



Board of Examiners
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Meeting Minutes

August 14, 2009

Portland State Office Building Conference Room 445 Portland OR

PRESENT:

Ashley Northam, SLP, Chair	Sandy Leybold, Executive Director
Alison Metcalf, Audiologist, Vice-Chair	Tim Anderson, Administrative Assistant
Carol Clupny, SLP (arrived 10:28 a.m.)	Jeff Dover, AAG
Evan "Butch" Evans, Audiologist	
Charles Murphy, Public Member	
Elisa Williams, Public Member	
Mark Wax, MD, Otolaryngologist (arrived 10:28 a.m.)	

CALL TO ORDER

The meeting was called to order at 10:01 a.m.

WELCOME/APPROVE AGENDA

Chair Northam welcomed the other Board members and asked for members for any suggested changes to the agenda as circulated. No changes were made.

APPROVE MINUTES

May 22, 2009: The Board reviewed the draft minutes for May 22, 2009.

Action: Metcalf moved to approve the minutes with the strike of a typo under pediatric audiology standards. Murphy seconded. The minutes were approved by unanimous vote of those present.

PUBLIC COMMENTS

There were no public attendees.

CHAIR'S REPORT

Chair Northam reported that the day prior, she had met with ODE and directed Leybold to update the Board on the issue during her Executive Director report.

Metcalf asked if the SLPA auditees were notified about the results. Northam stated they had received individual letters at the end of June. Metcalf asked if the permit expiration/renewal notices had gone out. Anderson replied yes, and that it was documented that the renewal went out and to whom.

DIRECTOR'S REPORT

Leybold distributed a written report and spoke to the following highlights:

- TSPC and SLP licensure – Leybold stated that Vickie Chamberlain, director of TSPC, called and informed her that TSPC had voted to stop licensing SLPs in the schools. Leybold stated that she and Chamberlain would get together in September 2009 to solidify a plan to bring to their respective Boards. Metcalf asked if licensees transitioning from TSPC would be included in the upcoming renewal. Leybold replied that it requires statutory changes for both BSPA and TSPC so it had to wait until the legislature's next session in 2011. The Board discussed the topic further, and tabled the issue until there is further notice from

Leybold.

- Budget – Leybold informed the Board that she just learned that the Board did not receive invoices for legal services for March, April and May, 2009, which totaled about \$6,000. She stated this brought the legal services expense total for the 2007-09 biennium up to about \$32,000, which is over what the Board had budgeted.
- 2009 Legislative Report – Leybold presented a table summarizing legislation that passed and did not pass that affects the Board.

SLPA AUDIT RESULTS

Leybold reported that letters went out to all districts about the general findings from the audit, and that districts with concerns had those mentioned in their specific letters as well. In June, an electronic bulletin also went to all licensees regarding the SLPA audit and announcing the final fee increases.

BOARD SELF-EVALUATION & GOAL SETTING

The Board completed their annual best practices self-assessment, led by Leybold. This report will be included in the Key Performance Measures Report which is due September 30, 2009.

The Board reviewed the Board goals proposed by Leybold (See Exhibit A). The Board decided to add “automate PD approval process” to 6. The Board decided to remove goal 3, as they felt it wasn’t within the Board’s mission. The Board decided to mark 17 as complete. Leybold agreed to issue a revised goal statement.

PROPOSED RULE CHANGES

The board reviewed draft amendments to 335-070-0065, 335-095-0060 and 335-095-0030 for proposed rulemaking. The changes proposed were:

- **335-070-0065(1):**
“Effective January 31, 2004, each applicant for renewal of a dual license shall complete ~~forty (40)~~ **100% of the required** clock hours of documented and approved professional development in audiology and ~~forty (40)~~ **100% of the required** clock hours of documented and approved professional development in speech-language pathology to be reported at renewal ~~on January 30, 2006 and at each renewal thereafter.~~ A maximum of ~~twenty (20) hours~~ **50% of the required hours for either speech-language pathology or audiology (or any combination of the two)** may be applied to both license categories if the topic is applicable to both types of licenses. A class in CPR may be counted only once.”
- **335-095-0060(1)(b):**
“ Provide direct treatment assistance, excluding ~~dysphasia~~ **dysphagia** (as opposed to feeding for nutritional purposes), to patients/clients identified by the supervising SLP by following written treatment plans or protocols developed by the supervising SLP.”
- **335-095-0030(1):**
“ Official transcripts showing 45 quarter hours or 30 semester hours of speech-language pathology technical course work **completed less than 7 years prior to the date of application**; and”

Action:

Wax moved to accept the proposed amended rules for 335-070-0065 and 335-095-0060 for permanent rulemaking as shown in the notice of proposed rulemaking, but to cancel the changes to 335-095-0030 as they weren’t needed due to requirements for 15 hours of professional development prior to application. Metcalf seconded.

Yea: Evans, Northam, Wax, Murphy, Clupny, Williams, Metcalf

Nay: None.

The motion carried by unanimous vote.

EXECUTIVE SESSION

The Board entered executive session at 12:15 PM, and resumed regular session at 2:32 p.m.

MOTIONS FROM EXECUTIVE SESSION

2009-20

Action: Wax moved to propose emergency suspension for violation of ORS 681.350(1)(b), relating to ethical standards, specifically that the licensee violated OAR 335-005-0010(2)(f) and (2)(i), the standards that define unprofessional conduct as habitual or excessive use of intoxicants, drugs or controlled substances, and verbal abuse of a client. Licensee also violated 335-005-0015(13), which states that individuals whose professional services are adversely affected by substance abuse or other health-related conditions shall seek professional assistance and where appropriate will withdraw from the affected areas of practice in order to protect the welfare of clients. Metcalf seconded.

Yea: Evans, Northam, Wax, Murphy, Clupny, Williams, Metcalf

Nay: None

The motion carried by unanimous vote.

RATIFY LICENSES ISSUED

Clupny moved to ratify licenses issued between May 15, 2009 and August 5, 2009. Metcalf seconded.

Yea: Evans, Northam, Wax, Murphy, Clupny, Williams, Metcalf

Nay: None

Motion passed by unanimous vote.

POLICIES

Swallowing Studies

Leybold stated that at the last meeting, the Board decided to follow what the ASHA guidelines were for whether a radiologist must be present during a barium swallow study. Leybold noted that ASHA stated that a radiologist *may* be present, whereas the Board stated that there *should* be a radiologist present.

Leybold presented a draft BSPA policy that references the ASHA position statement, by outlining BSPA's position to *recommend* but not *require* a radiologist to be present.

Action:

Metcalf moved to approve draft policy 05-01, attached (exhibit B). Murphy seconded. The motion passed by unanimous vote.

Pediatric Audiology Standards

Since Heather Durham was not able to present on these standards, this topic was tabled until the October meeting. Leybold asked that one or more Board members meet with Durham before the next meeting. Williams, Metcalf and Evans stated they would.

SET NEXT MEETING DATE

The Board set their next meetings for October 30, 2009, December 11, 2009, February 26, 2010, April 23, 2010, and June 4, 2010, from 10 a.m. to 3:00 p.m.

ADJOURN

The meeting adjourned at 2:42 PM.

BSPA GOALS
January 21, 2009

Exhibit A

1. Finalize implementation of **e-commerce** system for on-line license requests and payments.*
2. Expand information available on the **website** about Board functions and actions taken.* Enhance navigation and content to make information more accessible and user-friendly.
3. Develop **continuing education** program(s) to promote better professional practices and their documentation.* Explore feasibility of granting CEU's and charging for these programs.
4. Monitor **professional staffing shortages** and work with licensees, employers, and training programs to develop appropriate responses.*
5. Implement **fee increase**, effective no later than November 2009.
6. **Re-evaluate professional development requirements**, in light of ASHA's and other states' requirements, and the Board's duty to protect the public.
7. Develop Board policy on **telepractice**.
8. Develop Board policy on **foreign-trained applicants** and **English language proficiency**.
9. Research the issue of **criminal background checks**, and revisit the Board's policies and practices.
10. Clarify the Board's position regarding **licensing audiologists in their fourth year** of training. Revise statute regarding Master's vs. Aud.D. as initial licensing requirement.
11. Review the Board's "**Code of Conduct**" in light of national standards and recent complaint/case history.
12. Initiate **audits** and continuing education regarding **supervision** of SLPAs, conditional licensees, and trainees.
13. Review case history and consider establishing a **schedule of fines** for disciplinary matters.
14. Improve timeliness of **reporting Board disciplinary actions** to the HIPDB and other agencies.
15. **Review all licensing policies and procedures** to conform to Board philosophy, current law, and best practices.
16. **Update statute and rules** as needed; evaluate making **temporary rule regarding SLPA supervision exceptions** permanent.
17. **Work with TSPC** towards standardizing and/or consolidating SLP licensing functions.
18. Evaluate potential consolidation of **hearing aid dispensing by audiologists** into BSPA scope.

* Included in the budget narrative for the 2009-2011 biennium.

Exhibit B

BSPA Policy 05-01

Practice Policies

Presence of a Radiologist During Swallowing Studies (VFSS)

Statute: ORS 681.220

Rule: OAR 335-005-0015(2): Individuals shall provide all services competently

Date: September 9, 2009

The Board does not *require* the presence of a radiologist or other physician in the exam room during the completion of a VFSS by a competent SLP. However, the Board *recommends* having the radiologist present as a best practice.

Rationale:

Any speech-language pathologist licensed by this Board should be competent to do so. Performing any speech-language pathology or audiology services incompetently is a violation of OAR 335-005-0015(2): "Individuals shall provide all services competently". ASHA guidelines specify the training and clinical experience that would typically develop this competence, and the Board would review any concerns regarding competent performance of VFSS in light of community standards and ASHA guidelines.

Both the Board and ASHA recognize that today's standard level of practice involves the performance of VFSS with both the speech-language pathologist and radiologist present.

Procedures:

When both the SLP and radiologist are present, the speech-language pathologist focuses on swallowing physiology and functioning, and the radiologist makes medical diagnoses relative to anatomy. Thus, the speech-language pathologist and radiologist typically collaborate to comprehensively assess swallowing as it relates to physiology and anatomy.

In some cases, the study may be done with the SLP and radiology technologist, with the radiologist available for consultation, as needed.

When a radiologist is *not* present during the VFSS, the SLP assesses and comments on swallowing physiology and function only. If a radiologist is not present, a note should be made of that in the medical record. The VFSS assessment and report do not include medical diagnoses.