



# SLP HEALTH CARE 2021 SURVEY

## Workforce

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## Executive Summary

The American Speech-Language-Hearing Association (ASHA) conducted a survey of speech-language pathologists (SLPs) in the spring of 2021. The survey was designed to provide information about health care–based service delivery and to update and expand information gathered during previous *SLP Health Care Surveys*. The results are presented in a series of reports.

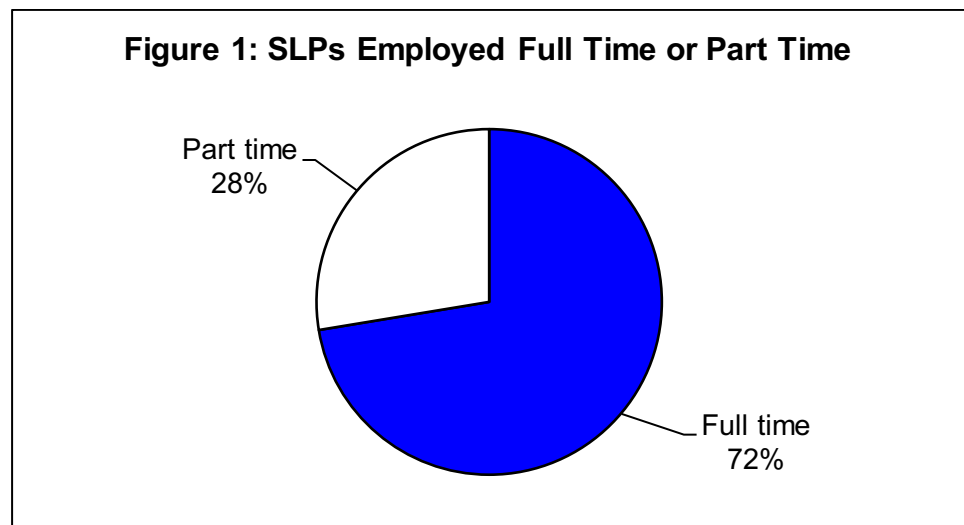
This report addresses only questions on the survey pertaining to workforce issues. Data are drawn from six categories of health care facilities: general medical, Veterans Affairs (VA), military, long-term acute care, or university hospitals; home health agencies or clients' homes; outpatient clinics or offices; pediatric hospitals; rehabilitation (rehab) hospitals; and skilled nursing facilities (SNFs).

### Highlights

- 72% of the SLPs worked full time.
- The median number of years of experience for SLPs was 14 years; the mean was 17 years.
- 71% of clinical service providers and administrators or supervisors who saw patients had one employer.
- 36% reported that there were fewer job openings than job seekers. This varied by function, facility, geographic area, and population density.
- 30% of clinical service providers had funded, unfilled positions for SLPs at their facility. This was highest in the Pacific area (42%) and lowest in the Middle Atlantic (25%).
- 49% of SLPs said that ASHA was doing a good or excellent job serving SLPs who work in health care.
- 22% of SLPs in SNFs had been pressured to discharge inappropriately (e.g., early or delayed).
- 16% of SLPs anticipated moving to part time/PRN from full time, or vice versa.
- Not feeling valued by other types of professionals or by administrators was the most frequently mentioned reason for seeking a career change by respondents overall and by clinical service providers.

## Employment Status

Among all the respondents to the survey who were employed, 72% worked full time (see Figure 1).



Note.  $n = 1,671$ .

Employment function, primary employment facility, population density, and years of experience had an effect on status.

Respondents who were employed full time included:

- 69% of the SLPs who were primarily clinical service providers, 93% who were exclusively administrators or supervisors, and 94% who were primarily administrators or supervisors but did see some patients ( $p = .000$ ).
- 61% of the SLPs who were employed in home health agencies or clients' homes, 71% in general medical, VA, military, LTAC, or university hospitals or in rehab hospitals, 73% in outpatient clinics or offices, 79% in pediatric hospitals, and 83% in SNFs ( $p = .000$ ).
- 68% of the SLPs who were employed in suburban areas, 74% in rural areas, and 77% in city or urban areas ( $p = .001$ ).
- Between 86% of SLPs who had 1–5 years of experience and 65% with 31 or more years of experience ( $p = .000$ ).

Highest degree and the state where they were employed did not have an effect on status.

## Years of Experience

Overall, the median number of years of experience that SLPs reported having in the profession was 14 years, and the mean was 17 years. For clinical service providers, the median was 14 years, and the mean was 17. For SLPs who were primarily administrators or supervisors but who saw some patients, the median was 17 years, and the mean was 19 years; and for SLPs who were exclusively administrators or supervisors, the median and mean were both 23 years ( $p = .001$ ).

Years of experience for clinical service providers varied by the type of facility where they were employed ( $p = .000$ ; see Table 1).

**Table 1. Years of Experience for Clinical Service Providers, by Facility**

	Median	Mean
General medical, VA, military, LTAC, university hospital	14.0	16.7
Home health agency or client's home	18.0	19.8
Outpatient clinic or office	12.0	16.8
Pediatric hospital	12.0	15.1
Rehab hospital	11.0	14.7
Skilled nursing facility	13.0	15.0

Note.  $n = 1,285$ .

## Number of Employers

In a typical month, the number of employers for whom SLPs work as a clinical service provider varied by their function ( $p = .000$ , see Table 2).

**Table 2. Number of Employers (%)**

Count	Primarily Clinical Service Provider	Primarily Administrative or Supervisory, With Some Patients
0	5.6	13.3
1	70.7	70.9
2	16.0	9.5
3	4.5	1.3
4	1.2	0.6
5 or more	1.9	4.4

Note.  $n = 1,527$ .

## Job Openings

Overall, the distribution of whether there were fewer job openings than job seekers (36%), more openings than seekers (36%), or a balance between both (29%) was fairly even. Responses varied by employment function, facility, area of the country, and population density.

### Function

Employment function ( $p = .000$ ):

- 29% of the SLPs who were primarily administrators or supervisors but saw some patients, 33% who were exclusively administrators or supervisors, and 37% who were primarily clinical service providers reported that there were fewer job openings than job seekers.
- 30% who were exclusively administrators or supervisors, 33% who were primarily clinical service providers, and 55% who were primarily administrators or supervisors but saw some patients reported that there were more job openings than job seekers.
- 16% who were primarily administrators or supervisors but saw some patients, 30% who were primarily clinical service providers, and 38% who were exclusively administrators or supervisors reported that job openings and job seekers were in balance.

### Facility

Employment facility ( $p = .000$ ; see Appendix Table 1):

- The range of SLPs who were primarily clinical service providers who reported that there were fewer job openings than job seekers was between 21% in home health agencies or clients' homes and 56% in general medical, VA, military, LTAC, or university hospitals.
- The range of clinical service providers who reported that there were more job openings than job seekers was between 19% in general medical, VA, military, LTAC, or university hospitals and 47% in home health agencies or clients' homes.
- The range of clinical service providers who reported that job openings and job seekers were in balance was between 25% in general medical, VA, military, LTAC, or university hospitals and in rehab hospitals and 33% in outpatient clinics or offices.

### Geographic Area

When the country was divided into four geographic regions, nearly half of the clinical service providers in the West (46%) declared that there were more job openings than job seekers. Clinical service providers in the South (35%), Midwest (38%), and Northeast (42%) were more likely to say that there were fewer job openings than job seekers than they were to select either of the other two responses ( $p = .001$ ).

Population Density

Population density ( $p = .000$ ):

- 29% of clinical service providers in rural areas, 34% in suburban areas, and 43% in city or urban areas reported that there were fewer job openings than job seekers.
- 26% of clinical service providers in city or urban areas, 36% in suburban areas, and 44% in rural areas reported that there were more job openings than job seekers.
- 27% of clinical service providers in rural areas and 31% in suburban areas and in city or urban areas reported that job openings and job seekers were in balance.

Funded, Unfilled Positions

Among all of the SLPs who responded, 32% said that they had funded, unfilled positions for SLPs at their facility.

- 30% of SLPs who were primarily clinical service providers, 38% who were exclusively administrators or supervisors, and 43% who were primarily administrators or supervisors but saw some patients had funded, unfilled positions for SLPs at their facility ( $p = .006$ ).
- Among clinical service providers, 20% of SLPs in SNFs, 30% in general medical, VA, military, LTAC, or university hospitals, 32% in outpatient clinics or offices, 33% in rehab hospitals, 37% in home health agencies or clients' homes, and 44% in pediatric hospitals had funded, unfilled positions for SLPs at their facility ( $p = .001$ ).

Geographic Area

The area of the country where clinical service providers worked had an effect on whether there were funded, unfilled positions ( $p = .037$ ).

Geographic Area	Percentage (%)
Pacific	42.0
New England	36.6
West South Central	33.5
South Atlantic	31.2
East North Central	28.0
West North Central	26.6
East South Central	25.7
Mountain	25.6
Middle Atlantic	25.0

Note.  $n = 1,280$ .



## Satisfaction With ASHA

When asked what kind of job the Association was doing in serving its speech-language pathology members who work in health care, 14% of the respondents said *poor*, 38% said *fair*, 43% said *good*, and 6% said *excellent*. Employment function, population density, and area of the country were not significantly related to responses for clinical service providers, but employment facility and years of experience were.

### Facility

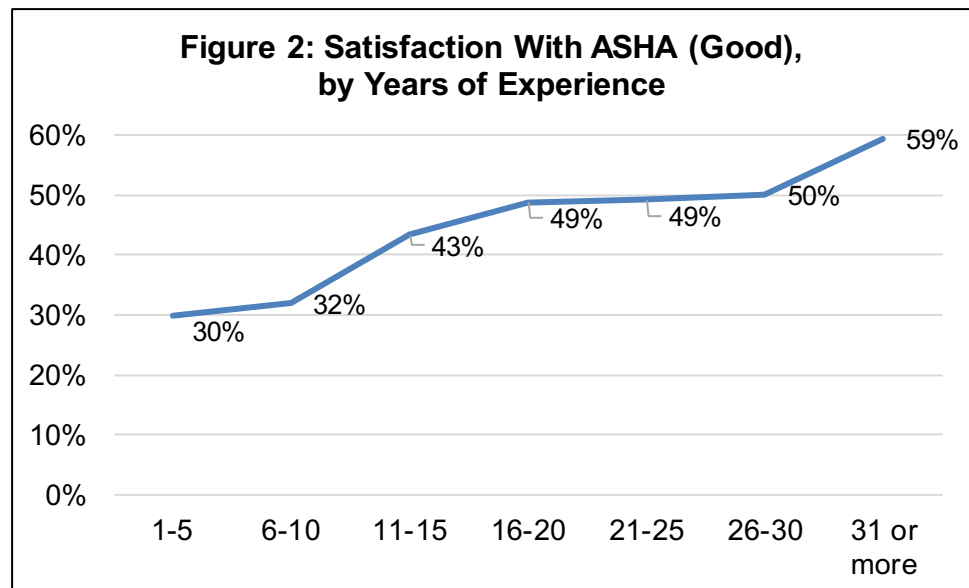
Facility ( $p = .000$ ):

- Among clinical service providers, more SLPs who were employed in general medical, VA, military, LTAC, or university hospitals (44%), in rehab hospitals (44%), and in pediatric hospitals (47%) selected *fair* than any other response.
- Among clinical service providers, more SLPs who were employed in SNFs (39%), in home health agencies or clients' homes (44%), or in outpatient clinics or offices (49%) selected *good* than any other response.

### Experience

Years of experience ( $p = 000$ ):

- The percentage of clinical service providers who selected *good* nearly doubled as the number of years of experience increased from lowest to highest (see Figure 2).



Note.  $n = 1,292$ .

## Pressure From Employers or Supervisors

Survey respondents were presented with a list of six potential areas in which employers or supervisors could have exerted pressure. More than half (58%) said that they had not felt pressured. This response ranged from 43% in SNFs to 70% in pediatric hospitals and in general, VA, military, LTAC, or university hospitals ( $p = .000$ ; see Appendix Table 2).

### Facility

The type of facility in which SLPs worked was related to five of the six activities, and SLPs in SNFs were the most likely group to have felt pressured with regard to four of the six activities.

- Overall, 11% said that they had been pressured to provide inappropriate frequency or intensity of services. The range was from 3% in pediatric hospitals to 19% in SNFs ( $p = .000$ ).
- Overall, 10% said that they had been pressured to discharge inappropriately (e.g., early or delayed). The range was from 4% in general, VA, military, LTAC, or university hospitals to 22% in SNFs ( $p = .000$ ).
- Overall, 10% felt pressured to provide evaluation and treatment that were not clinically appropriate. The range was from 5% in outpatient clinics or offices and in pediatric hospitals to 21% in SNFs ( $p = .000$ ).
- Overall, 7% felt pressured to provide services for which they had inadequate training and/or experience. The range was from 4% in SNFs to 10% in outpatient clinics or offices ( $p = .015$ ).
- Overall, 7% felt pressured to provide group therapy when individual therapy was appropriate. The range was from 1% in general, VA, military, LTAC, or university hospitals to 19% in SNFs ( $p = .000$ ).
- Overall, 3% felt pressured to alter documentation for reimbursement. Type of facility did not have an effect on their responses ( $p = .174$ ).

### Population Density

Population density was related to four activities. In each of the four bullets, below, SLPs in city or urban areas felt the least pressured. For the first three, SLPs in rural areas felt the most pressured, and for the fourth bullet, SLPs in suburban areas felt most pressured.

- Pressure to provide inappropriate frequency or intensity of services ( $p = .021$ ).
- Pressure to provide evaluation and treatment that were not clinically appropriate ( $p = .015$ ).
- Pressure to provide services for which they had inadequate training and/or experience ( $p = .008$ ).
- Pressure to alter documentation for reimbursement ( $p = .020$ ).

## Career Transitions

### Facility

More than half of the SLPs anticipated making changes to their main job in the next 5 years. They could select multiple responses from a list of 12 potential changes. (See Appendix Table 3.) The most frequently selected response from the overall group of respondents was *I would like to change but feel trapped by circumstances* (17%). This response was selected most often by SLPs in SNFs (26%) and least often by those in pediatric hospitals (12%;  $p = .000$ ). Facility had an effect on seven additional anticipated transitions.

- Overall, 16% anticipated moving to part time/PRN from full time, or vice versa. The range was from 11% in home health agencies or clients' homes to 21% in rehab hospitals and in SNFs ( $p = .001$ ).
- Overall, 12% anticipated moving to a different type of health care setting (e.g., from SNF to outpatient), ranging from 3% in pediatric hospitals to 25% in SNFs ( $p = .000$ ).
- Overall, 12% anticipated moving to another facility that is like their current one (e.g., from SNF to SNF). The range was from 7% in home health agencies or clients' homes and in pediatric hospitals to 23% in SNFs ( $p = .000$ ).
- Overall, 10% anticipated moving to another professional setting as an SLP. The range was from 7% of SLPs in general, VA, military, LTAC, or university hospitals and in pediatric hospitals to 14% in SNFs ( $p = .040$ ).
- Overall, 10% anticipated changing to a non-SLP profession, ranging from 7% of SLPs in outpatient clinics or offices, in pediatric hospitals, and in home health agencies or clients' homes to 13% in SNFs ( $p = .018$ ).
- Overall, 5% anticipated moving to schools, ranging from 1% of SLPs in rehab hospitals to 7% in outpatient clinics or offices, in pediatric hospitals, and in SNFs ( $p = .011$ ).
- Facility also had an effect on the 37% of SLPs who said that no change was anticipated, ranging from 24% in SNFs to 45% in pediatric hospitals ( $p = .000$ ).

### Function

Clinical service providers differed from administrators and supervisors in their selection of five of the anticipated career transitions. One example is the likelihood of SLPs' saying that they were not anticipating a change. Specifically, 35% of SLPs who were primarily clinical service providers, 49% who were primarily administrators or supervisors but who saw patients, and 67% of SLPs who were exclusively administrators or supervisors selected that option ( $p = .000$ ).

## Reasons for Career Transition

SLPs were asked to select which factors, from a list of 12, caused them to seek a career change. They could select more than one response. More than 90% of the respondents identified at least one factor. The most common reason was not feeling valued by other types of professionals or by administrators, followed closely by unsatisfactory salary/benefits and family/personal circumstances (see Table 4).

<b>Factor</b>	<b>All Respondents</b>	<b>Clinical Service Providers</b>
Not feeling valued by other types of professionals or by administrators	19.6	20.9
Unsatisfactory salary/benefits	19.0	20.1
Family/personal circumstances	18.6	20.0
High productivity demands	17.8	19.2
Paperwork (clinical and reimbursement)	12.5	13.4
Unstable work hours	11.4	12.4
Direct or indirect effect of COVID-19	11.1	12.1
Insufficient reimbursement for patient care	9.4	9.9
Ethical challenges	8.9	9.2
Low/unsustainable caseload	6.0	6.7
Managing caseloads at multiple sites	4.8	5.3
Keeping current with advances in clinical information related to my caseload	4.7	5.2
None of the above	8.6	8.7

Note. n = 1,671 (all respondents), n = 1,433 (clinical service providers).

## Predictor Variables

The type of facility where SLPs were employed was related to 10 of the factors, all but *family/personal circumstances*, *keeping current with advances in clinical information related to my caseload*, and *none of the above* (see Appendix Table 4).

Employment function was related to the first seven factors in Table 4, above. SLPs who were primarily clinical service providers were more likely to select those seven options than were SLPs who were either primarily or exclusively administrators or supervisors.

Survey  
Notes and  
Methodol-  
ogy

The ASHA SLP Health Care Survey has been fielded in odd-numbered years since 2005 to gather information of interest to the profession. Members, volunteer leaders, and staff rely on data from the survey to better understand the priorities and needs of SLPs.

The survey was fielded electronically on May 20, May 27, and June 3, 2021 to a random sample of 10,000 ASHA-certified SLPs who were employed in health care settings in the United States. Half of each group was assigned to a random sample to receive an additional question about whether their current work includes private practice, early intervention, or telepractice.

The sample was a random sample, stratified by type of facility. Small groups, such as pediatric hospitals, were oversampled. Weighting was used when presenting data to reflect the actual distribution of SLPs in each type of facility.

Response Rate

Of the original 10,000 SLPs in the sample, 157 opted out, 83 had unusable email addresses, and 196 were not currently employed in health care. The actual number of respondents was 1,671, resulting in a 17.5% response rate. The results presented in this report are based on responses from those 1,671 individuals.

Survey  
Reports

Results from the ASHA 2021 SLP Health Care Survey are presented in a series of reports:

- Survey Summary
- Workforce
- Practice Issues
- Caseload Characteristics
- Annual Salaries
- Hourly and Per Home-Visit Wages
- Survey Methodology, Respondent Demographics, and Glossary

Suggested  
Citation

American Speech-Language-Hearing Association. (2021) ASHA 2021 SLP Health Care Survey: Workforce. [www.asha.org](http://www.asha.org).

## Supplemental Resources

American Speech-Language-Hearing Association. (n.d.-a). *Careers*. [www.asha.org/careers/](http://www.asha.org/careers/)

American Speech-Language-Hearing Association. (n.d.-b). *Clinical personnel supply and demand in audiology and speech-language pathology*. [www.asha.org/Research/Clinical-Workforce/](http://www.asha.org/Research/Clinical-Workforce/)

American Speech-Language-Hearing Association. (n.d.-c). *Health care resources*. [www.asha.org/slp/healthcare](http://www.asha.org/slp/healthcare)



## Additional Information

For additional information regarding the *ASHA 2021 SLP Health Care Survey*, please contact Monica Sampson, director, Health Care Services in Speech-Language Pathology, 800-498-2071, ext. 5686, [msampson@asha.org](mailto:msampson@asha.org).

## Thank You

ASHA would like to thank the SLPs who completed the *ASHA 2021 SLP Health Care Survey*. Reports like this one are possible only because people like *you* participate.

**Is this information valuable to you?** If so, please accept invitations to participate in other ASHA-sponsored surveys and focus groups. You are the experts, and we rely on you to provide data to share with your fellow members. ASHA surveys benefit *you*.

## Appendix: State Listings and Data Tables

**Regions of the Country**

Northeast

- ◆ Middle Atlantic
  - New Jersey
  - New York
  - Pennsylvania
- ◆ New England
  - Connecticut
  - Maine
  - Massachusetts
  - New Hampshire
  - Rhode Island
  - Vermont

South

- ◆ East South Central
  - Alabama
  - Kentucky
  - Mississippi
  - Tennessee
- ◆ South Atlantic
  - Delaware
  - District of Columbia
  - Florida
  - Georgia
  - Maryland
  - North Carolina
  - South Carolina
  - Virginia
  - West Virginia
- ◆ West South Central
  - Arkansas
  - Louisiana
  - Oklahoma
  - Texas

Midwest

- ◆ East North Central
  - Illinois
  - Indiana
  - Michigan
  - Ohio
  - Wisconsin
- ◆ West North Central
  - Iowa
  - Kansas
  - Minnesota
  - Missouri
  - Nebraska
  - North Dakota
  - South Dakota

West

- ◆ Mountain
  - Arizona
  - Colorado
  - Idaho
  - Montana
  - Nevada
  - New Mexico
  - Utah
  - Wyoming
- ◆ Pacific
  - Alaska
  - California
  - Hawaii
  - Oregon
  - Washington



**Table 1: Job Market, Clinical Service Providers, by Type of Facility**

26. Based on your own observations and experiences, rate the current job market for SLPs in your type of employment facility and in your geographic area. (Percentages) Analyses limited to respondents who met the following criteria: ❖ CCC-SLP ❖ Employed full time or part time ❖ Primarily clinical service provider							
Job Market	Facility Type						
	All Facility Types (n = 1,276)	General/VA/ Military/ LTAC/ University Hospital (n = 236)	Home Health/ Client's Home (n = 224)	Outpatient Clinic/Office (n = 392)	Pediatric Hospital (n = 40)	Rehab Hospital (n = 97)	Skilled Nursing Facility (n = 274)
More job openings than job seekers	33.3	18.6	46.9	38.3	22.5	23.7	32.8
Job openings and job seekers in balance	29.9	25.4	32.1	33.4	27.5	24.7	28.8
Fewer job openings than job seekers	36.8	55.9	21.0	28.3	50.0	51.5	38.3
	Statistical significance: $\chi^2(10) = 93.4, p = .000$ , Cramer's $V = .192$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						

**Table 2: Pressured, All Respondents, by Type of Facility**

<p>20. In the last 12 months, have you felt pressured by an employer or supervisor to engage in any of the following activities? <i>Select all that apply.</i> (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)                  Analyses limited to respondents who met the following criteria:                  ❖ CCC-SLP                  ❖ Employed full time or part time</p>							
Pressure	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n ≥ 119)	Skilled Nursing Facility (n ≥ 354)
Provide inappropriate frequency or intensity of services	11.1	7.5	11.3	7.4	3.4	17.5	19.2
	Statistical significance: $\chi^2(5) = 42.5$ , $p = .000$ , Cramer's $V = .160$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Discharge inappropriately (e.g., early or delayed)	10.3	4.4	11.0	5.4	5.2	10.9	22.3
	Statistical significance: $\chi^2(5) = 82.8$ , $p = .000$ , Cramer's $V = .224$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Provide evaluation and treatment that are not clinically appropriate	9.8	6.8	6.5	5.4	5.1	15.8	20.6
	Statistical significance: $\chi^2(5) = 71.1$ , $p = .000$ , Cramer's $V = .207$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
(Question 20 continues on next page.)							

20. (cont'd) In the last 12 months, have you felt pressured by an employer or supervisor to engage in any of the following activities?  
*Select all that apply.* (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)  
 Analyses limited to respondents who met the following criteria:  
 ❖ CCC-SLP  
 ❖ Employed full time or part time

Pressure	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n ≥ 119)	Skilled Nursing Facility (n ≥ 354)
Provide services for which you had inadequate training and/or experience	6.9	6.8	6.2	10.0	5.1	5.0	3.9
	Statistical significance: $\chi^2(5) = 14.1$ , $p = .015$ , Cramer's $V = .092$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Provide group therapy when individual therapy was appropriate	6.5	1.4	2.7	2.4	1.7	12.5	19.4
	Statistical significance: $\chi^2(5) = 138.7$ , $p = .000$ , Cramer's $V = .289$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Alter documentation for reimbursement	3.1	2.0	4.5	2.6	0.0	1.7	4.2
	Statistical significance: $\chi^2(5) = 7.7$ , $p = .174$ <u>Conclusion:</u> There is not enough evidence from the data to say that the responses vary by facility type.						
Did not feel pressured	57.7	70.3	56.7	60.1	69.5	55.8	43.1
	Statistical significance: $\chi^2(5) = 55.0$ , $p = .000$ , Cramer's $V = .182$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						

**Table 3: Career Transitions, All Respondents, by Type of Facility**

<p>28. Do you anticipate making any of the following changes to your main job in the next 5 years? <i>Select all that apply.</i> (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)                  Analyses limited to respondents who met the following criterion:                  ❖ CCC-SLP                  ❖ Employed full time or part time</p>							
Transition	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
I would like to change but feel trapped by circumstances	17.1	15.6	12.7	13.5	12.1	19.2	26.3
	Statistical significance: $\chi^2(5) = 31.9$ , $p = .000$ , Cramer's $V = .139$ Conclusion: There is adequate evidence from the data to say that the means vary by facility type.						
To part time/PRN from full time, or vice versa	15.8	17.4	11.0	12.6	17.2	20.8	21.4
	Statistical significance: $\chi^2(5) = 20.5$ , $p = .001$ , Cramer's $V = .111$ Conclusion: There is adequate evidence from the data to say that the means vary by facility type.						
To a different type of health care setting (e.g., from SNF to outpatient)	12.2	6.8	12.4	8.0	3.4	10.8	25.1
	Statistical significance: $\chi^2(5) = 75.8$ , $p = .000$ , Cramer's $V = .214$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.						
(Question 28 continues on next page.)							

28. (cont'd) Do you anticipate making any of the following changes to your main job in the next 5 years? *Select all that apply.*  
 (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)  
 Analyses limited to respondents who met the following criterion:  
 ❖ CCC-SLP  
 ❖ Employed full time or part time

Transition	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
To another facility that is like my current one (e.g., from SNF to SNF)	11.7	11.9	6.9	8.7	6.8	7.5	22.8
	Statistical significance: $\chi^2(5) = 56.6$ , $p = .000$ , Cramer's $V = .185$ <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.						
To retirement	10.7	9.9	13.4	11.1	5.1	7.5	10.4
	Statistical significance: $\chi^2(5) = 5.8$ , $p = .325$ <u>Conclusion:</u> There is not enough evidence from the data to say that the means vary by facility type.						
To another professional setting, as an SLP	10.4	6.5	11.3	10.6	6.9	8.3	14.1
	Statistical significance: $\chi^2(5) = 11.6$ , $p = .040$ , Cramer's $V = .084$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
To a non-SLP profession	9.6	11.6	6.9	7.4	6.9	7.5	13.3
	Statistical significance: $\chi^2(5) = 13.6$ , $p = .018$ , Cramer's $V = .091$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
(Question 28 continues on next page.)							

28. (cont'd) Do you anticipate making any of the following changes to your main job in the next 5 years? *Select all that apply.*  
 (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)  
 Analyses limited to respondents who met the following criterion:  
 ❖ CCC-SLP  
 ❖ Employed full time or part time

Transition	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
To stay at home full time as a parent or caregiver	5.8	5.5	4.1	6.1	5.1	5.0	7.9
	Statistical significance: $\chi^2(5) = 4.6, p = .471$ <u>Conclusion:</u> There is not enough evidence from the data to say that the means vary by facility type.						
To schools	5.3	3.7	3.1	6.9	6.8	0.8	7.3
	Statistical significance: $\chi^2(5) = 14.8, p = .011$ , Cramer's V = .094 <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Other career change	5.2	4.4	3.8	4.6	3.4	5.0	7.1
	Statistical significance: $\chi^2(5) = 4.8, p = .447$ <u>Conclusion:</u> There is not enough evidence from the data to say that the responses vary by facility type.						
To academia	5.0	6.8	2.7	5.8	3.4	8.3	3.7
	Statistical significance: $\chi^2(5) = 10.1, p = .072$ <u>Conclusion:</u> There is not enough evidence from the data to say that the responses vary by facility type.						
(Question 28 continues on next page.)							

28. (cont'd) Do you anticipate making any of the following changes to your main job in the next 5 years? *Select all that apply.*  
 (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)  
 Analyses limited to respondents who met the following criterion:  
 ❖ CCC-SLP  
 ❖ Employed full time or part time

Transition	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n = 291)	Outpatient Clinic/Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
To return to school for an additional degree	4.3	6.1	3.4	4.3	3.4	3.3	3.9
	Statistical significance: $\chi^2(5) = 3.5, p = .629$ Conclusion: There is not enough evidence from the data to say that the responses vary by facility type.						
No change anticipated	36.5	40.1	39.2	40.4	44.8	41.7	23.7
	Statistical significance: $\chi^2(5) = 34.4, p = .000$ , Cramer's V = .144 Conclusion: There is adequate evidence from the data to say that the means vary by facility type.						

**Table 4: Factors, Career Change, All Respondents, by Type of Facility**

29. What factors are causing you to seek a career change? <i>Select all that apply.</i> (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.) Analyses limited to respondents who met the following criterion: ❖ CCC-SLP							
Factor	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client’s Home (n ≥ 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
Not feeling valued by other types of professionals or by administrators	19.6	19.1	12.7	15.6	16.9	17.5	32.4
	Statistical significance: $\chi^2(5) = 52.0$ , $p = .000$ , Cramer’s $V = .177$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Unsatisfactory salary/benefits	19.0	17.7	16.2	14.3	13.6	17.5	29.9
	Statistical significance: $\chi^2(5) = 38.4$ , $p = .000$ , Cramer’s $V = .152$ <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Family/personal circumstances	18.6	21.2	16.2	16.5	16.9	21.7	21.1
	Statistical significance: $\chi^2(5) = 6.3$ , $p = .278$ <u>Conclusion:</u> There is not enough evidence from the data to say that the means vary by facility type.						
(Question 29 continues on next page.)							



29. (cont'd) What factors are causing you to seek a career change? <i>Select all that apply.</i> (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)							
Analyses limited to respondents who met the following criterion: ❖ CCC-SLP							
Factor	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n ≥ 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
High productivity demands	17.8	11.9	12.7	14.1	15.5	15.8	32.4
		Statistical significance: $\chi^2(5) = 70.0$ , $p = .000$ , Cramer's V = .206 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.					
Paperwork (clinical and reimbursement)	12.5	5.8	17.2	14.1	10.2	12.5	12.1
		Statistical significance: $\chi^2(5) = 19.4$ , $p = .002$ , Cramer's V = .108 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.					
Unstable work hours	11.4	7.5	12.4	6.5	6.8	3.3	23.7
		Statistical significance: $\chi^2(5) = 80.7$ , $p = .000$ , Cramer's V = .221 <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.					
Direct or indirect effect of COVID-19	11.1	9.5	8.6	8.2	6.8	8.3	20.1
		Statistical significance: $\chi^2(5) = 38.5$ , $p = .000$ , Cramer's V = .152 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.					
(Question 29 continues on next page.)							

29. (cont'd) What factors are causing you to seek a career change? <i>Select all that apply.</i> (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)							
Analyses limited to respondents who met the following criterion: ❖ CCC-SLP							
Factor	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n ≥ 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
Insufficient reimbursement for patient care	9.4	5.5	13.4	7.4	3.4	5.8	14.1
	Statistical significance: $\chi^2(5) = 26.9$ , $p = .000$ , Cramer's V = .127 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.						
Ethical challenges	8.9	6.1	6.2	3.7	3.4	5.8	23.1
	Statistical significance: $\chi^2(5) = 115.4$ , $p = .000$ , Cramer's V = .264 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.						
Low/unsustainable caseload	6.0	2.4	6.5	2.4	0.0	0.8	16.9
	Statistical significance: $\chi^2(5) = 102.9$ , $p = .000$ , Cramer's V = .249 <u>Conclusion:</u> There is adequate evidence from the data to say that the responses vary by facility type.						
Managing caseloads at multiple sites	4.8	2.0	5.2	2.4	1.7	1.7	10.7
	Statistical significance: $\chi^2(5) = 44.8$ , $p = .000$ , Cramer's V = .164 <u>Conclusion:</u> There is adequate evidence from the data to say that the means vary by facility type.						
	(Question 29 continues on next page.)						

29. (cont'd) What factors are causing you to seek a career change? *Select all that apply.* (Percentages; we changed the order of responses from alphabetic to descending order of frequencies.)  
 Analyses limited to respondents who met the following criterion:  
 ❖ CCC-SLP

Factor	Facility Type						
	All Facility Types (n = 1,671)	General/VA/ Military/ LTAC/ University Hospital (n ≥ 293)	Home Health/ Client's Home (n ≥ 291)	Outpatient Clinic/ Office (n ≥ 539)	Pediatric Hospital (n ≥ 58)	Rehab Hospital (n = 120)	Skilled Nursing Facility (n ≥ 354)
Keeping current with advances in clinical information related to my caseload	4.7	4.1	4.8	4.3	3.4	5.0	5.6
	Statistical significance: $\chi^2(5) = 1.4, p = .921$ <u>Conclusion:</u> There is not enough evidence from the data to say that the means vary by facility type.						
None of the above	8.6	10.2	6.9	10.8	5.2	9.2	5.6
	Statistical significance: $\chi^2(5) = 10.2, p = .069$ <u>Conclusion:</u> There is not enough evidence from the data to say that the means vary by facility type.						