



Board of Examiners for SLP & Aud.  
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## New Executive Director of BSPA - Erin Haag



On February 2<sup>nd</sup>, Erin Haag joined BSPA as its new Executive Director. Erin has more than 25 years of experience leading, directing, and implementing the programs of nonprofit health organizations.

Her expertise includes administration and day to day management, board development, strategic planning, nonprofit accounting, resource development, advocacy and marketing in support of organizational missions. She has served as President/CEO of the

Arthritis Foundation, Oregon Chapter, and CFO/Operations Director of the national headquarters of the National Psoriasis Foundation. Most recently, she was the Associate Director of *KidTalk® Oregon*, a position that allowed her to work closely with speech-language pathologists for more than 12 years. Erin was raised in Lebanon, Oregon and graduated from the University of Oregon with degrees in Business Management and Community Services & Public Affairs (Public Administration).

“I am thrilled to be working with such a knowledgeable and professional group of Board members,” she said. “I’ve found Speech-Language Pathologists and Audiologists delightful to work with, and look forward to serving the public and professionals in this new role.”

Erin replaces Sandy Leybold, who recently retired after 6 ½ years as Executive Director. Erin can be reached at [Erin.Haag@state.or.us](mailto:Erin.Haag@state.or.us) or 971-673-0087.

## BSPA Elects Officers for 2015

At their January 30<sup>th</sup> meeting, the Board elected Lyndsay Duffus, Audiologist, as Chair and Wendy Gunter, SLP, as Vice Chair. Jennie Price will continue on the Board as a member.

“Jennie has been a dedicated Chair, always keeping in mind the Board’s mission of public protection,” said Ms. Duffus. “She has led the Board with an open and honest style, and has been responsive any time staff needed policy direction,” said retiring Executive Director, Sandy Leybold. Leybold continued, “it’s great that Jennie will continue on the Board as an SLP member, continuing to contribute her time and talents.”

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# SB 287 – Universal Licensure – Considered by the Legislature

After six years of collaborative work with the Teacher Standards and Practices Commission (TSPC), the Oregon Speech-Language & Hearing Association, and stakeholder groups, the Board finally has a bill to create a single structure for SLP licensure. SB 287 <https://olis.leg.state.or.us/liz/2015R1/Downloads/MeasureDocument/SB0287/Introduced> has been referred to the Senate Education Committee where it is expected to be heard in mid March.

If SB 287 passes, the exemption in ORS 681.230(4) would be changed so that it only applies to SLPs licensed by TSPC before July 1, 2016. Thus, as of July 2016, BSPA would issue all new Oregon SLP licenses. SLPs previously licensed by TSPC would be “grandfathered” by continually renewing their TSPC license after July, 2016.

SB 287 is supported by the Governor’s office, TSPC, the Oregon Education Association, and the three University programs that train SLPs in Oregon (Portland State University, University of Oregon, and Pacific University).



## Farewell to Executive Director Sandy Leybold

After 6 ½ years as Executive Director, Sandy Leybold is retiring. Sandy plans to stay busy with continuing education and personal development, volunteer leadership, and civic/political activities. Her husband will retire at the end of 2015, allowing both of them more time to travel to visit their college-aged daughters back east and to tick off places on their “bucket list”, from India to the Canyonlands of southern Utah, Mexico to Denali.

At its November meeting, the Board took time to thank Sandy and acknowledge her contributions to the Board. Some of the newer Board members highlighted how Sandy had supported their transition to the Board: **Jean Verheyden** mentioned how Sandy had helped Jean prepare for her attendance at the National Council for State Boards of SLP/Audiology meeting, and then how Jean was pleasantly surprised to learn that Sandy had received an award there last year. **Anna Sanger Reed** expressed what a powerful personal experience it has been for her to join the Board, and noted how Sandy’s coaching had helped her feel confident as a new Board member. And **Gail Swanstrom** said, “I really appreciate Sandy’s communication...She does an excellent job of keeping the Board informed in between meetings, which is no small feat...I always feel like I am really well prepared for the next meeting.”

Those who have worked longer with Sandy also expressed their appreciation. **Lyndsay Duffus** noted that working with the Board “has been an easy process and I think it’s in large part because of what you do. There is so much you do behind the scenes and before coming to the Board I didn’t realize how much you did...It’s been wonderful working with you.” **Wendy Gunter**, who has worked closely with Sandy, TSPC, and OSHA to develop a single licensing structure for Oregon SLPs, reminisced, “We have spent a lot of nights on the phone...and have taken our efforts together. It wouldn’t have been possible without that dynamic. There are things that we have really seen changed in the state because of that. I’m going to miss you.” **Betsy Chase** shared, “Sandy and I have worked together before. Both experiences have fulfilled me, in ways that I have been surprised about. So thank you.”

Chair **Jennie Price** summed up in her remarks: “There are many things we will miss about having you on the Board. The next person has some big shoes to fill. I appreciate your dedication to this job. You’ve been always pushing forward, always keeping the consumer and your Board at the forefront of everything. Good luck on your next journey and life of retirement!”

Sandy responded with her appreciation for the Board: “Working with the Board members, protecting the public, and learning about the speech and hearing professions has been an honor and a delight. I have such respect for the Board’s role and how you dedicate yourselves to your Board service with professionalism, care and consideration. I’ll miss you, too!”

# Telepractice: A Way to Help Provide Access to SLP Services

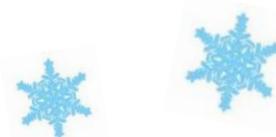
Recently, there has been growing use of telepractice to provide SLP services, particularly in response to recruitment difficulties in rural or other underserved geographic areas. The Board supports the use of telepractice as a service modality in the speech and hearing professions, as long as each provider is appropriately licensed, and meets professional and ethical standards in their practice. SLPs working from their home/offices in Oregon, or serving clients in Oregon, must be licensed by the Board. A TSPC license is not lawful for SLPs working at Oregon schools through contracts with staffing agencies or telepractice providers. Also, clinicians must determine whether telepractice is an effective service delivery mode for each client on their caseload, and follow professional and ethical standards for that care, including maintaining confidentiality of student/patient information. The Board welcomes questions from licensees about appropriate licensure and other practices, and as always, will investigate any specific complaints reported.

In this issue, we asked two prominent agencies providing telepractice in Oregon to give their perspectives on telepractice as a way to improve access to SLP services throughout the state. We hope these articles will educate our licensees about current issues in telepractice, and spur further dialogue among professionals about this relatively new modality.

NOTE: The inclusion of material from representatives of these private companies in no way constitutes an endorsement of these particular agencies or their models by the Board.

## Hello There! An Oregon Story Utilizing Teletherapy Practices

Sharon Soliday, MS, CCC-SLP, The Hello Foundation



An Oregon example of teletherapy support can be found in the *Hello There* approach to serving students within public school settings. *Hello There* was developed by The Hello Foundation (Gladstone, OR) in 2009 in response to the ever-pressing demand for speech therapy services in more rural environments throughout Western states. Teletherapy in the form of 1:1 online service is provided by other companies for the school population, and The Hello Foundation also provides these services for non-school based clients, which we call *Hello Online*. However, the leadership team of The Hello Foundation evaluated the 1:1 online therapy model and we decided that it did not adequately meet the complex needs of school districts and the students they serve.

Of particular concern was how to meet the needs of students within general education classrooms—what the law mandates—in situations where the online SLP specialists were not provided the structure or time to collaborate with teachers, review and assist with curriculum, and invest in building relationships that will help students practice speech targets outside of the speech room. In developing a different approach, The Hello Foundation leaders considered student needs, state licensing requirements, and professional and ethical guidelines.

The solution? The *Hello There* approach of blending the use of teletherapy and onsite collaborative work. SLPs within The Hello Foundation using the *Hello There* approach travel one week a month to be onsite in a school building to see students, collaborate, and address the multitude of workload demands that exist. When off-site 3 weeks a month, SLPs utilize teletherapy practices to supervise and direct SLP Assistants and monitor student growth/needs until they return again. Interest in this model has continued to grow each year and The Hello Foundation now uses the *Hello There* approach throughout Oregon, and in Alaska, Washington, Montana, Wyoming, and California.

We believe that the use of teletherapy and activity onsite every month builds a bridge to quality services in more remote school settings. In the end, if we are operating in the best interest of students, practicing within our professional framework and using clinically sound approaches, why can't we consider service in a new manner?

## Telepractice: A Practical, Effective and Mainstream Delivery Option for SLPs

Melissa Jakubowitz, M.A, CCC-SLP, ASHA Fellow  
Vice President of Clinical Services, PresenceLearning

While telepractice has been discussed for many years, it has only recently become a widespread practice in Speech-Language Pathology. Now, many state licensing boards (including Oregon's) recognize telepractice as an appropriate and effective service delivery model.

Evidence of the effectiveness of telepractice is both research-based and empirical. With more than 50 articles published in peer-reviewed journals covering a wide range of speech/language disorders as well as ages of clients, researchers have found that telepractice is an effective and appropriate service model.

Having delivered more than half a million online sessions, PresenceLearning has amassed a wealth of empirical evidence about the effectiveness of online delivery of SLP services. PresenceLearning clinicians complete ASHA NOMS (National Outcomes Measurement System) data on their students at the end of each year. Our NOMS data from thousands of students shows progress the same or better when compared to students treated in traditional in-person sessions. Our company relies on the NOMS data to help maintain standards of clinical excellence for our telepractioners.

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Our SLPs also observe that students have a high degree of engagement and attention to task in the telepractice environment. Parents of children with ASD often report their child's enthusiasm for their online sessions or their reduced fear and anxiety in the online setting. Such increased engagement helps improve children's compliance and progress in therapy.

It is important to remember that while using telepractice, clinicians are still obligated to provide services within their scope of practice and adhere to their Code of Ethics (as outlined by both the State Board and ASHA). It is also necessary for SLPs to maintain licensure in the state where their services originate and in the state where the client is located.

With regard to technology, SLPs need to become familiar with the IT platform they are using and have technical support readily available to troubleshoot issues. There are many choices, ranging from simple, free videoconferencing to business class videoconferencing to custom-built platforms for SLPs. Regardless of the IT used, clinicians must ensure that confidentiality is maintained and that the platform is secure, meeting HIPAA and/or FERPA standards. Early in the 2000s, many clinicians used Skype to provide telepractice services. There has been much discussion about whether or not Skype is HIPAA compliant. It is strongly suggested that SLPs consult an attorney with experience with HIPAA issues before using any IT platform, to ensure compliance with privacy and confidentiality regulations.

The appropriateness of telepractice must be determined for each client based on an assessment of their individual needs. By establishing a rubric or protocol, clinicians can make consistent decisions. Such a rubric should consider the client's cognitive skills, technical ability with computers, support available at home or at school, comfort with technology, hearing and vision, and attention to task. At PresenceLearning, we started out serving students whose issues were mild to moderate. However, we soon found we could use our telepractice model with most clients, including children who are non-verbal, on the more severe end of the autism spectrum, or have significant cognitive impairments. PresenceLearning's rubric has evolved as we have developed protocols for treating a variety of conditions.

When considering telepractice delivery, clinicians should also consider whether or not clients will be participating in groups or individually. Our SLPs regularly work with small groups of 2 or 3 students via telepractice, but larger groups may be better served by an onsite SLP. Cultural and linguistic background and personal preferences will also determine the most appropriate and effective therapy method.

One of the frequently-mentioned concerns about telepractice is the need for communication between the clinician and the child's support team at school and at home. PresenceLearning clinicians are equipped with specific processes and tools that facilitate greater communication with teachers, parents and other special education staff. This enables telepractitioners to function as full members of the team, attending IEP meetings and often serving as case managers.

Telepractice is rapidly becoming a mainstream service delivery model, and it is important for SLPs to understand how telepractice services can be provided ethically and competently. Telepractice can improve services to all clients—whether they are in underserved rural areas, populated urban centers, or somewhere in between. Telepractice provides a viable way for clinicians to extend their reach while ensuring continuity and maintaining ethical and legal standards of practice.

## SLPA Supervision Reminders

SLPA's cannot practice without adequate supervision from a licensed and qualified Speech-Language Pathologist. There have been rumors of SLPA's being used independently of a supervising SLP and performing the duties of SLP's that are outside the scope of an SLPA's responsibility. It is important to remember that all clients are considered to be part of the supervising SLP's caseload. SLPA's cannot have a caseload and adequate supervision must be given for all clients on the caseload that the SLPA is assisting with.

Other SLPA Supervision Reminders:

- The supervising speech-language pathologist must be able to be reached throughout the work day. A temporary supervisor may be designated as necessary.
- The supervising speech-language pathologist must co-sign each page of records.
- Supervision of speech-language pathology assistants must be documented.
- Documentation must include the following elements: date, activity, clinical interaction hours, and direct or indirect supervision hours. Clinical logs documenting supervision must be completed and supervision hours calculated **for each calendar month for each caseload**. Each entry should be initialed by the supervising speech-language pathologist. Each page of documentation should include the supervising speech-language pathologist's signature and license numbers issued by this Board and the Teacher Standards and Practices Commission if applicable. Supervision documentation must be retained by the speech-language pathology assistant for four (4) years.
- Documentation must be available for audit requests from the Board.



# Who's Who on The Board

**Lyndsay Duffus**, Au.D., CCC-A is our new Board Chair. Lyndsay is a clinical pediatric audiologist at Doernbecher Children's Hospital. She represents audiology on the Oregon Speech-Language Hearing Association (OSHA) board. She is interested in all aspects of pediatric hearing assessment, particularly in children with significant developmental disabilities or syndromes. In her spare time, Lyndsay enjoys knitting, reading, and spending time with her family.



**Wendy Gunter**, MS, CCC-SLP, is the new Board Vice-Chair. Wendy provides speech-language pathology services via telepractice through The Hello Foundation. Currently Wendy serves clients primarily in Wyoming, but she holds licenses in several states, which gives her a unique perspective on Oregon rules and practices. Her expertise in telepractice will be very useful as the Board develops rules around this issue. Wendy has worked in public school districts in Oregon and Washington, and at OHSU. She teaches students in the SLPA program at Chemeketa, and at Portland State. Wendy previously served as President of OSHA, and she is active in several ASHA interest groups on clinical and professional issues. In her spare time, she enjoys gardening, hiking, and boating.



**Betsy Chase**, was appointed by the Governor effective July 1, 2013, in the position previously held by Elisa Williams. Betsy holds a master's degree in educational leadership, and has worked in organizational development, training, professional development, strategic planning, operations systems, and group facilitation in Minnesota and Oregon. She has been employed by non-profits, public organizations, and school districts, and as a university professor. Currently Betsy is looking for just the right job for the next step in her career, while enjoying spending time with her husband at their new home in Wheeler.



**Jennie Price**, MS, CCC-SLP joined the Board as an SLP member in June 2010 and was Chair of the Board for 2013-14. Jennie is the Director of Regional Programs & Related Services for InterMountain ESD in Pendleton. Her background as an SLP in public schools and at a skilled nursing facility, and as an administrator, allows her to provide clinical expertise and a perspective on rural service delivery that is invaluable to the Board. In her spare time, Jennie volunteers with the Pendleton Children's Rodeo and the ASHA School Finance Committee and enjoys reading, riding bikes, and spending time with family and friends.



**Anna Sanger Reed** is the Board's new public member. Ms. Sanger Reed has a bachelor's degree in psychology from the University of Washington. She also completed a 2-year fellowship with the Robert Johnson Foundation and the Center for Creative Leadership for nonprofit and government leaders who address public health issues, with a focus on health equity. Over the past six years she has worked closely with the Board of

Directors of Parkinson's Resources of Oregon, where she is currently Program Services Manager. In explaining her interest in Board service, Anna said that she sees herself "as a strong advocate for how appropriately addressing speech, swallowing and hearing issues can increase quality of life". In her personal time, Anna loves to play piano and has recently taken up learning the accordion as well.

**Gail Swanstrom, Au.D.** has been a licensed audiologist in Oregon since 1982. She has been in private practice for 33 years in Hillsboro, managing her own patients and providing audiology services for four ENT physicians. Dr. Swanstrom's practice includes a full range of diagnostic services as well as hearing aid consultation and dispensing. Gail was raised in southern California and began her professional career as a preschool and primary school teacher. After teaching school in Australia, she moved to Oregon to study audiology, completing her master's degree at Portland State University, and later earning her AuD from Central Michigan University in 2004. Gail was also a founding member of the Oregon Academy of Audiology, and remains an active member of the association. Gail is passionate about the environment and enjoys outdoor activities.



**Jean Verheyden, MD**, is the Board's new otolaryngologist member. Dr. Verheyden received her MD degree from George Washington University and completed a surgery internship at Swedish Hospital in Seattle, an ENT residency at SUNY Syracuse and a fellowship in neurolaryngology at St. Luke's Roosevelt Hospital in New York City. Dr. Verheyden also served for two years as Assistant Professor at the University of Washington before joining Central Oregon ENT in 2014. Jean's work brings her into professional contact with SLPs and audiologists throughout Central Oregon, including Burns, Prineville, Madras, and Klamath Falls. Jean is interested in providing her perspectives and expertise as the Board shapes policy and reviews patient care issues.



# 2014 Annual Customer Service Survey Results

Thank you for your resounding response to our annual customer service survey. Each October we ask all of our licensees to rate how the Board is performing. See the graph below for the ratings overall and for each dimension for October 2014. The graph shows the percentage of Excellent/Good responses. Not only was the overall rating up by 3% from last year, but ratings increased on almost every dimension. Timeliness, Accuracy and Expertise were each up 3% from 2013. Availability of Information and Comparison to Others were each up 4%. Helpfulness remained the same as last year at 88%. These results were based on 271 responses (about 11% of active licensees).

Thank you everyone who submitted complimentary comments regarding the Board office and staff. We strive to provide the best service to the licensees and people of Oregon, and are proud that the customer service scores have continued to climb over the last several years. The Board and staff consider each comment, and use this information to tailor our communications and our procedures as needed.

Here are some of the questions/comments and our responses:

Q: "I question whether the certification requirements for SLPAs is adequate preparation to implement effective therapy for 90 - 120 students/week while being supervised by a Skype SLP. "

A: The Board is concerned that all students assigned to an SLP/SLPA team are getting adequate attention. SLPs are responsible for all students on the caseload and must ensure an appropriate level of care. If an SLPA's training, ability, or resources are inadequate to properly deliver care to any student, it is the responsibility of the supervising SLP to address the issue. This may involve providing more hours of direct supervision than required by Board rule.

Q: "There needs to be a clearer definition of what "direct supervision" of SLPAs is. I have witnessed SLPAs used instead of SLPs, with very little supervision, if any. Logs are often created when needed"

A: An SLPA performing duties beyond the scope defined in Board rules is violating our licensing law. If an SLPA were to fabricate clinical interaction logs with incorrect or misleading information, or an SLP were to sign off on supervision hours not provided, they would also be violating Oregon statute and Board rules. It is the duty of all licensees to report unlicensed or unprofessional practice.

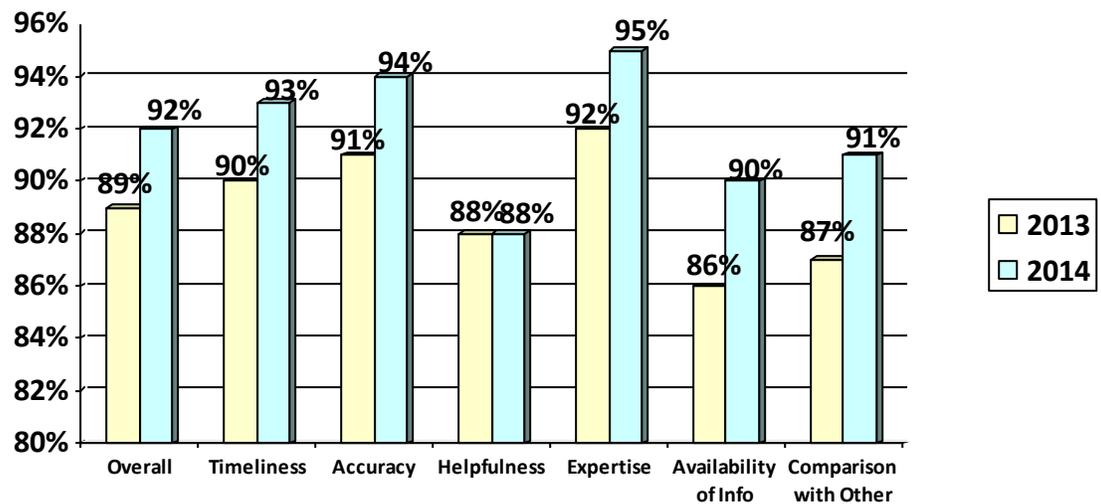
Q: "Get rid of "purporting" in the law as it's too subjective. Doing clerical work while waiting for a license is not practicing speech pathology. Claiming that that is purporting to do so is groundless."

A: The Board must ensure that any individual who is hired into a position requiring licensure in speech-language pathology or audiology is in fact licensed. Some of the ways you can purport to be an SLP are by performing job duties (even if it is orientation), holding a job title, having "SLP" on your name badge, and signing "SLP" after your name. "Purporting to be" means implying, holding yourself out as, or representing oneself as an SLP. You are giving the public the impression that you are a member of that profession, and available to provide such services. While you can search for a job before obtaining a license, and accept an offer of employment, you cannot start work without first obtaining a license, because you are in a position to provide SLP services. In a similar vein, you can be cited for DUII if you are impaired while sitting behind the wheel of a car, even if the car's not moving. You are in a position to drive drunk.

Q: "I'm not certain what the board provides to its licensees. I understand its purpose to protect the public. However, it seems quite redundant when one has a national license to require a state one too. I believe that the license is too expensive. "

A: ASHA CCCs are not a national license—they do not give you license to practice in any state. CCCs are a national credentialing standard used by each state to help determine the level of competency. ASHA is a professional association of members not a regulatory Board.

Our Board, as all the health licensing boards, is fully funded by licensing fees and other fees. We receive no general funds. Licensing fees are set at a level to support Board operations, which include staff for licensing and advising licenses and the public regarding our rules, and for investigations and legal proceedings that protect the public from persons who would violate the Board's standards for competent care and professional and ethical conduct.



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# 12 Months to Renewals

## Start Getting Your PD Ready!

Below are some tips to make sure your professional development is acceptable for renewing your license. All licensees must renew their licenses on or before December 31, 2015 to avoid a late fee. SLPs and audiologists must submit 30 hours of acceptable PD: SLPAs must document 15 hours, completed in calendar 2014 and 2015.

By rule, PD documentation must be maintained for four years. If you are selected for PD audit, you must submit acceptable documentation prior to the renewal deadline or you could face an additional delinquent fees and/or disciplinary action from the Board. Licensees with insufficient or unacceptable PD will not be renewed until they have submitted the required amount, and if that requires going into the 2016-2017 period they will be subject to an additional delinquent fee. Licensees who fail to submit the required amount of acceptable PD in multiple renewals will be subject to disciplinary action.

- **University Courses**—For a graduate level course to count as professional development it must be taken for credit (pass/no pass is not acceptable) and the individual must earn a “C” or better. Documentation can be in the form of an official or unofficial transcript.
- **In-Service Activities**—In-service activities are only applicable without pre-approval when put on by public school districts, ESDs, hospitals, or universities, **for their own employees**. If you are employed by a school and attend a program sponsored by another district or the ESD, this requires special approval. Ideally the sponsor will apply for such approval when they decide to open it up to other professionals who are not their employees but it is the responsibility of the licensee to ensure it is an approved activity. Any PD activities must directly related to speech-language pathology and/or audiology. An in-service on basic office tasks or software may improve your service delivery but they are only indirectly related and would not be counted as PD. All PD documentation must have the title, date & length of the activity and must be signed as verified by a third party administrator.
- CPR and basic life support courses put on by the American Red Cross, American Heart Associate or equivalent providers. You can use the card earned after the course as documentation of completion.
- All other activities should be ASHA, AAA, ABA, OSHA or Board approved activities. Documentation can be an unofficial CEU registry and/or certificates of attendance.
- Remember that 1.0 ASHA CEUs are equal to 10 PD hours. You must report your professional development in hours not ASHA CEUs.

## PD Activities That Are Not Accepted

**Per OAR 335-070-0020 -**

Activities not accepted as professional development include but are not limited to:

- Supervision of practicum students or clinical fellows, making presentations, or teaching classes;
- Serving on professional boards or committees;
- Attending professional association business or committee meetings (whether paid or not);
- Attending staff meetings (See article above for acceptable in-service activities);
- Performing volunteer work;
- Reading or studying professional journals or articles, unless part of a self-study program that is sponsored and verified by an independent third party.



## RECENT BOARD ACTIONS

**11/25/14**

**Shicor, Janel (aka Janelle Schicker) SLP # 13284**

**Outcome:** Final Order: License Revocation and \$39,980.86 Civil Penalty

**Violation:** A Final Order was issued 11/25/14, revoking Shicor's license and assessing the costs of the disciplinary proceeding as a civil penalty of \$39,980.86. Shicor was found to have used experimental techniques without informing clients of their experimental nature, in violation of OAR 335-005-0015(2) and (5). Shicor made unsupported clinical correlations and reached unsupported conclusions, in violation of OAR 335-005-0015(2). Shicor also violated OAR 335-005-0015(2) by diagnosing a client with a disorder not included in the ICD-9-CM codes related to speech and hearing disorders, and not generally recognized by SLPs and audiologists. In violation of OAR 335-005-0015(2) and (6), Shicor failed to evaluate the effectiveness of the treatment she provided to clients. Shicor failed to document client treatment goals, progress towards treatment goals, and discharge summaries consistent with professional standards, in violation of OAR 335-005-0015(9) and (16) and OAR 335-010-0070(1) and (2). Shicor failed to sign treatment data sheet entries, failed to initial signature stamps on client records, and failed to include a signature or stamp with initials on client records, in violation of OAR 335-010-0060(1) and OAR 335-010-0070(3). Shicor misrepresented to the insurer the services she rendered, in violation of OAR 335-005-0015(11).



## Questions and Answers from Annual Customer Service Survey (cont'd from page 5)

Q: " New BSPA contracts for background checks is costly as TSPC completes same checks for teachers. All SLPs who hold TSPC license have been cleared. This is expensive and inefficient. Call TSPC save money"

A: Given the confidential nature of background check information, agencies that conduct them cannot release any of that information. Unfortunately that includes even to other state agencies.

## A Reminder About Reporting Requirements

A reminder about events to report to the Board office:

- Any name used professionally. If you legally change your name you must submit a copy of whatever legal documentation used to change the name, within 30 days. We will update our records and mail you a new license.
- Changes in work or home address, email, and phone number must be reported within 30 days.
- Changes in supervision, whether you are an SLPA or a CF holding a Conditional SLP license, must be reported within 30 days.
- Any licensee's conviction for a misdemeanor or felony and any arrest for a felony crime must be reported within 10 days after the conviction or arrest.
- Prohibited or unprofessional conduct on the part of yourself or another licensee must be reported within 10 working days (see the Fall 2011 issue of *The Voice* for details).

Thanks in advance for your cooperation!



## SLPA Supervision Audit is Coming

Every year the Board audits a number of school districts, ESDs, and individual SLPAs to ensure they are receiving the minimum required supervision. Here are a few reminders about SLPA supervision from last year's audit:

- Only keep one month per log. Board rules require logs to be kept per month per caseload. This is to ensure that monthly supervision meets the Board's minimum requirements.
- Supervision Change notices must be submitted to the Board office within 30 days of the change.
- For the first 90 days at a new place of employment an SLPA must be supervised 20% direct and 30% total. After 90 days the minimum requirement is 10% direct supervision and 20% total.