



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

ISSUE:

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: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal		
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 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, or document necessary for the review.		
<input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> 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 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 patients.		

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.

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

E-Mail: cnkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

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

21 NCAC 64 .0108 WAIVER

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 Board shall use in determining whether to grant the waiver are:

- (1) degree of disruption to the Board;
- (2) cost to the Board;
- (3) degree of benefit to the public;
- (4) whether the requesting party had control over the circumstances that required the requested waiver;
- (5) notice to and opposition by the public;
- (6) need for the waiver; and
- (7) previous requests for waivers submitted from the requesting party.

~~(b) The Board may waive any rule in this Chapter that is not statutorily required upon its own initiative during a 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 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 provide notice by posting a link on their website and sending out information to their interested persons mailing list.~~

~~(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 waiver is granted.~~

History Note: Authority G.S. 90-304; 150B-19(6)

Emergency Adoption Eff. April 24, 2020; 2020:

Temporary Adoption Eff. June 26, 2020.



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

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: <input type="checkbox"/> Adoption <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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	
e. 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. 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 necessary for the review.	
<input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other:	
<p>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 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 patients.</p>	

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. Additionally, it is in 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? (Sec 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

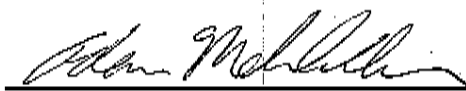
E-Mail: enkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

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

21 NCAC 64 .0219 TELEPRACTICE

(a) In light of the State of Emergency declared by Executive Order No. 116, issued March 10, 2020, the Board shall temporarily waive the requirement for licensure for telepractice in order to allow speech and language pathologists to delegate authorized tasks allowed pursuant to 21 NCAC 64 .0114 by telepractice to speech and language pathology-assistants under the same level of direct supervision as required by 21 NCAC 64 ~~.1003(e)(1)(2)~~ .1003(e)(1).(2) and (6). This temporary waiver of licensure shall apply only to speech and language pathology-assistants and shall continue for the duration of the declared emergency as set forth in Executive Order No. 116 issued March 10, 2020.

~~(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.

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

~~(e)(d)~~ Telepractice is subject to the same standard of practice stated in Rules .0205 and .0216 of this Chapter as if the person being treated were physically present with the licensee. Telepractice is the responsibility of the licensee. licensee and shall not be delegated.

~~(d)(e)~~ Telepractice constitutes the practice of Speech and Language Pathology and Audiology in both the patient site and provider site. Providers must hold a license in the state of the provider site and shall be in compliance with the statutory and regulatory requirements of the patient site.

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

~~(f)(g)~~ Notification of telepractice services shall be provided to the patient and guardian if the patient is a minor. The notification shall include the right to refuse telepractice services and options for alternate service delivery.

~~(g)(h)~~ Telepractice constitutes the practice of Speech and Language Pathology and Audiology in both the patient site and provider site.

*History Note: Authority G.S. 90-304(a)(3)
Eff. July 1, 2020
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 *Temporary Amendment Eff. June 26, 2020.*



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

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: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 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, or document necessary for the review.	
<input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other:	
<p>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 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 patients.</p>	

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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

9. Rule-making Coordinator: Nahale Freeland Kalfas

Phone: 919-491-7793

E-Mail: cnkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

21 NCAC 64 .1101 is adopted under temporary procedures as follows:

**SECTION .1100 - REQUIREMENTS FOR THE USE OF AUDIOLOGY ASSISTANTS IN DIRECT
SERVICE DELIVERY**

21 NCAC 64 .1101 DEFINITIONS

(a) "Board" means the North Carolina Board of Examiners for Speech and Language Pathologists and Audiologists.

(b) "Licensee" means an individual who holds a current permanent license in audiology from the North Carolina Board of Examiners for Speech and Language Pathologists and Audiologists.

(1) "Primary Supervising Licensee" means the Licensee who supervises the majority of the Assistant's work, who is responsible for the Assistant's registration with the Board, and who bears the responsibility for all supervision requirements and notification responsibility to the Board of any changes in registration information **set forth in the Rules of this Section.**

(2) "Secondary Supervising Licensee" means a Licensee who ~~may supervise~~ **supervises** the Assistant in the absence of the Primary Supervising Licensee to cover variations in work hours.

(c) "Assistant" means an Audiology Assistant who is registered by a Primary Supervising Licensee with the Board.

(d) "Registration" means the process through which an Assistant is approved by the Board to work with a Licensee to provide services to the public.

*History Note: Authority G.S. 90-298.1; 90-304(a)(3);
Emergency Adoption Eff. April 24, 2020;
Temporary Adoption Eff. June 26, 2020*



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

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: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 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, or document necessary for the review.	
<input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other:	
<p>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 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 patients.</p>	

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.

8. Rule establishes or increases a fee? (See G.S. 12-3.1)

☒ Yes

Agency submitted request for consultation on: April 16, 2020

Consultation not required. Cite authority:

☐ No

9. Rule-making Coordinator: Nahale Freeland Kalfas

Phone: 919-491-7793

E-Mail: enkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

21 NCAC 64 .1102 is adopted under temporary procedures as follows:

21 NCAC 64 .1102 GENERAL REQUIREMENTS

(a) For registration, Assistants must present:

(1) Evidence of high school diploma or equivalent; and

(2) A letter certification of the Assistant's competency ~~Evidence of training~~ provided by a supervising audiologist that attests to one of the following: ~~or education including specific instruction and demonstration of each task the assistant is to perform.~~

(A) the supervising audiologist has trained the Assistant in tasks allowed in Rule .1104;

(B) the Assistant has provided the supervising audiologist with evidence that he or she has completed training in the tasks allowed in Rule .1104; or

(C) the supervising audiologist has assessed and is satisfied with the competency of the Assistant to perform the tasks allowed in Rule .1104.

~~(b) Authority to approve the curriculum or the equivalent courses for audiology assistants is vested in the Board of Examiners.~~

(c) Assistants who conduct pure tone audiometry under general supervision by the licensee must have completed a ~~board approved certificate program such as~~ Certified Occupational Hearing Conservationists (COHC) or a program with equivalent certification requirements.

(d) A Licensee who is employed full-time (30 hours/week or more) may register to be primary supervisor of no more than two Assistants at any one time. A Licensee who is employed part-time (less than 30 hours/week) may register to supervise no more than one Assistant at any one time. The Primary Supervising Licensee shall ~~be responsible for assuring ensure~~ that the Assistant complies ~~compliance~~ with this Section, ~~the registration process, these rules,~~ and with ethical ~~standards.~~ standards set forth in the Board's Practice Act and rules. Secondary Supervising Licensees in the same practice may also supervise the Assistant, ~~allowing for flexibility in scheduling.~~ provided that such supervision is conducted in accordance with the rules set forth in this Section.

(e) The Primary Supervising Licensee must keep the Board apprised of any changes in registration ~~information as follows:~~ information.

(1) Changes of supervising licensee(s) ~~will shall~~ require prior written approval of the Board and ~~should be requested~~ the Primary Supervising Licensee must submit the request in writing at least 10 days prior to the effective date.

(2) The Primary Supervising Licensee must submit changes ~~Changes~~ that do not directly relate to patient care, such as change of address, ~~must be reported~~ to the Board in writing within 10 business days of the effective change. Such changes do not require pre-approval from the Board.

(f) The Primary Supervising Licensee shall remit to the Board an annual registration fee for the Assistant in an amount of forty dollars (\$40.00).

History Note: Authority G.S. 90-298.1; 90-304(a)(3);

Emergency Adoption Eff. April 24, 2020: 2020.

Temporary Adoption Eff. June 26, 2020.



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists	
2. Rule citation & name: 21 NCAC 64 .1103 Licensee Requirements	
3. Action: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 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, or document necessary for the review. <input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other:	
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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.

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

E-Mail: enkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

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

21 NCAC 64 .1103 LICENSEE REQUIREMENTS

(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 Carolina, or hold equivalent qualifications from another state, for the previous two years prior to registering an Assistant with the Board. Temporary license holders shall not register Assistants.

(b) Licensees who register an Assistant ~~shall attest to the Assistant's must demonstrate~~ understanding ~~and review~~ of ~~the basic elements of~~ the registration and supervision process (scope of practice, ethics, written protocols, record 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.

(c) Licensees must submit the application and annual fee for registration of the Assistant to the Board.

(d) Licensees ~~must assure that patients are informed~~ shall inform all patients when services are being provided by an Assistant and the Assistant must wear a badge that includes the job title: "Audiology Assistant."

(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 Supervising Licensee and cannot be delegated. The Supervising Licensee shall be responsible for all patient services performed by the Assistant. Therefore, the assignment of tasks and the amount and type of supervision must be 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 determine the assignment of tasks and the amount and type of supervision to ensure quality of care considering relevant factors such as the skills of the Assistant, the needs of the patient, and the service setting.~~ Before assigning treatment tasks to an Assistant, the Licensee ~~must have first evaluated~~ shall evaluate the patient files and ~~developed~~ develop a plan for the care and/or follow an established protocol.

(f) ~~For every patient encounter (screening or treatment) in which an Assistant provides service, there must be documentation of the Assistant's services provided in the patient's medical record and co-signed by a Supervising Licensee 100% of the time. Any time an Assistant provides services during a patient encounter (screening or treatment), the Supervising Licensee or Assistant shall document the Assistant's services in the patient's medical 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 documentation. These signed and dated patient encounter records must be retained as part of the patient's file for the time period specified in Rule .0209 of this Chapter and may be requested by the Board.

(g) The Board may do random audits of records to determine compliance with ~~the Rules in this Chapter. its rules.~~

(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 supervision can occur when necessary.

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.

5 (j) ~~Any attempt to engage in those activities and responsibilities reserved solely for the Supervising Licensee~~
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 *History Note: Authority G.S. 90-298.1; 90-304(a)(3)*

11 *Emergency Adoption Eff. April 24, 2020; 2020.*

12 *Temporary Adoption Eff. June 26, 2020.*



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists	
2. Rule citation & name: 21 NCAC 64 .1104 Authorized Tasks of Audiology Assistants	
3. Action: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Effective date: April 24, 2020	
5. Provide dates for the following actions as applicable: <ul style="list-style-type: none"> 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. 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, or document necessary for the review. <ul style="list-style-type: none"> <input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other: <p>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 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 patients.</p>	

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.

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

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Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

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

21 NCAC 64 .1104 AUTHORIZED TASKS OF AUDIOLOGY ASSISTANTS

(a) ~~Direct Patient 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, ~~present-absent~~); ~~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 ~~facility; 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) ~~Indirect Patient Services:~~ An audiology assistant may engage in the following indirect patient services:

- ~~(1) — Respecting the rights and dignity of all individuals.~~
- (1)(2) Reporting any workplace conduct ~~that which~~ appears to be unethical ~~in violation of Section .0300 of this Chapter~~ or illegal to the supervising audiologist or to the Board of ~~Examiners; Examiners.~~
- (2)(3) Requesting assistance from the supervising audiologist, as needed, in order to ensure continuous service ~~quality; quality.~~
- (3)(4) Observing universal precautions and safety ~~procedures; procedures.~~

- 1 (4)(5) Releasing patients only to the care of appropriate care-givers of record; and care-givers.
2 (5)(6) 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)*



TEMPORARY RULE-MAKING FINDINGS OF NEED

[Authority G.S. 150B-21.1]

OAH USE ONLY

VOLUME:

ISSUE:

1. Rule-Making Agency: State Board of Examiners for Speech and Language Pathologists and Audiologists	
2. Rule citation & name: 21 NCAC 64 .1105 Supervision and Continuing Competence Requirements	
3. Action: <input checked="" type="checkbox"/> Adoption <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal	
4. Was this an Emergency Rule: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 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 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, or document necessary for the review.	
<input checked="" type="checkbox"/> A serious and unforeseen threat to the public health, safety or welfare. <input type="checkbox"/> The effective date of a recent act of the General Assembly or of the U.S. Congress. Cite: Effective date: <input type="checkbox"/> A recent change in federal or state budgetary policy. Effective date of change: <input type="checkbox"/> A recent federal regulation. Cite: Effective date: <input type="checkbox"/> A recent court order. Cite order: <input type="checkbox"/> State Medical Facilities Plan. <input type="checkbox"/> Other:	
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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

9. Rule-making Coordinator: Nahale Freeland Kalfas

Phone: 919-491-7793

E-Mail: cnkalfas@aol.com

Agency contact, if any: Denise Sherwood Brown

Phone: 336-272-1828

E-Mail: dbrown@ncboeslpa.org

10. Signature of Agency Head*:



* If this function has been delegated (reassigned) pursuant to G.S. 143B-10(a), submit a copy of the delegation with this form.

Typed Name: Adam Mehlenbacher, AuD

Title: Chair

E-Mail: amehlenbacher@ncboeslpa.org

RULES REVIEW COMMISSION USE ONLY

Action taken:

Submitted for RRC Review:

☐ Date returned to agency:

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

21 NCAC 64 .1105 SUPERVISION AND CONTINUING COMPETENCE REQUIREMENTS

Following registration by a supervising audiologist, a registered assistant shall:

- (1) ~~Discussing~~ discuss job expectations with the supervising audiologist(s) ~~in order to have a~~ and having mutual understanding of job scope and ~~specific responsibilities.~~ responsibilities;
- ~~(1)(2)~~ ~~Participating~~ participate in a specified amount of supervised training according to a written plan for all tests and clinical equipment ~~which~~ that will be used for assessment and ~~treatment.~~ treatment of the patient;
- ~~(2)(3)~~ ~~Receiving~~ receive regular, ~~formal~~ employment evaluations on a scheduled basis from the supervising audiologist(s) to assess ~~one's~~ the assistant's performance, strengths, and weaknesses of the assistant and to establish development goals for continuous performance ~~improvement.~~ improvement;
- ~~(3)(4)~~ ~~requesting~~ request assistance, additional instruction, ~~and/or~~ and additional supervision from the supervising audiologist, when ~~needed.~~ needed;
- ~~(4)(5)~~ ~~participating~~ participate in various types of educational activities in order to enhance skill and knowledge, as assigned by the supervising ~~audiologist.~~ audiologist; and
- ~~(5)(6)~~ ~~Reading~~ read information assigned by the audiologist.

*History Note: Authority G.S. 90-298.1; 90-304(a)(3);
Emergency Adoption Eff. April 24, 2020; 2020;
Temporary Adoption Eff. June 26, 2020.*