Next Steps 2022
Summer Webinar Series

Ad Hoc Committee Plan Next Steps to Re-design Entry-level Education for SLPs
Volunteer Members of the AHC Next Steps

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AHC “Next Steps” CHARGE

• Advance discussion and planning about SLP education:
  • What data, dissemination efforts, and actions are needed to make recommendations and propose a plan?
  • What alternative models of education and changes to the current educational model should be considered?
  • How should stakeholders be engaged to obtain comprehensive input from their larger communities?
Specific Consideration of:

• What competencies are needed? How should they be acquired and measured?
• Which aspects of the current model are serving the profession and public adequately and which are not?
• Are there changes to the current model that would address any gaps or unmet needs that have been identified?

What is needed to adequately prepare SLPs to enter the profession?
This is not about the degree designator!

• The AHC is not examining, or even discussing, the degree designator for the entry-level degree in speech-language pathology (i.e., master’s degree versus clinical doctorate).
  • Not on the agenda
  • Not in the charge
Previous ASHA Ad Hoc Committee: Graduate Education in SLP

AHC-GESLP

Convened in 2018 to gather data and synthesize information to address questions regarding current education model in SLP.

• Which aspects of our current entry-level educational model are serving the profession and the public well, versus falling short, to adequately prepare SLPs across practice settings?
Are there changes to the current model of entry-level education that would address gaps or unmet needs?

- AHC-GESLP 2020 report informs the work of the “Next Steps” ad hoc committee
- Areas were identified regarding what is serving the profession and the public well and what is not.

https://www.asha.org/siteassets/reports/ahc-graduate-education-for-slps-final-report.pdf
Challenges with the Current Model of Entry-Level Education

• Students are not consistently prepared, even across the Big 9, nor sufficiently prepared to enter practice across common work settings for SLPs
• Insufficient student and faculty diversity
• Most UG majors cannot go on in the field yet clinical shortages are severe
• Scarcity of outplacements and supervisors
• Scarcity of SLPs specializing in clinical areas
Challenges with the Current Model of Entry-Level Education

• Trying to fit the full scope of practice across the lifespan into a 2-year master’s program
• The current model lacks a competency-based education framework to guide preparation and self-evaluation of one’s readiness for specific areas of practice
• Access to graduate education is limited due to the predominance of our “full-time residency” model
• Over-reliance on volunteers for supervision
• Unequal training across SLP programs
• Lack of sufficient faculty to teach all topic areas
Some Reflections from AHC-Next Step Members When Asked “What dissatisfies you about the way things are now?”

• “I am concerned about the difficulty that both academic and clinical faculty have in achieving graduate student competency across our ever-expanding scope of practice. While I believe we are successful at teaching foundational clinical skills that apply to all populations across the lifespan and across our scope of practice, we are not successful at achieving competency across the big nine, particularly in the area of implementing evidence-based practice.”

• “I am dissatisfied with the wide-but-shallow preparation that sends clinicians out into the field without a clearly charted path for how to deepen the areas in which that clinician actually ends up working in.”

• “Many graduate classes provide an overview of several methodologies and viewpoints in different areas. That often results in limited knowledge of each methodology and a lack of expertise to apply in daily practice.”

• “Our ever-expanding scope of practice is making graduate education and preprofessional preparation in 5-6 semesters very challenging…I often ponder this thought: has our perception of "entry-level" changed due to this expansion of scope of practice? If so, how have programs adapted? Has the role of the Clinical Fellowship changed in response? Could it? Should it?”
Critical Needs

Significant Challenges

Develop
- Competency-based Ed with pathways to learn, assess, & recognize (signal) specific competencies
- New pedagogy and curricular goals to prepare students for the future of work...

Increase
- SLPs
- Student & faculty diversity
- Student readiness for work, in diverse practice settings & with diverse populations
- Pathways to deepen knowledge across the full SoP

More Opportunities
- Varied clinical experiences
- Critical & analytical thinking
- Oral & written communication
- Research literacy & EBP
- Cultural humility
- Professionalism
- Empathy and more…
Six Working Groups

1. Future of Learning, Work, & Teaching
2. Competency-Based Education
3. Alternative Education Models
4. Clinical Experiential Learning
5. Student Diversity
6. Faculty Development & Capacity
Widespread Stakeholder Engagement

• The goal of the Next Steps webinar series is to communicate what ASHA is working on and to solicit input from stakeholders about their perceptions and to gather ideas about how entry-level education for SLPs can be improved and lifelong learning advanced.

• Webinar attendees (and asynchronous viewers of the webinar presentations) are invited to share their ideas and opinions via a survey link.

• Webinar attendees are also invited to participate in a breakout group discussion, which will be recorded, and then the transcripts will be qualitatively analyzed.

• All survey responses and breakout discussions on the following seven topics will be considered, analyzed and incorporated into the final report.
Watch the “Next Steps” webinar series live or recorded and share your input about each topic!

- Future of Learning, Work, and Teaching – June 7
  futureoflearning@asha.org
- Competency-based Education – June 14
  competencybaseded@asha.org
- Alternative Educational Models – June 21
  alternativeed@asha.org
- Faculty Growth and Sufficiency – June 28
  fdac@asha.org
- Clinical Experiential Learning – July 12
  experientiallearning@asha.org
- Faculty Development – July 19
  fdac@asha.org
- Student Diversity – July 26
  increasesstudentdiversity@asha.org
Alternative Educational Models

Barbara Jacobson, Marnie Kershner, Carol Koch, Sonja Pruitt-Lord, Patti Solomon-Rice, Todd Philbrick, and Margaret Rogers
The Prior Ad Hoc Committee on Graduate Education for Speech-Language Pathologists

Concluded there is a great need to reexamine the current model of entry-level education for SLPs.

- No change in educational model since the master’s degree became the entry-level degree in 1963 although scope of practice has changed significantly.
- Based on multiple surveys across the years, widespread concern has been expressed that students may not be consistently prepared to enter practice nor to deliver services across the full scope of practice across the lifespan.
  - In 2013: 33% of SLP master’s programs reported concerns about capacity to teach across scope of practice.
  - In 2019, 78% of SLP master’s programs reported limited faculty capacity to cover the “Big Nine” curricular areas.

Academic SLP program responses to the 2018-2019 CSD Education Survey
Why Consider Alternative Education Models?

- Students need to learn too much information & too many skills in the limited time available to consistently achieve entry-level competency in across the big nine areas across the lifespan and the variety of practice settings.
- Need to provide greater depth and breadth across the scope of practice and the life span.
- Promoting critical thinking skills is a challenge, especially if we cannot provide opportunities for students to gain greater depth in one or more clinical areas.
What other problems needs to be resolved?

- Need to improve students’ readiness for work, in diverse practice settings, and with diverse populations
- Need more opportunities for varied clinical experiences
- Need to develop and nurture 21st Century competencies
- Need to decrease stress for both students and faculty
- Need to strengthen the quality of services graduates can provide

Also

- Need pathways towards clinical mastery and specialization, especially for early career professionals and transitioning clinicians
- Need to instill lifelong learning and develop a means for external signaling and assessment of specific competencies
• One educational program and one certification for all SLPs covering the full scope of practice across the lifespan.
• This model is what is currently offered but in consideration of how to adequately prepare entry-level students across the full scope of practice, additional credits and time would be added to the current 2-year model.
• Thus, this model would be an expanded version of the current model.
**Track Model**

- Two tracks with separate programs for adult and pediatric populations but with a shared core curriculum for the two tracks. Certification would no longer be across the full scope of practice but rather by track such that students would be educated and certified to practice ONLY with pediatric (birth-18 years) or ONLY adults.
- After graduation, SLPs could become qualified to practice in the other track by completing the educational requirements and passing a qualifying exam for that track.
Modular Model

• Curriculum would be organized into modules (e.g., 12), plus a required core curriculum.

• Programs would offer the core curriculum plus those modules that they choose to offer but at least as many as would be required for graduation and initial certification (e.g., 6). SLPs would be certified to provide services in ONLY those areas for which they have completed the educational requirements and passed the qualifying exam.

• After graduation, SLPs could expand the areas in which they are qualified to practice by completing the educational requirements and passing a qualifying exam for each additional module that they want to add. Certification would be specific to each of the modules.
Options at 4 stages to be considered:

- Pre-entry-level
- Entry-level
- Clinical Fellowship
- Post-entry-level
Pre-entry-level Options

• More time in Undergraduate (or post-bac) programs could be devoted to clinical preparation.

• If a competency-based framework were in place, students could proceed through portions of the curriculum at their own pace.

• Competency assessment (gap analysis) could be useful for focusing students on where additional education is needed to achieve entry-level competency in an area, which could result in increased efficiencies for the same amount of time spent in UG & entry-level programs.
Entry-level Options

• Track or Modular Models (with core courses for all graduate SLP students)
• Lifespan model with extended time added to entry-level degree programs
• Self-directed learning founded within a competency-based framework could help to augment coursework. There could be programs wherein students choose the areas in which they’d like to become more competent and gain greater depth of knowledge.
• This “self-directed learning” approach would benefit from area-specific competency assessments and a way for advanced competency to be nationally understood and recognizable by employers.
Clinical Fellowship Options

- Better utilization of the CF for continued learning is an ideal time for strengthening and developing additional competencies.
- More structure in CF experiences might be needed to help CF supervisors facilitate and support continued learning in specific areas during the CF.
- More structure may need to be imposed as employer expectations and support for continuing education is inconsistent.
Post-entry-level Options

• An important goal to advance lifelong learning is to foster motivation and recognition of advanced competency.

• Pathways to specialized credentials (and differentiated levels of expertise) may be helpful.

• Employing micro and stackable credentials that add up to signal advanced levels of competency could be helpful.

• Certificates and advanced credentials could help incentive lifelong learning.

• A mechanism is needed for competency assessment (gap analysis) for SLPs transitioning to new practice settings and perhaps for certification maintenance.
Breakout Group Instructions

- There are two questions provided to kick off your discussion.
- There will not be a facilitator so please take turns.
- You will have approximately 30-45 minutes.
- No idea is a bad idea!
- There is a person in each breakout group who has volunteered to record the discussion via Zoom. The Zoom recording will be transcribed for qualitative analyses. No personally identifying information will be available or reported.
- Please complete a short survey after the breakout ends. Your participation is essential to the committee’s work and will provide you with additional opportunities to have your opinion heard. You will have up to 2-days to respond to the survey.
- Please copy the link to the survey from the chat or scan the QR code on the next slide. The survey URL and QR code will also be displayed throughout the breakout group discussion.
- Both the recording and survey data will be analyzed and incorporated into the ad hoc committee’s final report. Only group data will be reported.
1. Of the models presented, which is your preference and why?
   • Lifespan +more time; Track, and Modular Educational Models
   • Stages: UG, Entry-level, CF, Post-entry-level

2. Do you have any suggestions about other models that haven’t been discussed that could help to improve the entry-level preparation of SLPs?

3. OPTIONAL: Do you have any suggestions about how we can improve ongoing development of additional competencies for SLPs throughout their careers?

Please take to this survey: https://www.research.net/r/Alternative_Education_Webinar