



AMERICAN
SPEECH-LANGUAGE-
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ASSOCIATION

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

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Final Report

Guidelines for the Clinical Doctorate in Speech-Language Pathology

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Background

The ASHA Board of Directors (BOD) approved the development of guidelines for academic programs offering the clinical doctorate in speech-language pathology (BOD 02-2014). 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 guidance to institutions developing clinical doctoral programs in speech-language pathology.

The work of the committee commenced in June 2014 and followed commonly accepted best practices for the development of guidelines (e.g., literature review, development of domains and related knowledge and skills [K & S], identification of quality program characteristics, and select and widespread peer review). The committee's work concluded in June 2015.

The committee adhered to the following four principles throughout the course of its work.

1. The *Guidelines* provide guidance to academic programs and students.
2. ASHA is not considering changing the entry-level degree for speech-language pathologists from a master's to a clinical/professional doctorate.
3. The clinical/professional doctorate is distinct from a research doctorate and is not intended to replace or substitute for the PhD.
4. The degree represents one path to acquiring advanced clinical expertise and to preparing for leadership roles or specialization.

The committee thoroughly considered available information and input from stakeholders while developing the guidelines and made decisions about fundamental elements addressed in the guidelines. Below is a summary of the key decisions.

- a. **Clinical vs. professional doctorate**—The degree will be described in the guidelines as a clinical doctorate degree.

Rationale: The committee agreed that a clinical component (e.g., advanced clinical mentorship, clinical specialization) is essential to this advanced clinical degree. The committee also agreed that the guidelines must clearly distinguish the post-entry-level clinical doctorate from the entry-level master's degree, the research doctoral degree, and other entry-level clinical doctoral degrees to avoid confusion on the part of consumers and other professions.

- b. **Clinical vs. research degree**—The degree will be described as distinct from the research doctoral degree.

Rationale: The committee sought to avoid confusion about the intended outcomes of the clinical doctorate relative to the intended outcomes of the research doctorate.

- c. **Guidelines**—Guideline component areas are (1) Administrative Structure and Governance, (2) Academic and Clinical Faculty, (3) Students, (4) Assessment, (5) Program Resources, and (6) Curriculum.

Rationale: The guidelines cover six general components that should be addressed by all clinical doctoral programs in speech-language pathology. For each component, guidance is provided to assist programs in addressing the intended purpose of the degree.

- d. **Quality indicators**—Quality indicators are not included in the guidelines document.

Rationale: Quality indicators are more appropriate for accreditation standards. Thus, the term *quality indicators* is not used in the guidelines document.

- e. **Student eligibility for admission**—Students admitted to the clinical doctoral program should hold or qualify for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) or the accepted credential in the country of practice.

Rationale: Holding the CCC–SLP identifies the individual as ready for advanced clinical education and able to mentor others; otherwise, distinction between the master’s and doctorate is blurred.

- f. **Institutions offering the degree**—Speech-language pathology clinical doctoral degree programs should be housed in institutions with existing master’s in speech-language pathology programs—accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA)—or PhD programs that serve speech-language pathologists (SLPs) in clinical research settings.

Rationale: Institutions with existing CAA-accredited master’s in speech-language pathology programs or PhD programs that serve SLPs in clinical research settings have resources (e.g., speech-language pathology faculty) needed to offer the clinical doctorate.

- g. **Degree designator**—The recommended degree designator is the doctor of speech-language pathology (SLPD).

Rationale: 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 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).

- h. **Distance Education**—The curriculum may be delivered via multiple modalities (e.g., residential, synchronous and 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 throughout each student’s program of study.

Rationale: Programs have the flexibility to determine mode of delivery given the current use of multiple modalities for the delivery of higher education and future emergence of new technologies.

The timeline for the committee’s work and milestones achieved included the following:

June 2014—First conference call conducted and work plan established.

July–September 2014—Literature review of relevant resources and documents conducted (see references and resources listed at the end of the guidelines document).

October 2014—Relevant domains and related K & S statements identified. A total of 10 domains and 77 K & S statements were ultimately developed.

November 2014—Focus group conducted at the 2014 ASHA Convention for the purpose of receiving input on clinical doctoral education from holders of the clinical doctorate degree in speech-language pathology.

December 2014—Select peer review of domains and K & S statements conducted.

The select peer review of K & S statements was conducted via survey from November 30 through December 19, 2014. The response rate was 22.1% ($n = 1,748$). The survey was fielded to approximately 8,000 individuals who resided in the United States or U.S. territories; reported their employment status as employed full- or part-time, on leave of absence, or unemployed and seeking

employment; had provided ASHA with an e-mail address; and had not opted out of receiving web surveys. The survey populations included:

- speech-language pathology communication sciences and disorders (CSD) academic program directors—master’s and doctoral (all)
- CCC-SLP university-based clinic directors (all)
- CCC-SLP non-university-based clinic directors (all)
- CSD speech-language pathology faculty (all)
- current speech-language pathology PhD students (all)
- speech-language pathology clinical doctorate degree holders (all)
- CCC-SLP clinical service providers (random sample; approximately $n = 4,000$)

January 2015—Select peer review survey results reviewed by the committee.

The results of the select peer review indicated strong agreement among all respondents overall based on mean ratings of the K & S statements and for mean ratings of clinical service providers across work settings (i.e., health care vs. schools). The committee further refined the domains and K & S statements, which resulted in 10 domains and 74 K & S statements.

February 2015—Guidelines for academic programs drafted.

March 2015—Widespread peer review of draft guidelines conducted.

A widespread peer review of the draft guidelines for academic programs was conducted March 1–20, 2015, via the ASHA website. The widespread peer review was open to the full ASHA membership. Announcements advertising the peer review were disseminated to academic programs, the Council of Academic Programs in Communication Sciences and Disorders (CAPCSD), ASHA Special Interest Groups, the ASHA Community, and state association leaders and were conveyed via select ASHA publications (e.g., *The ASHA Leader*, ASHA e-newsletters) and social media.

The peer review yielded 172 respondents who submitted comments via an online comment form. The majority of respondents (119 of 172 respondents or 69%) answered “yes” when asked whether all of the guidelines addressed essential components of an advanced post-entry-level clinical doctoral degree program. One third of respondents (53 of 172 or 31%) answered “no” to the question and submitted comments that, in some cases, included suggestions for additions, deletions, or edits to existing language.

Comments from individuals who responded “no” represented six themes that occurred from one to several times:

1. opposition to the concept of clinical doctoral degree programs;
2. opposition to the SLPD degree designator;
3. concerns regarding program director qualifications and faculty sufficiency;
4. concerns regarding administrative requirements—length of program (years vs. hours), admissions criteria (master’s degree and CCC-SLP), pathway to program;
5. concerns regarding curriculum content and clinical experience expectations (before and after admission);
6. concerns regarding differentiation between entry-level master’s degree, advanced clinical doctorate expectations, and research degrees.

April–June 2015—*Guidelines* finalized.

The committee reviewed and vetted all peer review comments, made further refinements to the guidelines document, and prepared an executive summary report for the ASHA BOD, which accompanied the guidelines document.

June 2015—Guidelines submitted to ASHA BOD for approval.

If approved by the BOD, the guidelines are to be disseminated via ASHA and CAPCSD communications according to a plan developed by the committee.

Recommendations

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

1. the ASHA BOD accept this report,
2. the ASHA BOD approve the *Guidelines for the Clinical Doctorate in Speech-Language Pathology* (addendum to this report),
3. ASHA and CAPCSD widely disseminate the approved *Guidelines*.