



ASHA
American
Speech-Language-Hearing
Association

Schools Survey Report:
SLP Caseload Characteristics Trends
2004–2020

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Introduction

The American Speech-Language-Hearing Association (ASHA) conducted the *2020 Schools Survey* to gather information about professional issues related to school-based services. Results from this survey are presented in a series of reports, including this report on speech-language pathologist (SLP) caseload characteristics trends.

Findings from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, and 2018 *ASHA Schools Surveys* are included in this report for comparative purposes. Questions differ among surveys, so data on all topics are not available for all survey years.

Survey Report Highlights

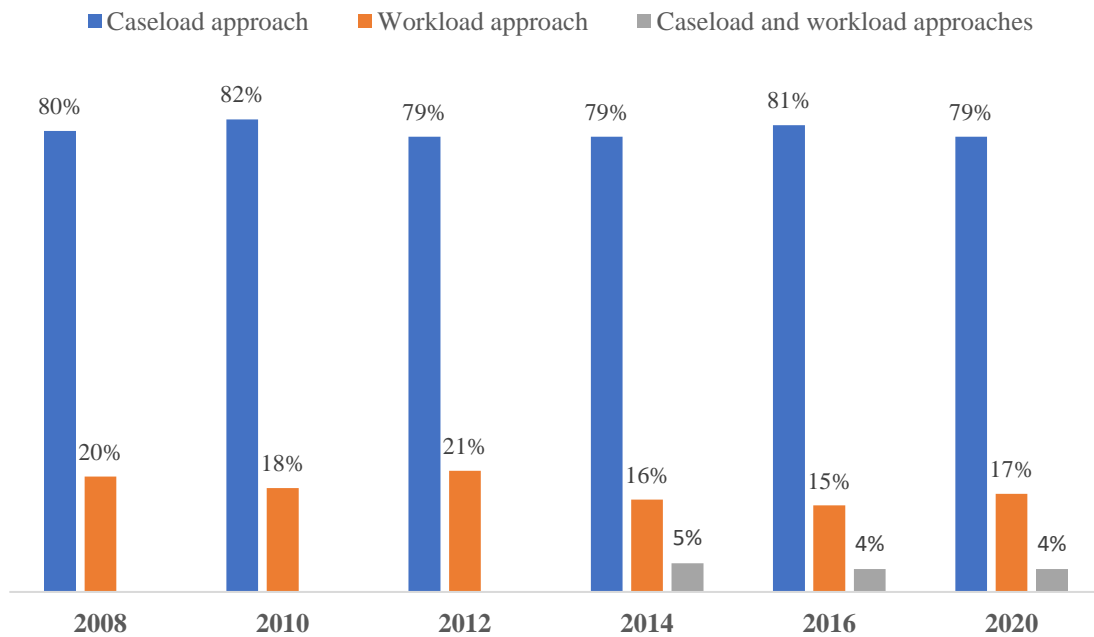
- In 2020, most (79%) SLPs indicated that a caseload approach was used to determine the number of students they served—the same or about the same as in past years (79%–82% from 2008 to 2016).
- In 2020, SLPs had a median monthly caseload size of 47—the same or about the same as in recent past years (47–48 from 2012 to 2018).
- From 2004 to 2020, caseload size was lower in special day or residential schools and preschools than in other school settings (25–30 for special day or residential schools and 37–41 for preschools).
- From 2004 to 2020, SLPs in California and Ohio consistently had among the largest caseload sizes (55–58 and 53–61, respectively). SLPs in New York consistently had among the smallest caseload sizes (30–40).
- From 2016 to 2020, SLPs in the Northeast—especially in the Mid-Atlantic states—had smaller caseload sizes than did SLPs in other regions of the country.
- From 2014 to 2020, about 90% of SLPs treated students with autism spectrum disorder, language disorders, and speech sound disorders.
- From 2014 to 2020, SLPs' caseloads included a higher number of students with language disorders, reading and writing difficulties, and speech sound disorders than with other disorders.
- In 2020, overall, SLPs spent much of their time each week (19 hours) in pullout services to students—the same or about the same as in recent past years (18–20 hours from 2014 to 2018).
- From 2014 to 2020, SLPs in elementary schools spent more time in pullout services per week (20–22 hours) than did SLPs in other types of schools.
- In 2020, most (63%) SLPs were required to make up missed sessions with students any time they missed a session for any reason—up from 54% in 2016 and 2018.

Caseload or Workload Approach

As defined in the survey, a *caseload approach* is based on the number of students served; a *workload approach* is based on all activities required and performed.

In 2020, most (79%) SLPs indicated that a caseload approach was used to determine the number of students they served—the same or about the same as in past years (79%–82% from 2008 to 2016; see Figure 1).

Figure 1. Percentage of school-based SLPs who indicate that a caseload and/or workload approach is used to determine the number of students they serve, by year.



Note. These data are from the 2008, 2010, 2012, 2014, 2016, and 2020 ASHA Schools Surveys. In 2008, analysis was limited to clinicians employed full time; in 2010, 2012, 2014, 2016, and 2020, clinicians who were employed part time were also included. In 2008, 2010, and 2012, *caseload and workload approaches* (combined) was not included in the survey.

n = 1,733 (2008); *n* = 2,153 (2010); *n* = 2,149 (2012); *n* = 1,464 (2014); *n* = 1,566 (2016); *n* = 1,470 (2020).

Caseload Size

In 2020, SLPs had a median monthly caseload size of 47—the same or about the same as in recent past years (47–48 from 2012 to 2018; see Appendix Table 1). In other words, each SLP treated about 47 different students in a typical month.

Caseload Size, by School Setting

Caseload size differed by school setting. From 2004 to 2020, caseload size was lower in special day or residential schools and preschools than in other school settings (25–30 for special day or residential schools and 37–41 for preschools; see Appendix Table 1).

Caseload Size, by State

Caseload size varied by state. From 2004 to 2020, SLPs in California and Ohio consistently had among the largest caseload sizes (55–58 and 53–61, respectively). SLPs in New York consistently had among the smallest caseload sizes (30–40; see Appendix Table 2).

Caseload Size, by Geographic Region

Caseload size varied by geographic region. From 2016 to 2020, SLPs in the Northeast—especially in the Mid-Atlantic states—had smaller caseload sizes than did SLPs in other regions of the country (see Table 1 and page 10 for a key of geographic regions/divisions and corresponding states).

Table 1. Median monthly caseload size of school-based SLPs, by geographic region and year.

Geographic region	#		
	2016 (<i>n</i> = 1,328)	2018 (<i>n</i> = 1,539)	2020 (<i>n</i> = 1,279)
Northeast	38	36	35
New England	40	40	40
Mid-Atlantic	37	35	34
Midwest	48	49	46
East North Central	50	50	48
West North Central	41	43	45
South	50	50	52
South Atlantic	50	50	50
East South Central	55	57	60
West South Central	50	50	55
West	52	54	54
Mountain	52	55	59
Pacific	48	52	53

Note. These data are from the 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time.

Areas of Intervention

SLPs served students in numerous areas of intervention. From 2014 to 2020, about 90% of SLPs served students with autism spectrum disorder, language disorders, and speech sound disorders. About 70% of SLPs served students with fluency disorders (see Appendix Table 3).

From 2014 to 2020, SLPs' caseloads included a higher number of students with language disorders, reading and writing (literacy) difficulties, and speech sound disorders than with other disorders (see Appendix Table 4).

Weekly Activities

From 2014 to 2020, SLPs spent much of their time each week (18–20 hours) in pullout services to students (see Table 2).

Table 2. Number of hours per week that school-based SLPs spend on activities, by year.

Weekly activity	#			
	2014 (n ≥ 989)	2016 (n ≥ 1,033)	2018 (n = 1,423)	2020 (n = 1,279)
Collaborative consultation	—	—	2	2
Diagnostic evaluations (e.g., observation, screening, scoring, analysis)	3	3	4	4
Direct intervention: Classroom-based/integrated services	4	5	7	5
Direct intervention: Pullout	18	19	20	19
Documentation/paperwork	7	7	—	—
Medicaid billing	—	2	—	—
MTSS/RtI activities	1	1	2	1
Services to Section 504 students	< 1	< 1	2	< 1
Supervision	1	1	4	1
Technological support (e.g., hearing aids/cochlear implants, AAC)	1	1	2	1
Telepractice	—	—	—	< 1
Other duties as assigned ^a	4	2	—	3

Note. These data are from the 2014, 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time and had a caseload size of at least one student. In 2014, 2016, and 2018, clinicians worked a maximum of 52 hours per week; in 2020, they worked a maximum of 55 hours per week. Dash indicates that the item was not included in the survey. MTSS = multitiered system of supports; RtI = response to intervention; AAC = augmentative and alternative communication. ^aIn 2014, 2016, and 2018, this item was *other indirect activities*.

Weekly Activities, by School Setting

The amount of time spent on activities varied by school setting. From 2014 to 2020, SLPs in elementary schools spent more time in pullout services per week (20–22 hours) than did SLPs in other school settings. SLPs in special day or residential schools and preschools spent the least amount of time per week in pullout services (13–17 hours). (These data are not presented in any figure or table.)

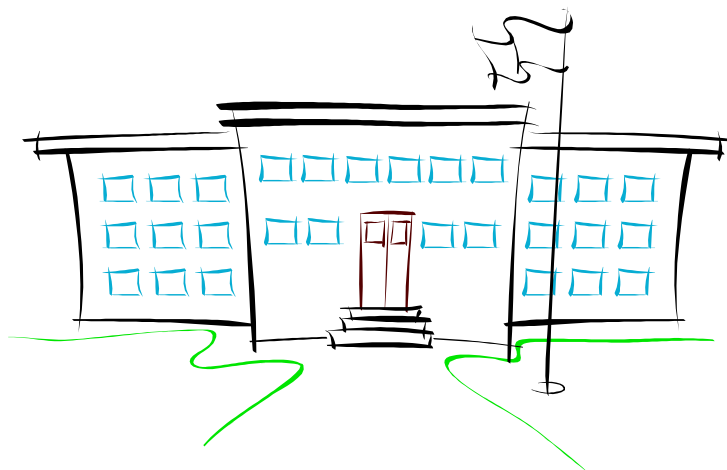
Missed Sessions With Students

In 2020, most (63%) SLPs were required to make up missed sessions with students any time they missed a session for any reason—up from 54% in 2016 and 2018. About one third (32%) of SLPs were *not* required to make up missed sessions—down from 40% in 2016 and 2018 (see Table 3).

Table 3. *Percentage of school-based SLPs who are required to make up missed sessions, by circumstance and year.*

Circumstance	%		
	2016 (n = 1,597)	2018 (n = 1,864)	2020 (n = 1,496)
I am not required to make up missed sessions.	40	40	32
When the student misses a session due to an assembly or a classroom activity	12	13	17
Any time a student misses a session for any reason	8	9	9
Any time I miss a session for any reason	54	54	63

Note. These data are from the 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full or part time.



Survey Methodology

The survey was mailed on February 10, 2020, to a random sample of 4,500 ASHA-certified SLPs and 500 ASHA-certified audiologists employed in school settings in the United States. The sample was stratified by state. Small groups, such as SLPs and audiologists in Wyoming, were oversampled. A survey notification email was sent at the time of the mailing. A second mailing followed on March 11 to individuals who had not responded to the February mailing. A third mailing was canceled due to the COVID-19 pandemic.

Response Rates

Of the original 4,500 SLPs in the sample plus one other SLP who returned the survey without any identifying number, eight had incorrect mailing addresses, 17 had retired, 21 were employed in other types of facilities, 16 were not employed in the profession, and two were ineligible for other reasons, which left 4,437 possible respondents. The actual number of respondents was 1,779—a 40.1% response rate.

Past *ASHA Schools Survey* response rates were as follows:

- 2004: 69.7%
- 2006: 64.9%
- 2008: 64.0%
- 2010: 64.8% (overall); 65.5% (among SLPs)
- 2012: 63.6% (overall); 64.7% (among SLPs)
- 2014: 46.0% (overall); 47.0% (among SLPs)
- 2016: 47.4% (overall); 47.9% (among SLPs)
- 2018: 48.0% (overall); 48.8% (among SLPs)

Suggested Citation

American Speech-Language-Hearing Association. (2020). *Schools survey report: Caseload characteristics trends, 2004–2020*. www.asha.org

Additional Information

Companion reports are available on the ASHA website at www.asha.org/Research/memberdata/Schools-Survey/.

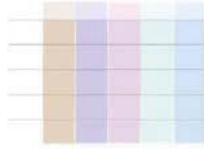
Questions?

For additional information regarding this report, contact Schools Services at schools@asha.org.

Acknowledgment

Without the generous cooperation of the members who participate in our surveys, ASHA could not fulfill its mission to provide vital information about the professions and discipline to the Association membership and public. Thank you!

Appendix



Key of geographic regions/divisions and corresponding states.

Geographic region/division	Corresponding states
Northeast	
New England	CT, ME, MA, NH, RI, VT
Mid-Atlantic	NJ, NY, PA
Midwest	
East North Central	IL, IN, MI, OH, WI
West North Central	IA, KS, MN, MO, NE, ND, SD
South	
South Atlantic	DE, DC, FL, GA, MD, NC, SC, VA, WV
East South Central	AL, KY, MS, TN
West South Central	AR, LA, OK, TX
West	
Mountain	AZ, CO, ID, MT, NV, NM, UT, WY
Pacific	AK, CA, HI, OR, WA

Appendix Table 1. Median monthly caseload size of SLPs, by school setting and year.

School setting	#								
	2004 (n = 2,052)	2006 (n = 1,772)	2008 (n = 1,721)	2010 (n = 1,749)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,539)	2020 (n = 1,279)
Overall ^a	50	50	50	50	47	48	48	48	47
Special day or residential school	25	27	28	28	25	24	30	27	27
Preschool	40	40	40	40	37	41	38	40	40
Elementary school	52	52	50	50	50	50	50	50	50
Secondary school (middle school, junior high, or senior high)	50	55	49	50	48	50	50	48	48
Combination of the above school settings	50	55	50	50	50	52	45	48	48

Note. These data are from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^a*Overall* includes respondents who did not indicate a school setting.

Appendix Table 2. Median monthly caseload size of school-based SLPs, by state and year.

State	#								
	2004 (n = 2,067)	2006 (n = 1,742)	2008 (n = 1,707)	2010 (n = 1,785)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,231)	2020 (n = 927)
Alabama	n/r	50	n/r	n/r	n/r	n/r	n/r	n/r	n/r
Alaska	n/r	n/r	n/r	49	n/r	n/r	n/r	n/r	n/r
Arizona	54	55	57	60	57	n/r	n/r	60	65
Arkansas	40	41	40	40	42	n/r	n/r	40	n/r
California	58	58	55	55	55	55	55	55	55
Colorado	48	n/r	48	n/r	55	n/r	n/r	n/r	n/r
Connecticut	42	40	37	40	32	n/r	35	n/r	n/r
Delaware	n/r	50	55	54	n/r	n/r	n/r	n/r	n/r
District of Columbia	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r
Florida	72	65	46	65	59	60	64	60	60
Georgia	50	46	43	46	45	52	42	43	48
Hawaii	n/r	35	40	40	n/r	n/r	n/r	n/r	n/r
Idaho	n/r	57	61	58	n/r	n/r	n/r	n/r	n/r
Illinois	50	55	50	50	48	49	50	49	45
Indiana	74	78	75	80	72	n/r	n/r	76	n/r
Iowa	50	49	55	50	n/r	n/r	n/r	n/r	n/r
Kansas	47	n/r	46	45	n/r	n/r	n/r	n/r	n/r
Kentucky	63	60	65	59	52	n/r	60	60	n/r
Louisiana	50	n/r	45	46	45	n/r	n/r	n/r	n/r
Maine	n/r	n/r	n/r	30	n/r	n/r	n/r	n/r	n/r
Maryland	50	52	45	43	45	47	45	44	41
Massachusetts	45	40	40	43	42	41	40	41	43
Michigan	57	57	55	60	55	58	50	54	53
Minnesota	42	45	45	42	43	n/r	36	38	46
Mississippi	55	55	50	45	n/r	n/r	n/r	n/r	n/r
Missouri	45	42	48	45	39	40	40	42	36

(Table continues)

Appendix Table 2. Continued

State	#								
	2004 (n = 2,067)	2006 (n = 1,742)	2008 (n = 1,707)	2010 (n = 1,785)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,231)	2020 (n = 927)
Montana	n/r	45	43	45	n/r	n/r	n/r	n/r	n/r
Nebraska	n/r	54	53	55	n/r	n/r	n/r	n/r	n/r
Nevada	n/r	55	n/r	60	n/r	n/r	n/r	n/r	n/r
New Hampshire	n/r	n/r	n/r	31	n/r	n/r	n/r	n/r	n/r
New Jersey	48	46	42	40	40	40	40	40	35
New Mexico	35	40	35	45	n/r	n/r	n/r	n/r	n/r
New York	35	40	40	32	32	35	31	30	30
North Carolina	45	56	50	47	43	46	48	48	46
North Dakota	n/r	32	33	35	n/r	n/r	n/r	n/r	n/r
Ohio	55	60	60	61	60	57	55	55	53
Oklahoma	52	54	55	50	50	n/r	n/r	50	n/r
Oregon	n/r	60	n/r	50	n/r	n/r	n/r	n/r	n/r
Pennsylvania	60	53	53	60	50	50	50	54	56
Rhode Island	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r
South Carolina	58	55	n/r	48	50	n/r	n/r	n/r	n/r
South Dakota	n/r	49	40	n/r	n/r	n/r	n/r	n/r	n/r
Tennessee	n/r	61	57	60	n/r	n/r	n/r	n/r	n/r
Texas	55	55	50	50	50	50	51	55	65
Utah	n/r	n/r	65	60	n/r	n/r	n/r	n/r	n/r
Vermont	n/r	30	n/r	31	n/r	n/r	n/r	n/r	n/r
Virginia	55	55	55	56	53	55	55	49	50
Washington	50	51	52	53	n/r	n/r	n/r	48	n/r
West Virginia	n/r	50	50	49	n/r	n/r	n/r	n/r	n/r
Wisconsin	38	40	40	38	40	n/r	40	40	42
Wyoming	n/r	50	45	n/r	n/r	n/r	n/r	n/r	n/r

Note. These data are from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. *n/r* = not reported (to preserve confidentiality and provide more certain results, we have not reported data for groups of fewer than 25).

Appendix Table 3. Percentage of school-based SLPs treating students, by area of intervention and year.

Area of intervention	%							
	2006 (n = 1,769)	2008 (n = 1,718)	2010 (n = 1,747)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,539)	2020 (n = 1,279)
Acquired brain injury ^a	18	14	17	17	0	17	15	13
Auditory processing disorder	61	54	47	58	46	37	32	31
Autism spectrum disorder ^b	84	84	88	90	90	91	90	92
Childhood apraxia of speech	56	58	59	57	63	63	60	58
Cognitive communication disorders	—	—	—	—	61	60	48	52
Dysphagia (swallowing/feeding disorders)	10	9	9	11	14	11	11	10
Fluency disorders	69	67	67	67	68	69	67	68
Hearing loss ^c	48	44	46	45	51	46	45	45
Language disorders: Pragmatics/social communication	77	75	81	83	89	90	85	87
Language disorders: Semantics, morphology, syntax	—	—	—	—	92	91	91	90
Nonverbal, augmentative and alternative communication	50	45	53	49	55	55	60	63
Reading and writing (literacy) difficulties	37	32	32	30	36	33	31	36
Selective mutism	—	—	16	17	18	18	19	23
Speech sound disorders ^d	91	94	92	93	93	89	90	89
Voice or resonance disorders	29	24	23	22	22	18	19	15

Note. These data are from the 2006, 2008, 2010, 2012, 2014, 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^aFrom 2006 to 2016, this item was *Traumatic brain injury*. ^bFrom 2006 to 2008, this item was *Autism/pervasive developmental disorder*; from 2010 to 2012, it was *Autism spectrum disorders, including pervasive developmental disorder and Asperger's*. ^cFrom 2006 to 2012, this item was *hearing disorders*. ^dFrom 2006 to 2014, this item was *articulation/phonological disorders*. Dash indicates that the item was not included in the survey.

Appendix Table 4. Average number of students on school-based SLPs' caseloads, by area of intervention and year.

Area of intervention	#							
	2006 (n varies)	2008 (n varies)	2010 (n varies)	2012 (n varies)	2014 (n varies)	2016 (n varies)	2018 (n varies)	2020 (n varies)
Acquired brain injury ^a	2	1	2	1	1	2	2	2
Auditory processing disorder	9	8	7	10	7	6	5	5
Autism spectrum disorder ^b	6	7	8	8	9	10	10	11
Childhood apraxia of speech	3	3	3	3	3	3	3	3
Cognitive communication disorders	—	—	—	—	10	10	9	10
Dysphagia (swallowing/feeding disorders)	4	3	3	3	3	2	3	4
Fluency disorders	3	2	2	3	3	3	3	3
Hearing loss ^c	3	3	3	3	3	3	2	3
Language disorders: Pragmatics/social communication	8	8	8	10	11	12	11	13
Language disorders: Semantics, morphology, syntax	—	—	—	—	22	22	21	22
Nonverbal, augmentative and alternative communication	5	4	5	4	5	5	5	7
Reading and writing (literacy) difficulties	15	15	14	14	15	15	14	13
Selective mutism	—	—	1	1	1	1	1	1
Speech sound disorders ^d	23	22	21	19	21	18	18	19
Voice or resonance disorders	2	2	2	2	2	1	2	2

Note. These data are from the 2006, 2008, 2010, 2012, 2014, 2016, 2018, and 2020 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^aFrom 2006 to 2016, this item was *Traumatic brain injury*. ^bFrom 2006 to 2008, this item was *Autism/pervasive developmental disorder*; from 2010–2012, it was *Autism spectrum disorders, including pervasive developmental disorder and Asperger's*. ^cFrom 2006 to 2012, this item was *hearing disorders*. ^dFrom 2006 to 2014, this item was *articulation/phonological disorders*. The numbers included in this table were provided by SLPs who do treat students in the areas of intervention listed. The *n* values vary widely because SLPs did not treat students in all areas. Dash indicates that the item was not included in the survey.