Guidelines for the Clinical Doctorate in Speech-Language Pathology

Ad Hoc Committee on Guidelines for the Clinical Doctorate in Speech-Language Pathology

About This Document

This guidelines document is an official policy of the American Speech-Language-Hearing Association (ASHA) and was prepared by the Ad Hoc Committee on Guidelines for the Clinical Doctorate in Speech-Language Pathology (GCD-SLP). Members of the Committee were Kathy Chapman (Council of Academic Programs in Communication Sciences and Disorders [CAPCSD] representative, October 2014–June 2015); Anthony DiLollo (Academic Affairs Board [AAB] representative); Neil DiSarno (ASHA staff consultant); John Folkins (Special Interest Group 10, Issues in Higher Education representative); Richard Folsom, (CAPCSD representative, June–October 2014); Sue Hale (Council on Academic Accreditation in Audiology and Speech-Language Pathology [CAA] representative); Gail Kempster (academic program representative); Paula Leslie (academic program representative); Bonnie Martin-Harris (chair); Lemmietta McNeilly (ASHA staff consultant); Lauren Nelson (CAA representative); Loretta Nunez (ex officio); Wren Newman (academic program representative); Shari Robertson (ASHA Board of Directors liaison); Margaret Rogers (ASHA staff consultant); and Patti Tice (ASHA staff consultant).

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Introduction
The clinical doctorate in speech-language pathology is an advanced clinical practice degree that is distinct from the entry-level master’s degree in speech-language pathology as well as the research PhD. This degree is intended to prepare speech-language pathologists to assume advanced professional roles—such as master clinician, clinical educator, clinical administrator, or leader in a clinical setting or area of specialization—or to serve as collaborators and supporters of clinical research. Students entering a post-entry-level clinical doctoral program are expected to have earned the master’s degree and hold or qualify for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), awarded by the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) of ASHA.

Background
The ASHA Board of Directors (BOD) received a letter in March 2011 from five administrators—representing three different academic programs in speech-language pathology—requesting that the ASHA BOD, through a coordinated planning process, initiate substantive discussion and consideration of a planning mechanism for clinical doctoral programs in speech-language pathology. The BOD subsequently charged the Academic Affairs Board (AAB) to consider the role of a clinical doctoral degree in speech-language pathology and to formulate recommendations to advise the ASHA BOD on this matter. Accordingly, the AAB investigated several aspects of the potential impact on the profession, given that the number of such programs is increasing.

The AAB reported to the ASHA BOD on the role of a clinical doctoral degree in speech-language pathology in October 2012. As part of this report, the AAB recommended to the BOD that a standards program for the clinical doctoral degree be considered. The BOD established the Ad Hoc Committee on the Feasibility of Standards for the Clinical Doctorate in Speech-Language Pathology to explore standards options, including guidelines, recognition, or accreditation, as well as the cost and resources needed to establish standards for the clinical doctorate in speech-language pathology. After considering the three options, the ad hoc committee recommended, in its November 2013 report to the BOD, that guidelines be established.

The ASHA BOD approved the development of guidelines (rather than a recognition or an accreditation program) for academic programs offering the clinical doctorate in speech-language pathology. The BOD also approved a recommendation to monitor the growth of clinical doctoral programs in speech-language pathology to determine whether accreditation would be warranted in the future. Below are the recommendations approved as part of resolution BOD 02-2014.
1. ASHA initiate the development of guidelines for academic programs offering the clinical doctorate in speech-language pathology;
2. ASHA and CAPCSD, through the *Communication Sciences and Disorders (CSD) Education Survey*, monitor the rate of development of such clinical doctoral programs, including the number of programs and number of students enrolled and graduated;
3. ASHA monitor the success of guidelines use, growth of programs, financial variables, and relevant risk factors to determine when or if recognition or accreditation is warranted.

Consequently, this committee, the Ad Hoc Committee on Guidelines for the Clinical Doctorate in Speech-Language Pathology (GCD-SLP), was formed in 2014 and charged with developing academic program guidelines, which could include quality indicators, to provide counsel to institutions developing clinical doctoral programs in speech-language pathology. The work of the committee followed commonly accepted best practice for the development of guidelines (e.g., literature review, development of domains and related knowledge and skills, identification of quality program characteristics, and select and widespread peer review). The committee’s work concluded in June 2015.

**Key Features**
The guidelines encompass the areas that require consideration for those programs that are developing a clinical doctorate in speech-language pathology degree program or those individuals who are considering enrolling in an existing program. The guidelines reflect that the degree is an advanced post-entry-level clinical degree and emphasize the broad spectrum of components that are needed for a quality clinical doctoral program.

The guidelines cover six general components that should be addressed by all clinical doctoral programs in speech-language pathology. These are (1) Administrative Structure and Governance, (2) Academic and Clinical Faculty, (3) Students, (4) Assessment, (5) Program Resources, and (6) Curriculum. For each component, guidelines are identified to assist programs in addressing the intended purpose of the degree.

**Guidelines**

1. **Administrative Structure and Governance**
   a. The institution holds regional accreditation.
   b. The program is housed in an institution with an existing CAA-accredited master’s speech-language pathology program or a PhD program that educates speech-language pathologists.
c. The program develops a mission and goals consistent with its institutional mission and that are appropriate for advanced clinical practice in speech-language pathology.
d. The program provides information to the public that is current, accurate, and readily available. Such information includes admission criteria, program requirements, and institutional policies.

2. **Academic and Clinical Faculty**
a. The speech-language pathology faculty is sufficient in number to support the program's mission and goals and has appropriate expertise in stated areas of clinical specialization. Faculty in other professional areas contribute to the program, as appropriate.
b. The program director and faculty have responsibility and authority for the program.

3. **Students**
a. Students accepted into the clinical doctoral program meet the minimum academic requirements for admission to doctoral study at the institution.
b. Students will have earned the master’s degree in speech-language pathology or—if students have been educated in a non-U.S. program—its equivalent education degree as evaluated by an approved credential evaluation service.
c. Students admitted to the clinical doctoral program hold or qualify for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) or the accepted credential in the country of practice. Guidance regarding equivalency of some international credentials can be obtained from the Mutual Recognition Agreement (MRA, 2008), signed by ASHA and five other CSD professional organizations.
d. The program provides ongoing mentoring throughout each student’s program of study.

4. **Assessment**
a. The program conducts ongoing and systematic assessment of student performance and of timely program completion.
b. The program conducts regular and ongoing self-assessment to ensure program effectiveness and quality improvement.

5. **Program Resources**
a. The institution provides adequate financial support to ensure viability of the program.
b. The program has access to appropriate physical facilities, equipment, support personnel, and services that are sufficient to achieve its mission and goals.
c. The program has access to appropriate clinical resources to support the students' areas of study.
6. **Curriculum**

a. The program’s curriculum leads to a doctoral level clinical degree with a major emphasis in speech-language pathology. The academic and clinical curriculum is consistent with the mission and goals of the program and prepares students with in-depth knowledge and advanced skill development in select areas of clinical practice in speech-language pathology.

b. The program offers appropriate courses and clinical experiences on a regular basis so that students are able to satisfy the degree requirements within the published time frame. The achievement of these outcomes is expected to require the completion of at least 2 years of full-time equivalent doctoral study. The curriculum may be delivered via multiple modalities (e.g., residential and synchronous/asynchronous distance) to reflect the program’s mission and goals, faculty expertise, and areas of clinical specialization. Regardless of the mode of education delivery, these guidelines reflect the expectation that the program faculty maintain oversight and mentoring responsibilities.

c. The curriculum provides the opportunity for students to participate in diverse mentored clinical experiences. The program provides sufficient depth of opportunities for students to obtain clinical experiences in specific work settings and with specific populations. It is the program’s responsibility to design, organize, administer, and evaluate the overall advanced clinical development of each student. The manner and amount of clinical mentorship are determined and adjusted to reflect the competence and needs of each student in developing advanced skills in clinical practice. The program has access to appropriate clinical resources to support the students’ areas of study.

d. The scientific and research foundations of advanced clinical practice are evident in the curriculum. The curriculum provides opportunities for students to critically evaluate, interpret, and apply research literature with an emphasis on the principles of evidence-based practice. Sensitivity to influences of diversity is infused throughout the curriculum. The program provides evidence that the curriculum is regularly and systematically evaluated and updated to reflect current knowledge and skills.
The following curriculum component is organized into 10 domains, each with a series of knowledge and skills that exemplifies educational outcomes specific to the particular domain. The domains are divided into two tiers. Tier I includes four domains. The knowledge and skills in Tier I domains are essential for the quality of the program, and all are included in the curriculum. Tier II includes six domains, which are also included in the curriculum. The individual knowledge and skills within each Tier II domain may be tailored to meet the strengths of individual programs and needs of the students, as reflected in Figure 1 below.

Figure 1: SLP Clinical Doctoral Curriculum Domains

Programs of study are sufficient in depth and breadth for graduates to achieve the knowledge and skills outcomes identified below.

Tier I
Tier I includes four domains. For each domain, all elements are included in the curriculum.

I.A. **Depth of knowledge and advanced skill development in select areas of clinical practice**
1. Demonstrate depth and breadth of knowledge in declared area(s) of clinical specialization.
2. Demonstrate advanced skills in declared area(s) of clinical specialization.
3. Demonstrate ability to justify clinical decisions based on research evidence and theory.
4. Evaluate different intervention approaches with respect to outcomes measures, such as those in the International Classification of Functioning, Disability and Health (ICF) model (World Health Organization, 2001).
5. Demonstrate in-depth knowledge of delivery models, policies, and systems related to continuum of care and real life circumstances.
7. Implement practice strategies to improve outcomes in area(s) of clinical specialization.
8. Demonstrate ability to develop and deliver professional education in declared area(s) of clinical specialization.
10. Evaluate the relative strengths and weaknesses of various resources and technological tools for clinical service delivery.

I.B. Critical thinking and clinical problem solving 1
1. Integrate and apply theories, models, and frames of reference that underlie the practice of speech-language pathology.
2. Integrate advanced knowledge by linking literature to evidence-based practice and philosophy.
3. Participate in self-assessment and reflection to identify, monitor, and enhance clinical reasoning and improve patient/client outcomes.
4. Reflect on ambiguities and evaluate underlying values and assumptions in the practice of speech-language pathology.
5. Determine the issues, evaluate options, and justify clinical and professional decisions.
6. Demonstrate a commitment to continuous advanced learning.

I.C. Clinical education, teaching, supervision, and mentorship
1. Develop a theory-based philosophy of teaching to inform clinical education.
2. Apply teaching strategies that are grounded in adult learning theories and principles.
3. Describe the importance of the professional responsibility for providing clinical education.

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1 Critical thinking “entails the examination of those structures or elements of thought implicit in all reasoning: purpose, problem, or question-at-issue; assumptions; concepts; empirical grounding; reasoning leading to conclusions; implications and consequences; objections from alternative viewpoints; and frame of reference” (The Critical Thinking Community at criticalthinking.org).
4. Demonstrate knowledge of the criteria and competencies for a clinical educator.
5. Demonstrate competency in the supervision of students in clinical activity through mentored experiences.
6. Demonstrate knowledge of appropriate mentoring of clinical fellows.
7. Demonstrate knowledge of appropriate supervision of speech-language pathology assistants (SLPAs), as described in ASHA’s *Scope of Practice in Speech-Language Pathology* (2007) and *Speech-Language Pathology Assistant Scope of Practice* (2013).
8. Demonstrate ability to mentor and coach others effectively (e.g., personnel, colleagues, students).
10. Participate in peer-assessment activities.
11. Produce instructional materials using technological resources and tools that demonstrate sound design principles.

I.D. **Expertise in interpreting and applying clinical research**
1. Critically evaluate the validity of research studies, including their design (quantitative and qualitative), methodology, and findings.
2. Justify clinical decision making based on interpretation of research findings in the context of other relevant sources.
3. Assess the effectiveness of intervention programs and outcomes using reliable and valid measures at both the individual and system levels.
4. Participate in clinical research that contributes to the body of knowledge for the profession of speech-language pathology.
Tier II
All Tier II domains are included in the curriculum. The individual knowledge and skills within each Tier II domain may be tailored to meet the strengths of individual programs and needs of the students.

II.A. Professionalism and ethical decision making
1. Serve as a resource to others regarding the ASHA Code of Ethics, Scope of Practice in Speech-Language Pathology, standards, and policy documents.
2. Evaluate practices to avoid conflicts of interest, biases, or preferences related to the professional's clinical judgments or research.
3. Respond to complex ethical dilemmas, including those that emerge from evolving technologies, regulatory changes, and emerging service-delivery models.
4. Demonstrate strategies for analyzing issues and making decisions to resolve personal and organizational ethical conflicts.
5. Develop strategies for effective, competency-based ethical supervision of students, practitioners, and related personnel.
6. Develop policies that promote professionalism and the adherence to ethical principles and rules of conduct.
7. Model the highest level of integrity and professional behavior in all interactions.
8. Recognize the constraints associated with providing nondiscriminatory and culturally competent services within systems of finite resources.

II.B. Oral and written communication about the clinical enterprise
1. Lead and facilitate effective professional interactions through written, oral, and nonverbal communication.
2. Communicate effectively the nature and value of the profession of speech-language pathology to a variety of audiences.
3. Demonstrate ability to write program proposals and management plans for the provision of services to individuals and clinical populations.
4. Write scholarly reports appropriate for dissemination in journals or other professional publications.
5. Create, deliver, and evaluate professional presentations.
6. Develop theory-based counseling skills to facilitate understanding and coping among patients, clients, students, families, and other constituent groups.
7. Demonstrate skills in conflict resolution, mediation, and negotiation.
8. Communicate strategies to individuals served to assist in their self-advocacy efforts.
9. Demonstrate person-centered interaction and communication and personal qualities, such as empathy, respect, and active listening.
II.C. **Advocacy and leadership**

1. Demonstrate advocacy skills to optimize person-centered outcomes.
2. Demonstrate leadership strategies to enhance communication, behavior, and performance of others.
3. Develop advocacy skills to influence policies that frame practice regulation, efficacy, access, and quality.
4. Evaluate and implement quality improvement strategies for creating and sustaining changes at the organizational and policy levels.
5. Display the ability to lead and sustain a diverse team to meet the needs of the populations being served.
6. Advocate for speech-language pathology services by educating others (e.g., service providers, administrators, consumers, third-party payers, regulatory bodies, the public).
7. Advocate for service models that address the needs of underserved populations.
8. Serve the profession by engaging in state and national organizations.
9. Demonstrate the ability to administer and manage programs, departments, organizations, and systems.
10. Demonstrate knowledge of strategies that promote staff development.

II.D. **Interprofessional practice**

1. Employ consultative, mentoring, and leadership skills with interprofessional and collaborative teams to create change or coordinate service delivery.
2. Navigate and integrate services across practice settings.
3. Facilitate coordination of care, case management, and transition services in practice environments.
4. Apply knowledge of one’s own role and expertise in collaboration with those of other professions to appropriately assess and address the needs of individuals and populations served.
5. Demonstrate knowledge of the principles of team dynamics.
6. Apply knowledge and skills to support decision making in the provision of culturally responsive services and team coordination.
II.E. **Regulatory and reimbursement expertise**
1. Demonstrate knowledge of how service delivery systems are organized and financed (e.g., federal, state, third party, private payer).
2. Develop systems of documentation that address regulatory and reimbursement requirements.
3. Adapt existing models or develop new service-provision models to respond to changes in policy, regulatory agencies, and reimbursement and compliance standards.
4. Use data to demonstrate the value of services from an individual to a systems level.
5. Evaluate the implications of regulatory and reimbursement issues associated with alternative methods of service delivery (e.g., telepractice).

II.F. **Service delivery in a diverse society**
1. Conduct critical review of the literature in other disciplines to support culturally competent professional practice.
2. Synthesize culturally based evidence to determine appropriate practice and service delivery across diverse populations.
3. Model culturally appropriate behaviors in practice and service delivery that reflect the changing needs of diverse populations.
4. Assess the quality of services provided to diverse groups and use the results to make program improvements.
5. Use strategies that reflect cultural competence in clinical teaching and mentorship.

**Degree Designator**

The degree designator may be determined by institutional and/or state licensing bodies. It is recommended that, where possible, the designator *Doctor of Speech-Language Pathology (SLPD)* be used. Identifying one primary degree designator should help to promote consistency across programs and reduce confusion for both the public and potential students. In addition, the SLPD designator also serves to highlight that this is specifically a speech-language pathology degree and not a more broadly based clinical or science degree. This recommendation is not intended to devalue existing degrees that use an alternative designator (e.g., CScD, DSLP).
Glossary

**Academic Affairs Board (AAB)**
An ASHA standing committee charged to (a) identify and monitor critical issues, forecast needs and trends, develop resources, implement programs, and recommend actions that address academic preparation and (b) support and enhance capacity-building efforts in response to clinical and faculty-researcher personnel needs and shortages.

**Accreditation**
The voluntary process of external quality review to evaluate colleges, universities, and programs for quality assurance and quality improvement and to verify that the entity has met predetermined and standardized criteria. Accreditation typically includes an evaluation of written documentation as well as an on-site visit to the institution or program to verify the information in the written documentation and to triangulate data from various sources.

**Board of Directors (BOD)**
The single governing body of the American Speech-Language-Hearing Association (ASHA). The BOD actively promotes the objectives of ASHA in accordance with the Association’s bylaws.

**Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA)**
A semiautonomous body of ASHA with governing responsibility for the accreditation program for master’s programs in speech-language pathology and clinical doctoral programs in audiology. The CAA’s charge is to formulate standards for the accreditation of graduate education programs that provide entry-level professional preparation in audiology and/or speech-language pathology, evaluate programs that voluntarily apply for accreditation, and award accreditation to those programs deemed to have fulfilled requirements for accreditation.

**Council of Academic Programs in Communication Sciences and Disorders (CAPCSD)**
An organization of academic programs that offer undergraduate and/or graduate degrees in communication sciences and disorders (CSD). CAPCSD’s goal is to promote quality, accessibility, and innovation in CSD in higher education.

**Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC)**
A semiautonomous body of ASHA that is charged with defining the standards for clinical certification and applying those standards in awarding the Certificate of Clinical Competence in Audiology (CCC-A) and the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP).
Continuum of Service Delivery
A range of service delivery options that are determined to be best for an individual and his/her family based on the setting. Options along the continuum include direct contact for assessment and intervention; telepractice; supervising/mentoring support personnel (i.e., speech-language pathology assistants), graduate student clinicians, and clinical fellows; and consultation.

Credentialing Evaluation Service
An independent organization that performs analyses of academic records and educational credentials of individuals from non-U.S. institutions to determine degree equivalence and provide an evaluation summary of how a particular qualification compares to similar qualifications in the U.S. education system, labor market, or the professions.

Distance Education
Education that uses one or more of the technologies to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously.

Domains
A set of organized categories characterizing subject matter under which knowledge and skills may be represented in specifications for curricula, assessment instruments, and other related matters. A domain may include the essential behaviors that should be exhibited by an individual in a specific job or may be considered as a blueprint, outlining the ideal behaviors that an individual should exhibit on the job.

Entry-Level Clinical Degree
The degree required to qualify for credentials to practice independently in one’s profession (e.g., ASHA’s Certificate of Clinical Competence, state licensure). The entry-level degree to become an ASHA-certified audiologist is a clinical doctorate (e.g., AuD). The entry-level degree to become an ASHA-certified speech-language pathologist is a master’s degree (e.g., MA, MS).

Guidelines
Statements, principles, or specifications to provide advisement or instruction as an indication of quality, best practice, or processes related to a task, activity, or course of action. By definition, a guideline is not mandated, binding, or enforced.

Interprofessional Practice (IPP)
When multiple service providers from different professional backgrounds provide comprehensive health care or educational services by working with individuals, their families, caregivers, and communities to deliver the highest quality of service across settings. (Definition
adapted by ASHA from the *Framework for Action on Interprofessional Education and Collaborative Practice* [World Health Organization, 2010]).

**Knowledge and Skills**
Subject matter content and abilities within identified domains required to perform a specific task or job, often designated as competencies or outcomes to be achieved associated with a degree or credential. Knowledge and skills are typically developed by a panel of subject matter experts and validated through a peer review process.

**Mutual Recognition Agreement (MRA)**
An agreement for mutual recognition of the substantial equivalence of the speech-language pathology certification programs of the following associations: the American Speech-Language-Hearing Association, Speech-Language and Audiology Canada, the Royal College of Speech and Language Therapists, the Speech Pathology Australia, the Irish Association of Speech and Language Therapists, and the New Zealand Speech-language Therapists' Association (Incorporated). The MRA provides procedures by which certificate holders, certified members, or full members of the signatory associations can apply for expedited certification by the associations in the other counties.

**Post-Entry-Level Clinical Degree**
An advanced clinical degree in one’s profession that may be earned by individuals already credentialed for independent professional practice. The clinical doctorate in speech-language pathology (e.g., CScD, SLPD) is a post-entry-level advanced clinical degree.

**Recognition**
A process whereby a credential is awarded to an entity that typically includes verification by a third party of compliance with predetermined and standardized criteria through an external review of written documentation. A recognition program assumes some level of accountability and some external evaluation against a set of expectations; it is more rigorous than a self-assessment by the organization, but usually is a less formalized and less prescriptive application of criteria than is accreditation.

**Research doctoral degree**
A degree (e.g., PhD) designed to prepare individuals for an academic and research career with the expectation that the degree holder will contribute to the science of the discipline.
References


Resources


