Presented by the Ohio Board of Speech-Language Pathology and Audiology

Resolving Ethical Dilemmas
Best Practices For
School-Based Practitioners

Presented by: Carrie L. Spangler, Au.D., CCC-A, FAAA
Educational Audiologist

Gregg B. Thornton, Esq.
Executive Director
Ohio Board of Speech-Language Pathology & Audiology

Ethics – What’s Our Perspective?
Rules, Morals, Behavior, and Principles

- Revealed in what you do, how you do it, and with what intention
- Process for looking at and acting on situations that pose ethical dilemmas
- Similarities and differences between licensure board’s Code of Ethics, ODE Operating Standards, and school district policies – Which one applies to you?
- Your Code of Ethics keeps the professions strong by ensuring practitioners hold tantamount the welfare of persons professionally served

What is an Ethical Dilemma?
Things to consider:

- How do I know if I have an ethical dilemma?
  - Situation where there is no right or wrong answer

- Best Practice – Avoid the gray area
Ethics – Choose Carefully!

Ethical dilemmas involve:

- Choices
- Outcomes
- Final Consequences

Effectively resolving ethical dilemmas require:

- Decision-making process

Ethical Decision-Making Process

Things to consider:

1. Define the problem and collect the relevant facts

   - Gather information and be thorough
   - Ask questions
   - Take the time you need before acting

   Step 1 – Things to consider:

   - Resolving an ethical dilemma requires a stable decision-making process and can help with gray areas:

   2. Identify rules, policies, best-practices to determine feasible options

      Step 2 – Things to consider:

      - Check laws, rules, and work policies.
      - Check other resources for best practices – ASHA

   3. Assess the effect of each option on all individuals involved

      Step 3 – Things to consider:

      - Consider impact on student, others in your work setting, and yourself

   * Adapted from Morris & Chabon, Rockhurst University, 2005
Ethical Decision-Making Process

Things to consider:

- Resolving an ethical dilemma requires a stable decision-making process and can help with gray areas:

  4. Review all information within your chain-of-command to determine the most appropriate action

Step 4 – Things to consider:

- Your supervisor is there to support you.
- Make your supervisor aware of issues as soon as possible.

5. Select the best option and keep documentation

Step 5 – Things to consider:

- Your decision should support the best interest of your student.
- Keep all documentation of your actions.

Ethical Dilemma – What’s at Stake?

Things to consider:

- What are the implications when I’m facing an ethical dilemma?
  - Impact to your patient/client
  - Your license/certification
  - Your employment
  - Your reputation, integrity, and professional conduct

Why use the Code of Ethics

- Ensures that the health and welfare of your clients/patients are being protected and served

Adapted from Morris & Chabon, Rockhurst University, 2005
**Code of Ethics**

**OAC Chapter 4753-9**

*Code of Ethics – Two Sections*

**Applies to all Licensees**

**Section A – Ethical Duties Required For the Patient/Client**

1. Respect
2. Professional Relationship – Boundaries
3. Protect
4. Proficiency
5. Practicing Within Established Standards
6. Public Behavior
7. Public Statements
8. Conflict of Interest with Professional or Commercial Affiliations
9. Subscribe to Code of Ethics
10. Duty to Report

**Section B – Ethical Conduct Required of the Licensee**

1. Professional Behavior
   - dishonesty, fraud, impairment
2. Maintaining Records
   - adequate records, confidentiality
3. Delivery of Services
   - reasonable expectation of benefit
   - independent professional judgment
4. Supervision
   - direct/indirect (students, aides, conditional licensees)
5. Research
   - informed consent, established methods
6. Business Practices
   - disclosures, fees, conflicts of interest
7. Telecommunications
   - adhere to telepractice guidelines under OAC Chapter 4753-2

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**Areas of Interest; Ethics &**

**Ethics in the School Setting**

1. Supervision
2. Caseload Management
3. Outside Services
4. Breach of Contract
5. Licensure Requirements
6. Telepractice
7. Social Media
8. Impairment
9. Patient Abandonment
10. Confidential Records – HIPPA
11. FM Systems – Audiology Presentation
12. Facilities – Audiology Presentation

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**1A. Ethics in Supervision – “Supervising Takes Time”**

An SLP employer offers a conditional licensee/CF a position. As a condition of employment, the CF must sign a contract agreeing to the following: CF will reimburse the SLP for their time mentoring if the CF ends their employment prior to completing the CFY for reasons determined to be within their control.

Is it unethical for the SLP supervisor to require the CF to sign the contract?
1B. Ethics in Supervision – “My Employer Wants Me To Co-Sign My CFs Documents”
School district directs the SLP who is serving as the board approved Supervised Professional Experience supervisor to sign-off on the conditional licensee’s documentation, including requests for billing. The SLP supervisor does not believe she should co-sign anything since she is not directly observing all of the conditional licensee’s services.

Is the supervisor ethically required to co-sign documentation of services completed by the conditional licensee/CF?

1C. Professional Experience (CFY)
- Conditional licensee is at the end of their 36 week supervised professional experience and realizes that their supervised professional experience plan was not submitted to the licensure board as legally required within 30 days of their start date of employment. Conditional licensee contacts the licensure board and states that the Plan was signed and dated by their supervisor at their very first meeting when employment began, but he forgot to mail it. The Plan is submitted with the Report and Contacts Log and it was determined after contacting the supervisor that the supervisor never signed the Plan, only the Report and Log. The supervisor reviews their handwriting on the Plan and Report and Log, and verifies that the signature/date on the Plan is not their handwriting and she had never seen or discussed the Plan with the conditional licensee.

Supervised Professional Experience

1. Is it appropriate for the conditional licensee to sign and date their supervisor’s name to the Plan in this case?

2. Should the SLP supervisor report what the conditional licensee did to the licensure board?

1D. Supervision – Adequate supervision dilemma
- SLP agrees to serve the mentor for a conditional licensee/CF at their school district. Subsequently, the SLP determines that supervision requires too much time to manage their own caseload in their work setting and will not be compensated for extra duties related to the supervision. The SLP notifies the conditional licensee that he/she must find another supervisor.

The SLP cannot continue supervising due to her caseload. Should she simply stop supervising?
A full time SLP resigns and the supervisor transfers her entire caseload to the remaining fulltime SLPs. The SLP follows chain of command in reporting that she cannot provide adequate services due to the additional cases assigned to her caseload. The supervisor directs the SLP to spend less time in therapy or spend less time with paperwork, but the SLP believes that this is not appropriate for her students' needs. SLP is subsequently suspended for failure to provide services.

Should the supervisor require the SLP to "make it work" in this case?

On several occurrences during the school year, a school-based SLP documented providing services to a student under an IEP when the student was absent from school. The SLP also submitted these services for Medicaid reimbursement. The SLP failed to provide speech services documented on student's IEP. The SLP claimed her caseload was too high and the district did not provide adequate resources.

Was the SLP justified in her actions due to her claim that the district did not provide adequate resources?

Ohio Department of Education’s (ODE) Special Education Operating Standards were amended on July 1, 2014:
- Service provider workload determination of delivery of services – Ohio Administrative Code section 3301-51-09(I)(1) - Refer to Guidance document;
- The Workload Determination Process is not optional;
- Resource – Article by Dr. Chuck Carlin, CCC-SLP, available at: www.omnie.ocali.org

Guiding Principles – Caseload Ratio
Workload Determination Process
- Article includes a workload calculator and workload calculator instructions for download
- Article provides an overview of the workload approach
- Two methods educational agencies use to determine the number of children assigned to SLPs – caseload approach and workload approach
- The caseload approach is no longer valid in Ohio, e.g., certain number of children assigned to SLP
Under the workload approach, educational agencies ensure SLPs have enough time in their workweek to complete all their workload duties, as well as provide appropriate services and interventions.

Workload duties are assigned first, and then with the remaining time determine who will be placed on the SLP’s caseloads.

Workload Determination Process is a team-based approach (e.g., principal, special education administrator, service providers, teacher, parents).

Data Driven – sources that can be used include, time study analysis, standard values that reflect known workload duties and activities, and review of records, such as IEPs and plans.

Workload Determination Process is a fluid process and should be reevaluated as the school year progresses.

Article addresses proportional calculations or weights, e.g., 1.6, as well as mixed caseload calculations.

Article addresses workload waivers.

In Feb. 2016 – ODE released official guidance documents on workload determination process, including new calculator that helps districts determine workload of service providers for special education services.

In August 2016 – ODE released a series of videos on the workload determination process.

All information, including ODE memos, guidance documents, resources, and calculator are posted at: http://slpaud.ohio.gov/SBL.stm

Guiding Principles – Resolving Ethical Workload Determination Process

1. If your school district is not following the workload determination process, we urge you to contact your immediate supervisor, special education coordinator, or other appropriate administrator and inform them about ODE’s rule, i.e., 3301-51-09(1), which went into effect on July 1, 2014. Your contact should be documented in writing and verified by the supervisor or special education coordinator by e-mailing and summarizing the conversation and requesting confirmation;

Document situations or conditions that have an adverse impact on your ability to adequately serve your student.
Guiding Principles – Resolving Ethical Workload Determination Process

2. Collect and organize your data to support your workload before meeting with your supervisor. Remember, the workload determination process should be based upon appropriate services that each student has been qualified to receive;

3. Be sure to calculate the time it takes to perform assigned school duties, staff meetings, professional development, supervision, travel/transition, screening, assessment, evaluation, progress documentation and reporting, secondary transition service planning, conference/consultation pertaining to individual students, documentation for individual students, third party billing requirements, the severity of each eligible student’s needs, the level and frequency of necessary services, time needed for planning, any mandatory lunch period, any applicable statutory or contractual agreements, etc. The components are not limited to those listed above so include all components that impact your workload, and be prepared to support it with data and documentation;

4. Use of a workload calculator is recommended in order to factor in your components, minutes, and any types of cases that should be weighted more heavily. It is our understanding that ODE is reviewing a workload calculator template. As soon as we receive notification that the workload calculator is available, we will inform our licensees. In the interim, we recommend that you keep track of your time spent on various activities. When the workload calculator is available, it will be much easier to input your minutes based on the time you noted for each component, instead of using estimates;

5. Visit the American-Speech-Language Hearing Association’s website for tools and resources about caseload and workload characteristics, how to conduct a workload analysis, factors impacting workload, approaches to managing an existing workload, and examples of workload approaches: http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589934681&section=Key_Issues#Caseload/Workload_Models_in_Practice;
6. If your school district is not implementing the workload determination process after you have contacted and documented communication with your immediate supervisor or the special education coordinator, you should report issues or concerns directly to the Ohio Department of Education – Office For Exceptional Children at: OEC-Procedural-Safeguard@education.ohio.gov or contact them at: 877-644-6338. The Office for Exceptional Children is the appropriate entity that has jurisdiction to investigate allegations that school districts are not following the workload determination process, as required by ODE’s rule;

7. Bookmark and regularly visit the following links to ODE’s website for information, resources, and guidance regarding the operating standards: ODE’s Operating Standards and Guidance For the Education of Children with Disabilities; (http://education.ohio.gov/Topics/Special-Education/Federal-and-State-Requirements/Operational-Standards-and-Guidance); and

8. Contact the licensure board’s Executive Director, Gregg Thornton, Esq., at (614) 644-9046 or via e-mail at Gregg.thornton@slpaud.ohio.gov if you need guidance or assistance in resolving any ethical dilemmas resulting from the workload determination process.

3. Services Outside Primary Setting – “PRN Work”

- Practitioner is providing services to a child in their primary employment setting, and the family requests that the practitioner also provide additional therapy to their child in a private setting, focused on achieving academic goals during the school year, and offer to private pay for the services.

Can the practitioner provide private PRN services to the child?


Practitioner signs a one year contract with her school district. She also works a PRN position in a rehabilitation setting over the weekends. The SLP director at the rehabilitation center unexpectedly resigns and the employer offers the position to the practitioner. The practitioner wants to accept the offer; however, her school district will not release her from her contract. The district advises that if she breaches her contract, they will report her to the Ohio Department of Education and to the licensure board.

Will the practitioner face any consequences to her license if she breaches her contract to accept the new position?
5A. Ethics in Professional Behavior – Licensure Requirements – “My Employer Wants Me to See Students Yesterday!”

An Ohio employer hires an out-of-state practitioner and needs services provided to students as soon as possible. The practitioner moves to Ohio and is advised by the employer that he/she can practice before receiving their Ohio license because of licensure held in their home state and based on ASHA certification.

Can the new hire legally practice for the employer before receiving their Ohio license?

5B. Ethics in Licensure Requirements – “I’ve Graduated But Don’t Have My License Yet”

Recent graduate is hired by school district for position. The “graduate’s” application for licensure is pending, but the employer needs to have student’s seen as soon as possible.

Can the “graduate” begin practicing for the employer after graduation?

5C. Ethics in Licensure Requirements – “My License Is Expired”

Practitioner forgets to renew her license by 12/31/18 and proceeds to practice at work the following day. She provides services for which reimbursement is sought by her employer.

Can the licensee practice if their license is not renewed in a timely manner?

6. Ethics in Telepractice

- SLP has to travel a lengthy distance to serve two students within her district. She would like to deliver services to the students via telepractice to reduce travel time.

Can the SLP provide services to the two students via telepractice in this case?
7. Social Media: Ethics and Etiquette

Clinician accepts ‘friend invitations’ on Facebook from her students who are receiving services, and post general messages about her services on her private Facebook page. She is careful not to identify students by name, but gives examples of the type of cases she treats.

Should the SLP accept friend invitations from students she is serving on her private FB page?

Should the SLP post information on her Facebook page about her cases, if she does not identify her students by name?

8. Impairment – “I Think My Co-Worker Has Been Drinking”

A supervising practitioner receives a report of a clinician smelling like alcohol when he/she arrived to work. The clinician has an appointment with a client first thing in the morning. The supervising practitioner follows-up with co-workers who interacted with the clinician and contacts their administration for guidance. By the time the supervising practitioner approaches the clinician to investigate the allegations, at least one client has already received services by the clinician. The employer requires the clinician to take a blood alcohol test on-site, which comes back over the legal limit.

Are there any ethical issues to consider in this case?

9. Patient Abandonment

SLP discontinues services to a student on an IEP. The student’s parents disagree with the SLP’s decision to end therapy and threaten to file a complaint against the SLP for patient abandonment.

Is the licensee at risk of patient abandonment for discontinuing services with the student in this case?


Practitioner uses the employer’s electronic records system to access confidential information on students not on their caseload. The employer conducts an audit which determines that the practitioner was accessing information without a business purpose. The licensee claimed someone else accessed the records with their user name and password that was written down and kept next to their computer.

Is the licensee responsible for the unauthorized access to the student’s information in this case?
DUTY TO REPORT

- Is it really a requirement?
- What must I report, when, and to whom?
- How do I report?
- Why is it important?
- What are the consequences if I fail to report?

Licensees have a duty to report alleged violations to the board

Ethics rule: 4753–9–01(A)(10):

Licensees shall report to the board any violation of the board rules or any breach of the code of ethics that he/she is aware of.

- Direct, first-hand knowledge;
- Reasonable cause to believe that a violation occurred;
- Contact licensure board’s Executive Director to discuss specific situations at: gregg.thornton@slpaud.ohio.gov or (614) 644–9046

What happens to information once it's reported to the Board?

Powers and duties – 4753.05

(E) The board shall investigate all alleged irregularities in the practices of speech-language pathology and audiology by persons licensed or permitted pursuant to this chapter and any violations of this chapter or rules adopted by the board.

Licenses and powers of the board - 4753.10

Board's Investigative Process

- Information referred to board investigator for review and follow-up
- Matter reviewed by the Investigative Review Group Committee
- Final recommendation submitted to Board
- Administrative Disciplinary Process
- Board action reported to national practitioner databank
Board Addresses Questions About Medicaid School Enrollment

- In June, the Board addressed inquiries regarding the Medicaid School Provider application.
- Clarification – no ethical issues when licensees complete the application as required by the Ohio Department of Medicaid (ODM) and Ohio Department of Education Medicaid School Program (ODE-MSP).
- The Medicaid School Program FAQ is currently available on the Ohio Department of Medicaid’s website at: http://www.medicaid.ohio.gov/PROVIDERS/EnrollmentandSupport/ProviderEnrollment.aspx. We hope this communication alleviates any concerns our licensees may have about completing the application as currently specified by ODM and ODE-MSP.

School Medicaid Update

Why use the Code of Ethics

- Using the Code of Ethics will protect your license and help educate others about your professional conduct.

Pointers for Resolving Ethical Dilemmas

Seek recourse within your work setting
- Many employers have compliance specialists who are available to assist in resolving ethical dilemmas or just clarifying existing work policies that address the situation. It is important to know your employer’s internal procedures and policies for addressing conflicts.

Pointers for Resolving Ethical Dilemmas

Keep records
- Document...document...document. Trained to document well re: clients; the same due diligence should be followed with ethical dilemmas.
- Maintaining a detailed, written record of actions (yours and relevant others).
- Might include e-mail correspondence, or a personal journal/log with dated entries.
Summary

- Review & understand the Code of Ethics under Chapter 4753-9, ASHA Code of Ethics
  - Empowers you to resolve dilemmas
- Act in a manner that maintains the dignity of persons served
  - Person-first decision making
  - We serve patients, students, supervisees, families, coworkers

Summary

- Employ a process for decision making
  - Process will influence outcome
  - Follow a stable process to make decisions more consistent and equitable
- Educate your employer & your consumers about our Code of Ethics
  - Encourages strong boundaries that will be respected by others

Summary

- Use the many resources available and consult with others:
  - The more facts and points of view considered, the more likely you are to make a wise decision
- Links to other resources:
  ASHA Resources: http://www.asha.org/practice/ethics/
  OSSPEAC Resources: http://www.osspeac.org
  OBSLPA Resources: http://www.slpaud.ohio.gov
  Other Resources: http://www.omnie.ocali.org

Summary

- Contact Ohio Licensure Board for assistance and guidance
- Licensure board's Executive Director, Gregg B. Thornton, directly at (614) 644-9046 or gregg.thornton@slpaud.ohio.gov.
TABLE: PRACTICAL TIPS FOR PROTECTING PATIENT INFORMATION

Tips:
- Make sure that every staff member has a unique password to log into the computer or electronic medical record system. It should be at least eight characters long and contain both uppercase and lowercase letters, at least one number, and at least one symbol like @ or #. It should not use any easily guessable passwords like the month or birthdate.
- Do not store computer passwords where they can be seen.
- Establish a standard policy that all staff members are to log off their computers when leaving for more than a few minutes.
- Use privacy screens on all computers.
- Set up clocks so that computer screens face away from public areas.
- Remind all personnel to keep all health information on mobile devices such as laptops, smartphones, tablets, or other wireless devices secure. Do not store password information, email, or phone numbers in accounts that are normally viewable by anyone who might be in the room.
- Do not store any patient information on cloud services that are accessible to unauthorized individuals.
- Always double-check e-mail headers before sending.


Points for Resolving Ethical Dilemmas

- Additional Resources
  - Ohio Master’s Network Initiatives in Education (OMNIE)
  - Website: www.omnie.ocali.org
  - Speech and Language Guidelines

Facebook page: https://www.facebook.com/OhioBoardOfSpeechLanguagePathologyAndAudiology
With access to CE Broker, a speech-language pathologist or audiologist can view their official transcript to see how courses have affected their progress towards meeting their specific education requirements. For more information, visit Board’s website at: http://slpaud.ohio.gov/cebroker.stm

Reporting alleged violations to the Board
Report misleading any alleged violation of Chapter 4753 to the Board at:
Ohio Board of Speech-Language Pathology and Audiology
77 South High Street, Suite 1659
Columbus, Ohio 43215-6108
Telephone: (614) 644-9046
E-mail: Board@slpaud.ohio.gov

Ohio eLicense – visit
http://slpaud.ohio.gov/elic.stm

Board Consolidation – visit
Chapter 4753-9 Code of Ethics

4753-9-01 Code of Ethics.

(A) Preamble: Licensees shall hold tantamount the health and welfare of person(s) served.

(1) Licensees shall respect and protect the inherent worth, integrity, dignity and rights of each person served including his/her right of self determination.

(2) The relationship between the professional and the person(s) served or supervised makes it imperative that the professional is aware of the vulnerability of the person(s) served or supervised, licensees shall not:

(a) Discriminate in his/her relationships with person(s) served or supervised, colleagues, students, and members of the allied professions on the basis of race, ethnicity, gender, age, religion, national origin, sexual orientation, or disability.

(b) Engage in sexual or intimate relations the person(s) served or supervised.

(c) Harass or abuse person(s) served or supervised.

(d) Engage in the evaluation or remediation of speech, language, or hearing disorders except in a professional relationship.

(e) Participate in activities that constitute a conflict of interest.

(3) Licensees shall use reasonable precautions to protect the health and welfare of person(s) served in the delivery of professional services and in research.

(4) Licensees shall be proficient in areas of treatment, objective in the application of skills, and maintain concern for the best interests of person(s) served or supervised, colleagues, and society as a whole.

(5) Licensees shall practice within the established standards of practice and training recognized by the American speech-language-hearing association or the American academy of audiology.

(6) To protect the public confidence, public behavior shall reflect a high level of moral and ethical behaviors.

(7) When making public statements, licensees shall:

(a) Provide information about professional services and products that do not contain misrepresentations or claims that are false, deceptive, or misleading.

(b) Provide accurate information about the nature and management of communicative disorders, the professions, and services rendered to persons served or supervised professionally.

(c) Announce services in a manner consonant with the highest professional standards in the community.

(8) Licensees shall not mislead or limit services with person(s) served or supervised based on professional or commercial affiliations.

(9) Licensees shall subscribe to these principles and the code of ethics adopted by the board and agree to
abide by the rules of the board and Chapter 4753. of the Revised Code.

(10) Licensees shall report to the board any violation of the board rules or any breach of the code of ethics that he/she is aware of.

(B) Fundamental rules considered essential. Violation of the code of ethics shall be considered unprofessional conduct.

(1) Licensees shall maintain professional behavior.

(a) Licensees shall not engage in dishonesty, fraud, deceit, misrepresentation, or illegal conduct that adversely reflects on the profession or the individual.

(b) Licensees shall not practice under the influence of illegal substances, alcohol, or other chemicals that may impair decision making or quality of care.

(c) Licensees shall maintain a professional relationship with the board.

(i) Licensees shall conduct their practice according to Chapter 4753. of the Revised Code and agency-level 4753 of the Administrative Code.

(ii) Licensees shall cooperate with all lawful requests of the board within thirty calendar days.

(iii) The denial or revocation of licensure in another state, or from another board in this state, may result in denial or revocation of licensure by the board.

(d) When patients from a primary employment setting are seen in another setting, the person(s) served professionally shall be fully informed of services available from the licensee's primary employment setting as well as those from the private practice and given freedom to choose whether and from whom the will obtain professional services.

(i) The costs associated with obtaining services from the licensee's primary employment setting versus those associated with the private practice shall be made clear.

(ii) Practitioners accepting cases in a private setting from their primary place of employment shall inform the administrator at their primary employment setting of the intent.

(2) Licensees shall maintain records and keep confidentiality of person(s) served, including:

(a) Maintaining adequate records of professional services rendered.

(b) Providing appropriate access to records of person(s) served professionally.

(c) Not disclosing to unauthorized persons any confidential information obtained from any person(s) served or supervised professionally without the written consent of person(s) served or his/her legal guardian unless required by law.

(d) Being compliant with all state and federal laws and regulations relating to records keeping, records access and patient confidentiality.
(3) Licensees shall exhibit professional behavior in the delivery of services by:

(a) Accurately represent his/her training, credentials and competence.

(b) Provide only services for which he/she is properly trained.

(c) Continue their professional development throughout their careers.

(d) Accept for treatment, persons:

(i) Who can reasonably be expected to benefit from services and continue with treatment when there is reasonable expectation of further benefit.

(ii) Following the exercise of independent professional judgment, regardless of referral source or prescription.

(e) Fully inform person(s) served of the nature and possible effects of service

(f) Secure all reasonable precautions to avoid injury to persons in the delivery of professional services including but not limited to the following:

(i) Established guidelines for infection control.

(ii) Established procedural techniques.

(iii) Safety guidelines for equipment.

(g) Provide only services and products that are in the best interest of person(s) served.

(h) Evaluate services rendered and products dispensed to determine effectiveness.

(i) Ensure that all equipment used in the provision of services is in proper working order and is properly calibrated.

(j) Not guarantee the results of any speech or hearing consultative or therapeutic procedure.

(i) A guarantee of any sort, express or implied, oral or written, is contrary to professional ethics.

(ii) A reasonable statement of prognosis is appropriate, but factors, hence, any warranty for services and outcomes is deceptive and unethical.

(k) Use every resource available, including referrals to other specialists as needed, to effect maximum improvement in person(s) served. Licensees shall:

(i) Identify competent, dependable referral sources for person(s) served professionally.

(ii) Include referrals to other audiologists and speech-language pathologists when the scope and nature of the indicated evaluation and/or treatment is beyond the training of the licensee.

(iii) Not order excessive tests, treatment or use of treatment facilities when not warranted by the condition of the person(s) served.
Licensees shall be compliant with all state and federal laws and regulations governing the practice of speech-language pathology and audiology and the dispensing and selling of products.

Licensees shall not disparage the goods, services or business of another by false representation of fact.

Licensees supervising conditional licensees, aides, and students: shall prohibit anyone under their supervision from engaging in any practice that violates Chapter 4753. of the Revised Code or agency-level 4753 of the Administrative Code including the code of ethics.

(a) Supervisors of clinical practice shall:

(i) Provide direct and indirect clinical supervision.

(ii) Maintain adequate records of direct and indirect supervision rendered.

(iii) Not supervise the clinical practice of a student or aide, while completing the supervised professional experience required for licensure under section 4753.06 of the Revised Code.

(b) Supervisors of supervised professional experience shall:

(i) Not delegate any service requiring the professional competence of a licensed clinician to anyone unqualified.

(ii) Limit conditional licensees to providing services pursuant only to a specific plan approved by the board.

(c) Aide supervisors shall:

(i) Ensure aides provide services pursuant only to a specific plan approved by the board.

(ii) Assume full responsibility of services provided by the aide.

(iii) Not offer clinical services by aides for whom they do not provide appropriate supervision.

(iv) Ensure aides do not represent himself/herself to the public as a speech-language pathologist or audiologist.

(v) Ensure aides abide by Chapter 4753. of the Revised Code and agency-level 4753 of the Administrative Code.

(5) Licensees performing research shall:

(a) Ensure persons selected for research be informed of their free choice to participate and guarantee their right to privacy.

(b) Inform person(s) served and research subjects about the nature and effects of research activities.

(c) Use established methods and techniques in research.

(d) Exercise all reasonable precautions to protect the health and welfare of person(s) and their rights.
(e) Assign credit to those who have contributed to a publication and development of materials in proportion to their contribution.

(f) Credit reference sources.

(g) Honestly and accurately report findings in a non-misleading manner.

(h) Enter into agreements with those funding research that allow the researcher to honestly and accurately report findings even when results of research do not positively reflect on the funding source and/or the funding source's services or products.

(i) Disclose funding sources of research resulting in publications, presentations, products, and/or clinical procedures, and/or cited in presentations.

(6) Business practices shall be compliant with regional, state and federal laws.

(a) Licensees shall:

(i) Charge fees commensurate with services rendered.

(ii) Not charge for services not rendered.

(iii) Abide by federal, state and regional laws regarding billing for services and products rendered.

(iv) Not enter into relationships, which pose or appear to pose a conflict of interest.

(a) Licensees shall not accept compensation from a manufacturer, dealer, distributor, or sales person of prosthetics or other devices for recommending a particular product or service, including but not limited to, monetary, gift or travel incentives.

(b) Licensees who are faculty at meetings and/or consultants who provide instruction may receive reasonable honoraria and reimbursement of travel, lodging and meal expenses from manufacturers, dealers distributors and sales persons of prosthetics or other devices or services.

(c) Licensees who are faculty at meetings and/or consultants who provide instruction shall disclose to participants potential conflicts of interest.

(d) Kickbacks in violation of federal and state statutes shall not be accepted.

(e) Licensees owning stock or having financial interests in a company whose products he/she sells, dispenses or recommends shall disclose to person(s) served the relationship and financial or consultative interest.

(v) Not engage in commercial activities that conflict with the responsibilities to person(s) served or supervised by him/her professionally or to professional colleagues.

(b) Licensees shall be compliant with state and federal laws and regulations regarding business practices, sales practices, including safe harbor and antitrust laws.

(7) Licensees may practice via telecommunications within the state where not prohibited by law.
(a) Support personnel in off-site locations assisting in clinical care, shall be licensed aides under Chapter 4753. of the Revised Code.

(b) Evaluation and/or treatment shall not be solely by correspondence.

**Cite as Ohio Admin. Code 4753-9-01**

R.C. [119.032](http://codes.ohio.gov/oac/4753-9) review dates: 11/15/2012 and 12/01/2017
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