



Tough Questions (And Answers) on Salary Supplement Funding

“What Decision Makers Ask and How to Answer their Questions”

They Say:

Why should we give a salary supplement to audiologists and speech-language pathologists with ASHA certification?

We Say:

Ten states and over one hundred districts have recognized (or are considering recognition) of ASHA certification for a salary supplement.

- ▶ The number of children in our state that have special needs continues to rise. A significant portion of those have speech, language and hearing disorders which interfere with their ability to reach their full academic potential. Studies clearly document that children with language disorders are four-to-five times more likely to have difficulties in reading and writing. These children need the best services available from fully qualified ASHA certified professionals.

They Say:

Why can't speech-language pathologists and audiologists apply for NBPTS certification?

We Say:

Speech-language pathology and audiology is not one of the 24 areas for which the NBPTS offers certification. In a recent meeting with NBPTS, the president stated that there are currently no standards for speech-language pathologists/audiologists nor does the National Board have any plans to develop them in the future. The National Board's "focus is on teachers providing instruction in the classroom."

Further, while the two certification programs are different; they are equally rigorous. In fact NBPTS standards are lower than ASHA standards.

Let's compare:

- ▶ The minimum degree required for the National Board is a BA/BS, compared to an MA/MS for SLPs and a doctoral degree for audiologists for ASHA certification.
- ▶ National Board Certification requires that a candidate first take the national teachers' exam and then spend three year's teaching before applying. As part of the application process, the National Board requires a portfolio review of aspects of the candidate's teaching. After submission of the portfolio, National Board Certification applicants complete written exercises at an assessment center and are evaluated on essays they have written.

- ▶ By contrast, ASHA candidates complete a graduate degree and take two exams. The first is an objective multiple choice exam developed and validated by the Educational Testing Service (ETS). The second exam, comparable to the NBPTS portfolio, is an assessment performed three times during the clinical fellowship by a supervisor who holds the Certificate of Clinical Competence (CCC). Twenty-one skills are assessed in this real world setting. Candidates are not allowed to practice independently until both their clinical fellowship (CF) and national exam requirements have been completed and approved.

They Say:

The purposes of NBPTS and ASHA certification are different. NBPTS certification identifies master teachers. Doesn't ASHA certification prepare only entry-level personnel?

We Say:

Both the certification from the NBPTS and the Certificate of Clinical Competence (CCC) from the American Speech-Language-Hearing Association indicate a level of professional competence that exceeds minimum requirements for employment in the schools. State teacher credentials do not require NBPTS certification. With a few exceptions, states do not require the ASHA CCC, or its equivalent, to hold a position as a speech-language pathologist or audiologist in the schools. Thus, just as a teacher may work in the public schools without NBPTS certification, speech-language pathology services can be provided by personnel who do not hold the ASHA CCC. This credential indicates a level of accomplishment beyond the minimum.

- ▶ The Minnesota Council for the Advancement of Accomplished Teaching (MCAAT) compared ASHA's CCC standards with those of the NBPTS and is of the opinion that "the CCC requirements are high standards and are comparable to, although different from, those of the National Board for Professional Teaching Standards."

They Say:

But, NBPTS certification involves a rigorous process, not just academic coursework. How does the ASHA certificate demonstrate competency?

We Say:

The Clinical Fellowship (CF) required for the ASHA CCC provides the same evidence of practice competency that portfolio review does for National Board certification.

- ▶ This CF is a 36-week work experience beyond practicum required during graduate study. Each clinical fellow is assessed at least three times by the CF supervisor using the Clinical Fellowship Skills Inventory Rating (CFSI) form. This form addresses the fellow's attainment of skills (18 for speech-language pathology or 21 for audiology), just as the NBC assessment process addresses the attainment of skills during work experience for its certifies.
- ▶ The CFSI stresses the need for both the clinical fellowship supervisor and the clinical fellow to identify performance areas in which improvement is needed and

- then to develop and implement performance improvement plans. This approach to the performance appraisal process includes the following features: (a) a standardized system for reviewing the clinical work of all clinical fellows at regularly scheduled intervals; (b) a procedure to ensure that the clinical fellow has the skills for independent practice; (c) a means by which the clinical fellowship supervisor can meaningfully supervise the clinical fellow's progress in attaining and improving skills; (d) a process by which the clinical fellow gains experience in the self-evaluation of his or her skills; and (e) a collaborative effort in which the clinical fellowship supervisor and the clinical fellow are encouraged to work together to make the clinical fellowship a valuable learning experience.
- ▶ The regularity of the feedback to the clinical fellow promotes professional development throughout the experience rather than waiting for a *post hoc* evaluation that occurs after development of a portfolio. The objectives of the CF and of NBPTS's portfolio review are the same: a performance-based assessment of actual work experience that demonstrates accomplished practice. The mechanisms for meeting these objectives are just different.

They Say:

Why are you here now?

We Say:

- ▶ We are concerned about the ability of the state's schools to recruit and retain qualified speech-language pathologists and audiologists to serve the state's children. A documented shortage of qualified speech-language pathologists exists throughout the country. In states where salary supplements are provided, there has been a reduction in the shortage and an increase in local district's ability to attract new qualified professionals.
- ▶ Establishing a salary supplement will provide an incentive for CCC-holders to come and remain in the state. It will provide an inducement to obtain ASHA certification. It will help the state eliminate any problems with obtaining Medicaid reimbursement for such services.
- ▶ The time for helping children has never been as critical as it is now. The number of challenging students grows daily; school populations are exploding; and teachers' workloads are at their peak.

They Say:

If we give the salary supplement to audiologists/speech-language pathologists, what do we tell the next group (the school psychologists, the guidance counselors, the social workers, etc.) that comes in and want a salary supplement?

We Say:

ASHA certified speech-language pathologists and audiologists demonstrate their skill and competence through the process required to achieve the CCC. Other groups would have to demonstrate the rigor of their certification process. While both ASHA and NBPTS require a competency based assessment and multiple evaluations, only ASHA requires an advanced degree (MA/MS/ Doctorate) and a nationally validated exam.

They Say:

A salary supplement for speech-language pathologists and audiologists will cost taxpayers a lot of money. How can we pay for this?

We Say:

The salary supplement will attract and keep the best speech-language pathologists and audiologists in our schools. Our children deserve the same quality services provided to individuals in other settings, e.g. health care settings.

The services of speech-language pathologists and audiologists to Medicaid-eligible children in the public schools are reimbursable so that such funds can help to offset the cost of a salary supplement. In fact, 75% of Medicaid eligible services in schools are provided by speech-language pathologists. Districts across the country are paying a stipend to speech-language pathologists delivering services to Medicaid eligible children for the additional work required. Local and state grants could also be used to offset the cost of a supplement.

Revised: March 2008