

SOUND DECISIONS: APPLYING ETHICS IN EVERYDAY AUDIOLOGY

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Goals

- Ethics is ever changing and evolving. This presentation will focus on both the foundations of ethics and integrating these principles into the present and the future. Ethical decision making will be highlighted and addressing ethical dilemmas will be presented. Cases will be provided for discussion. The ethics of care will be described as a clinical and counseling tool.
- After attending this session, participants will be able to:
 1. Describe components of ethical practice, specifically in educational audiology
 2. Define ethics of care.
 3. State future considerations for ethical practice

Where do professions learn about ethics?

- Infused into clinical education programs
 - "Read" code of ethics...necessary but might be a big yawn
 - In courses, discussion, etc.
- Ongoing in profession
 - Case based
 - Principle drive (evidence based practice)
 - Both count
- Required in licensure, certification, etc.

WHAT IS/are ETHICS?

Ethics is commonly misunderstood and seen as a black and white decision

- May be black and white or “perfect” in theory but many “shades of gray” in practice
- Addresses all “wrong doings”
- Designed to police professional relationships?
- Some absolutes with many opportunities to think critically about ethics
 - Example: Objectivity in dual relationships

Ethics is commonly misunderstood and seen as a black and white

- Historically, this was “easy”
 - Don’t have sex with patients/students
 - Don’t “rip” people off, sell them services when they don’t need them, etc.
 - Don’t be impaired at work

in the past FEW decades
“ ethical practices in Healthcare have received
increased scrutiny and study...” (Franklin et al,
2014)

WHY?

Some ideas: HIPAA, moving away from
paternalistic/maternalistic healthcare/educational
services, shared decision making, the Internet, social
media, among many others!

Ethics:

- A moral philosophy or set of moral principles that determine appropriate behavior in society
- A code of conduct
- Healthcare/educational ethics: Focus on well-being, and quality of life **for those we serve** (notice that the student is the center of this decision making)
 - (Kummer and Turner, 2011).

Defining ethics: the basics

- Principles of right and wrong
- Principles and values that guide a profession
- Commitment to patients and providing quality care

Contrasting ethics and morals

- Morals refer to a personal and private set of interactions
 - Your **internal** compass or NorthStar
 - “Good and bad behavior”
 - Right and wrong behavior
- Ethics refers to professional interactions
 - External source
 - Guide behavior
 - May guide performing of an activity

Contrasting ethics and the law

- **Law** is the system of rules that a particular country or community recognizes as regulating the actions of its members and may enforce by the imposition of penalties.
 - Law governs society as a whole, often dealing with interactions between total strangers
 - Everyone is governed by the same set of laws

Ethics, Morals, and Laws
have considerable overlap

There are also times that these are in
contrast with each other

Professions vs. jobs

- Discussion to whom ethics does/should apply
- Professions have codes of ethics that guide their behavior
- Are “jobs” guided by this?
 - Marketing perspective: Plumbers, automotive repair, hearing instrument specialists
 - Why advertise ethics?
 - The “Star Torch Award for Ethics 2016”: A heating business

Professions vs. jobs

- Metz (2016): Professions are guided by ethics, jobs are not (not saying that business principles don't exist!)
- Recognition of what has been stated by Franklin et al.—greater emphasis on ethics

Collegiality as an ethical principle

- How do we relate to each other
- How do we treat each other as professionals
- High tides floating all ships
- Pierscionek (2008): Collegiality is related to mutual respect and understanding

Collegiality as an ethical principle

- “Easy” to practice with those that have a similar outlook and interests...watch for “group think”
- More difficult when a person has different perspective, attitude, or practice setting
- If colleagues practice ethically (not always black and white), personal differences should be put aside
 - You like Oticon and I like Phonak

Collegiality as an ethical principle

- If inappropriate professional behavior is noted/demonstrated/reported, “collegiality cannot be used as an excuse to protect what is wrong” (Pierscioneck, 2008)
 - The expression “Oh you know, that’s just how they are, they don’t mean anything by that”
 - Important point is that if a question arises, don’t need to be the “judge and jury”

Exploring bias

- “Illusion of objectivity”
 - Not just tied to DEI but an overarching concept for us to explore
 - Believe we are free from bias BUT quick to recognize the same bias in others
 - Unconscious (implicit) bias can be contrary to our conscious (explicit) bias
 - These biases are reported to be prevalent and suggest that anyone may unwittingly allow unconscious thoughts and feelings to influence what may be an objective decision (Banjo et al, 2003)
 - Palmer (2009) “Everyone is unethical”
 - **What is a bias you may bring to your clinical care?**

Exploring bias

Social science research suggests that when we are conflicted, we don't operate in rational ways but we are not cognizant of that

- *Switch: How to change things when change is hard (2010) : Chip and Dan Heath*
- *Blink: The Power of thinking without Thinking (2005) Malcolm Gladwell ("thin slicing": using limited information from a short period of experience to come to a conclusion)*
- Cuidini (1993) we may not understand our motives and we may behave differently than we think we do

Exploring bias

Social science research suggests that when we are conflicted, we don't operate in rational ways but we are not cognizant of that

- Research from pharmaceutical companies: Clinician decisions are clearly affected by these interactions
- Free gifts build loyalty—if they didn't why would anyone provide them? (DeAngelis, 2000)
- In the profession of audiology, the professional-manufacturer relationship has the potential to be fraught with ethical concerns
 - Does a pen, a tootsie roll, a gift card really impact your decision making????

Ethical dilemmas facing our professions as defined by our professions

- Unethical behavior of colleagues
- Patient/student/parent disagreement with treatment/treatment approaches
 - Considering this relationship: Shared decision making
- Inadequate supervision and/or training
- External constraints on clinical decision making
- Others (Buie, 2007)

Ethical aspects to consider

- “Ethical issues, dilemmas, and debates usually arise because of circumstances and relationships surrounding the people involved, such as issues of attitude, competence, education, and expectations. Ethical issues also arise out of circumstances involving workplace systems, workplace operating procedures, legal mandates, regulatory requirements, reimbursement streams, employer expectations, and site-specific planning and preparedness or lack thereof “
- Ethical Issues in Providing Services in Schools to Children With Swallowing and Feeding Disorders (Huffman and Owre, 2008; LSHSS)

Potential educational audiology considerations related to ethics

Ethical issues in educational audiology often arise when balancing the student's individual needs, family preferences, school resources, and legal requirements.

- Case load/work load
- Confidentiality in working with multiple team members
- Prioritizing student need based on severity
- Parental pressure

Potential educational audiology considerations related to ethics

Ethical issues in educational audiology often arise when balancing the student's individual needs, family preferences, school resources, and legal requirements.

- Maintain professional relationship (dual relationships or dual obligations):: The audiologist may feel accountable both to the employing school system and to the student. When institutional priorities conflict with the student's needs, the student's welfare and applicable professional and legal standards should guide decision-making.

Potential educational audiology considerations related to ethics

- Appropriate service models (e.g. “I’ve never worked with a kid with an auditory processing disorder”)
- Interprofessional boundaries
- **Appropriate and equitable access:** Ensuring students receive needed hearing technology, accommodations, evaluations, and audiology services regardless of socioeconomic status, language, race, disability, or school district resources.

Potential educational audiology considerations related to ethics

- **Confidentiality and privacy:** Protecting audiologic and educational records while sharing enough information with teachers and other team members to support the student.
- **Informed consent and student assent:** Making sure parents understand proposed evaluations and interventions—and including the student in decisions whenever developmentally appropriate.

Potential educational audiology considerations related to ethics

- **Professional competence:** Practicing within one's training and maintaining current knowledge about pediatric assessment, classroom acoustics, hearing technology, auditory processing, and special-education requirements.
- **Evidence-based recommendations:** Recommending services and technology based on the best available evidence, professional expertise, and the student's individual needs—not convenience, habit, cost alone, or vendor influence.

- **What Do I Do Now? Resolving School-Based Ethical Challenges**
- **Author:** Lissa A. Power-deFur**AUTHORS INFO & AFFILIATIONS**
- **Publication:** Perspectives of the ASHA Special Interest Groups
- Volume 5, Number 1
- Pages 282-289
- https://doi.org/10.1044/2019_PERSP-19-00084

Most people think of codes of ethics when they hear “ethics”

- Defines professional practice that is accepted by and adhered to by members of a profession (or is it an organization?)
- Represent an enforceable set of rules that guide the conduct of a profession
- “Living document”

Defining a coe

- ASHA ([2016](#)) defines their Code of Ethics as “a framework and focused guide for professionals in support of day-to-day decision making related to professional conduct. The Code is partly **obligatory and disciplinary** and partly **aspirational and descriptive** in that it defines the professionals’ role” (p. 2).

Most people think of codes of ethics when they hear “ethics”

- Outline the responsibility of the profession—provide direction and guidance
- Can justify your decision or position on an issue

Documents of ethics

- Codes of Ethics (COE)
- Conflict of Interest guidance (COI)
- Standards of Care
- Best practice documents: A couple in audiology that are often overlooked—real ear verification of hearing aids, speech in noise testing
 - My biggest complaint about SLP treatment: NO screening or assessment of hearing prior to initiating SLP treatment
- State licensure laws

Code of ethics

- “A Code of Ethics is an official statement of the beliefs and guidelines of a professional group that reflects the responsibilities, obligations, and goals for the group members” Kummer and Turner, 2011 (p 331)
- Guides professional behaviors of members

Educational audiology and ethical codes

- **EAA requires members to follow the ethical standards of their credentialing and licensing bodies.** Its scope-of-practice documents and position statements provide additional guidance specific to educational audiology
- OSSPEAC's ethics training materials refer to the **Ohio Speech and Hearing Professionals Board's Code of Ethics**, rather than an OSSPEAC-specific code
- Shared values: collaboration, excellence, professionalism, and leadership

Defining ethics: a broader perspective

- Create “mindful” consequences of our actions (Chabon and Donaldson, 2011)
- Stewardship for patient well-being and for the profession
- A “covenant of trust” (Woodstock Theological Center, 1995)
- “A continuous and dynamic **decision-making process** that ultimately seeks to render a judgment about human conduct”
- Influenced by culture, religious principles, law, politics, economics, and science, among other aspects (Payne, 2011)
- A continuous and dynamic decision-making process (Payne, 2011)

Increasing broader perspective including global perspective

- Ethical behavior is inherently contextual and cultural (Staley et al, 2021)

The “ethics of care”

- ✧ Allows us to differentiate ourselves from others
- ✧ In order to address ethics of care, the professional must look beyond the code of ethics (COE) and conflict of interest (COI) and consider organizational and social relationships and valuing each student as an individual

The “ethics of care”

- ✧ The ethics of caring is essential to the mastery of professional identity (again, how we differentiate ourselves and as a characteristic of a mature profession and mature professional)
- ✧ (Purtilo & Doherty, 2011)

The “ethics of care”

- ✧ Goes back to Franklin et al comments about increased focus on ethics
- ✧ Greater diversity in patient population (e.g. lesbian, gay, bisexual, transgender, queer—LGBTQ: Hancock and Haskin, 2015)
- ✧ How does ethics “inform” diversity and inclusion—does it?
- ✧ Including individuals with disabilities as fully participating members of our communities (Payne, 2011)

The “ethics of care”

- ✧ Goes back to Franklin et al comments about increased focus on ethics
 - ✧ Billing issues/billing fraud
 - ✧ Expectations/fears from the bigger world that are generalized

Organizational ethics

- Applies to places as well as people
 - Is this a marketing ploy or part of their core values?
 - Organizational ethical statements might include:
 - Conduct professional activities based on the patient/student best interest
 - Deal in fair and honest manner with internal and external sources and peers
 - Adhere to the highest standards of truth and ethics
 - Kummer and Turner, 2011
 - Lofty statements but how are they put into action?

Ethical principles

Viewed as foundations for most professional Codes of ethics

- Nonmaleficence
- Beneficence
- Fidelity
- Autonomy
- Justice

Reframing ethical principles

✧ Nonmaleficence:

- ✧ Your actions may potentially harm someone else
 - ✧ “First, do no harm”; thought to be related to the Hippocratic Oath
 - ✧ The foundation of a caring response
 - ✧ Refraining from harming another
 - ✧ Purtilo and Doherty 2011

Reframing ethical principles

✧ **Nonmaleficence:**

- ✧ Balancing risk with treatment
- ✧ Optimize benefit with minimizing risk
- ✧ A recent audiology example: The tinnitus patient and triggering audiologist

Reframing ethical principles

- ✧ Nonmaleficence in educational audiology
 - ✧ Assuring a device is fit appropriately for that student
 - ✧ Issue of being underfit or overfit
 - ✧ Keeping others in their lane—audiologist's responsibility and scope of practice

Reframing ethical principles

Nonmaleficence as a case for advocacy

Children with Hearing Loss Need an Educational Audiologist on their Educational Team” by Dr. Kym Meyer on Wrightslaw.

- **“Who Should Select and Fit Hearing Assistance Technology (HAT)?”**, Educational audiologists should select, fit, and verify the technology. Others (e.g. teachers of the deaf or speech-language pathologists) should not be assigned to hearing assistance technology (HAT) responsibilities outside their professional scope.
 - **The risk of “harm”**

Reframing ethical principles

✧ Beneficence

- ✧ Our “positive good” as clinicians
 - ✧ Follow-up on hearing screening in a child to be enrolled in speech-language therapy
 - ✧ What our patients expect in care: They tell us and we listen
 - ✧ Pierscionek (2008): Every patient should leave the clinic in a “better state” than when they arrived
 - ✧ They should not be in a worse condition!
 - ✧ Example: “Your concerns as a parent are unfounded”

Reframing ethical principles

✧ Beneficence

- ✧ Our “positive good” as educational audiologists
 - ✧ Access to instruction/education
 - ✧ Supporting children and their families in needs
 - ✧ IEP meetings
 - The “f-words” of child development
 - Functioning, Family, Fitness, Fun, Friends, Future
 - The framework emphasizes children’s strengths, interests, and participation in everyday life. [CanChild](#)
- **In educational audiology** , you could apply it by asking: *Does our plan help this student participate in class, communicate with family, enjoy activities, connect with friends, maintain well-being, and prepare for their future?*

Reframing ethical principles

✧ Fidelity:

- ✧ A promise, explicit or inexplicit
- ✧ Faithfulness; in the profession may be defined as meeting their reasonable expectations
 - ✧ Basic respect
 - ✧ Professional competence
 - ✧ Adhere to the standard of care for the profession
 - ✧ Practicing at the top of our scope: Hearing aid verification
 - ✧ How to we support each other to provide the best care to the patient and their family?

Reframing ethical principles

✧ Fidelity:

- ✧ Why social media can be a negative—how we talk about our patients/students (Your words/your world)
- ✧ MEETS THE REASONABLE EXPECTATION OF THE PATIENT (AND OTHERS) (PORTILO AND DOHERTY, 2011)

Reframing ethical principles

✧ Fidelity:

- **Trustworthy, honoring commitments, and following through on professional responsibilities.** In educational audiology, students, families, and school teams can rely on you
- An educational audiologist promises to train a student's teachers on using a remote microphone system and check its effectiveness after two weeks. **Fidelity means completing that training, returning for the follow-up, and addressing any problems identified.** If a delay occurs, the audiologist communicates promptly and arranges interim support.
- **Following through on agreed services** and recommendations.
- **Giving accurate information** about what you can provide and wh.
- **Keeping the student's interests central** when school pressures or competing demands arise.
- "Have I done what I told this student family or team I would do?"

Reframing ethical principles

✧ Autonomy:

- ✧ The ability to exercise “freedom” in the situation
- ✧ “Self-determination” on the part of the patient/student
 - ✧ Refers to both professional autonomy for the profession and patient/student autonomy
 - ✧ To be free and independent to act on your own decision-making (Purtilo and Doherty, 2011)

Reframing ethical principles

✧ **Autonomy**

- ✧ Patients have what is referred to as “patient centered care” (Purtilo and Doherty, 2011)
 - ✧ Significant benefits in many ways; must look at it from an ethical perspective
 - ✧ Shared decision-making between the professional and patient
- ✧ SLP example?

Reframing ethical principles:

✧ Autonomy

- ✧ Resulted in increased regulation and legislation, such as HIPAA
- ✧ Professions act to minimize oversight
- ✧ What is the role of ethics in patient decision-making: Choice for using one hearing aid when binaural fitting is recommended?
- ✧ Evidenced-based/research based?

Reframing ethical principles:

- ✧ Related to Autonomy is truthfulness and honesty
 - ✧ Patient/family has sufficient information to make their own decisions
 - ✧ Share decision making
 - ✧ Not telling “little white lies” about progress, etc. (Kummer and Turner, 2011)
- ✧ Following best practices, standards of

Reframing ethical principles:

- ✧ Educational audiology examples
 - ✧ “Make my teenager wear their hearing aids at school”
 - ✧ Don’t let them sign
 - ✧ Age and understanding of the family

Reframing ethical principles

Justice

- ✧ All individuals have equal and fair access to resources
 - ✧ Very challenging (Kummer and Turner, 2011)
- ✧ Fair to all patients
 - ✧ What does “fair” mean: parity or the same for everyone?
 - ✧ Contrasting equity to equality
- ✧ Patient is able to access your time and expertise

Reframing ethical principles

Justice

- ✧ Decisions are related to how your time and resources are distributed
- ✧ What happens when you “fire” a patient
- ✧ Audiology example?
 - ✧ Justice means fairness and equity: students receive the support they need to have an equitable opportunity to learn

Reframing ethical principles

Justice

- ✧ Audiology example?
 - ✧ Two students need remote microphone systems to access classroom instruction. One student's parents actively request the technology; the other student's family has limited resources and is unfamiliar with available services. The educational audiologist advocates for appropriate access for **both students**, rather than allowing parental advocacy/savvy to determine who receives

Reframing ethical principles

- Dignity
 - Basic human rights to the patient and family, which must be honored
 - The right to ask questions
 - The right to be treated with respect and dignity
 - The right to refuse treatment
 - The right to access the medical record
 - The right to privacy and confidentiality
 - Kummer and Turner, 2011
 - The right to access communication: The legal and ethical responsibilities for providing an interpreter
 - This is critical and an expectation: Why our clinic has access to BoostLingo
 - Patient/family not charged for this—it is YOUR responsibility

Ethics and your internal “compass”

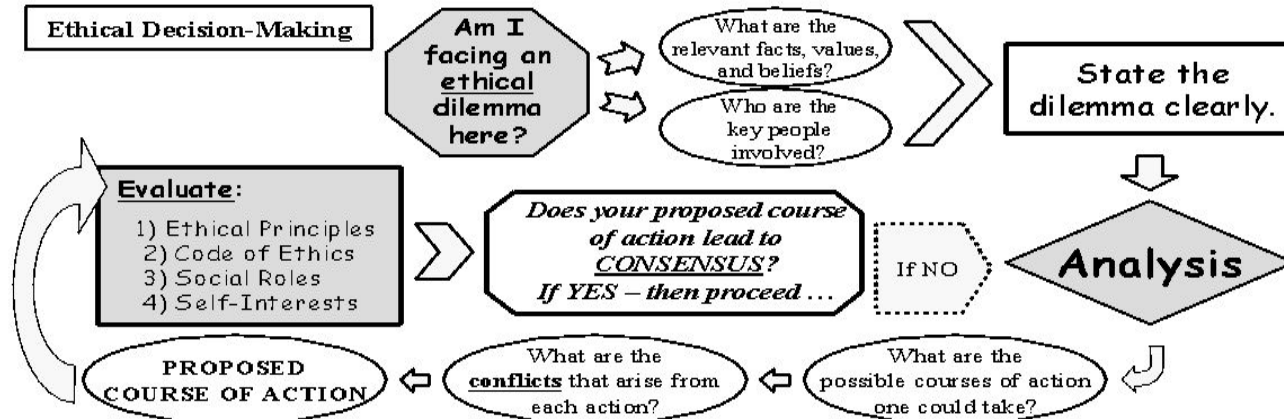
- Consideration: Who has to abide by “ethics”?
 - What’s a an Audiologist to do?
 - Pick a Code of Ethics as your guide
 - Check your internal compass
 - About 50% of inquires to ASHA’s Board of Ethics are related to a potential code violation
 - May be related to employer demands or something being done by a colleague (Bupp, 2012)

Common Ethical violations

- Practicing without appropriate licensure/certification
- Practicing beyond scope of practice
 - Staying in your lane while being part of interdisciplinary practice
 - Practicing at the top of your scope (GMW)
- Falsifying data/report
- Inappropriate billing practices
- Misleading advertising

How to have a discussion about ethical ideas,
challenges and dilemmas

An ethics decision-making flow-chart (adapted from Chabon and Morris, 2004 by Fitzgerald, 2015)



Seedhouse's ethical grid



Seedhouse's ethical grid



Seedhouse's Ethical Grid

- Provides a way of thinking about a situation that is structured, coherent and recoverable.
- Based on Moral Theory
- Consists of layers
- Designed to be used in Healthcare – but has potential as a tool to be used beyond that.

The dynamic model of ethical reasoning (Kenny et al, 2007)

The Dynamic Model of Ethical Reasoning

Awareness

Independent problem solving

Supported problem solving

Decision Outcome

The dynamic model of ethical reasoning (Kenny et al, 2007)

The Dynamic Model of Ethical Reasoning

- Early concerns
 - Initial reactions
 - Checking Action for client
 - Positive Conflict in practice
 - Accepting professional responsibility
 - Discussing Action for professional
- Negative Critical incidents
 - Self protection
 - Handing over Action for team
 - Adequate Clinical reasoning
 - Action for organization
 - Rules Beliefs and values
 - Lack of support

5 step process for follow-up and reflection-ethics

- 1) Carefully examine the issue
- 2) Determine if the issue is ethical, legal, or moral
- 3) A) Consult resources: Documents
B) Consult resources: Individuals
- 4) Brainstorm situations
- 5) Evaluate and select a solution (Power-deFur, 2020)

Clinical considerations

- We are acting in the best interest of our students and their family
- Shared decision making (SDM) is an ethical principle for clinicians
 - Healthcare/education in the past was viewed to be maternalistic/paternalistic
 - Patients/students/their families demanded autonomy
 - Family centered care

Professional dilemmas

- Can be controversial, confusing, and controversial
- Shades of grey, not black and white
- Tools to address these
 - Flow charts provided here
 - Codes of Ethics
 - State licensure boards
 - Professional Organizations (Ethical Practices Boards and Committees)
 - Crowd sourcing: Ethics in Audiology FB group

An ethical issue facing educational audiologists

- Service provision in the schools
 - Balancing employer needs/demands and the truth (e.g. speech services available in schools)

What are some ethical issues facing audiologists

- Personal conflict in the workplace
 - Being asked/told to do something you know is illegal and unethical (e.g. billing, etc.)
- Following “standard of care”
 - Hearing screening prior to enrolling a person in speech/language therapy
 - Real ear measures
 - Speech-in-noise testing
- Access/fairness to accessing our services

Some special considerations for school based professionals

- Diagnostics using standardized test based results rather than holistic assessments
 - Discount informal input due to “institutional policy”
 - Ethically addressing needs of children
 - Fulcher-Rood, et al (2018)
- Need for interpreters

State Compact

- The Audiology & Speech-Language Pathology Interstate Compact (ASLP-IC) is an occupational licensure compact which allows professionals to practice in multiple states without having to obtain additional state licenses. The compact addresses increased demand to provide/receive audiology and speech-language pathology services and **authorizes in-person and telepractice across state lines**. States participating in the compact communicate and exchange information, including verification of licensure and disciplinary sanctions; however, compact states retain the ability to regulate practice in their state. (ASHA, 2021)

State Compact

- ASLP-IC Impact on Audiologists and SLPs
- The ASLP-IC will certify that audiologists and speech-language pathologists (SLPs) have met acceptable standards of practice, promote cooperation between compact states in the areas of licensure and regulation, and offer a higher degree of consumer protection across state lines.
- Licensed audiologists and SLPs will be able to practice in person or through telepractice across state lines via a privilege to practice.
- The ASLP-IC will increase access to client, patient, and student care and will facilitate continuity of care when clients, patients, and students relocate/travel.
- Audiologists and SLPs will be able to provide services to populations currently underserved or geographically isolated as well as allow military personnel and spouses to maintain their profession when relocating.

Ethics and ai

- A central ethical issue is whether AI improves a student's access and support while protecting privacy, accuracy, equity, and the student's voice.

Does this AI tool help us understand and support this particular student—or simply produce a convincing document?”

- An educational audiologist asks AI to draft classroom accommodations. The output recommends preferential seating and captions but overlooks the student's difficulty hearing peers during group work. Accepting that draft without individualized review could leave important communication needs unmet.

To thine own self be true--Shakespeare

- Continue to learn
- Follow the standards of care, scope of practice, and evidence based practice guidelines for the profession
- Talk with colleagues
 - Avoid group think
 - Be a “devil’s advocate”

To thine own self be true--Shakespeare

- Self assessment and reporting (and reporting of others)
 - Dual relationships
 - COI
 - Diminished decision-making abilities
 - Negligence
- When we address these things, we raise the bar for the profession, which improves our climate for ethics

Summary

- Ethics is about checking the moral compass and keeping an eye on changes that frame ethics
- Many ethical issues to consider that are in flux: social media concerns, telepractice/telehealth, expansion of patient centered care, Artificial intelligence

Summary

- A recent consideration is that confidentiality now “belongs to the patient”: medical records (“My chart”, etc.)
- In contrast to the Seinfeld episode “The Difficult Patient”
 - Elaine, picking up her chart and reading that it says “Difficult”
 - Physician walks in “Elaine, you shouldn’t be reading that.”
 - She ends up stealing her chart in the episode

“Ethics is about questions; about who asks, what they ask for, and how we as individuals and communities respond” (McLean, 2003).

Ed aud cases

Case 1: Funding Caps vs. FAPE (Free Appropriate Public Education)

- **The Scenario:** An educational audiologist determines that a student with a profound bilateral hearing loss requires a new, multi-microphone remote microphone system (RMS) to hear the teacher and peers during small-group work. The special education director tells the audiologist that the district's assistive technology budget is completely exhausted. The director explicitly orders the audiologist to write "classroom FM system not required at this time" on the student's IEP (Individualized Education Program) draft to avoid legal and financial obligations for the school year.
- **Ethical Core:** Professional autonomy, misrepresentation of clinical needs, and advocacy vs. employment.

Ed aud cases

Case 2: It's only a few decibels among friends

The Scenario: Your unit is moving to a new building. The booth you use for doing validation of hearing aids and HAT technology is going to be put in a room in the building and initial measurements indicate it does not meet the ANSI standard for soundfield testing. No one except you seems to care. Is this an ethical issue?

- **Ethical Core: Beneficence, Justice**

Your case

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