Enhancing Service Delivery Across the Continuum
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Speaker Disclosure

Financial:
• Employed by ASHA as Chief Staff Officer, Speech-Language Pathology

Nonfinancial:
• Member of Strategic Objective #4 Team
Learning Outcomes

After watching this presentation, you will be able to:

1. Identify ways to practice at the top of the license
2. Write functional goals using the International Classification of Functioning, Disability and Health (ICF) framework
3. Manage your workload by implementing alternative service delivery options, such as consultations or telepractice

Topics

- ASHA’s envisioned future and pathway
- Changing landscapes: health care and education
- Reframing the SLP profession
- Service delivery options
  - SLPAs, telepractice, IPE/IPP
- ICF framework – writing functional goals
- What do SLPs need to do now?
What Challenges Do You Experience?

- Health Care
- Schools
- Early Intervention
- Private Practice
- Reimbursement
- Documentation

ASHA’s Envisioned Future 2025 and Strategic Plan
Enhancing Service Delivery Across the Continuum
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ASHA’s Envisioned Future: 2025
ASHA’s Envisioned Future supports the Association’s Vision of making effective communication, a human right, accessible and achievable for all.

It is 2025, and the American Speech-Language-Hearing Association (ASHA)—the professional, scientific, and credentialing association for audiologists, speech-language pathologists, and speech, language, and hearing scientists—leads the efforts in advocating for the clients its members serve. ASHA also plays an unparalleled role in advancing, sustaining, and promoting the discipline of communication sciences and disorders, related functions, and methods of communication. The Association’s contributions to enriching the professions and commitment to diversity, inclusion, advocacy, and collaboration with related professional entities are well known and respected.

When policy makers, payers, federal and state agency personnel, media, other professionals, and consumers need guidance, knowledge, and advice on standards, credentials, scope of practice, research, legislation, regulations, and clinical information related to communication sciences and related disorders, including swallowing, balance, and vestibular disorders, they communicate with ASHA.

http://www.asha.org/About/ASHAs-Envisioned-Future/

http://www.asha.org/uploadedFiles/Strategic-Pathway-to-Excellence-Map.pdf
Strategic Objective #4

“Enhanced service delivery across the continuum of care to increase value and access to services”

- Working with support personnel
- Preparing audiologists and speech-language pathologists for changes
- Supporting them in collaborative practice
Strategic Objective #4

• Supervising clinicians and students in training

• Practicing at the “top of the license”

• Promoting clinical education models of practice across the continuum of care, including clinical doctoral preparation

Strategic Objective #4

• Telepractice

• Demonstrate value of services and promote access to services

• Enhance members’ awareness of collaborative practice and multiple service delivery options
Performance Measures

1. Number of members who report engagement in service delivery that involves practicing at the “top of the license” and using extenders to address functional patient/student outcomes

2. Number of academic programs that infuse the concepts of varied continuum of service delivery options within the curriculum (e.g., practice at the “top of the license,” using assistants) that target functional patient/student outcomes

3. Number of members who report telepractice engagement

Strategic Initiatives

1. Develop informational resources, including models, that define and explain the concepts of varied continuum of service delivery (e.g., support personnel, telepractice, practicing “at the top of the license,” etc.)

2. Disseminate customized resources and information to targeted audiences and showcase successful models that demonstrate the concepts of varied continuum of service delivery (e.g., academic programs, practitioners, members, etc.)
Strategic Initiatives

3. Maintain, enhance, and disseminate “state-of-the-art” resources on telepractice

4. Promote the use of telepractice among members working with select populations in disorder areas where funding/reimbursement is already in place

Changing Landscapes: Health Care and Education
Health Care Landscape Summit
October 2012

TRIPLE AIM Framework

Improve Health

TRIPLE AIM

Better Care

Lower Costs

Institute for Healthcare Improvement, 2007 (www.ihi.org)
Purposes of the Summit

• Provide forum for knowledge transfer, open discussion about changing health care landscape

• Discern specific implications of health care reform including the professions of speech-language pathology and audiology

Health Care Landscape

• Escalating costs

• Affordable Care Act

• Changing reimbursement models

• Quality outcome measures
Medicare Trying To Limit Overutilization

- High documentation demands/increased denials/Department of Justice investigations
- Trend toward alternative payment models rather than fee for service
- Focus on value, outcomes, performance measures

Private Insurers Will Follow Similar Trends

Affordable Care Act, Impact Act, Etc.

Challenges In Hospitals

- Staff reduction
- Outcomes reporting
- Cost-savings focus
Why Change Anything Now?

• Costs too high
• Government can’t continue to fund Medicare
• Affordable Care Act
• Necessity for functional patient outcomes
• Need for quality service delivery models

Outcomes of the Summit

Identified a set of options and gained consensus recommendations for strategic actions that respond to health care challenges and opportunities in the areas of:
• Professional practice
• Research and data needs
• Professional preparation
• Member education and interprofessional education
• Information dissemination to energize change
Summit Summary

Determine ASHA’s role in proactively safeguarding the professions in light of the changing landscape of health care

http://www.asha.org/uploadedFiles/ASHA/Practice/Health-Care-Reform/Healthcare-Summit-Executive-Summary-2012.pdf

Ad Hoc Committee on Reframing the Professions

December 2013
School TRENDS

- Teacher accountability
- State standards
- Medicaid/budget constraints
- SLPAs
- Collaboration
- Shortages and expanding workload
- Every Student Succeeds Act (ESSA)

What Are Functional Outcomes in the School Setting?

- Goals are tied to the state standards and district curriculum
- Goals are designed to improve the student’s academic, social, and emotional functioning
- Goals promote improved communication in various school and community settings
The roles and responsibilities of SLPs listed below should provide the basis for speech-language services in schools to promote efficient and effective outcomes for students:

- **Critical roles** – SLPs have integral roles in education and are essential members of school faculties.
- **Range of responsibilities** – SLPs help students meet the performance standards of a particular school district and state.
- **Collaboration** – SLPs work in partnership with others to meet students’ needs.
- **Leadership** – SLPs provide direction in defining their roles and responsibilities and in ensuring delivery of appropriate services to students.

**Audiology TRENDS**

- Unbundling of services
- Direct-to-consumer hearing tests and hearing aid sales
- Personal sound amplification products (PSAP)
- Audiology assistants
Private Practice

TRENDS

- Expenses increasing and reimbursement decreasing
- Health plans and Medicaid
  - Increased denials
  - Fewer sessions approved
  - Demand for measurable outcomes, functional improvement, cost savings

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How Is the Clinical Paradigm Changing?

- Move from deficits/impairments to functional effectiveness
- Move from silos to interprofessional collaborative practice
- Include consultations with other professionals that enhance care coordination within and across settings
- Expand beyond traditional service models
- Consider the social determinants of health
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Regulations

- IDEA
- ESSA
- EHDI
- Medicaid
- State licensure
- Reimbursement

- FERPA
- HIPAA

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FACING THE CHALLENGES
Speech-Language Pathology

- Expand the clinical paradigm
- Reframe the profession
- Outcomes, databases, and quality
- Professional preparation
- Member education
- Widespread dissemination of information
### Quality and Outcomes Measurement Needs

- SLPs need guidance documents for optimal practice (e.g., pathways, protocols)
- Update National Outcomes Measurement System (NOMS)
- Outcomes focused on patient/student functional measures
- Patient-reported outcomes
- Consider cross-professional outcomes tool

### Demonstrating Value and Outcomes

- Adhere to best practices (e.g., Practice Portal, institutional protocols and procedures, EBP)
- Participate in ASHA’s National Outcomes Measurement System (NOMS)
- A new audiology registry is being developed
How To Be Trustworthy?

- Demonstrate safe care
- Use standard practice guidelines
- Be accountable for our behavior
- Manage knowledge
- Utilize a value creation system

(McCarthy & Klein, 2011; Marx, 2001)

Innovative Approaches to Pre-Professional Education

- Clinical practicum “active” approaches (e.g., simulation, case-based or problem-based learning)
- Interprofessional education (IPE)
- Supervision training of support personnel
- Documentation, billing, and coding
Innovative Approaches to Professional Education

- Interprofessional collaborative practice
- Professional learning communities (PLCs)
- Supervision training
  - Support personnel
  - Graduate students
  - CFs
  - SLPs
  - Other professionals
- Leadership development
- Advocacy education
- Specialty certification
- SLP clinical doctoral programs

Practicing at the “Top of the License”

May require new ways of thinking/working by:

- Delegating responsibilities that do not require professional interpretation and judgment
- Enhancing supervision and management skills
- Demonstrating and articulating our own unique knowledge and skills (value) and how we can contribute to teams
Practicing at the “Top of the License”

“Audiologists and SLPs should engage in ONLY those patient/student/client care activities that require their level of expertise and skill.”

*Ad Hoc Committee on Refreshing the Professions*

Includes:

- Assessment
- Skilled intervention
- Consultations (with colleagues regarding functional goals and treatment option)
- Delegation (supervision/mentoring)
  - Clinical fellows
  - Students
  - Support personnel (speech-language pathology/audiology assistants)
  - Technicians, family members, volunteers
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PARADIGM SHIFT
TO PERSON-CENTERED CARE

Using the ICF framework to develop individual functional goals

Overview of ICF

https://youtu.be/p_WvTrr_yPc

Overview of the International Classification of Functioning, Disability and Health (ICF)

Travis Threats, PhD
2015 ASHA Ad Hoc Committee on the ICF
Overview of ICF

Developed by the
World Health Organization (WHO)
in 2001

Provides a framework for an individual’s functioning and disability within the context of his/her activities and social roles in everyday life.

ICF FRAMEWORK

of Health and Disability (WHO, 2011)

APPLICATIONS OF FRAMEWORK

INDIVIDUAL LEVEL | INSTITUTIONAL LEVEL | SOCIAL LEVEL

- Body functions and structures (impairment)
- Activities (Limitation)
- Participation (Restriction)
- Environmental factors
- Personal factors

ICF Online

http://apps.who.int/classifications/icfbrowser/

ICF

- Addresses functioning
- Is not based on etiology or “consequence of disease” but as a component of health
- The World Health Organization defines health as “the complete physical, mental, and social functioning of a person and not merely the absence of disease.”
- In this definition, functioning, as classified in the ICF, is an essential component of health
ICF

Describes health and health-related domains using standard language

The purposes of the ICF include:
- Collection of statistical data
- Clinical research
- Clinical use
- Social policy use

Functional Goal Writing
**Functional Goals**

**Target** individually **meaningful activities** or roles that a person cannot perform or avoids performing as a result of a health condition.

**Why Target Functional Goals?**

- To **maximize outcomes**, because treatment of impairments alone may not lead to functional improvement or be meaningful to the individual.
- To **optimize** the individual’s **potential** to engage in meaningful activities following discharge.
- To **increase engagement** with clients and their families.
- To **demonstrate the value** of skilled services to payers.
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**Functional Goals Using ICF**

Click below for more information...

- Acquired Apraxia of Speech
- Aphasia
- Cleft Lip and Cleft Palate
- Dementia
- Dysarthria
- Permanent Childhood Hearing Loss
- Severe Hearing Loss and Falls
- Specific Language Impairment
- Speech Sound Disorder
- Swallowing
- Tinnitus Management
- Traumatic Brain Injury
- Voice

**ICF Case Study: SLP**

https://youtu.be/r2Gcy3EwcCE
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Specific Language Impairment

Swallowing
http://www.asha.org/uploadedFiles/ICF-Swallowing.pdf
Service Delivery

- Extenders
- Consultations
- Intensive treatment
- Service delivery models
- Telepractice

Continuum of Service Delivery

Using extenders
- Rehab technicians
- Family members
- Community workers
- SLPAs
Continuum of Service Delivery

Consultations
- Other professionals
- Individuals and families
- Self management

Intensive treatment
- More frequent sessions scheduled in blocks

Service delivery models
- Varying location, frequency, length of sessions
Continuum of Service Delivery

Telepractice

- State laws
- Equipment and software
- Requirements at both locations

Telepractice

- Provide resources for SLPs and audiologists who are interested in provision of services through telepractice
- Promote legislative and regulatory changes to:
  a) Allow the use of and reimbursement for telepractice in the provision of services, even across state lines
  b) Allow for telepractice for supervision, mentoring, and professional consultation
Interprofessional Collaborative Practice (IPP)

World Health Organization Definitions

Interprofessional Education (IPE)

“...two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes.”

Framework for Action on Interprofessional Education and Collaborative Practice, WHO, 2010
World Health Organization Definitions

Interprofessional (or Collaborative) Practice (IPP)

“...multiple health workers from different professional backgrounds provide comprehensive health services by working with patients, their families, caregivers, and communities to deliver the highest quality of care across settings.”

*Framework for Action on Interprofessional Education and Collaborative Practice, WHO, 2010*
Why IPE/IPP?

Why IPP in the Health Care Setting?
Why IPP in a School Setting?

- Patient/student/family is part of the team
- Shared responsibility/accountability
- Role clarification
- Non-hierarchical/non-territorial
- Transparency
- Integrated evaluation, service provision, professional development
- Continuous, seamless, dynamic communication
IP Competencies: Four Domains

Values and Ethics

Roles & Responsibilities

Interprofessional Communication

Teams & Teamwork

Values and Ethics

• Act with honesty and integrity in relationships with patients/students, families, and other team members

• Respect the dignity and privacy of patients/students while maintaining confidentiality of the delivery of team-based care
Roles and Responsibilities

- Communicate one’s role and responsibilities clearly to patients, students, families, and other professionals
- Explain the roles and responsibilities of other care providers and how the team works together to provide care

Interprofessional Communication

- Choose effective communication tools and techniques, including information systems and communication technologies for facilitating discussions and interactions that enhance team function
- Give timely, sensitive, instructive feedback to others about their performance on the team and respond respectfully as a team member to feedback from others
Teams and Teamwork

- Engage other health/education professionals – appropriate to the specific care situation – in shared patient/student-centered problem-solving
- Reflect on both individual and team performance improvement

What Is ASHA Doing?

- Presenting at 10 state association conventions
- Presented at ASHA Convention
- Providing professional development opportunities
- Developing resource pages and info for Practice Portal
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http://www.asha.org/practice-portal/

http://www.asha.org/Practice-Portal/Clinical-Topics/Aphasia/

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http://www.asha.org/Practice-Portal/Clinical-Topics/Pediatric-Dysphagia/

Pediatric Dysphagia

Overview

- Feeding and swallowing disorders fall in the dysphagia category. Dysphagia can occur in any phase of the swallowing process. Difficulties can occur anywhere between oral phase (e.g., liquids or solids) and pharyngeal phase (e.g., difficulty swallowing). Dysphagia can occur during any stage of life, from infancy to adulthood.
- Dysphagia can include difficulty with any step of the swallowing process, from accepting foods and liquids in the mouth to the entry of food into the esophagus and intestines. Dysphagia can also occur in any phase of the swallowing process, from oral phase to pharyngeal phase. Dysphagia can occur in any stage of life, from infancy to adulthood.

http://www.asha.org/Practice-Portal/Professional-Issues/Speech-Language-Pathology-Assistants/

Speech-Language Pathology Assistants

Overview

- Support personnel assist speech-language pathologists (SLPs) in providing services to children in different settings. Support personnel work under the supervision of SLPs. Support personnel may include assistants, SLPs, or other personnel as specified by the SLP. Support personnel must be appropriately trained and supervised.
- Support personnel may include assistants, SLPs, or other personnel as specified by the SLP. Support personnel must be appropriately trained and supervised.
Changes in health care, schools, and communities are creating opportunities for audiologists and speech-language pathologists to use different service delivery options. These options enhance service delivery across the continuum and demonstrate value and functional outcomes for individuals. Options include “top of the license” practice, using support personnel, and telepractice.
Summary

• SLPs practicing collaboratively across the continuum of care (e.g., acute care, inpatient rehabilitation, skilled nursing, home health, outpatient, early intervention, schools, and private practice)
• Determine which services are most beneficial and valuable to the individual’s functioning
• Variations in payment methodologies across settings will impact service delivery options

Ask Yourself

• How can I practice differently?
• How does the patient’s/student’s environment impact his/her goals?
• How do I work with other health care and education providers?
• What changes are needed to support a value-based approach?
What Can I Do Monday?

- Continue to educate yourself
  - ASHA Web site, articles, podcasts, webinars, and other resources
- Provide clear evidence of the value of your services
- Think “out of the box” regarding treatment models
- Share information with your colleagues

Resources

- I Can Function mobile app
  http://icfmobile.org/
- ASHA ICF Resources
  http://www.asha.org/slp/icf
- SLP Case Study – Vickers
  https://www.youtube.com/watch?v=r2Gcy3EwcCE&feature=youtu.be
Resources

- The Practice Portal - Documentation in Health Care and Schools

- Reframing the Professions of Speech-Language Pathology and Audiology

- ASHA Code of Ethics

Questions and Answers

Thank you!!!