

March 8, 2022
Board Room 4
10:00 a.m.

Agenda

**Virginia Board of Audiology &
Speech-Language Pathology
Full Board Meeting**

Call to Order – Melissa A. McNichol, Au.D., CCA-A, Chair

Page 1

- Welcome
- Emergency Egress
- Mission Statement

Ordering of Agenda – Dr. McNichol

Public Comment – Dr. McNichol

The Board will receive all public comment related to agenda items at this time. The Board will not receive comment on any regulatory process for which a public comment period has closed or any pending or closed complaint or disciplinary matter.

Approval of Minutes – Dr. McNichol

Pages 2-7

- October 19, 2021 – Full Board Meeting (page 2-5)
- January 20, 2022 – Regulatory Advisory Panel on Speech-Language Pathology Assistants (pages 6-7)

Agency Director’s Report – David E. Brown, D.C., Director

Legislative/Regulatory Report – Elaine Yeatts

Pages 8-27

- Periodic Review Update (page 8)
- Report of the 2022 General Assembly (pages 9-14)
- Recommendations from the Regulatory Advisory Panel on Speech-Language Pathology Assistants
 - Draft Guidance Document 30-4 (action item) (pages 15-18)
 - Delbridge Petition for Rule-making (action item) (pages 19-23)

Board Counsel’s Report – Charis Mitchell

Chair’s Report – Dr. McNichol

Board of Health Professions’ Report – Alison King, Ph.D., CCC-SLP

New Business – Dr. McNichol

Executive Director’s Report

- Statistics (page 28)
 - Outreach Information
 - [2022 Meeting Calendar](#)
-



Virginia Department of

Health Professions

Board of Audiology and Speech-Language Pathology

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Next Meeting – Dr. McNichol/Ms. Knachel

Meeting Adjournment – Dr. McNichol

This information is in **DRAFT** form and is subject to change.

MISSION STATEMENT

Our mission is to ensure safe and competent patient care by licensing health professionals, enforcing standards of practice, and providing information to health care practitioners and the public.

VIRGINIA BOARD OF AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY
MEETING MINUTES
October 19, 2021

- CALL TO ORDER:** The October 19, 2021, Virginia Board of Audiology and Speech-Language Pathology (Board) meeting was called to order at 9:01 a.m. at the Department of Health Professions (DHP), Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 4, Henrico, Virginia 23233.
- PRESIDING OFFICER:** Melissa A. McNichol, Au.D.,CCC-A, Chair
- BOARD MEMBERS PRESENT:** Corliss V. Booker, Ph.D., APRN, FNP-BC
Bradley W. Kesser, M.D.
Alison Ruth King, Ph.D., CCC-SLP
Angela W. Moss, MA, CCC-SLP
Erin G. Piker, Au.D., Ph.D., CCC-A
- MEMBERS NOT PRESENT:** Kyttra Burge, Citizen Member
- QUORUM:** With six members of the Board present, a quorum was established.
- STAFF PRESENT:** Leslie L. Knachel, Executive Director
Kelli Moss, Deputy Executive Director
Charis Mitchell, Assistant Attorney General, Board Counsel
David E. Brown, D.C., Agency Director
Elaine Yeatts, Senior Policy Analyst
Yetty Shobo, Healthcare Data Workforce Center
Heather Pote, Sr. Disciplinary Case Specialist
Laura Paasch, Administrative Assistant
Sylvia Robinson, Administrative Assistant
- PUBLIC PRESENT:** Marie Ireland, Department of Education
- EMERGENCY EGRESS:** Ms. Knachel read the emergency egress procedures.
- INTRODUCTIONS:** Ms. Knachel introduced Ms. Robinson and Ms. Moore, new staff members, to the Board.
- MISSION STATEMENT:** Dr. McNichol read the Department of Health Professions' Mission Statement.
- ORDERING OF AGENDA:** Ms. Knachel requested that "Consideration of Settlement for Case No. 189062" be added to the Discussion Items.
- Dr. Booker moved to accept the agenda as amended. The motion was seconded by Ms. A. Moss. The motion carried unanimously.
- PUBLIC COMMENT:** There was no public comment.
- APPROVAL OF MINUTES:** Dr. McNichol opened the floor to any edits or corrections regarding the draft minutes for the Full Board Meeting on February 9, 2021 and the Regulatory Committee Meeting on April 19, 2021. With no additions or corrections, the minutes were approved as presented.

DIRECTOR'S REPORT:

Dr. Brown provided updates on DHP's return to the office in January 2022. He reported on Virginia's vaccination rates. Dr. Brown commented that Boards are not conducting continuing education audits this year do the pandemic.

LEGISLATIVE/REGULATORY UPDATE:

Ms. Yeatts stated that the Delbridge Petition for Rulemaking to allow supervision of Speech-Language Pathology Assistants via telepractice is open for public comment until 11/10/2021.

Periodic Review

Ms. Yeatts provided information regarding the Regulatory Committee Meeting recommendations on amending several regulations as part of the Periodic Review of Regulations. Ms. Yeatts recommended considering the supervision of unlicensed SLPAs outside of the regular Periodic Review process. Ms. Knachel and Ms. Yeatts suggested a Regulatory Advisory Panel could meet to make recommendations to the full Board. Dr. King and Ms. A. Moss volunteered to serve on the RAP.

Ms. A. Moss made a motion to adopt the amendments to the regulations with a fast-track action. The motion was seconded by Dr. Booker. The motion carried unanimously.

Consideration of Electronic Meeting Policy

Ms. Yeatts presented information regarding the Electronic Meeting Policy for the Board.

Ms. A. Moss made a motion to accept the policy as presented. Dr. Kesser seconded the motion. The motion carried unanimously.

DISCUSSION ITEMS:**Healthcare Workforce Data Reports**

Dr. Shobo reviewed the 2021 survey information for Audiologists and Speech Language Pathologists.

Continuing Education Audit for Previous License Year

Ms. Knachel asked the Board to consider not conducting education audit for the time period of July 1, 2020 to June 30, 2021, due to the pandemic.

Dr. King moved that a continuing education audit for July 1, 2020 to June 30, 2021, not be conducted. The motion was seconded by Ms. A. Moss. The motion was carried unanimously.

Update on Licensure Compact

Ms. Knachel provided an update on the Licensure Compact. There are 15 states that have joined the Compact. She reported that funding information have not been provided. Details regarding the financial impact to Virginia licensees are not clear at this time.

Update on ASHA's Assistants Certification

Ms. Knachel reported SLPAs are starting to obtain ASHA certification.

BOARD COUNSEL REPORT:

Ms. Mitchell had nothing to report.

PRESIDENT’S REPORT:

Dr. McNichol had nothing to report.

**BOARD OF HEALTH
PROFESSIONS’ REPORT:**

Dr. King reported that members of the Board of Health Professions were notified by Dr. Brown that Ms. Knachel will serve as the Executive Director for the Board of Health Professions.

STAFF REPORTS:

Executive Director’s Report

Ms. Knachel provided the following information:

- Licensure and budget statistics;
- Outreach activities
- Board calendar for 2022

Discipline Report

Ms. Moss provided an overview of the caseload statistics.

NEW BUSINESS:

Elections

Dr. McNichol reviewed the information in the bylaws regarding elections to be held at the first board meeting of the organizational year with an effective date of January 1.

Dr. Kesser moved to nominate Dr. McNichol as Chair. The motion was seconded by Ms. A. Moss. The motion passed unanimously.

Ms. A. Moss moved to nominate herself as vice-chair. The motion was seconded by Dr. Booker.

Dr. McNichol moved to nominate Dr. Piker for Vice-Chair. Dr. Kesser seconded the motion. A roll call vote was taken by Ms. Knachel. Having received four out of six votes, Dr. Piker will be the Vice-Chair of the Board starting January 1, 2022.

Consideration of Case Settlement for 189062

Dr. Piker made a motion that the Board convene a closed meeting to reach a decision in the matter of Abdul Mukati, SLP. Dr. Piker further motioned that Dr. McNichol, Ms. A. Moss, Dr. Kesser and herself remain in the room, and that Ms. Knachel and Ms. Mitchell attend the closed session. Dr. Booker seconded the motion. The motion passed unanimously.

Dr. Piker moved to certify that the Board heard, discussed or considered only public business matters lawfully exempted from open meeting requirements under the Virginia Freedom of Information Act and only such public business matters as were identified in the motion by which the closed meeting was convened. Dr. Kesser seconded the motion, and the motion passed unanimously.

Dr. Piker moved that the Board dismiss the case regarding Abdul Mukati, SLP. Ms. A. Moss seconded the motion. The motion was voted on by Dr. McNichol, Ms. A. Moss, Dr. Kesser and Dr. Piker and carried unanimously.

NEXT MEETING:

The next full Board meeting is scheduled for March 8, 2022.

ADJOURNMENT:

The meeting adjourned at 11:35 a.m.

Melissa A. McNichol, Au.D., CCC-A
Chair

Date

Leslie L. Knachel, M.P.H
Executive Director

Date

VIRGINIA BOARD OF AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY
Regulatory Advisory Panel Meeting Minutes
January 20, 2022

CALL TO ORDER: The January 20, 2022 Virginia Board of Audiology and Speech-Language Pathology (Board) Regulatory Advisory Panel (RAP) meeting was called to order at 10:06 a.m. at the Department of Health Professions (DHP), Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 3, Henrico, Virginia 23233.

PRESIDING OFFICER: Alison R. King, PhD, CC-SLP, Chair

BOARD MEMBERS PRESENT: Marie Ireland, Department of Education (DOE) Representative
Amber Handon, DOE Representative
Amy Barnett, Speech-Language-Hearing Association of Virginia Representative
Laura Verdun, Private Practice
Angela Moss, Board Member
Teri Nelligan, Department of Behavioral Health and Developmental Services, Infant & Toddler Connection

MEMBERS NOT PRESENT: All members present

QUORUM: With seven members of the Committee present, a quorum was established.

STAFF PRESENT: Leslie L. Knachel, Executive Director
Elaine Yeatts, Senior Policy Analyst
Erin Barrett, Senior Policy Analyst
Laura Paasch, Administrative Assistant
Laura Jackson, Board Administrator

PUBLIC PRESENT: There were no members of the public present

EMERGENCY EGRESS: Ms. Knachel read the emergency egress procedures.

INTRODUCTIONS: Attendees introduced themselves.

MISSION STATEMENT: Dr. King read the Department of Health Professions' Mission Statement.

ORDERING OF AGENDA: The agenda was accepted as presented.

PUBLIC COMMENT: There was no public comment.

DISCUSSION ITEMS: **18VAC30-21-140 Supervisory responsibilities; supervision of unlicensed assistants.**

A discussion of the following occurred:

18VAC30-21-140(E)(2) – Consideration to allow tele-supervision of assistants.

Ms. Knachel provided background information on the issue.

The RAP members discussed tele-supervision of assistants.

18VAC30-21-140(E) (2) Consideration of the number of assistants supervised by a speech-language pathologist.

Ms. Knachel provided background information on the issue.

The RAP requested that staff develop a draft guidance document that clarifies the discussed issues related to supervision of an assistant and the number of assistants a speech-language pathologist may supervise. The RAP asked staff to circulate the draft to the member before presenting to the full Board for adoption consideration.

A motion for staff to develop a draft guidance document to clarify issues related to supervision of an assistant and the number of assistants that a speech-language pathology may supervise was made by Ms. Moss and properly seconded by Ms. Ireland. The motion carried with six members voting in favor and one opposed.

NEW BUSINESS:

There was no new business.

NEXT MEETING:

The need for another meeting will be assessed following the development of the guidance document. If adequate clarification cannot be accomplished with a guidance document, the RAP will reconvene to discuss regulatory amendments.

ADJOURNMENT:

The meeting adjourned at 11:53 a.m.

Melissa A. McNichol, Au.D.,CCC-A
Chair

Leslie L. Knachel, M.P.H
Executive Director

Date

Date

**Agenda Item: Regulatory Actions - Chart of Regulatory Actions
(As of February 23, 2022)**

Board of Audiology and Speech-Language Pathology		
Chapter		Action / Stage Information
[18 VAC 30 - 21]	Regulations Governing the Practice of Audiology and Speech-Language Pathology	<p>Results of periodic review [Action 5876]</p> <p>Fast-Track - At Governor's Office for 41 days</p>

Board of Audiology & Speech-Language Pathology Report of the 2022 General Assembly

HB 80 Healthcare Regulatory Sandbox Program; established, report, sunset date.

Chief patron: Davis

Summary as passed House:

Healthcare Regulatory Sandbox Program; established. Requires the Department of Health to establish the Healthcare Regulatory Sandbox Program to enable a person to obtain limited access to the market in the Commonwealth to temporarily test an innovative healthcare product or service on a limited basis without otherwise being licensed or authorized to act under the laws of the Commonwealth. Under the Program, an applicant requests the waiver of certain laws, regulations, or other requirements for a 24-month testing period, with an option to request an additional six-month testing period. The bill provides application requirements, consumer protections, procedures for exiting the Program or requesting an extension, and recordkeeping and reporting requirements. The bill requires the Department to provide an annual report to the Chairmen of the House Committee on Health, Welfare and Institutions and the Senate Committee on Education and Health that provides information regarding each Program participant and that provides recommendations regarding the effectiveness of the Program. The bill has an expiration date of July 1, 2027.

02/11/22 House: Engrossed by House - committee substitute HB80H2

02/14/22 House: Read third time and passed House (54-Y 46-N)

02/14/22 House: VOTE: Passage (54-Y 46-N)

02/16/22 Senate: Constitutional reading dispensed

02/16/22 Senate: Referred to Committee on Education and Health

HB 84 Out-of-state audiologists; providing free health care to an underserved area in the Commonwealth.

Chief patron: Kilgore

Summary as introduced:

Volunteer audiologists. Permits out-of-state audiologists to volunteer to provide free health care to an underserved area of the Commonwealth under the auspices of a publicly supporting nonprofit organization that sponsors the provision of health care to populations of underserved

people if they do so for a period not exceeding three consecutive days and if the nonprofit organization verifies that the practitioner has a valid, unrestricted license in another state.

01/26/22 House: Read third time and passed House BLOCK VOTE (97-Y 0-N)

01/26/22 House: VOTE: Block Vote Passage (97-Y 0-N)

01/27/22 Senate: Constitutional reading dispensed

01/27/22 Senate: Referred to Committee on Education and Health

02/16/22 Senate: Assigned Education sub: Health Professions

HB 244 Regulatory Budget Program; DPB to establish a continuous Program, report.

Chief patron: Webert

Summary as passed House:

Department of Planning and Budget; Regulatory Budget Program; report. Directs the Department of Planning and Budget, under the direction of the Secretary of Finance, to establish a continuous Regulatory Budget Program with the goal of setting a two-year target for each executive branch agency subject to the Administrative Process Act to (i) reduce regulations and regulatory requirements, (ii) maintain the current number of regulations and regulatory requirements, or (iii) allow regulations and regulatory requirements to increase by a specific amount over a two-year period. The bill requires the Secretary of Finance to report to the Speaker of the House of Delegates and the Chairman of the Senate Committee on Rules on the status of the Program no later than October 1 of each odd-numbered year. Finally, the bill provides that the Department, in consultation with the Office of the Attorney General, shall, by March 1, 2023, issue guidance for agencies regarding the Program and how an agency can comply with the requirements of the Program.

02/15/22 House: Reconsideration of passage agreed to by House

02/15/22 House: Passed House (63-Y 36-N)

02/15/22 House: VOTE: Passage #2 (63-Y 36-N)

02/16/22 Senate: Constitutional reading dispensed

02/16/22 Senate: Referred to Committee on General Laws and Technology

HB 444 Virginia Freedom of Information Act; meetings conducted through electronic meetings.

Chief patron: Bennett-Parker

Summary as introduced:

Virginia Freedom of Information Act; meetings conducted through electronic meetings.

Amends existing provisions concerning electronic meetings by keeping the provisions for electronic meetings held in response to declared states of emergency, repealing the provisions that are specific to regional and state public bodies, and allowing public bodies to conduct all-virtual public meetings where all of the members who participate do so remotely and that the public may access through electronic communications means. Definitions, procedural requirements, and limitations for all-virtual public meetings are set forth in the bill, along with technical amendments.

02/01/22 House: Read second time and engrossed

02/02/22 House: Read third time and passed House BLOCK VOTE (98-Y 0-N)

02/02/22 House: VOTE: Block Vote Passage (98-Y 0-N)

02/03/22 Senate: Constitutional reading dispensed

02/03/22 Senate: Referred to Committee on General Laws and Technology

HB 555 Health care providers; transfer of patient records in conjunction with closure, etc.

Chief patron: Hayes

Summary as introduced:

Health care providers; transfer of patient records in conjunction with closure, sale, or relocation of practice; electronic notice permitted. Allows health care providers to notify patients either electronically or by mail prior to the transfer of patient records in conjunction with the closure, sale, or relocation of the health care provider's practice. Current law requires health care providers to provide such notice by mail.

02/17/22 Senate: Reported from Education and Health (15-Y 0-N)

02/18/22 Senate: Constitutional reading dispensed (38-Y 0-N)

02/21/22 Senate: Read third time

02/21/22 Senate: Passed Senate (40-Y 0-N)

02/23/22 House: Bill text as passed House and Senate (HB555ER)

HB 1359 Health care; consent to services and disclosure of records.

Chief patron: Byron

Summary as passed House:

Health care; consent to services and disclosure of records. Provides that an authorization for the disclosure of health records shall remain in effect until (i) the authorization is revoked in writing to the person in possession of the health record subject to the authorization, (ii) any expiration date set forth in the authorization, or (iii) the person in possession of the health record becomes aware of any expiration event described in the authorization, whichever occurs first, and that a revocation shall not be effective to the extent that the person in possession of the health record released health records prior to such revocation.

The bill also provides that authorization for the release of health records shall include authorization for the person named in the authorization to assist the person who is the subject of the health record in accessing health care services, including scheduling appointments for the person who is the subject of the health record and attending appointments together with the person who is the subject of the health record.

The bill also provides that every health care provider shall make health records of a patient available to any person designated by a patient in an authorization to release medical records and that a health care provider shall allow a spouse, parent, adult child, adult sibling, or other person identified by a person to make an appointment for medical services on behalf of another person, regardless of whether the other person has executed an authorization to release medical records.

02/15/22 House: Read third time and passed House (52-Y 48-N)

02/15/22 House: VOTE: Passage (52-Y 48-N)

02/16/22 Senate: Constitutional reading dispensed

02/16/22 Senate: Referred to Committee on Education and Health

02/17/22 House: Impact statement from DPB (HB1359H1)

SB 257 Counseling Compact; Dept. of Health Professions shall review merits entering into Compact.

Chief patron: Hashmi

Summary as introduced:

Licensure of professional counselors; Counseling Compact. Authorizes Virginia to become a signatory to the Counseling Compact. The Compact permits eligible licensed professional counselors to practice in Compact member states, provided that they are licensed in at least one member state. The bill has a delayed effective date of January 1, 2023, and directs the

Board of Counseling to adopt emergency regulations to implement the provisions of the bill. The Compact takes effect when it is enacted by a tenth member state.

02/02/22 Senate: Passed by for the day

02/03/22 Senate: Read third time and passed Senate (26-Y 14-N)

02/23/22 House: Placed on Calendar

02/23/22 House: Read first time

02/23/22 House: Referred to Committee on Health, Welfare and Institutions

SB 317 Out-of-state health care practitioners; temporary authorization to practice.

Chief patron: Favola

Summary as passed Senate:

Out-of-state health care practitioners; temporary authorization to practice; licensure by reciprocity for physicians; emergency. Allows a health care practitioner licensed in another state or the District of Columbia who has submitted an application for licensure to the appropriate health regulatory board to temporarily practice for a period of 90 days pending licensure, provided that certain conditions are met. The bill directs the Department of Health Professions to pursue reciprocity agreements with jurisdictions that surround the Commonwealth to streamline the application process in order to facilitate the practice of medicine. The bill requires the Department of Health Professions to annually report to the Chairmen of the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions the number of out-of-state health care practitioners who have utilized the temporary authorization to practice pending licensure and have not subsequently been issued full licensure. The bill contains an emergency clause.

EMERGENCY

02/21/22 House: Placed on Calendar

02/21/22 House: Read first time

02/21/22 House: Referred to Committee on Health, Welfare and Institutions

02/22/22 House: Committee substitute printed 22106790D-H1

02/22/22 House: Reported from Health, Welfare and Institutions with substitute (20-Y 0-N)

SB 672 Pharmacists and pharmacy technicians; prescribing, dispensing, etc. of controlled substances.

Chief patron: Dunnavant

Summary as passed Senate:

Pharmacists and pharmacy technicians; prescribing, dispensing, and administering of controlled substances. Allows pharmacists and pharmacy technicians under the supervision of a pharmacist to initiate treatment with and dispense and administer certain drugs, devices, and tests in accordance with a statewide protocol developed by the Board of Pharmacy in collaboration with the Board of Medicine and the Department of Health. The bill directs the Board of Pharmacy to establish such protocol by November 1, 2022, and to promulgate regulations to implement the provisions of the bill within 280 days of its enactment.

02/14/22 Senate: Passed Senate (40-Y 0-N)

02/15/22 Senate: Impact statement from DPB (SB672S1)

02/22/22 House: Placed on Calendar

02/22/22 House: Read first time

02/22/22 House: Referred to Committee on Health, Welfare and Institutions

Virginia Board of Audiology and Speech-Language Pathology

Guidance for the Use and Supervision of Speech-Language Pathology Assistants (SLPAs)

The Board of Audiology and Speech-Language Pathology often receives questions regarding the use of Speech-Language Pathology Assistants. The most frequently asked questions are the following:

- 1) What is the scope of practice for an SLPA?
- 2) Are all individuals that assist an SLP an SLPA?
- 3) How many assistants may an SLP supervise?
- 4) Can an SLPA implement treatment services?
- 5) How often must the SLP observe and evaluate the SLPA implementing the treatment services?
- 6) Is the SLP required to observe and evaluate at least two client sessions every 30 days for each for each client for which an SLPA is implementing treatment services?
- 7) May an SLP provide onsite supervision of an SLPA via tele-supervision?
- 8) Must the SLP who provides direct treatment and provides treatment plans to the SLPA also provide the supervisory observations of the SLPA?
- 9) How often is the treating SLP required to provide services to a client that utilizes SLPAs?

Guidance

- 1) **Question:** What is the scope of practice for an SLPA?

Response: The [Regulations Governing the Practice of Audiology and Speech-Language Pathology](#) define the scope of practice for an SLPA to be the following:

18VAC30-21-140. Supervisory responsibilities; supervision of unlicensed assistants.

C. Scope of practice of a speech-language pathologist assistant. After demonstration and documentation of competency for the duties to be assigned, an assistant shall only engage in those duties planned, designed, and supervised by a licensed speech-language pathologist, to include the following:

1. Assist with speech, language, and hearing screenings without clinical interpretation of results.
2. Assist during assessment of a client exclusive of administration or interpretation.
3. Perform activities for each session that are routine and do not require professional judgment, in accordance with a plan developed and directed by the speech-language pathologist who retains the professional responsibility for the client.

4. Document a client's performance and report information to the supervising speech-language pathologist.
5. Assist with programming augmentative and alternative communication devices and assist the client in repetitive use of such devices.
6. Sign or initial informal treatment notes and, upon request, co-sign formal documents with the supervising speech-language pathologist.
7. Engage in the following activities:
 - a. Preparing materials;
 - b. Scheduling appointments and activities;
 - c. Preparing charts, records, or graphs and performing other clerical duties;
 - d. Performing checks and maintenance of equipment; and
 - e. Assisting a client with transitioning to and from therapy sessions.
8. Perform duties not otherwise restricted to the practice of speech-language pathology.

2) **Question:** Are all individuals that assist an SLP an SLPA?

Response: Not all individuals that assist an SLP are SLPAs. An assistant that performs any of the duties defined in the scope of practice for an SLPA found in [18VAC30-21-140\(1-6\) and \(8\)](#) is an SLPA. Individuals that **only** assist by performing functions listed in [18VAC30-21-140\(7\)](#) do not need to be an SLPA.

3) **Question:** How many assistants may an SLP supervise?

Response: An SLP may supervise the equivalent of two full-time speech-language pathology assistants.

The [Regulations Governing the practice of Audiology and Speech-Language Pathology](#) state the following:

18VAC30-21-140. Supervisory responsibilities; supervision of unlicensed assistants.

E. Supervision of an assistant in speech-language pathology.

1. ... A speech-language pathologist shall only supervise the equivalent of two full-time assistants.

4) **Question:** Can an SLPA implement treatment services?

Response: An SLPA may implement treatment services planned and developed by their supervising SLP.

5) **Question:** How often must an SLP observe and evaluate an SLPA implementing the treatment services?

Response: The supervising SLP must provide documented onsite supervision (see Question 7) of at least two client sessions for each SLPA every 30 days. This is to directly observe and evaluate the performance of the SLPA. The onsite supervision requirement is distinctly different from the requirement for the SLP to provide services to all clients provided in Question 9.

The [Regulations Governing the Practice of Audiology and Speech-Language Pathology](#) state the following:

18VAC30-21-140. Supervisory responsibilities; supervision of unlicensed assistants.

E. Supervision of an assistant in speech-language pathology.

2. The speech-language pathologist shall provide the level of supervision to the speech-language pathologist assistant necessary to ensure quality of care to include onsite supervision of at least two client sessions for each assistant being supervised every 30 days to directly observe and evaluate the performance of the assistant. The speech-language pathologist shall document such onsite observation and evaluation in the client record for each session.

6) Question: Is the SLP required to observe and evaluate at least two client sessions every 30 days for each client for which an SLPA is implementing treatment services?

Response: No, the SLP is required to provide onsite supervision of a minimum of least two client sessions per SLPA every 30 days as provided in the response to Question 5.

7) Question: May an SLP provide onsite supervision of an SLPA via tele-supervision?

Response: Onsite supervision may occur in-person, face-to-face; or via a real-time, audio and visual electronic communication method that is synchronous, (real-time) in which the SLP, SLPA and client may visually see and verbally communicate with one another.

Recordings of SLPAs working with clients are not “real-time” and do not satisfy this requirement.

8) Question: Must the SLP who provides direct treatment and provides treatment plans to the SLPA also provide the supervisory observations of the SLPA?

Response: The SLP providing treatment to a client and planning treatment for the SLPA to implement to the client is required to conduct the supervisory observations. In the event the SLPA works for multiple SLPs, each SLP must observe and supervise 2x/month to ensure standard of care for the clients under their treatment.

Commented [KL(1): Was not discussed in RAP, but added as recommended by DOE. Board discussion needed.

9) Question: How often is the treating SLP required to provide services to a client that utilizes SLPAs?

Response: The treating SLP must meet with each client receiving services from the SLPA at least once every 30 days to provide treatment and to aid in their planning and development of treatment to be implemented by the SLPA.

The [Regulations Governing the Practice of Audiology and Speech-Language Pathology](#) state the following:

18VAC3021-140. Supervisory responsibilities; supervision of unlicensed assistants.

A. Responsibility of a licensee.

2. A licensed speech-language pathologist who supervises unlicensed assistants shall document such supervision, shall be held fully responsible for their performance and activities, and shall ensure that they perform only those activities that do not constitute the practice of speech-language pathology and that are commensurate with their level of training.

b. The frequency in which the speech-language pathologist personally delivers treatment or services to a client who is receiving some services from an assistant shall be up to the professional judgment of the speech-language pathologist and shall be determined by the treatment needs of the client, the type of services being provided, and the setting in which the client is being served, but shall occur at least every 30 days.

Request for Comment on a Petition for Rulemaking

X

Promulgating Board: **Board of Audiology and Speech-Language Pathology**

Elaine J. Yeatts

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Agency Contact:

Leslie L. Knachel

Executive Director

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Richmond, VA 23233

Chapter Affected:

18 vac 30 - **Regulations Governing the Practice of Audiology and Speech-
21: Language Pathology**

Statutory Authority: State: Chapters 24 and 26 of Title 54.1

Date Petition Received 09/09/2021

Petitioner

Rebecca Delbridge

Petitioner's Request

To allow for supervision of assistants by speech-language pathologists via telepractice.

Agency Plan

The petition will be published on October 11, 2021 in the Register of Regulations and also posted on the Virginia Regulatory Townhall at www.townhall.virginia.gov to receive public comment ending November 10, 2021. Following receipt of all comments on the petition to amend regulations, the Board will decide whether to make any changes to the regulatory language. This matter may also be discussed at the Board meeting on October 19, 2021 in the context of a periodic review of regulations. The petitioner will be informed of its decision.

Publication Date 10/11/2021 *(comment period will also begin on this date)*

Comment End Date 11/10/2021



COMMONWEALTH OF VIRGINIA

Board of Audiology & Speech-Language Pathology

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Note: As of June 1, 2019, the Boards phone number will change to: (804) 597-4132

Petition for Rule-making

The Code of Virginia (§ 2.2-4007) and the Public Participation Guidelines of this board require a person who wishes to petition the board to develop a new regulation or amend an existing regulation to provide certain information. Within 14 days of receiving a valid petition, the board will notify the petitioner and send a notice to the Register of Regulations identifying the petitioner, the nature of the request and the plan for responding to the petition. Following publication of the petition in the Register, a 21-day comment period will begin to allow written comment on the petition. Within 90 days after the comment period, the board will issue a written decision on the petition. If the board has not met within that 90-day period, the decision will be issued no later than 14 days after it next meets.

Please provide the information requested below. (Print or Type)		
Petitioner's full name (Last, First, Middle initial, Suffix,)		
Delbridge, Rebecca A		
Street Address	Area Code and Telephone Number	
1200 GARTH CT	919-616-6262	
City	State	Zip Code
Virginia Beach	VA	23454
Email Address (optional)	Fax (optional)	
rebecca.a.delbridge@gmail.com		

Respond to the following questions:

- What regulation are you petitioning the board to amend? Please state the title of the regulation and the section/sections you want the board to consider amending. 18VAC30-21-140. Supervisory responsibilities; supervision of unlicensed assistants.
 E. Supervision of an assistant in speech-language pathology.
 2. The speech-language pathologist shall provide the level of supervision to the speech-language pathologist assistant necessary to ensure quality of care to include onsite supervision of at least two client sessions for each assistant being supervised every 30 days to directly observe and evaluate the performance of the assistant. The speech-language pathologist shall document such onsite observation and evaluation in the client record for each session.
- Please summarize the substance of the change you are requesting and state the rationale or purpose for the new or amended rule.
 I am requesting to change the verbiage of supervision requirements from "onsite" supervision to "direct supervision via onsite or telepractice". This will ensure that every speech language pathologist assistant is able to work to their full potential of which they have been trained while guaranteeing adequate supervision for best therapy provision to clients. There are many school divisions in rural areas that are unable to access speech-language pathologists, but are able to access fully trained speech language pathology assistants. This will ensure students are still able to receive quality speech therapy services despite location, use of telepractice, or a student's inability to attend school due to public health emergencies. Proposed verbiage:
 E. Supervision of an assistant in speech-language pathology
 2. The speech-language pathologist shall provide the level of supervision to the speech-language pathologist assistant necessary to ensure quality of care to include direct supervision, via onsite or telepractice, of at least two client sessions for each assistant being supervised every 30 days to directly observe and evaluate the performance of the assistant. The speech-language pathologist shall document such direct observation and evaluation in the client record for each session.
- State the legal authority of the board to take the action requested. In general, the legal authority for the adoption of regulations by the board is found in § 54.1-2400 of the Code of Virginia. If there is other legal authority for promulgation of a regulation, please provide that Code reference.

No other code reference

Signature: Rebecca A Delbridge MS CCC SLP Date: 8/12/21

Comments on Delbridge Petition

10/14/21 10:34 am

Commenter: Luke

Please Allow Supervision via Telemedicine

Allowance of speech language pathologists to supervise assistants via telemedicine makes workplaces safer and modernizes SLP practice. Please allow this to happen.

CommentID: 109893

10/17/21 7:56 pm

Commenter: Chriss

Funding will come from ...?

Before we add positions we must ask if we have the funding and if not, where will the funding come from? If TELE-conference why not have parents participate if supervision is deemed essential? Maybe I don't understand fully but if it's accesible via computer screen then more than one person can be at each end. It shouldn't have to cost tax payer \$ when we're in an already crazy-bad economy due to poor leadership on all levels AND we have such a shortage of teachers anyway. This sounds like one mom who wants a babysitter for her kid's tele-class. If I'm wrong, pardon. If I'm right, none of us deserve/have earned special treatment or favor.

CommentID: 115011

10/18/21 11:29 am

Commenter: Terri

Allow the use of telemedicine for the supervision of SLPAs & increase the number allowed to supervis

ITCVA is in favor of allowing Speech language pathologists to use telemedicine to supervise speech language pathology assistants. We are also in favor of increasing the number of SLPAs allowed to be supervised by each SLP from 2 to allowing each SLP to determine how many they are capable of supervising. This grows the capacity of this specialized field and allows better access for families with children needing the service. Thank you for your consideration.

CommentID: 116534

10/19/21 2:58 pm

Commenter: Mary Ellen Plitt

Telemedicine in the Supervision of speech-language assistants

It is essential that families participating in early intervention services receive these services in their natural environments. Many families in Virginia live in areas where there is a shortage of providers and SLPAs are an answer to providing quality services in those areas. In order to increase access for families with infants and toddlers eligible for early intervention services, we need to allow for flexibility with regards to how SLPAs are supervised. I support the use of telemedicine for supervisoin by an SLP and I also support allowing the SLP or the SLP's employing agency to determine the number of SLPAs that can be effectively supervised by that SLP.

CommentID: 116539

11/10/21 5:31 am

Commenter: Ruman

Speech-language pathologists

Speech-language pathologists and audiologists assess, diagnose, treat, and help to prevent speech and hearing problems caused by accidents, diseases, and genetic disorders.

CommentID: 116714



October 5, 2021

Elaine Yeatts
Senior Policy Analyst, VA DHP
elaine.yeatts@dhp.virginia.gov

Leslie Knachel
Executive Director VA BASLP
leslie.knachel@dhp.virginia.gov

Virginia Board of Audiology & Speech-Language Pathology

RE: Petition to amend 18VAC30-21-140

Dear Ms. Yeatts, Ms. Knachel, and the VABASLP,

I am writing in response to the petition to amend 18VAC30-21-140 Supervisory responsibilities; supervision of unlicensed assistants, specifically:

E. Supervision of an assistant in speech-language pathology.

2. The speech-language pathologist shall provide the level of supervision to the speech-language pathologist assistant necessary to ensure quality of care to include onsite supervision of at least two client sessions for each assistant being supervised every 30 days to directly observe and evaluate the performance of the assistant. The speech-language pathologist shall document such onsite observation and evaluation in the client record for each session.

The petitioner is requesting the verbiage be changed to “direct supervision via onsite or telepractice”.

I understand the rationale for the request, which is reasonable. Additionally, understand that the VABASLP does not license, regulate or discipline SLP Assistants, however this request raises some issues for further Board consideration:

- Is the SLP Assistant providing services at the same physical location as the physically present licensed SLP supervisor. If that is the case, this would seem to be a reasonable modification. If not, this would be of concern. So additional clarification of language would be warranted.
- Is the SLP Assistant being supervised via synchronous telecommunication technology/videoconferencing by secure means. It seems the language would need to be specific in this regard.
- This would imply viewing of recorded sessions is not appropriate to meet the requirement for direct supervision.
- Additionally, it seems telehealth/telepractice supervision would not include email, instant messaging, telephone or fax.
- Is the SLP Assistant providing services via telepractice. This is not specifically addressed in the Code. Nor is that the request here, but there is some implication for it and should be a consideration too.
- If the SLP Assistant does provide services via telepractice, the supervising licensed SLP would need to determine whether or not the SLP Assistant had the professional and technical skills to provide teletherapy.

I appreciate the VABSLP’s attention to this matter. Thank you for your consideration.

Most sincerely,
Laura Purcell Verdun, M.A., CCC/SLP

Cc: Laura Jackson

Excerpts from the [Laws Governing Audiology and Speech-Language Pathology](#)

§ 54.1-2605. Practice of assistant speech-language pathologists.

A person who has met the qualifications prescribed by the Board may practice as an assistant speech-language pathologist in accordance with regulations of the Board and may perform limited duties that are otherwise restricted to the practice of a speech-language pathologist under the supervision and direction of a licensed speech-language pathologist.

2014, c. [661](#); 2016, c. [77](#).

Excerpts from the [Regulations Governing the practice of Audiology and Speech-Language Pathology](#) (effective date 10/15/20):

18VAC30-21-140. Supervisory responsibilities; supervision of unlicensed assistants.

A. Responsibility of a licensee.

1. A licensed audiologist who supervises unlicensed assistants shall document such supervision, shall be held fully responsible for their performance and activities, and shall ensure that they perform only those activities that do not constitute the practice of audiology and that are commensurate with their level of training.

2. A licensed speech-language pathologist who supervises unlicensed assistants shall document such supervision, shall be held fully responsible for their performance and activities, and shall ensure that they perform only those activities that do not constitute the practice of speech-language pathology and that are commensurate with their level of training.

a. A speech-language pathologist shall not supervise an assistant without the speech-language pathologist's knowledge and consent by the assistant and the licensee documented prior to assumption of supervisory responsibilities.

b. The frequency in which the speech-language pathologist personally delivers treatment or services to a client who is receiving some services from an assistant shall be up to the professional judgment of the speech-language pathologist and shall be determined by the treatment needs of the client, the type of services being provided, and the setting in which the client is being served, but shall occur at least every 30 days.

3. The identity of the unlicensed assistant shall be disclosed to the client prior to treatment and shall be made a part of the client's file.

B. Qualifications of a speech-language pathologist assistant.

1. A person acting as a speech-language pathologist assistant shall have:

a. A bachelor's degree or associate's degree and documented training by a licensed speech-language pathologist in topics related to the client population to be served; or

b. Employment as a speech-language pathologist assistant in a United States jurisdiction within the last five years preceding July 27, 2016.

2. A speech-language pathologist supervising an assistant shall be responsible for determining that the knowledge, skills, and clinical experience of the assistant are sufficient to ensure competency to perform all tasks to which the assistant is assigned. The speech-language pathologist shall document competency after training and direct observation of the assistant's performance of such tasks, and a record of skills and competencies shall be maintained.

C. Scope of practice of a speech-language pathologist assistant. After demonstration and documentation of competency for the duties to be assigned, an assistant shall only engage in those duties planned, designed, and supervised by a licensed speech-language pathologist, to include the following:

1. Assist with speech, language, and hearing screenings without clinical interpretation of results.

2. Assist during assessment of a client exclusive of administration or interpretation.

3. Perform activities for each session that are routine and do not require professional judgment, in accordance with a plan developed and directed by the speech-language pathologist who retains the professional responsibility for the client.

4. Document a client's performance and report information to the supervising speech-language pathologist.

5. Assist with programming augmentative and alternative communication devices and assist the client in repetitive use of such devices.

6. Sign or initial informal treatment notes and, upon request, co-sign formal documents with the supervising speech-language pathologist.

7. Engage in the following activities:

a. Preparing materials;

b. Scheduling appointments and activities;

c. Preparing charts, records, or graphs and performing other clerical duties;

d. Performing checks and maintenance of equipment; and

e. Assisting a client with transitioning to and from therapy sessions.

8. Perform duties not otherwise restricted to the practice of speech-language pathology.

D. A speech-language pathologist assistant shall not engage in the practice of speech-language pathology, including the following:

1. Represent himself as a speech-language pathologist.
2. Perform standardized or nonstandardized diagnostic tests or formal or informal evaluations.
3. Perform procedures that require a professional level of clinical acumen and technical skill.
4. Tabulate or interpret results and observations of feeding and swallowing evaluations or screenings performed by a speech-language pathologist.
5. Participate in formal conferences or meetings without the presence of the supervising speech-language pathologist.
6. Provide interpretative information to the client, the family of the client, or others regarding the client's status or service.
7. Write, develop, or modify a client's treatment plan.
8. Assist in or provide services as specified in subsection C of this section unless directed by the supervising speech-language pathologist.
9. Sign any formal documents in lieu of the supervising speech-language pathologist.
10. Select a client for service or discharge a client from service.
11. Make a decision on the need for additional services or make referrals for service.
12. Disclose clinical or confidential information either orally or in writing to anyone other than the supervising speech-language pathologist, unless mandated by law or authorized by the supervising speech-language pathologist.
13. Develop or determine the swallowing or feeding strategies or precautions for a client or provide feeding or swallowing treatment.

E. Supervision of an assistant in speech-language pathology.

1. The practice of an assistant shall only be supervised by a speech-language pathologist who retains full legal and ethical responsibility for the client. A speech-language pathologist shall only supervise the equivalent of two full-time assistants.
2. The speech-language pathologist shall provide the level of supervision to the speech-language pathologist assistant necessary to ensure quality of care to include onsite supervision

of at least two client sessions for each assistant being supervised every 30 days to directly observe and evaluate the performance of the assistant. The speech-language pathologist shall document such onsite observation and evaluation in the client record for each session.

Speech Pathology/Audiology Monthly Snapshot for December 2021

Speech Pathology/Audiology has received more cases in December than closed. Speech Pathology/Audiology closed 0 patient care cases and 1 non-patient care case for a total of 1 case.

Cases Closed	
Patient Care	0
Non-Patient Care	1
Total	1

Speech Pathology/Audiology has received 2 patient care cases and 0 non-patient care cases for a total of 2 cases.

Cases Received	
Patient Care	2
Non-Patient Care	0
Total	2

As of December 31, 2021 there were 7 patient care cases open and 4 non-patient care cases open for a total of 11 cases.

Cases Open	
Patient Care	7
Non-Patient Care	4
Total	11

There are 5,605 Speech Pathology/Audiology licensees as of January 1, 2021. The number of current licenses are broken down by profession in the following chart.

Current Licenses	
Audiologist	571
School Speech-Language Pathologist	341
Speech-Language Pathologist	4693
Total for Speech Pathology/Audiology	5,605

There were 52 licenses issued for Speech Pathology/Audiology for the month of December. The number of licenses issued are broken down by profession in the following chart.

Licenses Issued	
Audiologist	3
Provisional Speech-Language Pathologist	11
School Speech-Language Pathologist	2
Speech-Language Pathologist	36
Total for Speech Pathology/Audiology	52