**  
**FULL/ORDINARY MEMBERS: MINIMUM 30**

PLEASE ENSURE YOU RETAIN A COPY OF YOUR FINAL RETURN AND RELEVANT DOCUMENTS FOR AUDIT PURPOSES WHEN SUBMITTING YOUR RETURN

THIS WORKING PAPER IS FOR YOUR RECORDS AND PREPARATION PURPOSES ONLY

**DO NOT SEND TO ACAud**

## **ACAud Members**

### YOUR WEBSITE REGISTRATION INSTRUCTIONS

There are two registration requirements. Each is completely separate from the other.

1. **Log into the main ACAud website**  
**ONLY IF YOU WANT TO POST NEWS OR ARTICLES ON THE MAIN PAGE (NOT THE FORUMS)**

It is **not essential** to register on the main ACAud page, the purpose of registering here is so members can post news and/or articles onto the main page. ***If you aren't going to post news, don't bother registering.***

All content is available regardless. If you chose to register, simply enter your details, remember your password and then login to submit news etc.

To post news, use the Submit News links. The website will then contact the administrator (Michael Smith) and he will decide whether it is newsworthy and then post it on the main page.

2. **Log into the forums**  
**TO BE ABLE TO ACCESS & POST REPLIES ON THE FORUMS**

You **must** register to access the forums/message board.

The link to the forums is either via the Forums link in the left hand menu on the main page or the link in the main page registration box. (Explanation is there) Michael Smith administers the forums, To register you must supply your full name, email address, business name and ACAud Membership Number. Once you have completed registration, Michael Smith will then give access to the various forums.

3. **Members Only Section**  
To access the Members Only section on the main page you must use a global username and password supplied by the administrator.

*Welcome to the ACAud Website*

# IMPORTANT INFORMATION FOR NEW ASSOCIATE MEMBERS

## Entitlement to Letters and Titles

Just what are members of *ACAud* entitled to call themselves and what letters are they entitled to use?

Fellows are entitled to call themselves

**'Fellow of *ACAud*'** and are entitled use the letters **'*FACAud*'**

Full/Ordinary Members are entitled to call themselves

**'Member of *ACAud*'** and are entitled to use the letters **'*MACAud*'**.

Honorary Fellows are entitled to call themselves

**'Honorary Fellow of *ACAud*'**, but **are not entitled to any letters.**

Associate, Student, Affiliate and Service Members are entitled to call themselves by the appropriate membership level of *ACAud* e.g **Associate Member of *ACAud*** only whilst retaining this status, they are a financial member and whilst all obligations of membership are current (CEP, Quarterly Reporting, etc).

Under no circumstances are they **entitled to any letters.**

In using letters where applicable please take care to note that the **'*Aud*'** is in italics.

***Use of letters without entitlement or incorrect use may result in Peer Review and also have legal implications.***