March 9, 2021

The Honorable Nancy Barto
Arizona Senate
1700 West Washington Street
Phoenix, AZ 85007

RE: ASHA Comments on Licensure; SB 1458

Dear Senator Barto:

On behalf of the American Speech-Language-Hearing Association, I write to express support for Senate Bill 1458 with amendments, which defines telesupervision of speech-language pathology assistants, further defines the advisory committee for applicants for a hearing aid dispenser’s license, establishes waivers for in-person continuing education requirements, and addresses licensing reciprocity and requirements for audiologists, speech-language pathologists, and speech-language pathology assistants.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Over 3,100 ASHA members reside in Arizona.

ASHA supports the supervision of speech-language pathology assistants via telecommunication technology from a licensed speech-language pathologist (SLP). ASHA also supports a supervision ratio of up to two full-time speech-language pathology assistants (SLPAs) and the licensed SLP having two years of full-time professional experience following the attainment of their ASHA certification. Recommendations included below for Section 11 are based on ASHA’s current scope of practice for SLPAs. Furthermore, ASHA supports the amount of direct supervision language included in SB 1458 with the exception of supervision of medically fragile individuals in the section below.

Section 11. Section 36-1940.04 D (a)
ASHA recommends amending the language to the following:

“100% direct supervision of SLPAs for medically fragile patients, clients, or students is required.”

Section 2. Section 36-1902 C, 4
ASHA recommends increasing the number of SLPs serving on the advisory committee to assist in examining applicants for a hearing aid dispenser's license from two to four. In (8) of this same section, ASHA recommends increasing the number of SLPAs on the committee from two to four. Both changes will provide greater balance of speech-language pathology representation on the committee.

Section 9. Section 36-1940
ASHA recommends adding a requirement for a background check to be licensed as an audiologist. States certifying and licensing bodies are requiring background checks for employment. Interstate compact legislation that is moving forward in many states is also requiring an FBI background check. States recognize the need to protect the public from harm and as a result have begun requiring this. Adding this language would be consistent with these trends in other states.

**Section 11. Section 36-1940.04 A, 2. (a)**
ASHA recommends substituting the minimum of 60 semester credit hours of coursework with the degree requirements below:

“Completion of an SLPA program degree (2-year minimum) from a regionally or nationally accredited institution (e.g., an associate’s degree from a community college, a technical training program, a certificate program, or a bachelor’s degree).”

This amendment would allow SLPAs to take advantage of the minimum requirement to apply for ASHA’s Certified Speech-Language Pathology Assistant (C-SLPA) Program.²

**Section 11. Section 36-1940.04 A, 2. (b)**
ASHA recommends amending the language to read as follows:

“A minimum of 100 hours of clinical interaction, either through an academic program or on the job training that does not include observation, under the supervision of a licensed master’s level speech-language pathologist.”

**Section 11. Section 36-1940.04 C**
ASHA recommends adding the following to the SLPAs scope requirements:

- Exhibit compliance with the Health Insurance Portability and Accountability Act (HIPAA) and Family Educational Rights and Privacy Act (FERPA) regulations, reimbursement requirements, and SLPAs’ responsibilities.
- Program and provide instruction in the use of augmentative and alternative communication devices.
- Present primary prevention information to individuals and groups known to be at risk for communication disorders and other appropriate groups; promote early identification and early intervention activities.
- Advocate for individuals and families through community awareness, health literacy, education, and training programs to promote and facilitate access to full participation in communication, including the elimination of societal, cultural, and linguistic barriers.
- Provide information to emergency response agencies for individuals who have communication and/or swallowing disorders.
- Advocate at the local, state, and national levels for improved public policies affecting access to services and research funding.
- Participate actively in professional organizations.³

**Sec. 11. Section 36-1940.04 D**
ASHA recommends the following additional language for areas outside of the SLPA scope requirements:

- developing or determining the swallowing strategies or precautions for patients, family, or staff;
- treating medically fragile patients, clients, and/or student independently; and
designing or selecting augmentative and alternative communication systems or devices.\(^4\)

Thank you for your consideration of ASHA’s position to support SB 1458 with amendments. If you or your staff have any questions, please contact Eileen Crowe, ASHA’s director, state association relations, at ecrowe@asha.org.

Sincerely,

\[\text{\vspace{1cm} A. Lynn Williams, PhD, CCC-SLP} \]

\[\text{\vspace{0.5cm} 2021 ASHA President} \]


\(^4\) ibid.