

From
CLINIC
to
CONFERENCE ROOM



Speech-Language Pathology in the Corporate Sector

B Y K A T I E S C H W A R T Z



Speech-language pathologists can find a potentially rich market in business. There's no better time than now, when health care and education budgets are shrinking, to investigate this market. To do so will be well worth the effort. ♦ The clients of speech-language pathologists have historically been infants, children, older people, hospitalized patients, and people of all ages who have severe communication disorders. But who is serving adults ages 18–64 with mild disorders? These people are at work and frequently embarrassed by their speech. They are not getting promotions. Their customers often do not return and instead go to co-workers for future business dealings. ♦ My practice—I use the phrase “corporate speech-language pathology” to describe it—focuses exclusively on employees of business and industry. My clients are usually well-educated and highly motivated. They know that improving their communication skills will help them advance in their careers. ♦ Corporate speech-language pathology services differ from those carried out in medical or educational settings. Marketing techniques differ. So does terminology, location of services, diagnostic and treatment procedures, other services offered, materials, paperwork, and payment. The entire approach superimposes a corporate over a clinical paradigm.

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Working adults with mild communication disorders do not usually seek traditional speech-language treatment because of time and financial constraints. (Often they have not investigated their health insurance coverage, either.) But they know that their communication disorder is causing difficulty at work. Their employers are also aware of this, but usually have no idea what to suggest. Corporate administrators or trainers don't recommend using a speech-language pathologist because they think such a specialty is "medical," and hence in the realm of the company nurse or physician. Employees also cannot be told to use their health coverage to pay for something the company wants done.

Marketing efforts, then, should be directed to training and human resources directors (and occasionally to other corporate administrators). Not to be overlooked are employee assistance programs (EAPs) that exist to provide quick guidance to workers with personal problems.

All terminology should be couched in corporate, user-friendly language: "training" instead of "therapy" or "treatment," "problem" instead of "disorder," "pronunciation" instead of "speech." (To most business people, "speech" means a business presentation.) Marketed services include speech and voice training and foreign accent reduction.

Effective marketing to corporate trainers involves a variety of approaches. A brochure directed specifically to this audience, discussing the most common problems an employee might have, plus a business card, are two essential marketing tools. Beyond that, meetings of the local chapter of the American Society for Training and Development, and articles placed in the local business newspaper for the community are two effective approaches. An advertisement in the Yellow Pages is also important.

Corporations often prefer on-site training—employees need not use travel time and remain available for any work-related crisis that might arise. For speech-language pathologists, to work on-site is valuable because clients can often begin

immediately to generalize their new skills in the work environment.

Corporations want to know how much training will be required, and how much it will cost. In my own practice, I have established several rate structures: a per hour rate (plus travel time) for employees with communication disorders, and a 24-hour training course for those with distinct foreign accents. (This translates into 3 days in a month, with 8 hours per day of very intensive training, followed by six follow-

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up telephone calls at scheduled intervals during the next 2 months.)

Companies do business with written contracts, which may be prepared with a lawyer's assistance. Include in the contract when and how often you want to be paid for your services. Find out from the corporate trainer who contacted you initially if you are to send a bill, and to whose attention it should be addressed. Unless the client asks, all financial details should be handled by the corporate trainer or another designated person. The bill, on your letterhead, needs to include the client's name, branch or department (if appropriate), dates of service, type of services (i.e., voice training), and the fee. Billing should be simple and straightforward.

The first part of the diagnostic evaluation is traditional, including case history and assessment measures. Because many employees spend a lot of time on the telephone, ask how the communication problem affects telephone use. If clients come from another culture or country, ask how their native style of communication may differ from that of their present culture. Pre- and post-intervention tape recordings are helpful in demonstrating improvements to

both the employee and the supervisor.

The second part of the evaluation is unique in that it focuses on necessary work-related communication skills. Does the client buy or sell products? If so, what are they? Does he or she argue court cases, conduct medical interviews, answer technical questions under intense scrutiny from customers or the company, supervise employees in noisy surroundings, conduct research, teach courses?

Using a specially designed form, clients give numerous examples of technical or professional vocabulary they use in their daily lives as they complete paperwork, handle projects, or deal with customers. This information helps in forming a plan for integrating realistic work-related carryover skills into the training program. Business trainers and speech-language pathologists focus on accountability and generalization of skills. This is how your work will be judged.

When working with such educated and motivated clients, intensive training of up to 8 hours per day can produce quick results. Because their disorder is costing the company money (in terms of decreased employee productivity or actual lost business), the company prefers training to be completed as fast as possible.

Transfer of training is especially effective when clients are empowered to act as their own or their partner's clinician, under your close supervision. The training starts with an overview of the treatment process and an explanation of how responses are to be charted. Each client is given a packet that includes a list or explanation of voice or articulation errors to be corrected. Clients are given the responsibility of keeping track of their responses as soon as they show they can do it reliably. When two clients are working together, both the speaker and the listener can chart responses as a way of improving both learners' listening skills. Within a few hours of starting training, clients should be able to tell you that they are 80% accurate in pronouncing /s/ in the initial position in words, for example. This training in self-monitoring is essential if



clients are to practice sufficiently and appropriately between sessions.

As soon as clients are at the word level in whatever skill is being practiced, they go to the list of previously developed work-related vocabulary and practice the appropriate words. For example, one client, a scientist, needed to practice /r,l/ in the same word. His word list included "hydrochloric acid," "regulator," and "laboratory." A physician from the same foreign country also needed work with /r,l/ in the same word. Her list had "neurology," "rubella," and "cholesterol." A client with a voice disorder focused on the name of her company and some of its products. (A speech-language pathologist working with clients in many fields could not possibly know the proper pronunciation for all technical words, so locate someone who is able to coach you on unfamiliar vocabulary.)

When clients enter the reading phase of

instruction, the company provides two copies each of work-related material. This may include annual reports, advertisements, technical materials, or product literature. Clients continue in this way to focus on their work-related communication.

Even during coffee breaks and lunch, the client is expected to use new skills. This may include ordering a meal in the company cafeteria or reading signs on the walls of the elevator. The client must become accustomed to a new way of talking.

At the conversation level, clients can practice describing their jobs. When they are ready, simulate work-related communications such as vendor-purchaser transactions, physician-patient interviews, or courtroom closing arguments. A teacher could give a simulated lecture or an engineer could explain the details of a current project. Because people usually enjoy talking about their jobs, it will not be difficult

to find practice material.

To assess generalization, have someone from the client's department join the client and you for lunch during one of the training days. Forewarn the client that you will be monitoring the conversation. Other possibilities for advanced practice include having the client give you a tour of the company facilities or having another company employee role-play in a work situation. (The other employee is likely to know how to play the role of a difficult customer or situation very realistically, thus providing an excellent way for you to judge your client's speech generalization.)

Many clients will need help with the telephone. A less motivated voice client with a monopitch recently benefitted from calling local businesspeople and rating how they answered their telephones. This helped her realize how others were perceiving her own telephone greetings. Clients with for-

eign accents often have difficulty taking telephone messages, because they confuse the letters of their native alphabet with those of English, and write down the wrong letters. Clients with hearing loss need strategies to help them get maximum benefit from telephone conversations, too.

After the intensive training is over, telephone follow-up is important for skill maintenance. During the last training session, these telephone calls should be scheduled and goals outlined. Clients who are experienced in self-monitoring should be able to keep records and report back to you on their progress.

Other services beyond the training described here may be of value to the corporate staff. Staff may, for instance, welcome instruction on how to meet the needs of employees with disabilities, which is now required by the Americans with Disabilities Act, or the communications or

sales department may be interested in ideas on how to make the company's products or services more accessible to people with communication problems.

Reports to corporate staff should be short and free of jargon. Medical language should be avoided. Many corporate staff do not want progress reports, particularly since the training is so intensive. In some cases, such as that of an employee being referred to you through an EAP, it is important for confidentiality that there be no reports sent out to the corporate staff. When starting with a new company, ask how often and to whom reports should be sent. And get permission in writing from your client to send these reports.

There are some special satisfactions to corporate work. Employers report that clients are able to keep their jobs or get promoted because they can speak more clearly. Sometimes, improving one client's

communication means that an important accreditation or contract is won, and an entire company benefits. Mostly, though, it is the calls from the clients themselves that are memorable, reporting new self-confidence and hope for the future, all because of their speech-language training.

Corporate speech-language pathology represents a thriving market right now. The "America 2000" program focuses in part on the training of adults in the workplace; the Americans with Disabilities Act means that there will be more working adults who have communication disorders; and the Department of Labor estimates that by the year 2000 33% of the population will speak English as a second (or third) language. All of this constitutes a fine opportunity for our profession. ❶

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