

ICC Recommended

***Guidelines for Speech & Language
Pathology Assistants
Roles & Responsibilities in Early Intervention***

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Guidelines for the Speech Language-Pathology Assistants (SLPA) Duties and Responsibilities in Early Intervention Services

The following information was obtained from the California Business Code, Title 16, and ASHA Position Statement 2004. Please see Sources listed at the end of this document.

A Speech Language Pathology Assistant (SLPA) has met the requirements set forth by the California Business and Professions Code for Speech-Language Pathology Assistants. To be eligible for registration by the Board as a SLPA, the applicant must possess the following qualifications:

- An associate of arts or science degree from a SLPA program accredited by the Accrediting Commission of Community and Junior Colleges, Western Association of schools and Colleges, and approved by the Board or evidence of completion of a bachelor's degree program in speech pathology or communication disorders. (For further detail on the associate and bachelor degree requirements refer to Title 16 CCR Section 1399.170.11).

All SLPA's working in the field of early intervention shall embrace the Foundational Principles for all Early Intervention Team Members

These foundational principles reflect core beliefs, values and the shared vision and intent of IDEA, Part C and the California Early Start service system.

1. Practices shall be family-centered.
2. Practices shall be relationship-based.
3. Practices shall be culturally responsive.
4. Practices shall be collaborative and interdisciplinary.
5. Practices shall be responsive to child developmental risk and protective factors.
6. Practices shall adhere to professional and ethical standards.

Duties that the SLPA's are able to perform

The SLPA is considered a Specialized Consultant Assistant in the Early Start Personnel Model. The SLPA provides direct treatment assistance to children and families under the supervision of a speech-language pathologist by:

1. Conducting speech-language screening, without interpretation, and using age-appropriate screening protocols developed by the supervising SLP (Speech Language Pathologist).
2. Following and implementing documented treatment plans or protocols developed by a supervising SLP.
3. Documenting progress toward meeting established child and family outcomes and reporting the information to a supervising SLP.
4. Assisting a SLP during assessments, including, but not limited to, assisting with formal documentation, preparing materials, and performing clerical duties for a supervising SLP.
5. When competent to do so, as determined by the supervising SLP, acting as an interpreter for non-English speaking families.

6. Scheduling activities and preparing charts, records, graphs, and data.
7. Performing checks and maintenance on equipment including, but not limited to, augmentative communication devices.
8. Assisting with speech-language pathology research projects, in-service training, and family or community education.

All services will be provided in the child's natural environment to the maximum extent appropriate unless there is a justification in the IFSP stating why the early intervention service will not be provided in the natural environment.

SLPA supervision

The SLPA is supervised by the licensed (and/or credentialed) speech-language pathologist under the following definitions of supervision:

“Direct Supervision” means on-site observation and guidance by the supervising speech-language pathologist while a clinical activity is performed by the speech-language pathology assistant.

“Immediate Supervision” means the supervising speech-language pathologist is physically present during services provided to the child and family by the speech-language pathology assistant.

“Indirect supervision” means the supervising speech-language pathologist is not at the same location or physical space or in close proximity to the speech-language-pathology assistant, but is available to provide supervision by electronic means. Indirect supervision activities performed by the supervising speech-language pathologist may include but are not limited to, demonstration, record review, review and evaluation of audio or video-taped session, interactive television, and supervisory conferences that may be conducted by telephone or electronic mail.

“Supervision” means the provision of direction and evaluation of the tasks assigned to a speech-language pathology assistant. Methods for providing supervision include direct supervision, immediate supervision, and indirect supervision.

Early Intervention duties of a SLPA that require specific supervision

Types of supervision required for duties performed by a speech-language pathology assistant in early intervention include:

1. Duties performed by the SLPA that require immediate supervision may include, but are not limited to, any direct activity with the child and family involving medically fragile infants or toddlers. In such instances, the SLPA shall act only under the direction of the supervisor.
2. Duties performed by the SLPA that require direct supervision may include but are not limited to, any new screening or treatment activity that the assistant has been trained to perform by the supervisor, but has not yet been performed by the SLPA in direct care.
3. Duties performed by the SLPA under indirect supervision are provided in the child's natural environment unless a justification is provided. Duties may include, but are not limited to, the following:
 - a. Screening or treatment activities where the supervisor has previously given instruction as to how to perform the task, has observed the assistant in the

conduct of these activities, and is satisfied that the activities can be competently performed by the SLPA, i.e. imitation, turn-taking routines, following directions, labeling, generalization or carryover activities.

- b. Clerical tasks such as record keeping, materials preparation, scheduling, equipment maintenance, and
- c. Other non-client care activities.

Percentage of supervision

During the initial 90-Days:

The SLP will provide supervision at least 30% direct and indirect weekly of the SLPA's workweek, for the first 90 workdays. Direct supervision should be no less than 20%. Indirect supervision should be no less than 10%.

The supervising SLP will include early intervention modeling and strategies for the SLPA that will support their work with young children and families receiving early intervention services within the SLPA's scope of practice.

After the initial 90-days:

Supervision may be adjusted. The minimum is 20% supervision weekly of the SLPA's workweek, with no less than 10% being direct supervision.

Supervision days and time of day may be alternated to ensure that all children and their families received some direct contact with the SLP at least once every 2 weeks.

The supervising SLP co-signs all formal documentation and informal progress notes.

The supervising SLP will provide continued mentorship and modeling for the SLPA in the principles of providing early intervention services for young children and families.

Activities, duties, and functions outside the scope of responsibilities of a SPLA

A SLPA **may not** conduct evaluations, interpret data, alter treatment plans, or perform any task without the express knowledge and approval of a supervising speech-language pathologist

- (a) Participate in parent conferences, case conferences, or inter-disciplinary team conferences without the supervising speech-language pathologist or another speech-language pathologist being present;
- (b) Provide counseling or advice to a family which is beyond the scope of the /infant-toddler's treatment;
- (c) Sign any documents in lieu of the supervising speech-language pathologist, i.e., treatment plans, client reimbursement forms, or formal reports;
- (d) Discharge the infant or toddler from services;
- (e) Make referrals for additional services;

(f) Unless required by law, disclose confidential information either orally or in writing to anyone not designated by the supervising speech-language pathologist;

(g) Represent himself or herself as a speech-language pathologist; and,

(h) Perform procedures that require a high level of clinical acumen and technical skill, i.e., vocal tract prosthesis shaping or fitting, vocal tract imaging, and oropharyngeal swallow therapy with bolus material.

NOTE: Authority Cited: Sections 2531.95 and 2538.1(a), Business and Professions Code.
Reference Cited: Section 2538.1(b)(3), Business and Professions Code.

Continuing education

The supervising SLP is required to have 6 hours of continuing education in supervision training prior to commencement of supervision. Following the initial 2-year period, 3 hours in supervision training are required every 2 years.

The SLPA is required to have 12 hours of continuing education every 2-year period (state/regional workshops, formal in-service presentations, and/or independent study).

Sources

American Speech-Language and Hearing Association. (2004). *Guidelines for the training and supervision of speech-language pathology assistants (Guidelines)*.
<http://www.asha.org/docs/html/GL2004-00054.html>

American Speech-Language and Hearing Association. (2004). *Training, use, and supervision of support personnel in speech-language pathology (Position Statement)*
www.asha.org/policy

California Speech-Language Pathology and Audiology Board.(2011). *Excerpts from the California Business and Profession Code of Speech-Language Pathology Assistants*.
<http://www.slpab.co.gov/applicants/assistant.shtml>

Qualified Personnel Committee of the California Interagency Coordinating Council on Early Intervention, the California Early Start Personnel Manual Work-group and the California Early Start Personnel Manual Stakeholder Group. (2010). *Early Start Personnel Manual*. Sacramento, CA: WestEd Center for Prevention and Early Intervention.

Title 16 California Code of Regulation (CCR), Sections 1399.170 - 1399.170.20.1