OAH USE ONLY

VOLUME:

ISSUE:

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1. Rule-Making Agency: State Board of Examiners for Speech and Language	Pathologists and Audiologists
2. Rule citation & name: 21 NCAC 64 .0108 Waiver	
3. Action: 🛛 Adoption 🗌 Amendment	Repeal
4. Was this an Emergency Rulc: ⊠ Yes Effective date: April 24, 20 □ No	20
5. Provide dates for the following actions as applicable:	
a. Proposed Temporary Rule submitted to OAH: April 16, 2020	
b. Proposed Temporary Rule published on the OAH website: April 22, 2	020
c. Public Hearing date: May 29, 2020	
d. Comment Period: April 23, 2020 through May 29, 2020	
e. Notice pursuant to G.S. 150B-21.1(a3)(2): April 16, 2020	
f. Adoption by agency on: May 29, 2020	•
g. Proposed effective date of temporary rule [if other than effective date	established by G.S. 150B- 21.1(b)
and G.S. 150B-21.3]:	
h. Rule approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]:	
6. Reason for Temporary Action. Attach a copy of any cited law, regulation	n, or document necessary for the review.
🔟 A serious and unforeseen threat to the public health, safety or welfa	re.
The effective date of a recent act of the General Assembly or of the	U.S. Congress.
Cite: Effective date:	
A recent change in federal or state budgetary policy.	
Effective date of change:	
L A recent federal regulation. Cite:	
Effective date:	
A rccent court order. Cite order:	
State Medical Facilities Plan.	
└ Other:	
Explain: On March 10, 2020, the Governor of North Carolina, by issuing Executive Or a response and enact protective measures to help prevent the spread of COVID-19. The serious illness or death. The COVID-19, previously unidentified in humans, spreads cast COVID-19 begins, it is difficult to contain. The World Health Organization, the Center 1 Department of Health and Human Services have declared COVID-19 a public health three North Carolina and the NC Department of Health and Human Services use teleworking technologies, a modify these events or offer online streaming services. Additionally, it is in the public's especially in settings where there are high risk individuals (nursing homes, assisted living limited tasks that are generally performed by audiologists. This rule alleviates access to be a service of the serv	COVID-19 is a respiratory discase that can result in ly from person to person. Once an outbreak of the for Disease Control and Prevention, and the United States at and emergency. On March 12, 2020, the Governor of h risk persons stay at home, that schools implement plans nd that mass gatherings should cancel, postpone, and best interest to expand the pool of healthcare providers, a facilities, etc.) and allow audiology assistants to perform

TEMPORARY RULE-MAKING

[Authority G.S. 150B-21.1]

FINDINGS OF NEED

promotes the public safety of patients.

06/16/2020 4:18PM FAX

7. Why is adherence to notice and hearing requirements contrary to the public interest and the immediate adoption of the rule is required? The public health threat posed by COVID-19 requires immediate action to limit mass gatherings, increase social distancing, and limit exposure of high risks individuals. It is in the public's interest to immediately adopt rules that limit the Board's regulated audience's exposure to COVID-19 and allow for relaxed requirements during the time of this public health emergency. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of patients.		
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8. Rule establishes or increases a fcc? (See G.S. 12-3.1)		
 Yes Agency submitted request for consultation on: Consultation not required. Cite authority: 		
⊠ No	:	
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Head*:	
Phone: 919-491-7793	Telan Mallel	
E-Mail: enkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this	
Agency contact, if any: Denise Sherwood Brown	form. Typed Name: Adam Mehlenbacher, AuD	
Phone: 336-272-1828	Title: Chair	
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncbocslpa.org	
RULES REVIEW COMMISSION USE ONLY		
Action taken:	Submitted for RRC Review:	
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Date returned to agency:		
Date retained to agency.	이상이 가 있는 것이 가지 않는 것은 것을 수밖에 봐야 할 수 없는 것이 것이다.	
	en e	

1 2 21 NCAC 64 .0108 is adopted under temporary procedures as follows:

- 3 21 NCAC 64 .0108 WAIVER 4 The Board may waive any rule in this Chapter that is not statutorily required if a licensee submits a written request. The Board may also waive any rule in 21 NCAC 64 that is not statutorily required upon its own initiative. Factors the 5 6 Board shall use in determining whether to grant the waiver are: 7 (1)degree of disruption to the Board; 8 (2) cost to the Board; 9 (3) degree of benefit to the public; 10 (4) whether the requesting party had control over the circumstances that required the requested waiver; 11 (5)notice to and opposition by the public; 12 (6)need for the waiver; and 13 (7)previous requests for waivers submitted from the requesting party. 14 (b) The Board may waive any rule in this Chapter that is not statutorily required upon its own initiative during a 15 disaster declaration by the President of the United States or the Governor, a national emergency declaration by the President of the United States, or a state of emergency declaration issued under G.S. 166A-19.3(19), based on the 16 factors set forth in Paragraph (a)(1), (2), (3), (5) and (6) of this Rule. If the Board wishes to waive a rule, it shall 17 18 provide notice by posting a link on their website and sending out information to their interested persons mailing list. 19 (c) Any waiver granted by the Board in accordance with this Rule based upon a declared state of emergency shall include a date certain upon which the waiver will expire, not to exceed twelve (12) months from the date that the 20 21 waiver is granted. 22 23 24 25 History Note: Authority G.S. 90-304; 150B-19(6) 26 Emergency Adoption Eff. April 24, 2020, 2020;
- 27 <u>Temporary Adoption Eff. June 26, 2020.</u>



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists		
2. Rule citation & name: 21 NCAC 64 .0219 Telepractice		
3. Action: Adoption Amendment Repeal		
4. Was this an Emergency Rule: Yes Effective date: March 27, 2020		
5. Provide dates for the following actions as applicable:		
a. Proposed Temporary Rule submitted to OAH: March 19, 2020		
b. Proposed Temporary Rule published on the OAH website: March 23, 2020		
c. Public Hearing date: April 10, 2020		
d. Comment Period: March 26, 2020 through April 17, 2020		
c. Notice pursuant to G.S. 150B-21.1(a3)(2): March 18, 2020		
f. Adoption by agency on: May 29, 2020		
g. Proposed effective date of temporary rule [if other than effective date established by G.S. 150B- 21.1(b) and G.S. 150B-21.3]:		
h. Rulc approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]:		
6. Reason for Temporary Action. Attach a copy of any cited law, regulation, or document necessary for the review.		
A serious and unforeseen threat to the public health, safety or welfare.		
The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite:		
Effective date:		
A recent change in federal or state budgetary policy.		
Effective date of change: A recent federal regulation,		
Cite:		
Effective date:		
Citc order:		
State Medical Facilities Plan.		
Other:		
Explain: On March 10, 2020, the Governor of North Carolina, by issuing Executive Order No. 116, declared a state of emergency to coordinate a response and enact protective measures to help prevent the spread of COVID-19. The COVID-19 is a respiratory disease that can result in serious illness or death. The COVID-19, previously unidentified in humans, spreads easily from person to person. Once an outbreak of the COVID-19 begins, it is difficult to contain. The World Health Organization, the Center for Disease Control and Prevention, and the United States Department of Health and Human Services have declared COVID-19 a public health threat and emergency. On March 12, 2020, the Governor of North Carolina and the NC Department of Health and Human Services recommended high risk persons stay at home, that schools implement plans for distance or c-learning, that employers and employees use teleworking technologies, and that mass gatherings should cancel, postpone, and modify these events or offer online streaming services. Additionally, it is in the public's best interest to expand the pool of healthcare providers, especially in settings where there are high risk individuals (nursing homes, assisted living facilities, etc.) and allow audiology assistants to perform limited tasks that are generally performed by audiologists. This rule alleviates access to health care concerns during the COVID-19 outbreak and		

promotes the public safety of patients.

06/16/2020 4:19PM FAX

7. Why is adherence to notice and hearing requirements contrary to the public interest and the immediate adoption of the rule is required? The public health threat posed by COVID-19 requires immediate action to limit mass gatherings, increase social distancing, and limit exposure of high risks individuals. It is in the public's interest to immediately adopt rules that limit the Board's regulated audience's exposure to COVID-19 and allow for relaxed requirements during the time of this public health emergency. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public's best interest to expand the pool of healthcare providers regulated by this Board, especially in settings where there are high risk individuals (nursing homes, assisted living facilities, etc.) and allow audiology assistants to perform limited tasks that are generally performed by audiologists. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of patients by clarifying the parameters for authorized telepractice.			
· · · · · · · · · · · · · · · · · · ·			
8. Rule establishes or increases a fee? (See G.S. 12-3.1)			
Yes Agency submitted request for consultation on: Consultation not required. Cite authority:			
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Head*:		
Phone: 919-491-7793	ala Mahlellin		
E-Mail: enkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this		
	form.		
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mehlenbacher, AuD		
Phone: 336-272-1828	Title: Chair		
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncbocslpa.org		
RULES REVIEW COMMISSION USE ONLY			
Action taken: Sub	omitted for RRC Review:		
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	n en		

1 2 21 NCAC 64 .0219 is amended under temporary procedures as follows:

3 21 NCAC 64 .0219 TELEPRACTICE

4 (a) In light of the State of Emergency declared by Executive Order No. 116, issued March 10, 2020, the Board shall

5 temporarily waive the requirement for licensure for telepractice in order to allow speech and language pathologists to

6 delegate authorized tasks allowed pursuant to 21 NCAC 64 .0114 by telepractice to speech and language pathology-

7 assistants under the same level of direct supervision as required by 21 NCAC 64 .1003(e)(1)(2) .1003(e)(1).(2) and

8 (6). This temporary waiver of licensure shall apply only to speech and language pathology-assistants and shall continue

9 for the duration of the declared emergency as set forth in Executive Order No. 116 issued March 10, 2020.

10 (a)(b) For purposes of this Rule the following words shall have the following meanings:

- (1) "Patient site" means the patient's physical location at the time of the receipt of the telepractice
 services.
- (2) "Provider" means a licensed speech and language pathologist or audiologist who provides
 telepractice services.
- (3) "Provider site" means the licensee's physical location at the time of the provision of the telepractice
 services.
- (4) "Telepractice" means the use of telecommunications and information technologies for the exchange
 of encrypted patient data, obtained through real-time interaction, from patient site to provider site
 for the provision of speech and language pathology and audiology services to patients through
 hardwire or internet connection. Telepractice also includes the interpretation of patient information
 provided to the licensee via store and forward techniques.

22 (b)(c) Telepractice shall be obtained in real time and in a manner sufficient to shall ensure patient confidentiality.

23 (c)(d) Telepractice is subject to the same standard of practice stated in Rules .0205 and .0216 of this Chapter as if the

24 person being treated were physically present with the licensee. Telepractice is the responsibility of the licensee.

25 licensee and shall not be delegated.

26 (d)(e) Telepractice constitutes the practice of Speech and Language Pathology and Audiology in both the patient site

- 27 <u>and provider site</u>. Providers must hold a license in the state of the provider site and shall be in compliance with the
- 28 statutory and regulatory requirements of the patient site.

29 (e)(f) Licensees and staff involved in telepractice must be trained in the use of telepractice equipment.

30 (f)(g) Notification of telepractice services shall be provided to the patient and guardian if the patient is a minor. The

- 31 notification shall include the right to refuse telepractice services and options for alternate service delivery.
- 32 (g)(h) Telepractice constitutes the practice of Speech and Language Pathology and Audiology in both the patient site
- 33 and provider site.
- 34

35 History Note: Authority G.S. 90-304(a)(3)
36 Eff. July 1, 2020
37 Amended Eff. March 1, 2014

1	Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. October 4,
2	2016;
3	Emergency Amendment Eff. March 27, 2020.2020;
4	<u>Temporary Amendment Eff. June 26, 2020.</u>



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists		
· · · · · · · · · · · · · · · · · · ·		
2. Rule citation & name: 21 NCAC 64 .1101 Definitions		
3. Action: Adoption Amendment	Repeal	
4. Was this an Emergency Rule: X Yes Effective date: April 24, 24	2020	
5. Provide dates for the following actions as applicable:		
a. Proposed Temporary Rule submitted to OAH: April 16, 2020		
b. Proposed Temporary Rule published on the OAH website: April 22, 2	2020	
c. Public Hearing date: May 29, 2020	. · · · ·	
d. Comment Period: April 23, 2020 through May 29, 2020		
e. Notice pursuant to G.S. 150B-21.1(a3)(2): April 16, 2020		
f. Adoption by agency on: May 29, 2020		
g. Proposed effective date of temporary rule [if other than effective date and G.S. 150B-21.3]:	e established by G.S. 150B- 21.1(b)	
h. Rule approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]	,	
6. Reason for Temporary Action. Attach a copy of any cited law, regulation	ion, or document necessary for the review.	
 A serious and unforeseen threat to the public health, safety or welfs The effective date of a recent act of the General Assembly or of the Cite: Effective date: A recent change in federal or state budgetary policy. Effective date of change: 	fare. e U.S. Congress.	
 A recent federal regulation. Cite: Effective date: A recent court order. Cite order: State Medical Facilities Plan. 	· · · ·	
Other:		
Explain: On March 10, 2020, the Governor of North Carolina, by issuing Executive Order No. 116, declared a state of emergency to coordinate a response and enact protective measures to help prevent the spread of COVID-19. The COVID-19 is a respiratory disease that can result in scrious illness or death. The COVID-19, previously unidentified in humans, spreads easily from person to person. Once an outbreak of the COVID-19 begins, it is difficult to contain. The World Health Organization, the Center for Disease Control and Prevention, and the United States Department of Health and Human Services have declared COVID-19 a public health threat and emergency. On March 12, 2020, the Governor of North Carolina and the NC Department of Health and Human Services recommended high risk persons stay at home, that schools implement plans for distance or e-learning, that employers and employees use teleworking technologies, and that mass gatherings should cancel, postpone, and modify these events or offer online streaming services. Additionally, it is in the public's best interest to expand the pool of healthcare providers, especially in settings where there are high risk individuals (nursing homes, assisted living facilities, etc.) and allow audiology assistants to perform limited tasks that are generally performed by audiologists. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of natients.		

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7. Why is adherence to notice and hearing requirements contrary to the public interest and the immediate adoption of the rule is required? The public health threat posed by COVID-19 requires immediate action to limit mass gatherings, increase social distancing, and limit exposure of high risks individuals. It is in the public's interest to immediately adopt rules that limit the Board's regulated audience's exposure to COVID-19 and allow for relaxed requirements during the time of this public health emergency. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of patients. A significant percentage of patients requiring the services of the Board's regulated public are elderly and school-aged individuals. As such, these patients are no longer as able to seek services from the Board's regulated public in traditional settings, such as medical offices and schools, because of COVID-19. This rule will allow for licensees to delegate certain remote activities to audiology assistants to address the needs of their patients in a manner that better protects them from COVID-19.		
	· · · · · · · · · · · · · · · · · · ·	
 Yes Agency submitted request for consultation on: Consultation not required. Cite authority: No 		
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Hcad*:	
Phone: 919-491-7793	An Merhlah	
E-Mail: cnkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.	
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mchlenbacher, AuD	
Phone: 336-272-1828	Title: Chair	
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncbocslpa.org	
RULES REVIEW COMMISSION USE ONLY		
	omitted for RRC Review:	
· · · · · · · · · · · · · · · · · · ·		
Date returned to agency:		

1	21 NCAC 64 .11	101 is adopted under temporary procedures as follows:
2		
3	SECTION	.1100 - REQUIREMENTS FOR THE USE OF AUDIOLOGY ASSISTANTS IN DIRECT
4		SERVICE DELIVERY
5		
6	21 NCAC 64 .1	101 DEFINITIONS
7	(a) "Board" mea	ans the North Carolina Board of Examiners for Speech and Language Pathologists and Audiologists.
8	(b) "Licensee"	means an individual who holds a current permanent license in audiology from the North Carolina
9	Board of Examin	ners for Speech and Language Pathologists and Audiologists.
10	(1)	"Primary Supervising Licensee" means the Licensee who supervises the majority of the Assistant's
11		work, who is responsible for the Assistant's registration with the Board, and who bears the
12		responsibility for all supervision requirements and notification responsibility to the Board of any
13		changes in registration information set forth in the Rules of this Section.
14	(2)	"Secondary Supervising Licensee" means a Licensee who may supervise supervises the Assistant
15		in the absence of the Primary Supervising Licensee to cover variations in work hours.
16	(c) "Assistant"	means an Audiology Assistant who is registered by a Primary Supervising Licensee with the Board.
17	(d) "Registratio	n" means the process through which an Assistant is approved by the Board to work with a Licensee
18	to provide service	ces to the public.
19 20	History Note:	Authority G.S. 90-298.1; 90-304(a)(3);
21		Emergency Adoption Eff. April 24, 2020;
22		Temporary Adoption Eff. June 26, 2020

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TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists		
2. Rule citation & name: 21 NCAC 64 1102 General Requirements		
3. Action: Adoption Amendment Repea		
4. Was this an Emergency Rule: Yes Effective date: April 24, 2020	· · ·	
5. Provide dates for the following actions as applicable:		
a. Proposed Temporary Rule submitted to OAH: April 16, 2020		
b. Proposed Temporary Rule published on the OAH website: April 22, 2020	· · ·	
c. Public Hearing date: May 29, 2020		
d. Comment Period: April 23, 2020 through May 29, 2020		
e. Notice pursuant to G.S. 150B-21.1(a3)(2): April 16, 2020		
f. Adoption by agency on: May 29, 2020		
g. Proposed effective date of temporary rule [if other than effective date established and G.S. 150B-21,3];	by G.S. 150B- 21.1(b)	
b. Rule approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]:	i .	
6. Reason for Temporary Action. Attach a copy of any cited law, regulation, or docu	ment necessary for the review.	
 A serious and unforeseen threat to the public health, safety or welfare. The effective date of a recent act of the General Assembly or of the U.S. Cong Cite: Effective date: 	ress.	
 A recent change in federal or state budgetary policy. Effective date of change: A recent federal regulation. Cite: Effective date: A recent court order. Cite order: 		
 State Medical Facilities Plan. Other: 		
Explain: On March 10, 2020, the Governor of North Carolina, by issuing Executive Order No. 116 a response and enact protective measures to help prevent the spread of COVID-19. The COVID-19 is serious illness or death. The COVID-19, previously unidentified in humans, spreads easily from per- COVID-19 begins, it is difficult to contain. The World Health Organization, the Center for Disease Department of Health and Human Services have declared COVID-19 a public health threat and error North Carolina and the NC Department of Health and Human Services recommended high risk person	s a respiratory disease that can result in on to person. Once an outbreak of the Control and Prevention, and the United States gency. On March 12, 2020, the Governor of	

for distance or e-learning, that employers and employees use teleworking technologies, and that mass gatherings should cancel, postpone, and modify these events or offer online streaming services. Additionally, it is in the public's best interestito expand the pool of healthcarc providers, especially in settings where there are high risk individuals (nursing homes, assisted living facilities, etc.) and allow audiology assistants to perform limited tasks that are generally performed by audiologists. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of patients. 06/16/2020 4:21PM FAX

rule is required? The public health threat posed by COVID-19 r distancing, and limit exposure of high risks individuals. It is in the Board's regulated audience's exposure to COVID-19 and allow f emergency. This rule alleviates access to health care concerns du patients. A significant percentage of patients requiring the service individuals. As such, these patients are no longer as able to seek	For relaxed requirements during the time of this public health uring the COVID-19 outbreak and promotes the public safety of set of the Board's regulated public arc cldcrly and school-aged services from the Board's regulated public in traditional settings, s rule will allow for licensees to delegate certain remote activities
· · · ·	
Agency submitted request for consultation on: April 16, Consultation not required. Cite authority:	
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Head*:
Phone: 919-491-7793	Flow Mehled,
E-Mail: enkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mchlcnbacher, AuD
Phone: 336-272-1828	Title: Chair
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncboeslpa.org
RULES REVIEW COMMISSION USE ONLY	
Action taken:	bmitted for RRC Review:
Date returned to agency:	

1	21 NCAC 64 .11	02 is adopted under temporary procedures as follows:
2		
3	21 NCAC 64 .11	02 GENERAL REQUIREMENTS
4	(a) For registrati	on, Assistants must present:
5	(1)	Evidence of high school diploma or equivalent; and
6	(2)	A letter certification of the Assistant's competency Evidence of training provided by a supervising
7		audiologist <u>that attests to one of the following:</u> or education including specific instruction and
8		demonstration of each task the assistant is to perform.
9		(A) the supervising audiologist has trained the Assistant in tasks allowed in Rule .1104;
10		(B) the Assistant has provided the supervising audiologist with evidence that he or she has
11		completed training in the tasks allowed in Rule .1104; or
12		(C) the supervising audiologist has assessed and is satisfied with the competency of the Assistant
13		to perform the tasks allowed in Rule .1104.
14	(b) Authority to	approve the curriculum or the equivalent courses for audiology assistants is vested in the Board of
15	Examiners.	
16	(c) Assistants w	ho conduct pure tone audiometry under general supervision by the licensee must have completed a
17	board approved	certificate program such as Certified Occupational Hearing Conservationists (COHC) or a program
18	with equivalent of	certification requirements.
19	(d) A Licensee v	who is employed full-time (30 hours/week or more) may register to be primary supervisor of no more
20	than two Assista	nts at any one time. A Licensee who is employed part-time (less than 30 hours/week) may register
21	to supervise no n	nore than one Assistant at any one time. The Primary Supervising Licensee shall be responsible for
22	assuring ensure	that the Assistant complies compliance with this Section, the registration process, these rules, and
23	with ethical stand	dards. standards set forth in the Board's Practice Act and rules. Secondary Supervising Licensees in
24	the same practic	ce may also supervise the Assistant, allowing for flexibility in scheduling. provided that such
25	supervision is co	nducted in accordance with the rules set forth in this Section.
26	(e) The Primary	Supervising Licensee must keep the Board appraised of any changes in registration information as
27	<u>follows:</u> <mark>informa</mark>	tion.
28	(1)	Changes of supervising licensee(s) will shall require prior written approval of the Board and should
29		be requested the Primary Supervising Licensee must submit the request in writing at least 10 days
30		prior to the effective date.
31	(2)	The Primary Supervising Licensee must submit changes Changes that do not directly relate to
32		patient care, such as change of address, must be reported to the Board in writing within 10 business
33		days of the effective change. Such changes do not require pre-approval from the Board.
34	(f) The Primary	Supervising Licensee shall remit to the Board an annual registration fee for the Assistant in an amount
35	of forty dollars (\$40.00).
36		
37	History Note:	Authority G.S. 90-298.1; 90-304(a)(3);
38		Emergency Adoption Eff. April 24, 2020. <mark>2020;</mark>

1 of 2

<u>Temporary Adoption Eff. June 26, 2020.</u>



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audio	logists
2. Rule citation & name: 21 NCAC 64 .1103 Licensee Requirements	
3. Action: 🛛 Adoption 🗌 Amendment 🗌 Repeal	· · ·
4. Was this an Emergency Rule: X Yes Effective date: April 24, 2020 No	
5. Provide dates for the following actions as applicable:	
a. Proposed Temporary Rule submitted to OAH: April 16, 2020	
b. Proposed Temporary Rule published on the OAH website: April 22, 2020	
c. Public Hearing date: May 29, 2020	
d. Comment Period: April 23, 2020 through May 29, 2020	
e. Notice pursuant to G.S. 150B-21.1(a3)(2): April 16, 2020	
f. Adoption by agency on: May 29, 2020	
 g. Proposed effective date of temporary rule [if other than effective date established by G.S. 15 and G.S. 150B-21.3]: 	0B- 21.1(b)
h. Rule approved by RRC as a permanent rule [See G.S. 150B-21.3(b2)]:	
6. Reason for Temporary Action. Attach a copy of any cited law, regulation, or document neces	sary for the review.
 A serious and unforeseen threat to the public health, safety or welfare. The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: 	· · · · · · · · · · · · · · · · · · ·
Effective date:	
A recent change in federal or state budgetary policy.	1
Effective date of change: A recent federal regulation. Cite:	
Effective date:	
Cite order:	
 State Medical Facilities Plan. Other: 	
Explain: On March 10, 2020, the Governor of North Carolina, by issuing Executive Order No. 116, declared a s a response and enact protective measures to help prevent the spread of COVID-19. The COVID-19 is a respirator serious illness or death. The COVID-19, previously unidentified in humans, spreads easily from person to person COVID-19 begins, it is difficult to contain. The World Health Organization, the Center for Disease Control and F Department of Health and Human Services have declared COVID-19 a public health threat and emergency. On N North Carolina and the NC Department of Health and Human Services recommended high risk persons stay at hor	y discase that can result in Once an outbreak of the revention, and the United States farch 12, 2020, the Governor of

for distance or c-learning, that employers and employees use teleworking technologies, and that mass gatherings should cancel, postpone, and modify these events or offer online streaming services. Additionally, it is in the public's best interest to expand the pool of healthcare providers, especially in settings where there are high risk individuals (nursing homes, assisted living facilities, etc.) and allow audiology assistants to perform limited tasks that are generally performed by audiologists. This rule alleviates access to health care concerns during the COVID-19 outbreak and promotes the public safety of patients. 06/16/2020 4:21PM FAX

7. Why is adherence to notice and hearing requirements contr rule is required? The public health threat posed by COVID-19 re distancing, and limit exposure of high risks individuals. It is in the Board's regulated audience's exposure to COVID-19 and allow fo emergency. This rule alloviates access to health care concerns dur patients. A significant percentage of patients requiring the service individuals. As such, these patients are no longer as able to seek s such as medical offices and schools, because of COVID-19. This to audiology assistants to address the needs of their patients in a m	quires immediate action to limit mass gatherings, increase social e public's interest to immediately adopt rules that limit the or relaxed requirements during the time of this public health ring the COVID-19 outbreak and promotes the public safety of s of the Board's regulated public are elderly and school-aged ervices from the Board's regulated public in traditional settings, rule will allow for licensees to delegate certain remote activities
 8. Rule establishes or increases a fee? (See G.S. 12-3.1) Yes Agency submitted request for consultation on: Consultation not required. Cite authority: No 	
9. Rule-making Coordinator: Nahale Freeland Kalfas Phone: 919-491-7793	10. Signature of Agency Head*:
E-Mail: enkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mchlenbacher, AuD
Phone: 336-272-1828	Title: Chair
E-Mail: dbrown@ncboesipa.org	E-Mail: amehlcnbacher@ncboeslpa.org
Action taken:	nitted for RRC Review:
Date returned to agency:	

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1 21 NCAC 64 .1103 is adopted under temporary procedures as follows:

3 21 NCAC 64 .1103 LICENSEE REQUIREMENTS

- 4 (a) Licensees who register an Assistant must have held a current, permanent license in North Carolina for two years
- or equivalent qualifications from another state. Licensees who register an Assistant shall be licensed in North 5
- 6 Carolina, or hold equivalent qualifications from another state, for the previous two years prior to registering an
- 7 Assistant with the Board. Temporary license holders shall not register Assistants.
- 8 (b) Licensees who register an Assistant shall attest to the Assistant's must demonstrate understanding and review of
- 9 the basic elements of the registration and supervision process (scope of practice, ethics, written protocols, record
- 10 keeping), keeping) set forth in the Rules of this Section. and should satisfactorily complete a demonstration of
- knowledge and skills of tasks on the registration/supervision process. 11
- 12 (c) Licensees must submit the application and annual fee for registration of the Assistant to the Board.
- 13 (d) Licensees must assure that patients are informed shall inform all patients when services are being provided by an
- 14 Assistant and the Assistant must wear a badge that includes the job title: "Audiology Assistant."
- 15 (e) Tasks and duties that are within the scope of responsibilities for an Assistant are listed in Rules .1104 and .1105
- of this Section. The standards for all patient services provided by the Assistant are the full responsibility of the 16
- Supervising Licensee and cannot be delegated. The Supervising Licensee shall be responsible for all patient services 17
- performed by the Assistant. Therefore, the assignment of tasks and the amount and type of supervision must be 18
- 19 determined by the Supervising Licensee to ensure quality of care considering: the skills of the Assistant, needs of the
- patient, the service setting, the tasks assigned, and any other relevant factors. The Supervising Licensee shall 20
- 21 determine the assignment of tasks and the amount and type of supervision to ensure quality of care considering relevant
- 22 factors such as the skills of the Assistant, the needs of the patient, and the service setting. Before assigning treatment
- 23 tasks to an Assistant, the Licensee must have first evaluated shall evaluate the patient files and developed develop a
- 24 plan for the care and/or follow an established protocol.
- 25 (f) For every patient encounter (screening or treatment) in which an Assistant provides service, there must be
- 26 documentation of the Assistant's services provided in the patient's medical record and co signed by a Supervising
- 27 Licensee 100% of the time. Any time an Assistant provides services during a patient encounter (screening or
- 28 treatment), the Supervising Licensee or Assistant shall document the Assistant's services in the patient's medical
- 29 record. If the Assistant documents the services, the Supervising Licensee shall sign co-sign the medical record. The
- Supervising Licensee has full responsibility shall be responsible for the accuracy and compliance of the 30
- 31 documentation. These signed and dated patient encounter records must be retained as part of the patient's file for the
- 32 time period specified in Rule .0209 of this Chapter and may be requested by the Board.
- 33 (g) The Board may do random audits of records to determine compliance with the Rules in this Chapter. its rules.
- 34 (h) When patient services are being rendered by an Assistant, the Supervising Licensee must be available to observe
- and supervise the Assistant, when necessary. accessible to the Assistant in order to assure that direct observation and 35
- supervision can occur when necessary. 36

1 (i) The Primary Supervising Licensee shall assess the Assistant's competencies during the initial 60 days of 2 employment using a performance-based competency assessment. The completed assessment shall be submitted to the 3 Board within 90 days of registration. A new competency assessment must be completed and filed within 90 days each 4 time the Primary Supervising Licensee changes. (j) Any attempt to engage in those activities and responsibilities reserved solely for the Supervising Licensee 5 6 Assistants shall only engage in those activities related to the practice of Audiology as set forth in Rules .1104 and 7 .1105 of this Section. An Assistant's activities related to the practice of Audiology not set forth therein shall be 8 regarded as the unlicensed practice of Audiology. 9 10 Authority G.S. 90-298.1; 90-304(a)(3) History Note: 11 Emergency Adoption Eff. April 24, 2020; 2020. 12 Temporary Adoption Eff. June 26, 2020.



promotes the public safety of patients.

TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of E	xaminers for Speech and L	anguage Pathologists	and Audiolog	(ists
2. Rule citation & name: 21 NCAC 64 .1	104 Authorized Tasks of A	Audiology Assistants		
3. Action: 🔀 Adoption	Amendment	🗌 Repeal	,	
4. Was this an Emergency Rule: 🛛 Yes	s Effective date: Ap	ril 24, 2020		
5. Provide dates for the following actions	s as applicable:		'	
a. Proposed Temporary Rule submitte	d to OAH: April 16, 2020	• *		
b. Proposed Temporary Rule published	d on the OAH website: A	pril 22, 2020		
c. Public Hearing date: May 29, 2020		-		
d. Comment Period: April 23, 2020 thr	ough May 29, 2020			
e. Notice pursuant to G.S. 150B-21.1(a	-			
f. Adoption by agency on: May 29, 202			:	
g. Proposed effective date of temporary and G.S. 150B-21.3]:		ive date established	by G.S. 150B	– 21.1(b)
h. Rule approved by RRC as a perman	tent rule [See G.S. 150B-2	1.3(b2)]:		
6. Reason for Temporary Action. Attac	h a copy of any cited law,	regulation, or docu	ment necessar	y for the review.
 A serious and unforeseen threat t The effective date of a recent act Cite: Effective date: 			ess.	
A recent change in federal or stat	e budgetary policy.			
Effective date of change:			•	
Cite:				
Effective date:				
Cite order:				н. 1
State Medical Facilities Plan.				
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Explain: On March 10, 2020, the Governor of a response and enact protective measures to help serious illness or death. The COVID-19, previo COVID-19 begins, it is difficult to contain. The Department of Health and Human Services have North Carolina and the NC Department of Health for distance or e-learning, that employers and er modify these events or offer online streaming se especially in settings where there are high risk in limited tasks that are generally performed by au	b prevent the spread of COVII ously unidentified in humans, s World Health Organization, i declared COVID-19 a public th and Human Services recom- nployees use teleworking tech ervices. Additionally, it is in the ndividuals (nursing homes, as	D-19. The COVID-19 is preads easily from pers the Center for Discase C health threat and emery mended high risk perso nologies, and that mass the public's best interest sisted living facilities, e	s a respiratory d on to person. O control and Prev gency. On Marc ns stay at home, gatherings shou to expand the p tc.) and allow at	iscase that can result in once an outbreak of the vention, and the United States ch 12, 2020, the Governor of that schools implement plans ald cancel, postpone, and ool of healthcare providers, udiology assistants to perform

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rule is required? The public health threat posed by COVID-19	ntrary to the public interest and the immediate adoption of the Prequires immediate action to limit mass gatherings, increase social
patients. A significant percentage of patients requiring the serv	of for relaxed requirements during the time of this public health during the COVID-19 outbreak and promotes the public safety of rices of the Board's regulated public are elderly and school-aged
andividuals. As such, these patients are no longer as able to see such as medical offices and schools, because of COVID-19. The to audiology assistants to address the needs of their patients in a	sk services from the Board's regulated public in traditional settings, his rule will allow for licensees to delegate certain remote activities a manner that better protects them from COVID-19.
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· · · ·	
8. Rule establishes or increases a fee? (See G.S. 12-3.1)	
Yes Agency submitted request for consultation on: Consultation not required. Cite authority:	
No No	
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Head*:
Phone: 919-491-7793	Man Mellah
E-Mail: enkalfas@aol.com	* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mehlenbacher, AuD
Phone: 336-272-1828	Title: Chair
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncboeslpa.org
RULES REVIEW COMMISSION USE ONLY	المحير محمد النائي التكليبي المحمد المتعادية المتحد المحد
	Submitted for RRC Review:
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Date returned to avency:	

[•] Temporary Rule 0500 – 11/2014

21 NCAC 64	.1104 AUTHORIZED TASKS OF AUDIOLOGY ASSISTANTS
(a) Direct Pa	tient Services: An audiology assistant may engage in the following direct patient services:
(1)	Obtaining partial or selected case history information from patients and and/or families: families.
(2)	Administering audiologic screening protocols, as directed by the supervising audiologist. These
	screening procedures, including tests and checklists or parts of tests and checklists, will shall have
	the purpose of determining the need for further diagnostic (diagnostic) testing by the supervising
	audiologist and must meet the following criteria:
	(A) Have have unambiguous administration protocols and methods; methods.
	(B) Consist consist of test items that which require no more than a binary judgment (i.e., yes-
	no, <mark>present-absent);</mark> present absent).
	(C) Require require no more than a specifically-elicited single response; and response.
	(D) Require require no clinical interpretation by the assistant; assistant.
(3)	Preparing or positioning patients for evaluation or treatment following specific guidelines of the
	supervising audiologist and of the <u>facility</u> ; facility.
(4)	Direct patient services for evaluation are not within the approved scope of responsibilities for
	assistants who are not Certified Occupational Hearing Conservationists (COHC). Audiology
	assistants who are not COHC may assist in the evaluation of both pediatric and adult patients, but
	only under the direct supervision of the supervising audiologist who is present in the room and
	attending to the assistant's activities 100% of the time. Audiology Assistants who are COHC may
	conduct unmasked pure-tone audiometry under general supervision by the licensee for adult
	patients. Direct patient services to children under the age of 21 years old are not within the approved
	scope of activities for assistants unless under the direct supervision of the supervising audiologist
	who is physically present in the room and attending to 100% of the assistant's activities; activities.
(5)	Basic hearing device repair and trouble shooting; shooting.
(6)	Assistance with procedures related to the fitting and dispensing of hearing devices: devices.
(7)	Instructing patients in care and use of devices dispensed by the supervising audiologist; and
	audiologist.
(8)	Providing services previously mentioned through telehealth to extend access to clinical care.
(b) <mark>Indirect l</mark>	Patient Services: An audiology assistant may engage in the following indirect patient services:
(1)	Respecting the rights and dignity of all individuals.
<mark>(1)(</mark>	++
	of this Chapter or illegal to the supervising audiologist or to the Board of Examiners: Examiners.
<mark>(2)(.</mark>	Requesting assistance from the supervising audiologist, as needed, in order to ensure continuous
	service <u>quality:</u> quality.
<mark>(3)(</mark>	B Observing universal precautions and safety procedures: procedures.

21 NCAC 64 .1104 is adopted under temporary procedures as follows:

1	<mark>(4)(5)</mark>	Releasing patients only to the care of appropriate care-givers of record; and care-givers.
2	<mark>(5)(6)</mark>	Participating in research activities as approved by an the institution's Institutional Review Board
3		and oversight committees.
4 5	History Note:	Authority G.S. 90-298.1; 90-304(a)(3)

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TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

VOLUME:

OAH USE ONLY

ISSUE:

1. Rule-Making Agency: State Board of	f Examiners for Speech and La	nguage Pathologists	s and Audiologists	
2. Rule citation & name: 21 NCAC 64	.1105 Supervision and Conti	uing Competence R	Requirements	
3. Action: 🛛 Adoption		🔲 Repeal		
	Yes Effective date: Apr No	il 24, 2020	· .	
5. Provide dates for the following acti	ons as applicable:			
a. Proposed Temporary Rule submi	tted to OAH: April 16, 2020			
b. Proposed Temporary Rule publis	hed on the OAH website: Ag	ril 22, 2020		
c. Public Hearing date: May 29, 202	0			
d. Comment Period: April 23, 2020	through May 29, 2020			
e. Notice pursuant to G.S. 150B-21.	(a3)(2): April 16, 2020	-		
f. Adoption by agency on: May 29, 2	2020			
g. Proposed effective date of tempor and G.S. 150B-21.3];	ary rule [if other than effecti	ve date established	by G.S. 150B- 21.1(b)	,
h. Rule approved by RRC as a pern	anent rule [See G.S. 150B-2]	.3(b2)]:		
6. Reason for Temporary Action. Att	ach a copy of any cited law, r	egulation, or docu	ment necessary for the	e review.
A serious and unforescen threa The effective date of a recent a Cite:			ess.	
Effective date:	tate budgetary policy.			
Effective date of change:			1	
A recent federal regulation. Cite:				· .
Effective date:				
A recent court order. Cite order:				
State Medical Facilities Plan.				
Other:				,
Explain: On March 10, 2020, the Governor a response and enact protective measures to b scrious illness or death. The COVID-19, pre COVID-19 begins, it is difficult to contain. Department of Health and Human Services h North Carolina and the NC Department of He for distance or e-learning, that employers and modify these events or offer online streaming especially in settings where there are high ris limited tasks that are generally performed by promotes the public safety of patients.	elp prevent the spread of COVID- viously unidentified in humans, sp the World Health Organization, th ave declared COVID-19 a public f eath and Human Services recomm employees use teleworking techn services. Additionally, it is in the k individuals (nursing homes, assi	19. The COVID-19 is reads easily from pers e Center for Disease G ealth threat and emerg ended high risk perso ologics, and that mass public's best interest sted living facilities, e	s a respiratory disease that on to person. Once an ou control and Prevention, an gency. On March 12, 202 hs stay at home, that school gatherings should cancel, to expand the pool of hea te.) and allow audiology a	t can result in tbreak of the d the United States 0, the Governor of ols implement plans postpone, and ltheare providers, ssistants to perform

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7. Why is adherence to notice and hearing requirements contra- rule is required? The public health threat posed by COVID-19 re- distancing, and limit exposure of high risks individuals. It is in the Board's regulated audience's exposure to COVID-19 and allow for emergency. This rule alleviates access to health care concerns dur patients. A significant percentage of patients requiring the service individuals. As such, these patients are no longer as able to seek s such as medical offices and schools, because of COVID-19. This is to audiology assistants to address the needs of their patients in a m	quires immediate action to limit mass gatherings, increase social e public's interest to immediately adopt rules that limit the r relaxed requirements during the time of this public health ing the COVID-19 outbreak and promotes the public safety of s of the Board's regulated public are elderly and school-aged ervices from the Board's regulated public in traditional settings, rule will allow for licensees to delegate certain remote activities
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8. Rule establishes or increases a fee? (See G.S. 12-3.1)	
Yes Agency submitted request for consultation on: Consultation not required. Cite authority:	· · · · · · · · · · · · · · · · · · ·
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	•
9. Rule-making Coordinator: Nahale Freeland Kalfas	10. Signature of Agency Head*:
Phone: 919-491-7793	An Mal al
E-Mail: cnkalfas@aol.com	* If this function has been delegated (reassigned) pursuant
· · · · · · · · · · · · · · · · · · ·	to G.S. 143B-10(a), submit a copy of the delegation with this form.
Agency contact, if any: Denise Sherwood Brown	Typed Name: Adam Mehlenbacher, AuD
Phone: 336-272-1828	Title: Chair
E-Mail: dbrown@ncboeslpa.org	E-Mail: amehlenbacher@ncboeslpa.org
RULES REVIEW COMMISSION USE ONLY	
Action taken:	omitted for RRC Review.
Date returned to agency:	
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3	21 NCAC 64 .11	105 SUPERVISION AND CONTINUING COMPETENCE REQUIREMENTS
4	Following regist	ration by a supervising audiologist, a registered assistant shall:
5	(1)	Discussing discuss job expectations with the supervising audiologist(s) in order to have a and having
6		mutual understanding of job scope and specific responsibilities. responsibilities;
7	(<u>1)(2)</u>	Participating participate in a specified amount of supervised training according to a written plan for
8		all tests and clinical equipment which that will be used for assessment and treatment. treatment of
9		the patient;
10	<mark>(2)(3)</mark>	Receiving receive regular, formal employment evaluations on a scheduled basis from the
11		supervising audiologist(s) to assess one's the assistant's performance, strengths, and weaknesses of
12		the assistant and to establish development goals for continuous performance improvement.
13		improvement;
14	<mark>(3)(4)</mark>	requesting request assistance, additional instruction, and/or and additional supervision from the
15		supervising audiologist, when needed. needed:
16	<mark>(4)(5)</mark>	participating participate in various types of educational activities in order to enhance skill and
17		knowledge, as assigned by the supervising audiologist. audiologist; and
18	<mark>(5)(6)</mark>	Reading read information assigned by the audiologist.
19		
20	History Note:	Authority G.S. 90-298.1; 90-304(a)(3);
21		Emergency Adoption Eff. April 24, <mark>2020.</mark> 2020;
22		Temporary Adoption Eff. June 26, 2020.

1 21 NCAC 64 .1105 is adopted under temporary procedures as follows: