

# School-Based Speech-Language Pathologists' Clinical Decision-Making Process in the State of California

Lei Sun\* and Pei-Fang Hung

*Department of Speech-Language Pathology, California State University, Long Beach, CA, USA*

\***Corresponding author:** Lei Sun, Department of Speech-Language Pathology, California State University, Long Beach, 1250 Bellflower Blvd., LAB 215 Long Beach, CA 90840, USA, Tel: (562) 985-2907; E-mail: [Lei.Sun@csulb.edu](mailto:Lei.Sun@csulb.edu)

**Received date:** May 23, 2018; **Accepted date:** June 18, 2018; **Published date:** June 25, 2018

**Copyright:** © 2018 Sun L, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

## Abstract

**Purpose:** The purpose of this survey study was to examine the relationships between knowledge and training in evidence-based practice (EBP) and ethical decision-making processes among school based speech-language pathologists (SLPs) in the state of California, U.S.A. The possible factors that may prevent SLPs from making ethical clinical decision were also explored.

**Method:** An online survey collected demographic information as well as responses pertaining to school-based SLPs' understanding and implementation of EBP and ASHA Code of Ethics, and perceptions of possible constraints

among different contributing factors along with the intervention effectiveness and the possible limitations of applying research findings. Lastly, time constraint has been reported as one key factor that prevents clinicians from implementing evidence-based practice.

ASHA introduced the concept of EBP to the profession of speech, language, and hearing in 2004, and the EBP training has been gradually integrated into academic courses and strongly emphasized through ASHA Position Statement, practice policies, and the standards of clinical competence certification.

professionalism and ethics. Additionally, both ethical practice and EBP require clinicians to provide the “best possible service” [11]. In order to provide the optimal services, SLPs must constantly develop and advance their clinical skills, maximize benefits, and minimize harm while considering the client’s beliefs, values, and priority. Therefore, ethical practice not only shares a common ground with EBP in clinical decision-making process and practice but also serves as a primary instrument of implementing EBP to ensure that the clinician acts for the good of the client. Principle of The ASHA Code of Ethics also clearly states that clinicians shall use evidence based judgment and every resource to ensure the quality of service [17]. Christiansen et al.

reported that optimal service may not be delivered due to several reasons. The major concerns consistently reported by school-based SLPs from 2000 to 2016 included excessive paperwork, high caseloads, high workloads, and limited time to implement optimal service delivery models. These concerns all have a negative impact on the implementation of evidence-based practice and SLPs' ability to provide the best possible service to their students.

### Purposes of current study

Most research to date examining the relationship between ethical issues and clinical decision-making focused on either a specific disorder, such as dysphagia, or a particular setting such as private practice [27]. These studies examining ethical issues in the field of speech-language pathology mainly focused on medical settings and private practice [15,13]. Among these studies, dysphagia received more attention than other communication disorders [12]. According to ASHA [28], about 53% of the SLPs work in schools. However, no research to date examined the relationship between EBP and ethical practice in the school-based SLPs. Although Hofman examined the implementation of EBP in school-based SLPs in a national large-scale survey study, their study did not investigate the use of EBP in decision-making process nor possible factors, such as caseload, that may prevent SLPs from providing the best possible service to their clients/students. Majority of the literature that investigates the relationship between ethical issues and clinical decision-making is categorized as Level IV Evidence that contained the opinion of authorities and/or reports of expert committees through the discussion of clinical cases (ASHA, n.d.). Since California is one of the states that school-based SLPs may have large caseloads and subsequently high workloads, examining the factors that may impact the ethical decision-making process may provide valuable insight to the field of speech-language pathology. To date, there has been limited research investigating the relationship between SLPs' training in EBP and application of ethical principles during clinical decision-making process in schools. Therefore, this current study aimed to discover not only the relationships between the knowledge of EBP and the implementation of EBP, but also California school-based SLPs' perception on factors related to unethical clinical decisions. The study was designed to answer the following questions:

1. What is California school-based SLPs' understanding of evidence-based practice and ASHA Code of Ethics?
2. What are California school-based SLPs' self-perceptions on the implementation of evidence-based practice?
3. What are California school-based SLPs' perceptions on factors that may prevent them from making ethical clinical decisions when qualifying a student for speech and language services?

## Methods

### Procedure

According to the report from US Bureau of Labor Statistics in May 2016, approximately 11430 speech-language pathologists work in various settings in the state of California. With the estimated 53% SLPs who work in school setting on ASHA 2016 school-survey, it was estimated that 6,000 school-based SLPs would be potential participants in the study. The inclusion criteria of this survey study were SLPs who 1) hold both a valid Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) and California State License in Speech-Language Pathology and 2) have experience working in K-12

schools in the state of California. The participants were limited to SLPs who worked in K-12 schools because the current study only examined the perceptions and responses from SLPs who provide clinical service to clients/students in school settings. A list of email addresses publicly available on California school district websites were compiled. The online survey invitation was sent to either the speech-language pathology programs or special education programs in the school districts and the program coordinators were encouraged to disseminate the invitation to qualified SLPs. Additionally, the survey invitation was also sent to the directors of ten (10) California Speech-Language Hearing Association (Cal Districts) Word-of-mouth communication was also encouraged in order to facilitate the participation.



Have heard about	n=3	n=0	n=2	n=9	n=115
EBP (n=129)	2.3%	0%	1.6%	7.0%	89.1%
Know EBP well	n=2	n=2	n=10	n=50	n=65
to explain to	1.6%	1.6%	7.7%	38.7%	50.4%
others (n=129)					

**Table 2** Self-Reports on EBP Knowledge.

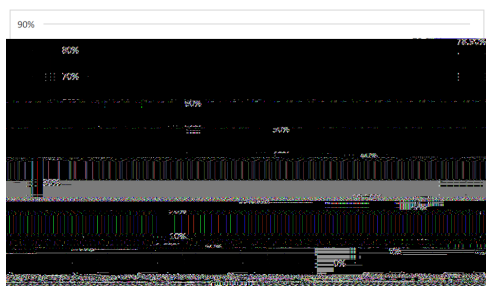
Regarding to EBP training majority of the respondents (n=83, 64.9 %) indicated that they either strongly agreed (n=59, 46.1%) or somewhat agreed (n=24, 18.8%) that they had training in EBP during their master's program. Only eleven respondents (n=11, 8.6%) somewhat disagree and twenty respondents (n=20, 15.6%) strongly disagree that they had EBP training when they were in graduate programs. Similarly, majority of the respondents (n=90, 70.3 %) indicated that they either strongly agreed (n=52, 40.6%) or somewhat

**Variable**

**Strongly**

## Factors related to ethical decisions

School-based SLPs were asked to report whether they believe they have been making ethical clinical decisions. Almost all the respondents (n=126, 98.4%) indicated that they either strongly agreed (n=101, 78.9%) or somewhat agreed (n=25, 19.5%) that their clinical decisions are ethical. Figure 2 shows the self-perception on making ethical clinical decisions.



**Figure 2** The responses on participants' perceptions on making ethical clinical decision.

Respondents were asked to identify factors that may prevent them from making ethical decisions. The top five mostly identified factors that may prevent them from making ethical decisions were parent's preference (n=44, 37.6%), school district's policies (n=42, 36.8%), lack of support from administration (n=39, 33.7%), lack of collaborations with other IEP team members (n=40, 33.9%), and advice from more experienced colleagues (n=42, 35.6%). The top five mostly identified factors that the respondents do not consider preventing them from making ethical decisions are caseload size (n=85, 71.4%), paperwork and documentation (n=85, 70.8%), time planning (n=80, 67.2%), other



EBP

understanding not only the ASHA Code of Ethics but also ASHA's Position Statement and their roles as school-based SLPs.



## References

1. [wwwasha.org](http://wwwasha.org)
2. Nicholls S, Newson A, Ashcrof R (2016) The need for ethics as well as evidence in evidence-based medicine. *J Clin Epidemiol* 77: 7-10
3. Gillam SL, Gillam RB (2006) Making evidence-based decisions about child language intervention in schools. *Lang Speech Hear Serv Sch* 37: 304-315
4. Porzolt F, Ohletz A, Gardner D, Ruatti H, Meier H, et al. (2003) Evidence-based decision making: The 6-step approach. *A C P J Club* 139: 1-6
5. Caty ME, Kinsella EA, Doyle PC (2016) Reflective practice in speech-language pathology: Relevance for practice and education. *Canadian Journal of Speech-Language Pathology and Audiology* 40: 81-91.
6. Schmitt M, Justice L (2012) Evidence-based practice: A retrospective overview and proposal for future directions. *EBP Briefs* 7: 1-6
7. Togher L, Yannoukas C, Lincoln M, Poer E, Munro N, et al. (2011) Evidence-based practice in speech-language pathology curricula: A scoping study. *Int Speech Lang Pathol* 13: 459-468
8. Kummer A, Turner J (2011) Ethics in the practice of speech-language pathology in health care settings. *Semin Speech Lang* 32: 330-337.
9. Payne KT (2011) Ethics of disability: Foundation of the profession of speech-language pathology. *Semin Speech Lang* 32: 279-288
- 10.