

**DEPARTMENT OF HEALTH
HEALTH REGULATION AND LICENSING ADMINISTRATION**

BOARD OF AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY

AUTHORITY FOR GUIDANCE

23-001
POLICY NO.

June 20, 2023
DATE OF POLICY

POLICY STATEMENT - EXTENDED INDEFINITELY

**(CLARIFICATION OF BOARD APPLICATION
REQUIREMENTS)**

In March of 2020, the Mayor and the Director of DC Health issued a Telehealth Waiver for Health Care Professionals in good standing with another state or jurisdiction, granting permission to provide telehealth services to residents residing in the District of Columbia due to the, then, ongoing COVID-19 Pandemic and those efforts to reduce the spread of the virus. The DC Council had extended the ability to practice under this waiver until August 10, 2022. **Thus, this Waiver ended on August 10, 2022.**

Telehealth is considered a method of service delivery, and the current, applicable regulations apply to all methods of service delivery, including Telehealth. Therefore, the individual licensee is responsible for using professional judgment to determine if the type of service can be delivered via Telehealth at the same standard of care as in-person service.

The Board *had* excused the requirement for pre-license supervised experience for Speech-Language Pathology and Audiology to be provided on a continuous basis if such continuous experience could not be completed during the *former* State of Emergency declared by the Mayor relating to the COVID-19 health crisis. For the duration of the *prior* state of emergency, the requirement that supervised experience be obtained on a “continuous” basis had been suspended. **However, individuals can now resume their supervised experience where they left off before it was interrupted by COVID-19.**

Clinical fellows are allowed to utilize Telehealth, and Telehealth is permissible for the completion of supervised experience. **However, all supervision of direct patient care must now be in-person,** and Telehealth should not be used as the sole modality, while earning experience toward licensure.

A clinical fellow can be supervised remotely. Appropriate supervision can be provided through the use of distance technology. However, individuals earning their experience will still need direct, regular *real-time* interactions with their supervisor whether that is accomplished through modern telecommunication technology, or in person. **Further, for emphasis, all supervision of direct patient care must be in-person.**

District regulations require that practitioners complete a portion of their continuing education courses in live, in-person settings, in order for the practitioner to renew their license,

registration, or certificate with the Department. The Board finds there had been a disruption of traditional in-person methods of education, including the in-person continuing education courses that practitioners must complete, in order to renew their health occupation licenses, registrations, or certificates with the Department. The Board recognizes that the COVID-19 pandemic made in-person continuing education instruction generally unavailable and, that *post-pandemic a hybrid model for CEs has become commonplace. The Board, therefore, will allow alternatives to the in-person continuing education requirement imposed on professionals.*

Moreover, the Board, at its discretion, **will accept continuing education courses that are completed via remote instruction** (e.g., **broadcasted live via the internet**) in lieu of courses that must be completed via in-person instruction when extraordinary circumstances, such as the COVID-19 pandemic, make attending in-person continuing education courses an undue hardship for license, registration, or certificate-holders regulated by the Board. (The Board may also exempt holders of a license, registration, or certificate from the continuing education requirements in *certain* circumstances.) It is imperative to the health, welfare, and safety of the residents of the District of Columbia that health practitioners be provided a pathway to retain their licenses and continue to provide needed healthcare in extraordinary circumstances.

The Board, therefore, issues this guidance and extends this policy statement indefinitely. Further updates and extensions may be put forth as needed.

All inquiries pertaining to the practice of audiology and speech-language pathology, including this policy, may be directed to the Board at dcboaud@dc.gov.

