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**DEPARTMENT OF LABOR, LICENSING AND REGULATION**

**BOARD OF EXAMINERS IN SPEECH‑LANGUAGE PATHOLOGY AND AUDIOLOGY**

CHAPTER 115

Statutory Authority: 1976 Code Sections 40‑1‑70 and 40‑67‑70

115‑1. General Licensing Provisions.

115‑2. Speech‑Language Pathology Assistants.

115‑6. Continuing Education.

**Synopsis:**

The South Carolina Board of Examiners in Speech‑Language Pathology and Audiology proposes to: amend R.115‑1 to add “a diploma”; amend R.115‑2(C)(3) to add “neurogenics”; modify R.115‑2(D)(5) to cite to a regulation; clarify R.115‑2(G) that direct supervision means on‑site and in person; and add in R.115‑6(A)(2) the National Black Association for Speech‑Language and Hearing (NBASLH).

The Notice of Drafting was published in the *State Register* on August 24, 2018.

**Instructions:**

Replace regulation as shown below. All other items and sections remain unchanged.

**Text:**

ARTICLE 1

Licensing Provisions

115‑1. General Licensing Provisions.

Each applicant for a license must submit a notarized application form to the board office. The appropriate fee must be received before the application may be evaluated.

(A) An applicant for active licensure in Speech‑Language Pathology or Audiology must submit or cause to be submitted documented evidence of the following:

(1) a diploma showing a post‑graduate degree in speech‑language pathology or audiology from a school or program with regional accreditation determined by the board to be equivalent to those accredited by the Council of Academic Accreditation (CAA) for Audiology and Speech‑Language Pathology of the American Speech‑Language Hearing Association (ASHA) or other board approved authority;

(2) a passing score on a national examination as approved by the board; and

(3)(a) completed supervised professional employment (SPE); or

(b) meets ASHA’s standards for Certificate of Clinical Competence or its equivalent as approved by the board, in Speech‑Language Pathology or Audiology in effect at the time of application; or

(c) have a current ASHA Certificate of Clinical Competence or its equivalent as approved by the board.

(B) An applicant for active licensure in Audiology with a Masters in Audiology before January 1, 2007, must submit or cause to be submitted documented evidence of the following:

(1) at least a masters degree in audiology or its equivalent from a school or program determined by the board to be equivalent to those accredited by the Council of Academic Accreditation (CAA) for Audiology and Speech‑Language Pathology of the American Speech‑Language Hearing Association (ASHA);

(2) successful completion of a supervised clinical practicum approved by the board; and

(3) successful completion of postgraduate professional experience approved by the board; or

(4) meets ASHA’s standards for Certificate of Clinical Competence or its equivalent as approved by the board.

(C) An applicant for active licensure in Audiology with a Doctorate in Audiology after January 1, 2007, must submit or cause to be submitted documented evidence of the following:

(1) a doctoral degree in audiology from a school or educational institution with regional accreditation determined by the board to be equivalent to those accredited by the Council of Academic Accreditation (CAA) for Audiology and Speech‑Language Pathology of the American Speech‑Language Hearing Association (ASHA); or

(2) meets ASHA’s standards for Certificate of Clinical Competence or its equivalent as approved by the board.

(D) An applicant for a speech‑language pathology or audiology intern license must submit or cause to be submitted documented evidence of having satisfied the requirement of (A)(1).

(1) A speech‑language pathology or audiology intern license must be issued to an applicant who has satisfied the requirement of subsection (A)(1) but who has not passed the examination required by subsection (A)(2) or who lacks the supervised professional employment as required by subsection (A)(3), or both.

(2) A person who has been issued a license as an intern who has not met the requirement of subsection (A)(2) must pass an examination approved by the board within twelve months of the issuance of the intern license.

115‑2. Speech‑Language Pathology Assistants.

(A) To be licensed as a Speech‑Language Pathology Assistant an applicant must:

(1) submit an application on forms approved by the board;

(2) submit an application fee as prescribed by the board;

(3) present evidence of a bachelor’s degree in Speech‑Language Pathology from a regionally accredited institution.

(B) A bachelor’s degree in Speech‑Language Pathology from a regionally accredited institution must include as a minimum the following core curriculum of 36 semester hours and not less than 100 clock hours of direct client contact/clinical practicum, excluding observation hours.

(C) Specialized Preparation: 36 Semester Hours

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | (1) | Directed Teaching in Speech‑Language Therapy | (6 Semester Hours) |
|  |  | 100 clock hours of supervised clinical practicum in not less than two different sites with direct client contact/clinical practicum, excluding observation hours. | |
|  | (2) | Basic Area |  |
|  |  | Anatomy, physiology, mechanics, and function of the ear and vocal mechanism. |  |
|  |  | Phonetics |  |
|  |  | Semantics |  |
|  |  | Speech and Voice Science |  |
|  |  | Psychology of Speech |  |
|  |  | Experimental Phonetics |  |
|  | (3) | Speech‑Language Pathology Courses | (12 Semester Hours) |
|  |  | Stuttering |  |
|  |  | Articulation |  |
|  |  | Voice Disorders |  |
|  |  | Cleft Palate |  |
|  |  | Aphasia |  |
|  |  | Cerebral Palsy |  |
|  |  | Speech‑Language Disorders |  |
|  |  | Neurogenics |  |
|  | (4) | Audiology | (3 Semester Hours) |
|  |  | Testing of Hearing |  |
|  |  | Introduction of Audiology |  |
|  |  | Auditory Training |  |
|  |  | Speechreading |  |
|  |  | Speech for the Deaf or Hard of Hearing |  |
|  | (5) | Psychology | (6 Semester Hours) |
|  |  | Human Growth and Development |  |
|  |  | Psychology of Adjustment or |  |
|  |  | Abnormal Psychology |  |
|  | (6) | Basic Course in Public Speaking | (3 Semester Hours) |

(D) General Guidelines

(1) No speech‑language pathology assistant may begin working in direct contact with clients/patients without the board’s written approval of the supervisory agreement and on the job training plan.

(2) Only a speech‑language pathologist with an active license in good standing and a minimum of three years of work experience may supervise speech‑language pathology assistants.

(3) A speech‑language pathologist shall supervise no more than two full‑time or three part‑time speech‑language pathology assistants, not to exceed more than three speech‑language pathology assistants whether part‑time or full‑time. Full time is defined as a minimum of 30 work hours per week.

(4) If, for any reason, there is a change in supervising speech‑language pathologist, it is the responsibility of the supervising speech‑language pathologist to notify the board in writing within seven (7) working days that the supervisory agreement has been discontinued.

(5) The assistant’s license shall become void when the authorized supervisor is no longer available for supervision. The license will be reactivated upon receipt and approval by the board of a new supervisory agreement and the change in supervising speech‑language pathologist fee specified in Reg. 10‑41(E).

(6) At the time of license renewal, supervising speech‑language pathologists are to list the names of all those speech‑language pathology assistants they are supervising.

(7) A speech‑language pathology assistant may work part‑time for more than one supervising speech‑language pathologist provided that the board has approved supervisory agreements for each supervising speech‑language pathologist.

(8) A licensed speech‑language pathologist who supervises any speech‑language pathology assistant must provide each speech‑language pathology assistant with on the job training and must maintain responsibility for all services performed or omitted by such speech‑language pathology assistant(s).

(E) On‑the‑Job Training (OJT)

At a minimum, on‑the‑job training (OJT) must include step‑by‑step instruction of each and every service or task the speech‑language pathology assistant is to perform and continuous visual observation by the supervising speech‑language pathologist of the speech‑language pathology assistant’s performance of each service or task until the supervising speech‑language pathologist establishes the speech‑language pathology assistant’s competence. The supervising speech‑language pathologist must maintain a written record of each service or task indicating the activity, date, time, and location of the training demonstration and observations. This record must be signed by both the supervising speech‑language pathologist and the speech‑language pathology assistant and a copy must be provided to the speech‑language pathology assistant. The supervising speech‑language pathologist and the speech‑language pathology assistant must maintain such records for a period of four (4) years and such records must be made available to the director or the designee upon request.

(F) Supervision ‑ General.

Supervising speech‑language pathologists are responsible for all the clinical services provided or omitted by the speech‑language pathology assistant(s). When speech‑language pathology assistants provide direct services, the supervising speech‑language pathologist is responsible for informing, in writing, all the clients (or their legal guardians), referring agencies, and third‑party payers. Further, it is the supervisor’s responsibility to ensure that the assistant is clearly identified at all times as an assistant by means of a name tag or similar identification. At no time may a speech‑language pathology assistant perform tasks when the supervising speech‑language pathologist cannot be reached by personal contact, phone, e‑mail, pager, or other immediate or electronic means. The supervisor must make provisions, in writing, for emergency situations including designation of another licensed speech‑language pathologist who has agreed to be available on an as needed basis to provide supervision and consultation to the assistant when the supervisor is not available. If for any reason (i.e., maternity leave, illness, change of job) a supervisor is not able to provide the level of supervision stipulated, the assistant may not perform client contact tasks.

(G) Direct Supervision.

Following initial OJT, direct supervision of each speech‑language pathology assistant must consist of a minimum of 15% (e.g., 6 hours per 40 hour work week) or one of every seven visits per patient of direct, visual supervision of client contact to include a sampling of each assigned service or task. This direct supervision must be on‑site, in person, and documented in writing. This documentation must be maintained by the supervising speech‑language pathologist for a period of four years and must be made available to the director or the designee upon request.

(H) Indirect Supervision.

In addition to direct supervision, indirect supervision is required a minimum of 5% (e.g., 2 hours per 40 hour work week) and must include review of written records and may include demonstrations, review and evaluation of audio‑ or video‑ taped sessions, and/or supervisory conferences.

(I) Quarterly Reviews.

In addition to direct and indirect supervision, the supervising speech‑language pathologist must conduct quarterly performance reviews of each speech‑language pathology assistant’s performance of each assigned service or task. Such quarterly reviews must document, on a form approved by the board, direct observation of each task or service assigned to the speech‑language pathology assistant. These reviews must be signed by both the supervising speech‑language pathologist and the speech‑language pathology assistant and must be maintained by the supervising speech‑language pathologist for a period of four (4) years and must be made available to the director or the designee upon request.

(J) Scope of Practice.

The supervising speech‑language pathologist accepts full and complete responsibility for all services and tasks performed or omitted by the speech‑language pathology assistant. Provided that education, training, supervision and documentation are consistent with that defined in this chapter, the following tasks may be designated to the speech‑language pathology assistant:

(1) Conduct speech‑language or hearing screenings (without interpretation) following specified screening protocols developed by the supervising speech‑language pathologist.

(2) Provide direct treatment assistance to patients/clients identified by the supervising speech‑language pathologist.

(3) Follow documented treatment plans or protocols developed by the supervising speech‑language pathologist.

(4) Document patient/client progress toward meeting established objectives as stated in the treatment plan.

(5) Assist the supervising speech‑language pathologist during assessment of patients/clients.

(6) Assist with tallying patient/client responses, prepare therapy materials, schedule activities, prepare charts and assist with other clerical tasks as directed by the supervising speech‑language pathologist.

(7) Perform checks and maintenance of equipment on a regular basis, and calibration at least annually on audiometric equipment.

(8) Assist the supervising speech‑language pathologist in research projects, in‑service training and public relations programs.

(9) Sign treatment notes which must be reviewed and co‑signed by the supervising speech‑language pathologist.

(10) Discuss with the client, the guardian or family members specifically observed behaviors that have occurred during treatment when such behaviors are supported by documented objective data.

(K) Prohibited Activities.

The speech‑language pathology assistant must not:

(1) Perform diagnostic tests of any kind, formal or informal evaluations, or interpret test results.

(2) Participate in parent conferences, case conferences, or any interdisciplinary team meetings where diagnostic information is interpreted or treatment plans developed without the presence of the supervising speech‑language pathologist or designated licensed speech‑language pathologist.

(3) Provide patient/client or family counseling.

(4) Write, develop, or modify a patient/client’s treatment plan in any way.

(5) Assist with patients/clients without following a documented treatment plan which has been prepared by a licensed speech‑language pathologist and for which the speech‑language pathology assistant has not received appropriately documented OJT.

(6) Sign any formal documents (e.g., treatment plans, reimbursement forms or reports) without the signature of the supervising speech‑language pathologist.

(7) Select patients/clients for services.

(8) Discharge patients/clients from services.

(9) Disclose clinical or confidential information either orally or in writing to any one not designated in writing by the supervising speech‑language pathologist.

(10) Make referrals for additional services.

(11) Provide any interpretation or elaboration of information that is contained in reports written by any licensed speech‑language pathologist.

(12) Represent oneself to be a speech‑language pathologist.

(13) Make advertisement or public announcement of services independent of the supervising speech‑language pathologist.

ARTICLE 2

Continuing Education

115‑6. Continuing Education.

(A) Courses used to meet the continuing education requirement must meet at least one of the following conditions:

(1) Courses offered by an American Speech‑Language Hearing Association (ASHA) or American Academy of Audiology (AAA) Continuing Education Sponsor.

(2) Courses offered by one of the following organizations: South Carolina Academy of Audiology, South Carolina Speech‑Language‑Hearing Association, National Institute of Hearing Instruments Studies (NIHIS), Academy of Rehabilitative Audiology, American Auditory Society, Academy of Dispensing Audiology, National Black Association for Speech‑Language and Hearing (NBASLH) or other organization approved by the board.

(3) Graduate level courses offered by a regionally accredited college or university within scope of practice (1 semester hour equals 15 hours for 1.5 CEUs).

(4) Courses offered by a state or federal agency provided the courses are within scope of practice.

(B) At least one‑half of the continuing education requirement must pertain to clinical practice in the area of licensure.

(C) Not more than two (2) hours of the continuing education requirement may be met by independent study. All independent study must receive prior approval by the board sixty (60) days prior to implementation. Independent study is developing a plan encompassing a variety of activities, such as reading journal articles, observing a master clinician, or reviewing case files. The study shall include the licensee writing a critical review stating how the licensee will incorporate the newly acquired skills and knowledge into practice.

(D) Continuing education requirements may be met by online or electronic courses.

(E) Instructors may receive continuing education credit, equivalent to that received by participants, for preparing and teaching courses, including online and electronic courses, within the scope of practice, subject to once per course.

(F) Submission of false or misleading continuing education information is grounds for immediate revocation of the license to practice and such other disciplinary actions as the board deems appropriate.

(G) Required documentation and audit process:

(1) each licensee shall attest to completion of the required continuing education at the time of license renewal;

(2) each licensee shall maintain records of continuing education hours earned for a period of four (4) years, and such records must be made available to the director or the designee upon request.

**Fiscal Impact Statement:**

There will be no cost incurred by the State or any of its political subdivisions for these regulations.

**Statement of Rationale:**

The South Carolina Board of Examiners in Speech‑Language Pathology and Audiology proposes to: amend R.115‑1 to add “a diploma”; amend R.115‑2(C)(3) to add “neurogenics”; modify R.115‑2(D)(5) to cite to a regulation; clarify R.115‑2(G) that direct supervision means on‑site and in person; and add in R.115‑6(A)(2) the National Black Association for Speech‑Language and Hearing (NBASLH).