**02 DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION**

**643 BOARD OF SPEECH, AUDIOLOGY AND HEARING**

**Chapter 9: SPEECH-LANGUAGE PATHOLOGY ASSISTANTS**

**Summary**: This chapter sets forth criteria for the initial licensure of speech-language pathology assistants, the supervision requirements and other responsibilities of speech-language pathologists for the assistants they supervise. This chapter also describes the scope of practice of speech-language pathology assistants.

**1. Qualifications**

To qualify for ~~registration~~ licensure as a speech-language pathology assistant the applicant must show proof of meeting the educational requirement through one of the following:

1. ~~h~~Hold an associate~~’s~~ degree from an accredited institution in the field of communication disorders or an associate~~’s~~ degree that is substantially equivalent to the following course distribution:

**Course Credit Hours**

English Composition/Grammar 6

Math 3

Psychology/Sociology/Multicultural Studies (some combination) 9

Phonetics 3

Human Anatomy and Physiology 6

Survey of Disabilities 3

Normal Speech, Language and Hearing Development

Across the Life Span 3

Articulation Disorders and Rehabilitation 3

Language Disorders and Rehabilitation 3

Clinical Methods/Procedures 3

Introduction to Audiology/Aural Rehabilitation 3

Elective 3

**Clock Hours**

Practicum 1: Observation 15

Practicum 2: Pediatric 40

~~Practicum 3: Adult 40~~

An applicant who has satisfied all of the above requirements, except for Practicum 1~~,~~ or 2 ~~or 3~~, may meet the practicum requirement by completing a practicum from a regionally-accredited training program which includes, at a minimum, ~~ninety-five (95)~~ fifty-five (55) hours distributed as follows:

Practicum 1: 15 hours observation; and

Practicum 2: 40 hours pediatric~~; and~~

~~Practicum 3: 40 hours adults~~

1. Hold a bachelor’s degree from an accredited institution in the field of communication disorders.

**2. Application; Term**

The applicant shall apply for ~~registration~~ licensure as set forth in Chapter 6, Section 1 of the board’s rules. As part of the application the applicant must provide documented proof of supervision by a Maine-licensed speech-language pathologist who meets the qualifications set forth in Section 3 of this chapter.

~~A registration issued by the board has no set expiration date.~~ Licenses expire annually at the end of February.

**3. Approved Supervisor**

1. **Practice Under Approved Supervisor**

A speech-language pathology assistant may practice only under the supervision of an approved supervising speech-language pathologist as set forth in Sections 3, 4 and 5 of this chapter.

2. **Qualifications for Approval as a Supervising Speech-Language Pathologist**

To qualify for approval as a supervising speech-language pathologist, an individual must:

A. Be a Maine-licensed speech-language pathologist with a minimum of 2 years professional experience ~~following completion of the clinical fellowship required by Chapter 3, Section 1 of the board’s rules~~;

B. Document completion of 10 hours of training in the supervision of speech-language pathology assistants. The documentation provided must meet the requirements of Chapter 8, Section 5 of the board’s rules; and

C. Agree in writing on a form provided by the board to provide supervision pursuant to the laws and rules relating to speech-language pathology.

3. **~~One Supervisor Per Supervisee;~~ Maximum Number of Supervisees**

A. A speech-language pathology assistant may ~~not~~ have more than one approved supervisor.

B. A ~~supervisor may be approved to supervise up to 2 speech-language pathology assistants, provided that a~~ supervisor may not supervise a total number of temporary licensees, trainee hearing aid dealers and fitters, speech-language pathology assistants and students in excess of the supervisor’s ability to competently supervise such persons and also perform any direct client services for which the supervisor is responsible.

4. **Legal and Ethical Responsibility**

A supervising speech-language pathologist is legally and ethically responsible within the jurisdiction of the board for the professional activities of a speech-language pathology assistant under his or her supervision.

5. **Change of Supervisor**

A. A speech-language pathology assistant shall notify the board of a proposed change of supervisor. Notice shall include the qualifications of the new supervisor. The new supervisor shall agree in writing on a form provided by the board to provide supervision pursuant to the laws and rules relating to speech-language pathology. The change of supervisor is not effective until the new supervisor is approved by the board.

B. The supervisor of a speech-language pathology assistant shall notify the board of the termination of the supervisory relationship no later than 10 days after the termination.

C. Upon termination of a supervisory relationship, the supervisee may not continue to perform the duties of a speech-language pathology assistant until a new supervisor has been approved by the board as set forth in Section 3(5)(A) of this chapter.

[NOTE: The board urges supervisors and supervisees to submit the notices required by this subsection sufficiently in advance of an anticipated change of supervisor in order to avoid a break in registered status of a speech-language pathology assistant.]

6. When a speech-language pathology assistant provides direct services, the approved supervisor is responsible for so informing, in writing, all clients (or their legal guardians), referring agencies and payers for service. All clients must be provided with a written copy of Sections 4 and 5 of this chapter.

**4. Supervision Requirements**

~~1. For the first 90 work days following registration, or the first 90 work days following a change of supervisor:~~

~~A. The supervising speech-language pathologist shall provide the assistant with at least 30% direct and indirect supervision overall; and~~

~~B. Direct supervision of student/client care shall be required no less than 20% of the assistant’s actual student/client contact time weekly.~~

~~2. After the first 90 work days following registration, or the first 90 work days following a change of supervisor:~~

~~A. The supervising speech-language pathologist shall provide the assistant with at least 20% direct and indirect supervision overall; and~~

~~B. Direct supervision of student/client care shall be required no less than 10% of the assistant’s actual student/client contact time weekly.~~

Supervision schedules must allow for this supervision to be proportionate to the caseload served by the assistant.

~~3.~~ **~~Documentation~~**

~~Supervision provided pursuant to subsections 1 and 2 above must be documented as follows:~~

~~A. The supervision required by subsections 1 and 2 above must be documented in a log maintained by the supervising speech-language pathologist. The log must contain the date, hours and type (direct/indirect) of supervision provided. The supervising speech-language pathologist shall retain log entries for a period of 5 years on a rolling basis.~~

~~B. The content of the supervisory activity must provide information about the quality of the speech-language pathology assistant’s performance of assigned tasks and must verify that the clinical activity is limited to tasks specified in the speech-language pathology assistant’s scope of responsibilities. Information obtained during direct supervision must include data relative to:~~

~~(1) Agreement (reliability) between the assistant and the supervisor on correct/incorrect recording of target behavior;~~

~~(2) Accuracy in implementation of screening and treatment procedures;~~

~~(3) Accuracy in recording data; and~~

~~(4) Ability to interact effectively with the patient/client.~~

~~The board may perform an audit of supervision programs to assure compliance with these rules. The supervision log required by this subsection must be provided to the board upon request.~~

4. The supervising speech-language pathologist must be on-site or accessible by telecommunications at all times when the speech-language pathology assistant is providing client care.

**5. Scope of Responsibilities of Speech-Language Pathology Assistants**

1. Provided that the training, supervision, documentation and planning are appropriate, the following tasks may be delegated to a speech-language pathology assistant:

A. Conducting speech-language screenings (without interpretation) following specified screening protocols developed by the supervising speech-language pathologist.

B. Providing direct treatment assistance to clients identified by the supervising speech-language pathologist.

C. Following documented treatment plans or protocols developed by the supervising speech-language pathologist.

D. Documenting client progress toward meeting established objectives as stated in the treatment plan, and report this information to the supervising speech-language pathologist.

E. Assisting the speech-language pathologist during assessment of clients, such as those who are difficult to test.

F. Assisting with informal documentation (e.g. tallying notes for the speech-language pathologist to use), prepare materials, and assist with other clerical duties as directed by the speech-language pathologist.

G. Scheduling activities, prepare charts, records, graphs, or otherwise display data.

H. Performing checks and maintenance of equipment.

I. Participating with the speech-language pathologist in research projects, in-service training and public relations programs.

2. A speech-language pathology assistant may not:

A. Perform standardized or nonstandardized diagnostic tests, formal or informal evaluations or interpret test results.

B. Participate in parent conferences, case conferences, or any interdisciplinary team without the presence of the supervising speech-language pathologist.

C. Provide client or family counseling.

D. Write, develop, or modify a client’s individualized treatment plan in any way.

E. Assist with clients without following the individualized treatment plan prepared by the speech-language pathologist or without access to supervision.

F. Sign any formal documents (e.g. treatment plans, reimbursement forms, or reports). The assistant should sign or initial informal treatment notes for review and co-signature by the supervising professional.

G. Select clients for services.

H. Discharge a client from services.

I. Disclose clinical or confidential information, either orally or in writing, to anyone not designated by the supervising speech-language pathologist.

J. Make referrals for additional services.

K. Communicate with the client, family, or others regarding any aspect of the client’s status without the specific consent of the supervising speech-language pathologist.

L. Represent himself/herself as a speech-language pathologist.

**6. Exclusive Responsibilities of the Speech-Language Pathologist**

1. Documenting the pre-service training, competencies and credentials of the Assistant.

2. Informing patients/clients and families about the level (professional vs. support personnel), frequency, and duration of services as well as supervision.

3. Representing the speech-language pathology team in all collaborative, interprofessional, interagency meetings, correspondence and reports. This would not preclude the Assistant from attending meetings along with the speech-language pathologist as a team member or drafting correspondence and reports for editing, approval and signature by the speech-language pathologist.

4. Making all clinical decisions, including determining patient/client selection for inclusion/exclusion in the caseload and dismissing patients/clients from treatment.

5. Communicating with patients/ clients, parents and family members about diagnosis, prognosis and treatment plan.

6. Conducting diagnostic evaluations, assessments or appraisals, and interpreting obtained data in reports.

7. Reviewing each treatment plan with the assistant at least weekly.

8. Delegating specific tasks to the assistant while retaining legal and ethical responsibility for all patient/client services provided or omitted.

9. Preparing an individualized treatment plan and making modifications prior to, or during, implementation.

10. Discussing the case with, or referring the patient/client to, other professionals.

11. Signing all formal documents (e.g. treatment plans, reimbursement forms, reports). The supervisor should indicate on the documents that the assistant performed certain activities.

12. Reviewing and signing all informal progress notes prepared by the assistant.

13. Providing ongoing training to the assistant on the job.

14. Ensuring that the assistant only performs tasks within the scope of responsibility of the speech-language pathology assistant.

STATUTORY AUTHORITY: 32 M.R.S.A. §§ 17203(2), 17301(5)

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