

**We are CSAP!**



Paulette W. Gentry, President

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**UPCOMING SPRING CONFERENCE**

Maryland  
May 17-May 18  
See our *Sneak Peek* on page three.

**President's Message**

**Why Did You Decide To Become A Leader?**

I was reflecting on why or rather who inspired me to be a leader? Where did these foundations come from? Who inspired me? Motivated me? Mentored me?

I would have to give credit to my mother. She was a model of leadership in our family and in her work. She was always giving me additional chores or asking me to help her. I saw how she led our family smoothly and efficiently. My mom was the one who motivated me to set my goals high and do whatever was necessary to achieve them. I always knew she would be there for me. I was elected the leader of my girl's scout troop. I was captain of our girls' basketball team. The foundation of leadership is established early for some and later for others.

We begin this year with our nation focusing on our country's leaders. Over the years our country has experienced great leadership. These individuals have modeled a great variety of leadership skills. Abraham Lincoln had vision and the courage to pursue them. As leaders of our state associations we too must have visions. It was one of my first college professors who helped me develop my vision of becoming an SLP.

Roosevelt helped build the foundations for our country's commerce and defense by following his visions. Eisenhower was honest and wise. These are leadership characteristics I have strived to develop with the help of my church leaders.

Jefferson had weekly dinner with the congress. Roosevelt had fireside chats to keep the country updated on WWII. Gerald Ford was able to relate to ordinary people. A foundation of leadership is building relationships. Communication can be the foundation to a good leader. A mentor of mine spent his first year as a new principal just listening to his new staff.

As leaders of our state associations we have strong foundations to further build our leadership upon. I have followed some very strong and wise individuals in Tennessee. They laid the foundation for our association. It has been my challenge to continue building upon this foundation. I have seen integrity/honesty, vision, courage or the ability to follow their visions. I have often asked for their advice and guidance.

In CSAP I have also been mentored by some very strong leaders. CSAP has also benefited from strong leaders building upon even a stronger foundation. I have personally taken several of these effective leadership skills back to my state association; providing the board members with a timeline for their positions.

I hope CSAP will make 2013 a year of leadership growth. The foundations laid by our leaders nationally and locally can provide us the visions for 2013.

**Paulette**  
**Paulette W. Gentry**  
**CSAP President**



**Editor: Regina Lemmon**

## Future CSAP Meetings

May 2013 — ASHA Headquarters

November 2013 — Chicago, Illinois

May 2014 — Milwaukee, Wisconsin

November 2014 — Orlando, Florida



### California Speech-Language-Hearing Association

## Promoting Cultural Competence and Language Readiness Through a Web-Based Training Course

**D**r. Ying-Chiao Tsao (CSU Fullerton) has developed a pioneering self-paced online course through an ASHA Multicultural Grant Award to encourage speech-language pathologists to become “language ready” for picking up the language of the clients they serve.

This online course consists of six hours of total learning time, organized into four learning models. A well-known multicultural expert, Dr. Lilly Cheng (UCSD) will host a 90-minute video presentation on Cultural Competence. The goals of this training course are to gain knowledge of “cultural competence” and how one may cultivate his/her cultural competence; to gain knowledge of “language readiness” and how it is related to serving diversity; and step-by-step procedures and video demonstrations of how to “pick up” an unfamiliar language and apply it to clinical settings. The language protocols (including video resources) are available in Chinese, Korean, Spanish, Urdu and Vietnamese.

The program is being piloted now and is being peer-reviewed to gain ASHA CEU status. We will keep you posted on this course’s availability through our Yahoo Groups’ website. Join us at [http://groups.yahoo.com/group/csha\\_diversity\\_committee/](http://groups.yahoo.com/group/csha_diversity_committee/).

*Ying-Chiao Tsao, PhD, CCC-SLP*

California Speech-Language-Hearing Association

## CSAP Teleseminars

### **Making Meetings Work with Parliamentary Procedures**

Presented by Roberta Jackson, MS, CCC-SLP  
Past President, WSLHA

**Replay Teleseminar Cost: \$20**

This teleseminar will provide presiding officers with parliamentary tools to assist in planning and implementing meetings. A review of agenda development; techniques for presiding as well as understanding the use for explicit bylaws/standing rules will be discussed. Emphasis will be on the latest edition of *Roberts Rules of Order*, newly revised, 11th edition (2011).

### **Leadership: Adjusting the Sails**

Presented by: Melanie W. Hudson, MA, CCC-SLP

**Replay Teleseminar Cost: \$20**

For the aspiring and seasoned leader alike! What are the basic qualities of an effective leader and how to deal with difficult situations that confront other leaders? Stories and examples to inspire and motivate will be presented.

### **Thinking Outside the Box: On-line Solutions for Your Association**

Presented by Michael Shollenberger, founder of AuthWire

**Replay Teleseminar Cost: \$20**

Topics discussed: Website management/donations, online voting, online membership dues processing, conferences/seminars - signups and payment, Continuing education/online courses.

**Check the CSAP website, [www.csap.org](http://www.csap.org), for upcoming and updated information regarding CSAP teleseminars.**

## ArkSHA Members Recognized at ASHA Convention



The ASHA Convention was held at the World Congress Center in Atlanta, Georgia this year. Nearby was the World of Coca Cola, the Georgia Aquarium and the Georgia Dome. Arkansas showed up BIG TIME! Not only did we have representation by clinicians and university faculty members from around the state, but Arkansas students, both graduate and undergraduate, made appearances too! Of what can we be most proud? Not one, not two, but three ArkSHA members were honored at this year's ASHA convention! **Donna Fisher Smiley, PhD**, was honored by the ASHFoundation with the Louis M. DiCarlo Award for Recent Clinical Achievement. She is best known for her efforts in leading a systems change to bring educational audiology services to schools in Arkansas. **Rebecca O. Weaver, PhD**, was named Fellow of the

Association for outstanding contributions by serving in five offices held in Arkansas state associations and appointment to four ASHA councils and boards; directing the establishment of the Harding University graduate program; and developing an international practicum site in Zambia and teaching the first college courses for Zambians. **Carol B. Fleming, MS**, was also named Fellow of the Association for outstanding contributions by serving as ArkSHA president and receiving Honors and Clinical Service Achievement awards; developing and copyrighting a resource for school-based SLPs; and chairing the ASHA School Finance Committee and Joint Committee of State-National Association Relations.

Congratulations Donna, Becky and Carol (*pictured above*)! If all that wasn't enough, Opening Session Keynote Speaker, **Dr. Maya Angelou**, poet, educator, historian, best-selling author, actress, playwright, civil-rights activist, producer and director, reminisced about being raised by her paternal grandmother and Uncle Willie in Arkansas in the early 1930s. Some of you may remember her when she read a poem at the 1993 Presidential Inauguration of Bill Clinton. In her keynote presentation, Dr. Angelou spoke at length about "Rainbows in the Clouds," meaning that in all tragedies or hardships in life (i.e., the clouds), there can be rainbows. She specifically pointed out that every speech-language pathologist and audiologist is likened to a rainbow in the clouds of their patients and clients. So moving ... and so very proud to be associated with Arkansas!

Last but not least, what a privilege it was to see a rainbow in someone else's clouds. **Congresswoman Gabrielle Giffords** and **Captain Mark Kelly** were honored with the Annie Glenn Award for the remarkable story of courage and hope (and rehabilitation) after Gabby was critically injured from a gunshot wound to the head in January 2011. For all those in attendance, we got to hear Gabby speak for herself, even if it was a few short, effortful sentences. I don't think there was a dry eye in the room. This is significant progress since Gabby had to re-learn how to walk, write, read and speak again. It is stories like this and numerous others that make me excited to be a professional in this field. We can, and we do, make a difference!



**Samuel R. Atcherson, PhD, CCC-A**  
ArkSHA Treasurer

## Spring 2013 Conference Sneak Peak

Join us just outside the nation's capital in Rockville, Maryland for this year's meeting. The location provides easy access in and out of the D.C. area via local airports as well as access to the national monuments and museums via the metro train system. During the sessions you'll have an opportunity to engage with experts on state and national issues impacting you and your state. The always popular roundtables will allow you time to network with other state leaders to exchange information on the successful models that are working for their state associations. Friday's session at the ASHA Office will close with a live auction/reception and tours. Saturday will include a unique behind the scenes tour at the Marriott Hotel where you'll be staying. During lunch you'll have an opportunity to explore the shopping and restaurants in the area surrounding the hotel and finish with a special event on Saturday night. We hope you'll be able to stay on after the conference to experience firsthand the many historical points of interest only a metro ride away.



## Ohio Speech-Language-Hearing Association

### OSLHA Focuses

This issue of *Communication Matters*, Ohio Speech-Language Hearing Association's newsletter, focuses on telepractice, which entails the use of telecommunications technologies to link clinicians and clients at a distance.

The American Speech-Language-Hearing Association (ASHA, 2005) approves telepractice for diagnosis, therapy, and case management. The topic of telepractice is particularly relevant given the increasing availability of user-friendly telecommunications technologies. However, with this growth comes emerging controversies associated with telepractice.

Many clinicians, administrators and consumers harbor a healthy skepticism. Some may feel that telepractice is a depersonalized form of interaction, one of the many types of "virtual" human contact that could threaten to supplant person-to-person interaction. Moreover, considering that the rationale for choosing telepractice may sometimes have to do with cost savings—reducing the number of personnel hired or maximizing use of staff time—and with the practical convenience of minimizing consumers' travel time and expenses, telepractice could receive some criticism as a model of service delivery that is driven by "the bottom line."

While these concerns are real, the most important considerations for the professions of speech-language pathology and audiology pertain to whether telepractice can effectively serve persons with communication disorders. Telepractice can provide greater access to services for those who live at a distance from service sites or who have difficulty with mobility or travel.

Presently, in order to determine when, where and how telepractice provides effective practice, research is being conducted, practical evidence is being gathered and consumer outcome benefits are being documented. These findings can inform the decisions that professionals and consumers will make regarding the efficacy of telepractice.

The intent of this issue is to provide some information on how telepractice has been used in a variety of settings and thus share some of the available evidence. This issue offers a variety of articles that discuss telepractice. Included in the Research Forum is a study of the outcomes of a web-based, self-guided, at-home intervention program for veterans with traumatic brain injury.

The Clinic Forum features two reports on telepractice, one on services for young children and their families and one on voice therapy. The Hearing is Believing column offers a review of studies on audiology telehealth. Clinical Grand Rounds provides an account of a hybrid intervention program to treat stuttering using traditional clinical services coupled with follow

-up therapy via telepractice. The University Forum paper describes a telepractice intervention program for school-age children that functions as a training site for student clinicians.

Branching out from telepractice, the Getting Down to Business article discusses how the Internet provides speech-language pathologists and audiologists with innumerable opportunities for connecting with other individuals. The authors provide practical strategies for maximizing the benefits of online tools and social media. The Research Forum offers an off-theme paper on second language learning among bilingual Spanish-English children. This issue of *eHearsay* leaves us with many unexplored questions, for example, what types of staff training can prepare practitioners to provide services via telepractice?

How will a telepractice clinician's job performance be evaluated? What articles, books, or electronic sources on telepractice are destined to become the staples of university courses? Will standard procedures or customary models of service delivery emerge? Will landmark case studies be documented and inform practice? What new tools will emerge to judge the effectiveness of service delivery? Will there be systematic evaluations of the quality of telepractice services, and what criteria will they use? Will anecdotal evidence disseminated via social media become a relevant source of information for consumers? Even the vocabulary of telepractice is evolving – because telepractice can provide synchronous video interactions between persons at remote sites, it can be considered "face-to-face."

That leaves us with a need for new terms to describe traditional services – perhaps "side by side" or "on site." The contrast is between "within proximity" and "out of proximity." On a practical level, issues of licensure across states, reimbursement, hiring and employment practices, risk management, HIPAA compliance, confidentiality, and professional ethics will need to be addressed.

Further information can be obtained online from ASHA's Knowledge and Skills document on telepractice. ASHA Special Interest Group 18, Telepractice, publishes a Perspectives newsletter devoted entirely to telepractice in speech-language pathology and audiology. Other multidisciplinary sources include the American Telemedicine Association, the *International Journal of Telerehabilitation*, and the *International Journal of Telemedicine and Telecare*.

**Reprint from OSLHA newsletter**

## WI Association of School Boards to Vote on Resolution Relating to Shortage of SLPs

The Wisconsin Association of School Boards (WASB) Delegate Assembly will be voting on a resolution (Resolution 13-14) relating to the Shortage of Speech-Language Pathologists and Other Special Education Service Providers on Wednesday, January 23, 2013. **WSHA has been successful in reaching the WASB Directors and we strongly urge you to contact your local school board members, school administrators, superintendents, and WASB Directors and ask that they oppose WASB Resolution 13-14.**

The email addresses for local school district board members can be found on local school district websites. Each school district sends 1-2 delegates to the WASB Convention to vote on the resolutions.

For your convenience WSHA suggests the following language as you communicate your concerns ...

*Thank you for your dedication and service to children across Wisconsin. I am writing to ask that you oppose Wisconsin Association of School Boards Resolution 13-14 relating to the Shortage of Speech and Language Pathologists and Other Special Education Service Providers.*

*I have several concerns with the proposed resolution. First, it is vague in that it does not specify the type of degree or additional training required to obtain the proposed license. Secondly, a Bachelor of Science in Communicative Disorders is not sufficient to work semi-independently in the field of speech language pathology. Undergraduates only learn basic information in preparation for diagnostic and treatment learning at the graduate level. Practica experiences at the undergraduate level are minimal and do not prepare undergraduates to provide semi-independent services.*

*Bachelors-level licensure has been thoughtfully considered by numerous entities including the Wisconsin Department of Instruction Professional Standards Council and Special Education Committee, higher education campuses across Wisconsin that offer programs in speech-language pathology, and the Wisconsin Speech-Language Pathology and Audiology Association (WSHA). To my knowledge, none of these groups currently support the creation of a bachelors-level license in speech-language pathology.*

*Other solutions are available including making it easier for medically-based speech-language pathologists to obtain a DPI license. Medically-based speech-language pathologists are certified by the American Speech-Language-Hearing*

*Association (ASHA) and are licensed by the Wisconsin Department of Safety and Professional Services (DSPS).*

*Thank you for your consideration.*

Proposed resolution 13-14 reads as follows:

Create 4.61 (a) as follows: To address shortages of licensed providers of certain special education services (such as speech and language pathology, occupational therapy, physical therapy, etc.), the WASB supports creation of a license pathway for persons who hold a bachelor's degree and have received specified additional training that would lead to a mid-level licensure that would enable the holder of such a mid-level license to provide such specialized services under the supervision of a licensee in the area of such specialized service.

Rationale:

The committee advanced this resolution to allow the membership to decide whether to endorse the creation of a license pathway for persons who hold a bachelor's degree and have received specified additional training in the provision of certain special education services (such as speech and language pathology, occupational therapy, physical therapy, etc.) as a means to address current shortages of licensed providers of such special education services. Persons licensed to provide such specialized services under this new licensure pathway would practice under the supervision of a licensee in the area of such specialized service.

***Reprinted from a WSHA News—Action Alert from Wisconsin Speech-Language Pathology and Audiology Association***

## Manual Explains Autism Law to Health Insurers

### *Tennessee Association Assembles Guide to State Mandate*

Speech-language pathologists in Tennessee have developed a manual on reimbursement issues related to autism services that could serve as a model for other **states**. The comprehensive guide, "Autism Equity Act Reference Manual," is freely downloadable from the Internet and answers a variety of questions about autism services and reimbursement.

The print version of the manual is 105 pages long, with information on audiology and speech-language services and CPT codes (Common Procedural Terminology, ©American Medical **Association**) for autism, co-occurring conditions and disorders, ASHA efficacy **statements**, provider types, treatment approaches, cognitive rehabilitation, and applied behavioral analysis, as well as the National Institutes of Health 2007 autism report.

Members of the Tennessee Association of Audiologists and Speech-Language Pathologists (TAASLP) created the manual after the **state** legislature passed a law in 2006 mandating health insurance coverage of autism services. TAASLP members realized that it would take time for insurers to understand fully the range of diagnoses, speech and language services, diagnosis codes, and treatment codes that providers would be submitting for reimbursement.

The manual was critical when the law took effect, according to Lynne Harmon, chair of the TAASLP Reimbursement Committee from 2005 to 2009. "Many insurance companies in the **state** had specifically excluded services for autism and therefore had no experience with autism spectrum disorders or the codes for the related services," Harmon said. "We were afraid that the medical directors of the insurance companies would be totally unfamiliar with what we provide. Plus, some companies that cover Tennessee residents are based in other **states**, and we wanted to make sure they all knew what the Act said."

In addition, Harmon explained, "many children with autism have other disorders, and we wanted to explain the different services these children might need."

#### **Collaboration**

The manual was a continuation of a collaborative effort that led to the passage of the Autism Equity Act, Harmon said. TAASLP worked with Tennessee chapters of the Autism Society of America, the Tennessee Disabilities Coalition, and families of children with disabilities to lobby for passage of the bill. The Tennessee autism mandate is limited: it considers autism a neurological disorder, requiring insurers that provide benefits for neurological disorders to provide benefits for the treatment of ASD at the same level as benefits for other neurological disorders; it applies only to children under 12 years old; and it does not apply to self-insured group arrangements.

TAASLP received grants from ASHA's **State** Advocates for Reimbursement program to help defray the cost of assembling, printing, and distributing the manual.

Compiling the manual was much easier than getting it into the hands of the key players, Harmon acknowledged. "We had no idea that getting the names of the insurance company medical directors was going to be so difficult. It seems that the companies don't want people to know who they are."

With the help of a contact in the **state** medical society, TAASLP was able to identify some—but not all—of the medical directors, but could not identify those located outside of Tennessee. The largest insurer in the **state**, Blue Cross/Blue Shield, would not respond to TAASLP inquiries. It was only in 2009 that Harmon was given that name—and only through contacts she made in successfully appealing denied claims that had been submitted by her private practice.

#### **Results**

It is difficult to quantify companies' use of the manual, Harmon said, but providers are using it to appeal denied claims. In addition, several self-insured companies, which are not bound by the **state** mandate, have agreed to comply with the Autism Equity Act; and some companies have made exceptions to the mandate's limit on number of visits.

#### **Consumers**

TAASLP also compiled a companion manual for consumers. This 356-page guide offers information, guidance, and resources on accessing speech-language and hearing services and includes information about the Autism Equity Act. Many private-practice audiologists and SLPs keep copies in their waiting areas for patients to peruse. Members of the TAASLP Reimbursement Committee also will accompany families to meetings with employers to discuss additional coverage for speech-language and hearing issues. Both manuals may be freely downloaded from the [TAASLP website](#).

Harmon advises other **states** to compile similar resources. "It's important to give comprehensive, accurate information to the people who will review claims," she said, "and to customize that information based on the laws in a particular **state**."

Carol Polovoy

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*Polovoy, C. (2011, January 18). Manual Explains Autism Law to Health Insurers : Tennessee Association Assembles Guide to State Mandate. The ASHA Leader.*

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**LOCAL ARRANGEMENTS**

SPRING 2013  
*Gaithersburg, MD*

**LOCAL ARRANGEMENTS**

FALL 2013  
*Chicago, IL*

**The Mission of CSAP is to:**

1. provide leadership training for state Speech-Language-Hearing association presidents.
2. be a forum for collaboration and networking among these leaders.
3. promote communication of professional matters between state Speech Language Hearing associations, ASHA and other related national professional organizations.

**CSAP Vision**

CSAP is the premier organization where state leaders meet to cultivate a unique culture of growth and knowledge through collaborative efforts.

[CSAP](#) is a related association of the  
[American Speech-Language Hearing-Association](#)