The Clinical Doctorate in Speech-Language Pathology: National Stakeholder Survey Results

Ad Hoc Committee on the Feasibility of Standards for the Clinical Doctorate in SLP

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- This presentation is based, in large part, on a report written by the committee that was submitted to the ASHA Board of Directors (BOD) in December, 2013.
  - The report was reviewed and accepted by the ASHA BOD in January, 2014

- Mark DeRuiter is employed by the University of Minnesota –Twin Cities and has no other financial relationships to disclose. Mark has a non-financial relationship to the Council of Academic Programs in Communication Sciences and Disorders serving as Treasurer for this organization and liaison to the Ad Hoc Committee on the Feasibility of Standards for the Clinical Doctorate in SLP.

- Malcolm McNeil has a financial relationship to disclose with the University of Pittsburgh, which pays his salary. The University may potentially receive tuition dollars from recruited CScD students as a result of this presentation. He is also a member of the Ad Hoc Committee on the Feasibility of Standards for the Clinical Doctorate in Speech-Language Pathology.

- Loretta Nunez has a financial relationship with the American Speech-Language-Hearing Association that pays her salary. She has a non-financial relationship with ASHA’s Academic Affairs Board and the Ad Hoc Committee on the Feasibility of Standards for the Clinical Doctorate in Speech-Language Pathology serving as Ex Officio to these committees.

- Loretta Nunez is employed by the American Speech-Language-Hearing Association that pays her salary. She has a non-financial relationship to the Council of Academic Programs in Communication Sciences and Disorders serving as Ex Officio to these committees.

Disclosure Statement
**Learning Objectives**

Participants will:
- list three perceived benefits of the post entry-level clinical doctorate in Speech-Language Pathology
- list three benefits of program accreditation
- list two ways that survey results are consistent across constituents.

**Primary Purpose**

- Survey multiple stakeholder groups regarding the need, perceived benefit, impact, possible pursuit, and accreditation of an optional post-Master's Clinical Doctorate in Speech-Language Pathology
- All surveys conveyed that data were not being collected to be used in consideration of changes to entry-level requirements for the profession of Speech-Language Pathology

**Historical Perspective**

Multiple surveys have been conducted:
- Master's-level clinicians (2012)
  - Conducted in conjunction with ASHA's Academic Affairs Board (AAB)
  - This talk contains a high-level overview of the results discussed at the 2013 CAPCSD conference
  - Surveys to other stakeholder groups were largely based on the AAB survey
- Undergraduate students and Master's-level students in SLP programs (2013)
- Employee/Administrators/Directors (2013)
- Academic Programs (2013)

These survey reports can be accessed at:

**Themes Across Surveys**

- the perceived need for the clinical doctoral degree in speech-language pathology,
- the perceived need to accredit clinical doctoral degree-granting programs,
- the respondents' perceptions of the value and benefits of the degree,
- the anticipated impact of the degree on the profession,
- the current status of the development of such clinical doctoral programs,
- the potential pipeline for enrollment in clinical doctoral programs in speech-language pathology.

**Survey Design**

All 2013 surveys were based upon questions asked of Master's-level clinicians in 2012.
- This assisted us with examination of themes across different stakeholder groups

**Survey Groups**

- **Practicing Master's-Level Clinicians in Speech-Language Pathology** (May 2012)
  - Fielded: 4,083
  - Respondents: 682 (17% of fielded)
  - Reasonable representation of practicing SLPs
  - The speech-language pathology master's-level clinicians survey respondents mirrored the target population demographics for primary work setting (school, college/university, healthcare settings).
    - 41% school-based, 38% healthcare, 9% other, 7% college/university, 3% not employed/retired
Undergraduate Students and Master’s-Level Students in Speech-Language Pathology (May 2013)
- Fielded: 287 (program directors)
- Respondents: Undergraduates—653 (2% of undergraduate students), Master’s—836 (6% of masters students), Other—69

Employers/Administrators/Directors (June 2013)
- Fielded: 14,578
- Respondents: 2,109 (15%)

Academic Programs (May 2013)
- Fielded: 251 program directors
- Respondents: 87 (35%)

Two reminder emails followed the initial fielding of the survey giving individuals three opportunities to participate.
All email messages indicated “ASHA Survey on Optional Post-Master’s Clinical Doctorate in SLP, reply requested,” in the subject line so recipients were made aware of the issue under consideration. [The words “optional” and “post-masters” were used multiple times within the surveys]

Primary Question 1: Perceived Need
“Do you believe that there is a need for an optional post-master’s clinical doctorate in SLP?”

<table>
<thead>
<tr>
<th>Response</th>
<th>Students</th>
<th>Employers</th>
<th>Clinicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>43%</td>
<td>48%</td>
<td>48%</td>
</tr>
<tr>
<td>No</td>
<td>23%</td>
<td>32%</td>
<td>22%</td>
</tr>
<tr>
<td>Uncertain</td>
<td>35%</td>
<td>21%</td>
<td>30%</td>
</tr>
</tbody>
</table>
Considerable consistency across respondents in the percentages endorsing, opposing, and expressing uncertainty about the need for an optional post-master’s clinical doctorate in speech-language pathology.

More than 42% from each group of respondents indicated a need for this clinical doctoral degree.

- Employers were most likely to select yes/no versus an “uncertain” option.

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More clinicians would not pursue the degree than would.

- According to ASHA’s member and affiliate counts for year end 2011, there were approximately 135,948 certified practicing speech-language pathologists (SLPs).
- Therefore, it could be estimated that 33,987 (25%) practicing clinicians might pursue this degree.

According to 2011–2012 Higher Education Data System (HES) CSD Education Survey data, there were 48,161 undergraduate and graduate students enrolled. Therefore, it could be estimated that 18,301 (38%) students might pursue this degree.

Perspective:
- The Committee modeled an overestimation of the willingness to enroll for each group. If the number of clinicians and students willing to pursue a clinical doctorate was overestimated by 90%, it is estimated that 3,887 clinicians and 1,830 students would be likely to seek enrollment in a clinical doctoral program in speech-language pathology.

What is accreditation?
- A program of accreditation evaluates academic programs against a set of standards that are based on a practice analysis

What are the benefits of accreditation?
- Accreditation protects the interests of students; benefits the public; and improves the quality of teaching, learning, research, and professional practice.
- Accreditation accreditation status adds to the perceived value of the program (e.g., among university administrators, students, and employers).
- Academic accreditation promotes quality programs through independent agency evaluation and oversight and increased level of peer review. The effort and rigor associated with accreditation helps to promote quality programs and provide validation to prospective students about whether a given program meets quality standards.
Primary Question 3: Accreditation

“Do you think an optional post-masters clinical doctoral program should have oversight by an accrediting body (accreditation)?”

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<th>Clinicians</th>
</tr>
</thead>
<tbody>
<tr>
<td>No oversight</td>
<td>NA</td>
<td>44%</td>
<td>86%</td>
</tr>
<tr>
<td>No oversight</td>
<td>NA</td>
<td>6%</td>
<td>2%</td>
</tr>
<tr>
<td>Uncertain oversight</td>
<td>NA</td>
<td>10%</td>
<td>13%</td>
</tr>
<tr>
<td>Consider only if accredited</td>
<td>78%</td>
<td>44%</td>
<td>71%</td>
</tr>
<tr>
<td>Consider both accredited and non-accredited</td>
<td>8%</td>
<td>38%</td>
<td>10%</td>
</tr>
<tr>
<td>Uncertain</td>
<td>15%</td>
<td>21%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Stakeholder groups indicate a strong level of support for accrediting this degree.
- However, employers considered the accreditation of the degree program less essential than the students or clinician groups.

Primary Question 4: Clinical Doctorate and Ph.D.

“If a clinical doctorate in SLP were not available to you, would you enroll in a PhD program instead?”

<table>
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<tbody>
<tr>
<td>Yes</td>
<td>19%</td>
</tr>
<tr>
<td>No</td>
<td>48%</td>
</tr>
<tr>
<td>Uncertain</td>
<td>33%</td>
</tr>
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</table>

This question focuses on the challenging aspect of the Ph.D. pipeline within Communication Sciences and Disorders.
- What we know:
  - Upcoming AAB data – Friday session at 5:45 P.M.
  - 48% of the student respondents indicated that they would not pursue the Ph.D even if the clinical doctorate were not available to them.
  - 2010-11 HES First Employment Data: Approximately 2/3 of Ph.D. graduates go into academic positions (faculty, post doc, research) within the discipline and the majority of the remaining graduates assume clinical or administrative positions.
  - Could the clinical doctorate in Speech-Language Pathology actually help the pipeline?

Primary Question 5: Academic Programs

Of the 87 academic programs responding to the survey (35% of those surveyed)
- 1 (1.1%) offers and 4 (4.8%) plan to offer,
- 19 (22%) expressed an interest in offering a clinical doctoral program in speech-language pathology,
- 28 (33%) programs were undecided, and
- 39 (45%) were uninterested.

Anecdotally: The committee is aware of at least 10 programs that have expressed interest in, or in the process of developing, a clinical doctorate in SLP.
Positive impacts

- Greater than 50% of respondents reported that there would be a positive impact of a clinical doctorate in these areas:
  - Patient care
  - Leadership
  - Respect from patients, consumers, and other health care providers
  - Specialized training
  - Application of evidence-based practice and increased knowledge and skills (clinicians and employers)
  - Enhancement of prestige of the field
  - Promotion of autonomy

Students were most optimistic about salary improvements, followed by clinicians and then employers.

- Previous analysis from Master’s-level clinicians revealed a relatively even split between perceptions of salary increases and no impact upon salary.

Overall, more than 40% of each stakeholder group expresses a perceived need for an optional clinical doctorate in Speech-Language Pathology.

- Stakeholder groups also identify that there are potential positive impacts of the clinical doctorate.
- There is the potential for a significant number of people to pursue the degree, if it were offered widely.

Stakeholder groups strongly support accreditation of the clinical doctorate degree.

- There are interesting questions regarding the intersection of the clinical doctorate in Speech-Language Pathology and the Ph.D./terminal degrees.

Your responses to:

- The perceived need for and value of an optional clinical doctorate in SLP?
- The effect of the clinical doctorate in SLP on research doctorate programs and the pipeline of researchers?
- Perceived benefits of accrediting the optional clinical doctorate in SLP versus having it remain unaccredited?
The ad hoc committee recommended to the ASHA BOD that Guidelines be developed at this time to provide counsel to institutions in developing clinical doctoral programs in speech-language pathology.

The ASHA BOD established Ad Hoc Committee on Guidelines for the Clinical Doctorate in Speech-Language Pathology in 2014.

It is recommended that:

- ASHA initiate the development of guidelines for academic programs offering the clinical doctorate in speech-language pathology;
- ASHA and CAPCSD, through the CSD Education Survey, monitor the rate of development of such clinical doctoral programs, including the number of programs and number of students enrolled and graduated;
- ASHA monitor the success of guidelines use, growth of programs, financial variables, and relevant risk factors to determine when or if recognition or accreditation is warranted.

Guidelines serve as a metric for existing and planned programs, as well as a resource for individuals considering advanced professional education.

Examples of guideline content could include such things as institutional accreditation, program mission and goals, learning outcomes, and resources.

Guidelines do not include a monitoring component, but institutions will be able to indicate that their clinical doctorate programs voluntarily follow the guidelines. Prospective students could use the guidelines to support their choices of a clinical doctoral program.