

## CAA News – May 2020

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The Canadian Academy of Audiology

# CAA NEWS



## UPCOMING FREE WEBINAR:

### Applying Person-Centered Care (PCC) in the Appointment with Cherilee Rutherford – May 27, 2020

Join us on Wednesday, May 27 at 11 am ET as Cherilee Rutherford of Ida Institute presents Applying Person-Centered Care (PCC) in the Appointment Webinar.

**Free webinar for all – register now**

Key learning points

- Review the concept of person-centered care and define the key components of person-centered communication in hearing care and rehabilitation.
- Revisit the Calgary-Cambridge Guides and introduce The Four Habits to facilitate a person-centered interaction.
- Review key communication skills that are fundamental in any hearing care or rehabilitation scenario.

**Speaker: Cherilee Rutherford, Ida Institute**

The **Ida Institute** is a non-profit organization founded in 2007 by a grant from the

## UPCOMING WEBINAR:

### **Understanding Cases of Tinnitus with a Normal Audiogram: Is Hearing Loss Undetected with Brandon Paul – June 9th, 2020**

Join us on Tuesday, June 9th at 12 pm ET as Brandon Paul, PhD., Sunnybrook Health Sciences Centre presents Understanding Cases of Tinnitus with a Normal Audiogram: Is Hearing Loss Undetected Webinar.

- **CAA Members – free register now**
- **Non-members – fee \$50.00**

#### **Learning points**

- Standard audiometry may miss threshold shifts that are present in tinnitus sufferers, namely at frequencies above 8 kHz, or at several interoctave frequencies.
- Cochlear synaptopathy, or “hidden hearing loss,” may be present in individuals who have normal audiograms (even to 16 kHz) but chronic tinnitus.
- Detecting cochlear synaptopathy has proven difficult in humans, and thus the relationship between tinnitus and synaptopathy is unresolved.

**Speaker: Brandon Paul is a Postdoctoral Fellow at Sunnybrook Research Institute and the Department of Otolaryngology within Sunnybrook Health Sciences Centre in Toronto.**

**[Visit us for upcoming and on-demand webinars](#)**

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## ARCHIVED WEBINAR:

## **eAudiology Webinar: Privacy and Practicality with Bill Campbell and Erica Zaia –**

**April 30, 2020**

[\*\*Watch the Recording Now\*\*](#)

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## **ARCHIVED WEBINAR:**

### **eAudiology: For right now and for the future webinar with Bill Campbell –**

**April 2, 2020**

[\*\*Watch the recording now\*\*](#)

CEU credits will be issued via email in early May.

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## **COVID19 Helpful Links**

### **Click here for helpful links**

We have provided a list of links to your regulatory college websites where you will find COVID19 messages and links. We have also included links to the Employment Insurance website. We urge you to continue to monitor federal, provincial, and municipal government websites to ensure that you are informed about the health and employment-related mandates and policies.

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## **Providing Support for Vestibular Patients During COVID-19**

By: Erica Zaia & Janine Verge

With self-isolation, COVID-19 has created a challenge in how we provide services as Audiologists assessing and managing patients with vestibular disorders. As we depend

on equipment to conduct formal vestibular testing for our patients, providing objective assessments will most likely not be feasible through tele-health at this time. However, providing remote support for patients struggling with dizziness may be possible in some scenarios, as suggested below.

As a general rule, when providing e-Audiology, remember:

- Use a secure videoconference platform - you may need a business associate agreement. For instance, Microsoft products and Skype for business are HIPAA compliant.
- Be compliant with provincial, territorial, federal privacy and agency/clinic policies, confidentiality, privacy, security and consent laws.
- Consent can be verbal or written and should be noted in chart.
- Continue to work within your scope of practice when providing assessment and management for vestibular disorders.
- Make the patient aware audio/video as well as data is being transmitted and what the potential consequences might be (e.g. information is intercepted and re-transmitted).
- Patient should be aware of security issues at their own site/with their own computer equipment.

**Please read the full document [here](#)**

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