

# **SLP Practice Issues**

For additional information, please contact Jeanette Janota, Surveys and Analysis
American Speech-Language-Hearing Association
Rockville, MD 20850
800-498-2071, ext. 8738
jjanota@asha.org

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# Executive Summary

In Spring 2018, the American Speech-Language-Hearing Association (ASHA) conducted a survey of speech-language pathologists (SLPs) and educational audiologists in school settings. The survey was designed to provide information about school-based service delivery and to update and expand information gathered during previous Schools Surveys.

The results are presented in a series of reports. This practice issues report is based on responses from SLPs working in special day/residential schools, preschools, elementary schools, secondary schools, administrative offices, and combined school settings.

#### **Overall Findings**

- ♦ 67% of the SLPs said that, overall, ASHA was doing an *excellent* or *good* job serving school-based members.
- Nearly one quarter (24%) of the SLPs said that ASHA was doing an *excellent* job of serving school-based members with continuing education and with evidence-based resources.
- ◆ SLPs selected *early intervention* as the highest ranking in importance of nine issues related to the Individuals with Disabilities Education Act (IDEA).
- ♦ The performance evaluation system or tool that most (51%) of the SLPs said was used to evaluate them was one that was also used for classroom teachers.
- Social communication and pragmatic disorders, autism spectrum disorder, and childhood apraxia of speech were the top three topics, from a list of 16 topics, that SLPs would be most interested in seeing addressed more often or in more depth in the ASHA journals.
- Predictor variables such as the type of facility where SLPs were employed, the geographic area where they worked, their years of experience in both the profession and in schools, and population size had a significant effect on many of their responses.

# ASHA's Performance

When asked what kind of job the Association was doing, overall, in serving its school-based members, 12% of the SLPs said *excellent*, 55% said *good*, 21% said *fair*, 3% said *poor*, and 9% had no opinion (see Table 1).

Table 1: How Well ASHA Serves School-Based Members										
Response	Excellent	Good	Fair	Poor	Don't Know, NA					
Overall	12%	55%	21%	3%	9%					
With advocacy	10%	43%	23%	8%	15%					
With continuing education	24%	51%	16%	2%	6%					
With evidence-based resources	24%	51%	16%	2%	8%					
With questions about school-based practice	14%	50%	20%	3%	13%					

*Note.*  $n \ge 2,106$ .

No predictor variable affected responses to the job ASHA is doing *overall*.

This *overall* question was followed by evaluations of four specific service topics.

- <u>Advocacy</u>: Three predictor variables had a significant impact on responses.
  - Geographic region impacted responses to this item with 18% of SLPs in the Northeast and 26% of SLPs in the Midwest selecting *fair* (*p* = .006). (See Appendix A for a listing of states in four geographic regions.)
  - 7% of SLPs with 1–5 years and with 31 or more years of experience in the professions selected *excellent*, compared with 14% of SLPs with 26–30 years of experience (*p* = .020).
  - 38% of SLPs with 1–5 years of experience in the schools selected good, compared with 47% with 6–10 or with 31 or more years of experience (p = .010).
- <u>Continuing education</u>: Half (51%) of the SLPs said that ASHA was doing a *good* job in serving its school-based members with continuing education (see Table 1).
  - Responses varied by type of facility with 22% of SLPs in elementary schools and 35% in administrative offices selecting excellent (p = .032).
- <u>Evidence-based resources</u>: Four predictors impacted the results for this option.
  - 21% of SLPs in elementary and secondary schools and 44% in administrative offices selected *excellent* (p = .000).
  - 48% of SLPs in the West and 54% in the Midwest selected *good* in responding to this service (p = .041).
  - 20% of SLPs with 1–5 years of experience in the profession and 27% with 21–25 years chose *excellent* (p = .048).

- 42% of SLPs with 21–25 years of experience in the schools and 54% with 31 or more years chose good (p = .030).
- <u>School-based practice</u>: Two predictors had a significant impact on response choices for this option.
  - 10% of SLPs in secondary schools and 31% of those in administrative offices chose excellent (p = .009).
  - Years of experience in the schools was another predictor of selecting *good* as a response. SLPs with 6–10 years of experience were the most likely (54%) to select *good*, whereas those with 21–25 years were least likely to select *good* (42%; p = .018).

## **IDEA**

Survey participants were asked to use a 5-point scale to rate how important each of nine issues was in relation to the Individuals with Disabilities Education Act (IDEA). On the scale, 1 was *not at all important*, and 5 was *very important*. Early intervention was identified as *very important* more frequently than any other issue (see Table 2 and Table B1).

Table 2: I	Table 2: Issues Identified as Very Important Relative to IDEA							
Rank	Issue							
1	Early intervention							
2	Funding							
3	Early childhood							
4	Treatment of ASD							
5	Paperwork reduction							
6	Connection with EHDI							
7	IEP team independence/strengthening							
8	Language of intervention for ELLs							
9	American Sign Language (ASL)							

*Note.*  $n \ge 1,500$ . ASD = autism spectrum disorder; EHDI = Early Hearing Detection and Intervention; IEP = individualized education program; ELLs = English language learners.

## Type of Facility

Type of facility was a predictor of responses for two of the nine issues (see Table B1).

- Between 22% of SLPs in special day/residential schools and 42% in administrative offices said that IEP team independence/strengthening was *very important* (p = .001).
- Between 42% of SLPs in secondary schools and 59% in combined school settings identified paperwork reduction as *very important* (p = .013).

### Geographic Area

Geographic area was a predictor of seven of the nine issues.

- 13% of SLPs in the Northeast and 23% in the Midwest selected 2, the next to lowest rating, when they rated the importance of American Sign Language in relation to IDEA (p = .018).
- 20% of SLPs in the West and 26% in the Midwest selected 4, the next to highest rating, when they rated the importance of early childhood in relation to IDEA (p = .026).
- 57% of SLPs in the Midwest and 67% in the Northeast selected 5, *very important*, when they rated the importance of funding in relation to IDEA (p = .037).
- 26% of SLPs in the Midwest and 39% in the Northeast selected 5, *very important*, when they rated IEP team independence/strengthening in relation to IDEA (p = .001).
- 22% of SLPs in the West and 33% in the Midwest selected 3, the middle rating, when they rated the importance of language of intervention for English language learners in relation to IDEA (p = .005).
- 2% of SLPs in the Northeast and 7% in the West selected 1, *not at all important*, when they rated the importance of paperwork reduction in relation to IDEA (p = .049).
- 50% of SLPs in the Midwest and 61% in the Northeast selected 5, *very important*, when they rated the importance of treatment of ASD in relation to IDEA (p = .012).

## Years of Experience in the Profession

Years of experience in the profession was a predictor of two of the nine issues.

- 25% of SLPs with 21–25 years of experience in the profession and 38% with 1–5 years selected 3, the middle rating, when they rated the importance of American Sign Language in relation to IDEA (p = .046).
- 5% of SLPs with 16–20 years of experience in the profession and 15% with 21–25 years selected 3, the middle rating, when they rated the importance of early intervention in relation to IDEA (p = .019).

# Years of Experience in the Schools

Years of experience in the schools was a predictor of three of the nine issues.

- 18% of SLPs with 11–15 years of experience in the schools and 35% with 26–30 years selected 5, *very important*, when they rated the importance of American Sign Language in relation to IDEA (p = .002).
- 12% of SLPs with 31 or more years of experience in the schools and 24% with 16–20 years selected 4, the next to highest rating, when they rated the importance of connection with the Early Hearing Detection and Intervention program in relation to IDEA (*p* = .028).
- 48% of SLPs with 1–5 years of experience in the schools and 64% with 26–30 years selected 5, *very important*, when they rated the importance of paperwork reduction in relation to IDEA (p = .022).

#### Population Size

Population size was a predictor of two of the nine issues.

- 26% of SLPs who were employed in rural areas, 33% in suburban areas, and 38% in cities/urban areas selected 5, *very important*, when they rated the importance of IEP team independence/strengthening in relation to IDEA (*p* = .011).
- 25% of SLPs who were employed in rural areas, 30% in suburban areas, and 38% in cities/urban areas selected 5, *very important*, when they rated the importance of language of intervention for English language learners in relation to IDEA (p = .006).

# Performance Evaluation System

SLPs were asked to choose from among four evaluation systems or tools to identify the one(s) used to evaluate their performance. A performance evaluation system that is also used for classroom teachers was selected more frequently than other responses (see Table C1). Several predictor variables had an effect on which systems were selected.

## Type of Facility

The type of facility where SLPs were employed influenced three responses.

- 51% selected a system that is also used for classroom teachers. The range was from 26% of SLPs in administrative offices to 58% of those in preschools (p = .001).
- 32% selected a system customized for SLPs or audiologists. The range was from 23% of SLPs in combined settings to 35% of those in elementary school (p = .001).
- 15% said that another type of system, or no system, was used to evaluate them. The range was from 12% in special day/residential and secondary schools to 37% in administrative offices (p = .000).

## Geographic Area

Geographic area influenced the choice of two of the evaluation systems.

- SLPs reporting that they were evaluated with a system that is also used for classroom teachers ranged from 43% of SLPs in the South to 59% in the Northeast (p = .000).
- SLPs reporting that they were evaluated with a customized tool ranged from 26% of SLPs in the Northeast to 40% of those in the South (p = .000).

## Years of Experience in the Profession

Years of experience in the profession influenced the choice of two of the evaluation systems.

- Although few SLPs selected the ASHA Performance Assessment of Contributions and Effectiveness of SLPs (PACE), the range of 0% for SLPs with 21–30 years of experience to 2% of those with 6–10 years of experience was a statistically significant difference (*p* = .044).
- 9% of SLPs with 11–15 years of experience to 26% of those with 31 or more years selected "other" or wrote in "none" (p = .000).

Years of Experience in the Schools

Years of experience in the schools influenced one choice of evaluation system. From 10% of SLPs with 11–15 years of experience in the schools to 26% of those with 31 or more years selected "other" or wrote in "none" (p = .001).

## Population Size

Population size influenced two evaluation systems.

- A performance evaluation system that is also used for classroom teachers was used to evaluate 47% of SLPs in cities/urban areas, 50% in rural areas, and 54% in suburban areas (p = .036).
- 12% of SLPs in suburban areas, 16% in cities/urban areas, and 19% in rural areas selected "other" or wrote in "none" (p = .002).



# Journal Topics

Survey respondents were presented with a list of 16 potential topics they would be most interested in seeing addressed more often or in more depth in the ASHA journals. "Social communication and pragmatic disorders" was the first choice in every type of facility except for preschool (see Table 3).

Table 3: Rank Order of Requested Journal Topics, by Type of Facility											
Response	All Facility Types (n = 2,170)	$\mathbf{Day}$ $(n \ge 83)$	Pre- school (n = 280)	Ele- men- tary (n ≥ 1,195)	Secondary $(n \ge 278)$	Admin. Office $(n \ge 49)$	Combined $(n \ge 163)$				
Social communication and pragmatic disorders***	1	1	2	1	1	1	1				
Autism spectrum disorder (ASD)**	2	2	4	3	2	2	2				
Childhood apraxia of speech (CAS)***	3	4	1	2	7	5	3				
Specific language impairment (SLI)***	4	8	6	4	6	7	6				
Augmentative and alternative communication (AAC)***	5	3	5	6	3	4	4				
Fluency disorders***	6	10	8	5	5	9	10				
Reading and writing (literacy) ***	7	6	10	7	4	3	5				
Early identification and intervention***	8	5	3	8	12	8	7				
Cultural and linguistic diversity**	9	7	7	9	8	6	8				
Telepractice and computer-based approaches	10	10	9	10	9	12	9				
Voice or resonance disorders	11	16	13	11	11	13	13				
Traumatic brain injury**	12	12	14	12	10	10	11				
Dysphagia (swallowing/ feeding)**	13	9	11	13	14	10	12				
Hearing disorders	14	13	12	14	13	15	13				
Dysarthria	15	14	14	15	15	13	15				
Genetic and congenital disorders	16	15	16	16	16	16	16				

*Note.* \*\*p < .01. \*\*\*p = .000.

# Survey Notes and Methodology

Since 2004, ASHA has fielded the Schools Survey in even-numbered years to gather information of interest to the professions. Members, volunteer leaders, and staff rely on data from the survey to better understand the priorities and needs of SLPs and educational audiologists.

## Response Rate

The survey was fielded in February 2018 to a random sample of 4,500 ASHA-certified SLPs and 500 ASHA-certified audiologists who were employed in school settings in the United States. Half of each group was randomly assigned to a control group to receive standard cover letters, and half received shorter letters. Everyone also received an electronic "be-on-the-lookout-for" message at the time of the first mailing. Second (March) and third (April) postal mailings followed, at approximately 3- or 4-week intervals.

The sample was a random sample, stratified by state. Small groups, such as constituents in Wyoming, were oversampled. Weighting was used when presenting data to reflect the actual distribution of SLPs in each state based on ASHA's membership database.

The original sample included 4,500 SLPs, with an additional four surveys returned by SLPs who had removed their identifying number, resulting in a total gross sample of 4,504. Of the original 4,504 SLPs, nine were retired, six had incorrect addresses, 29 were employed in other types of facilities, six were not employed in the discipline, and four were ineligible for other reasons, leaving 4,450 possible respondents. The actual number of respondents was 2,170, resulting in a 48.8% response rate. The results presented in this report are based on responses from those 2,170 individuals.

## Reports

Results from the 2018 Schools Survey are presented in a series of reports for SLPs:

- SLP Caseload and Workload Characteristics
- SLP Workforce and Work Conditions
- SLP Practice Issues
- SLP Annual Salaries and Hourly Wages
- Survey Summary Report: Numbers and Types of Responses, SLPs
- Survey Methodology, Respondent Demographics, and Glossary, SLPs

Results from the educational audiologists are presented in a separate report: Survey Summary Report: Numbers and Types of Responses, Educational Audiologists.

# Suggested Citation

American Speech-Language-Hearing Association. (2018). 2018 Schools Survey report: SLP practice issues. Available from www.asha.org/research/memberdata/schoolssurvey/.

# Supplemental Resources

American Speech-Language-Hearing Association. (n.d.-a). Individuals with Disabilities Education Act (IDEA). Available from <a href="https://www.asha.org/public/coverage/IDEA/">www.asha.org/public/coverage/IDEA/</a>

American Speech-Language-Hearing Association. (n.d.-b). Information for school-based SLPs. Available from <a href="https://www.asha.org/slp/schools/">www.asha.org/slp/schools/</a>

American Speech-Language-Hearing Association. (n.d.-c). Interprofessional education/interprofessional practice (IPE/IPP). Available from <a href="https://www.asha.org/Practice/Interprofessional-Education-Practice/">www.asha.org/Practice/Interprofessional-Education-Practice/</a>

American Speech-Language-Hearing Association. (n.d.-d) PACE: Performance
Assessment of Contributions and Effectiveness of Speech-Language
Pathologists. Available from
<a href="https://www.asha.org/Advocacy/state/Performance-Assessment-of-Contributions-and-Effectiveness/">www.asha.org/Advocacy/state/Performance-Assessment-of-Contributions-and-Effectiveness/</a>

American Speech-Language-Hearing Association (n.d.-e) Practice Portal for speech-language pathologists. Available from <a href="https://www.asha.org/Practice-Portal/Speech-Language-Pathologists">www.asha.org/Practice-Portal/Speech-Language-Pathologists</a>

American Speech-Language-Hearing Association. (2010). *Working for change:*A guide for speech-language pathologists and audiologists in schools.
Available from <a href="www.asha.org/uploadedFiles/Working-Change-Schools-SLPs-Audiologists-Guide.pdf">www.asha.org/uploadedFiles/Working-Change-Schools-SLPs-Audiologists-Guide.pdf</a>

# Additional Information

For additional information regarding the *2018 Schools Survey*, please contact Jaumeiko Coleman, director of ASHA's School Services, at 800-498-2071, ext. 8750 or <a href="mailto:JColeman@asha.org">JColeman@asha.org</a>. To learn more about how the Association is working on behalf of school-based ASHA Certified Members, visit ASHA's Schools webpages at <a href="https://www.asha.org/slp/schools/">www.asha.org/slp/schools/</a>.



## Thank You

ASHA would like to thank the SLPs who completed the 2018 Schools Survey. Reports like this one are possible only because people like you participate.

**Is this information valuable to you?** If so, please accept invitations to participate in other ASHA-sponsored surveys and focus groups. You are the experts, and we rely on you to provide data to share with your fellow members. ASHA surveys benefit *you*.

Appendix A

State Listings

# Regions of the Country

#### Northeast

- ♦ Middle Atlantic
  - New Jersey
  - o New York
  - o Pennsylvania
- ♦ New England
  - Connecticut
  - o Maine
  - Massachusetts
  - New Hampshire
  - o Rhode Island
  - Vermont

#### South

- East South Central
  - o Alabama
  - Kentucky
  - Mississippi
  - Tennessee
- ♦ South Atlantic
  - o Delaware
  - o District of Columbia
  - o Florida
  - o Georgia
  - o Maryland
  - o North Carolina
  - o South Carolina
  - o Virginia
  - West Virginia
- ♦ West South Central
  - Arkansas
  - ArkansasLouisiana
  - o Oklahoma
  - o Texas

#### Midwest

- ♦ East North Central
  - o Illinois
  - o Indiana
  - o Michigan
  - o Ohio
  - o Wisconsin
- ♦ West North Central
  - o Iowa
  - o Kansas
  - o Minnesota
  - o Missouri
  - Nebraska
  - o North Dakota
  - South Dakota

#### West

- ♦ Mountain
  - o Arizona
  - o Colorado
  - o Idaho
  - o Montana
  - o Nevada
  - o New Mexico
  - o Utah
  - o Wyoming
- ♦ Pacific
  - o Alaska
  - o California
  - o Hawaii
  - o Oregon
  - Washington

# Appendix B

Importance of IDEA Topics

# Table B1: Importance of IDEA Topics, by Facility Type

28. Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

	Facility Type								
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination		
		Amo	erican Sign Langı	uage (ASL)					
	n = 1,874	n = 73	n = 237	n = 1,027	n = 241	<i>n</i> = 45	<i>n</i> = 146		
1 – Not at all important	8.0	8.2	5.1	8.7	9.5	8.9	7.5		
2	17.7	15.1	15.6	17.5	21.6	15.6	16.4		
3	31.3	26.0	32.5	33.7	24.1	31.1	26.7		
4	18.7	23.3	19.4	17.4	18.7	20.0	22.6		
5 – Very important	24.3	27.4	27.4	22.7	26.1	24.4	26.7		
		Statistical significance: $\chi^2(20) = 20.6$ , $p = .420$ Conclusion: There is not enough evidence from the data to say that the responses vary by facility type.							
						(T. 11 D.1			

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

	Facility Type									
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
	Connection with the Early Hearing Detection and Intervention program (EHDI)									
	n = 1,500	n = 56	n = 181	n = 831	<i>n</i> = 194	<i>n</i> = 36	<i>n</i> = 116			
1 – Not at all important	4.9	5.4	1.7	5.2	7.7	5.6	6.9			
2	10.1	10.7	7.7	10.3	9.8	5.6	13.8			
3	23.1	25.0	22.7	25.3	16.5	33.3	19.0			
4	20.3	21.4	17.1	20.0	22.7	25.0	18.1			
5 – Very important	41.6	37.5	50.8	39.2	43.3	30.6	42.2			
		Statistical significance: $\chi^2(20) = 27.0$ , $p = .136$ Conclusion: There is not enough evidence from the data to say that the responses vary by facility type.								

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $\hat{1} = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

	Facility Type									
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
	Early childhood									
	n = 1,870	n = 67	n = 245	n = 1,032	n = 231	n = 47	n = 142			
1 – Not at all important	1.9	1.5	0.4	1.8	4.3	0.0	2.1			
2	2.4	3.0	1.2	2.3	3.5	6.4	3.5			
3	12.4	14.9	4.9	13.9	13.0	10.6	15.5			
4	23.6	26.9	16.3	25.9	18.2	27.7	22.5			
5 – Very important	59.7	53.7	77.1	56.1	61.0	55.3	56.3			
	Too many cells (27%) have an expected count of less than 5. Conclusion: Too little data are available in some facility categories to test whether responses vary by facility type.									
						(Table B1 continu	les on next page.)			

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $\hat{1} = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

	Facility Type									
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
	Early intervention									
	n = 1,917	n = 69	n = 249	n = 1,064	n = 237	<i>n</i> = 47	n = 143			
1 – Not at all important	1.7	1.4	0.4	1.5	3.4	0.0	3.5			
2	1.8	1.4	1.6	1.6	3.8	4.3	1.4			
3	8.0	7.2	2.8	9.1	8.0	8.5	11.2			
4	19.0	18.8	15.7	19.5	15.6	31.9	16.8			
5 – Very important	69.4	71.0	79.5	68.2	69.2	55.3	67.1			
	Too many cells (37%) have an expected count of less than 5. Conclusion: Too little data are available in some facility categories to test whether responses vary by facility type.									
						(Table B1 continu	es on next page.)			

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

#### CCC-SLP

	Facility Type									
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
	Funding									
	n = 1,878	n = 72	n = 236	n = 1,038	n = 241	n = 44	n = 144			
1 – Not at all important	2.2	4.2	0.8	1.5	5.0	4.5	4.2			
2	3.3	4.2	2.5	2.9	5.0	2.3	5.6			
3	10.5	12.5	9.3	11.5	9.1	11.4	10.4			
4	20.2	19.4	17.8	20.7	21.2	11.4	16.7			
5 – Very important	63.7	59.7	69.5	63.4	59.8	70.5	63.2			
		Too many cells (23%) have an expected count of less than 5.  Conclusion: Too little data are available in some facility categories to test whether responses vary by facility type.								
	•					(Table B1 continu	es on next page.)			

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

#### ❖ CCC-SLP

	Facility Type									
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
	IEP Team Independence/Strengthening									
	n = 1,895	n = 69	n = 236	n = 1,045	n = 247	n = 45	n = 146			
1 – Not at all important	2.7	8.7	1.3	2.6	2.8	0.0	2.7			
2	8.1	4.3	7.6	8.7	3.6	4.4	13.0			
3	26.3	34.8	28.0	28.2	22.7	20.0	16.4			
4	29.7	30.4	27.5	28.6	34.8	33.3	30.8			
5 – Very important	33.1	21.7	35.6	31.9	36.0	42.2	37.0			
		Statistical significance: $\chi^2(20) = 45.7$ , $p = .001$ , Cramer's $V = .080$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.								

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

	Facility Type								
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination		
	La	nguage of interve	ntion for English	Language Learne	rs (ELLs)				
	n = 1,713	<i>n</i> = 61	n = 220	n = 948	n = 219	<i>n</i> = 45	<i>n</i> = 127		
1 – Not at all important	3.9	4.9	4.5	4.0	4.1	0.0	3.1		
2	8.7	8.2	8.2	8.8	7.3	8.9	10.2		
3	27.7	41.0	25.0	29.5	25.6	15.6	24.4		
4	28.2	24.6	26.8	26.2	32.0	33.3	34.6		
5 – Very important	31.5	21.3	35.5	31.5	31.1	42.2	27.6		
	Statistical significance: $\chi^2(20) = 22.5$ , $p = .312$ Conclusion: There is not enough evidence from the data to say that the responses vary by facility type.								
						/E 11 D1			

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $\hat{1} = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

❖ CCC-SLP

		Facility Type								
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination			
			Paperwork Red	uction						
	n = 1,933	n = 70	n = 244	n = 1,069	n = 248	n = 47	<i>n</i> = 147			
1 – Not at all important	4.5	1.4	3.7	5.1	4.4	2.1	4.8			
2	4.9	7.1	4.1	4.9	6.5	4.3	4.1			
3	17.0	21.4	18.4	15.0	26.2	19.1	12.2			
4	19.2	25.7	17.2	18.6	21.0	17.0	20.4			
5 – Very important	54.4	44.3	56.6	56.4	41.9	57.4	58.5			
		Statistical significance: $\chi^2(20) = 36.6$ , $p = .013$ , Cramer's $V = .071$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.								

# Table B1 (Cont'd): Importance of IDEA Topics, by Facility Type

28. (cont'd.) Rate the importance of each of the issues below in relation to the Individuals with Disabilities Education Act (IDEA).

Scale:  $1 = Not \ at \ all \ important \rightarrow 5 = Very \ important$ 

Analyses limited to respondents who met the following criterion:

#### CCC-SLP

	Facility Type							
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination	
Treatment of ASD								
	n = 1,913	n = 70	n = 241	n = 1,055	n = 247	n = 49	<i>n</i> = 145	
1 – Not at all important	0.8	0.0	0.0	1.1	0.4	4.1	0.7	
2	2.6	1.4	2.9	2.7	1.6	2.0	2.8	
3	13.2	5.7	13.3	14.3	10.9	12.2	13.1	
4	28.0	25.7	24.9	28.0	27.9	30.6	27.6	
5 – Very important	55.4	67.1	58.9	53.9	59.1	51.0	55.9	
		Too many cells (27%) have an expected count of less than 5. Conclusion: Too little data are available in some facility categories to test whether responses vary by facility type.						

Note. CCC-SLP = Certificate of Clinical Competence in Speech-Language Pathology; IEP = individualized education program; ASD = autism spectrum disorder.

# Appendix C

Performance Evaluation System or Tool

# Table C1: Performance Evaluation System or Tool, by Facility Type

14. What system or tool is used to evaluate your performance? Select all that apply.

Analyses limited to respondents who met the following criteria:

CCC-SLP

Employed full time or part time

	Facility Type							
Response	All Facility	Special Day/ Residential $(n \ge 83)$	Preschool (n = 279)	Elementary $(n \ge 1,195)$	Secondary $(n \ge 278)$	Admin. Office $(n \ge 49)$	Combination $(n \ge 163)$	
A performance evaluation system that is also used for classroom teachers	50.6	56.0	58.4	49.7	52.9	26.0	50.0	
		Statistical significance: $\chi^2(5) = 20.8$ , $p = .001$ , Cramer's $V = .101$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.						
A performance evaluation system that is customized for audiologists or SLPs	31.9	28.9	24.4	35.2	33.7	32.7	22.6	
		Statistical significance: $\chi^2(5) = 20.4$ , $p = .001$ , Cramer's $V = .100$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.						

# Table C1 (Cont'd): Performance Evaluation System or Tool, by Facility Type

14. (cont'd) What system or tool is used to evaluate your performance? *Select all that apply*. Analyses limited to respondents who met the following criteria:

CCC-SLP

Employed full time or part time

	Facility Type							
Response	All Facility Types	Special Day/ Residential	Preschool	Elementary	Secondary	Admin. Office	Combination	
	(n = 2,109)	$(n \ge 83)$	(n = 279)	$(n \ge 1,195)$	$(n \ge 278)$	$(n \ge 49)$	$(n \ge 163)$	
The ASHA Performance Assessment of Contributions and Effectiveness of SLPs (PACE)	0.8	0.0	0.7	0.7	0.7	0.0	0.0	
		Too many cells (42%) have an expected count of less than 5.  Conclusion: Too little data are available in some facility categories to test whether responses vary by facility type.						
Other, specify:*	15.1	11.9	13.6	13.5	11.5	36.7	23.9	
		Statistical significance: $\chi^2(5) = 34.8$ , $p = .000$ , Cramer's $V = .130$ Conclusion: There is adequate evidence from the data to say that the responses vary by facility type.					lity type.	

<sup>\*</sup>Includes *none* as a response.