



Oregon Board of Examiners for
Speech-Language Pathology & Audiology
Established in 1973

Pictured: Santiam River near Lebanon, Oregon, Photo by Gary Halvorson

Oregon's Children: The Need for Audiologists and Speech-Language Pathologists

- Speech, language, communication disorders is biggest health issue of children under the age of five, affecting at least 7%, which equates to 16,333 young children in Oregon needing speech-language therapy, including almost all children with autism.
- According to Oregon's Early Hearing Detection and Intervention Program, hearing loss is the most common birth defect, occurring at a rate of three in every 1,000 children.
- Early identification and treatment of hearing, speech, language and communication disorders is critical to success in school and in life.
- Every \$1 invested in early education saves \$7 in later remedial education, welfare and crime control costs.

Healthcare for Oregon's Seniors: The Need for Audiologists and Speech-Language Pathologists

- Speech-Language Pathologists work with adults and senior citizens in healthcare settings with stroke and accident victims, etc.
- SLPs in healthcare conduct barium swallowing studies and work with dieticians on the correct consistency of food to facilitate swallowing
- SLPs assist individuals on ventilators with speaking valves so that they may continue to communicate orally
- Audiologists hold a doctorate and specialize in identifying, diagnosing, treating and monitoring disorders of the auditory and vestibular system portions of the ear. They are trained to diagnose, manage and/or treat hearing, tinnitus, or balance problems.

The Board's Mission and Makeup

- The Board of Examiners was established in 1973 to license and regulate the performance of speech-language pathologists and audiologists for consumer protection.
- Board is comprised of two public members, two audiologists, two speech-language therapists and one otolaryngologist (ENT physician).
- Efforts are made to have a diversified board including representation from both urban and rural areas of Oregon.
- Board members receive a \$30 per meeting stipend plus mileage reimbursement/out of pocket costs.

Accomplishments 15-17 biennium

- Implementation of FBI fingerprint background checks June, 2015 for new applicants and LEDS check on all renewals February, 2016
- Implementation of universal licensure on July 1, 2016, all SLPs in Oregon must now obtain Board licensure, TSPC exemption phased out (with grandfathering for current TSPC license holders)
- Smooth transition to new Executive Director
- Upgraded to new Oregon “look and feel” website February, 2017
- Successful transition to shared in-house accountant

Emerging Issues – Environmental Factors

- National licensure compact – National Council of State Boards of Examiners (NCSB), American Speech-Language Hearing Association (ASHA) and Council on State Governments
- Telepractice as a way to deal with shortages of SLPs in both educational and healthcare settings
- Audiologist Assistants – potential new licensure category
- Better systems of supervising Speech-Language Pathology Assistants
- Continued problem of school districts and ESDs failing to understand licensure requirements, inappropriate use of SLPAs due to shortage of SLPs

Major Budget Drivers

- Number of licensees up 14.9% this biennium. Number of licensees last biennium also increased 14.3%.
- Increasing numbers of out of state providers obtaining license so they can do telepractice in Oregon from their home states.
- Caseload averages variable and unpredictable but ticking upward. In 2008 there were only 20 cases, 2016 there were 63. However, addition of fingerprint background check program in 2015 only created five cases more than previous year for that category.
- Cases becoming more complex, require review by clinical experts. Still need better efficiency, but have resolved significant backlog.

Major Budget Drivers

- ED and AA are now full time positions and able to handle workload with contract investigator and clinical experts even with the increased numbers of licensees and cases. Would not be able to accomplish this without a part time FTE or contract investigator. Also need separation between the ED and the investigative process for best legal outcomes.
- AAG costs – flat fee system has been important due to one case going to judicial review, already has cost 50K before that review. This is an uncovered risk on the expense side.
- No fee increases, most likely will not need to increase in 19-21 due to consistent 14%+ increase in license volume.