

**POWER OF THE PAST**  
**FORCE OF THE FUTURE**

# Future of the Professions

Integrating Lessons to Inform Our Future

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# Disclosure Information – Theresa Rodgers

## Financial

- CAPCSD Registration waived
- 2 Hotel nights provided by CAPCSD
- Honorarium
- Additional travel expenses reimbursed by ASHA

## Nonfinancial

- Member of ASHA Board of Directors/ASHA President Elect

# Disclosure Information – Sherri Jones

## Financial

- CAPCSD Registration waived
- 2 Hotel nights provided by CAPCSD
- Honorarium
- Additional travel expenses reimbursed by UNL

## Nonfinancial

- Chaired the AUD Vision Workgroup, which was an outcome of the 2016 AUD Education Summit
- Member of the ASHA Audiology Advisory Council



# The Sage on the Stage

## Overview

- Future of Work
- Generation Gap
- Technology for Education
- Instructional vs. Learning Paradigms

Developments in our Disciplines

AUD and SLP Education Summits

Healthcare & Education Landscapes

# US News and World Report 2019



## Audiologist Overview

#29 in Best Health Care Jobs | Overall Score 5.7 / 10

[Overview](#) [Salary](#) [Reviews and Advice](#) [Job Openings](#)

### What is an Audiologist?

Audiologists assess hearing and balance with tools like audiometers, and give treatment, which may mean different relief procedures for vertigo or fitting hearing aids for hearing impairments. Audiologists also counsel a patient's family or community on how to best serve a patient with hearing impairments or balance issues.



## Speech-Language Pathologist Overview

#18 in Best Health Care Jobs | Overall Score 7.0 / 10

[Overview](#) [Salary](#) [Reviews and Advice](#) [Job Openings](#)

### What is a Speech-Language Pathologist?

Speech-language pathologists are trained to help the millions of Americans for whom just ordering in a restaurant or swallowing a meal may pose a challenge. According to Elizabeth McCrea, the 2014 president of the American Speech-Language-Hearing Association, "Speech-language pathologists assess, diagnose and treat a variety of speech, sound, language, voice, fluency and swallowing disorders."



Pietranton, A. (2019). *National office update* [Powerpoint slides]. Retrieved from

<https://slpac.community.asha.org/search?executeSearch=true&SearchTerm=US+News+and+World+Report&l=1>

# Job Outlook (US Bureau of Labor Statistics)

## **Audiologists**

- Number of jobs in 2016
  - 14,800
- Job outlook 2016-2026
  - 21% (much faster than average)
- Employment change 2016-2026
  - 3100

## **Speech Language Pathologists**

- Number of jobs in 2016
  - 145,100
- Job outlook 2016-2026
  - 18% (much faster than average)
- Employment change 2016-2026
  - 25,900

# Nature of Work is Changing Rapidly

Significant proportions of the work humans do today will be automated in the coming decade.

Technological advancements will give rise to entirely new types of jobs.

85% of jobs that will exist in 2030 have not yet been invented.

Human skills, like leadership, communication and problem-solving are among the most in-demand skills in the job market.

# Nature of Work is Changing Rapidly

Number of jobs an individual will hold will only increase with time.

Employers need nimble, agile, creative, resilient thinkers.

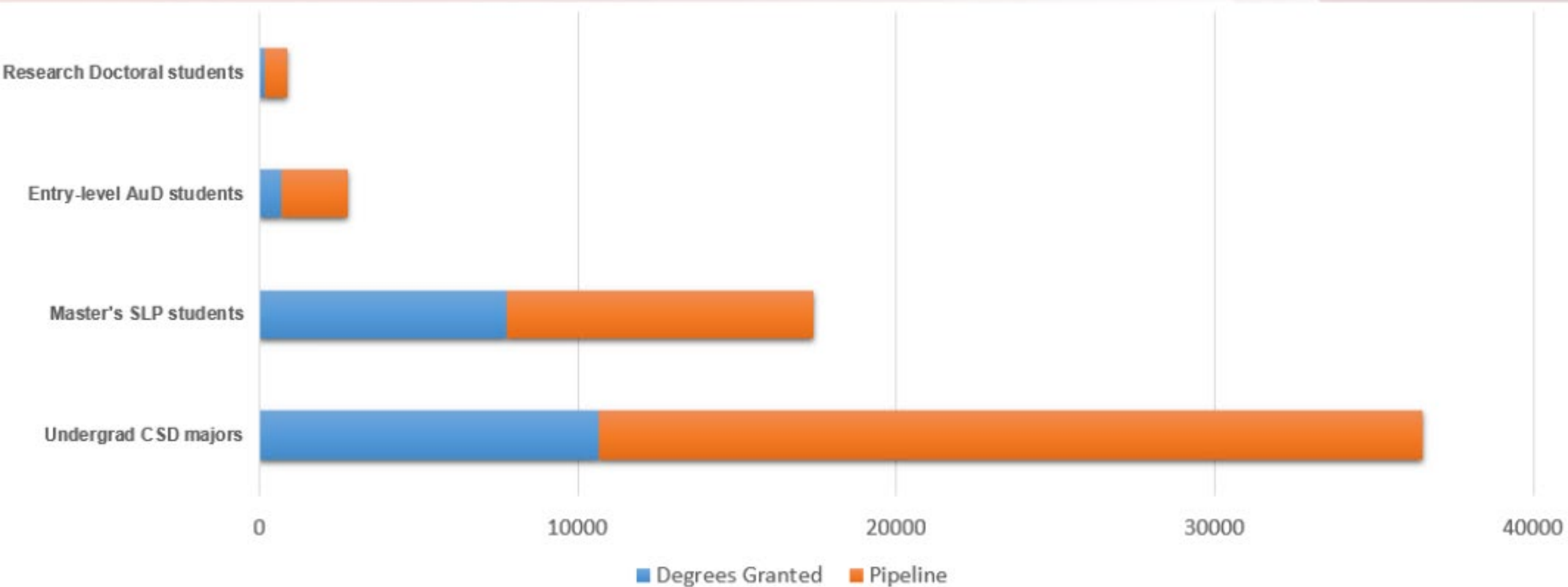
Importance of problem-based inquiry that fosters creativity, agility, and innovation.

“systems thinking, creativity, critical thinking, emotional intelligence and communication-will be the ones needed to succeed in the future.” (p. 6)



# Students (2016-2017)

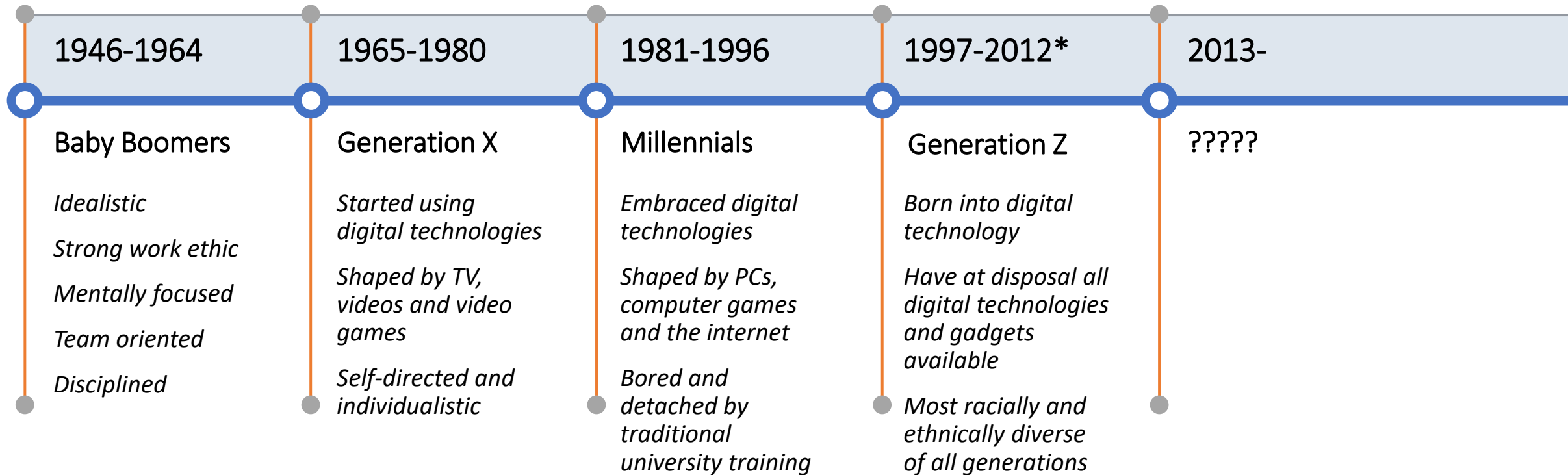
Pietranton, A. (2019). *National office update* [Powerpoint slides]. Retrieved from <https://slpac.community.asha.org>



- AUD – 74 CAA accredited and 3 candidate programs; 5 ACAE accredited and 3 developing status
- SLP – 258 CAA accredited and 22 candidate programs

# Generations of Students (and Faculty)

## *Generation Gap in Higher Education*



# Generations in the Workforce

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Millennials have surpassed Generation X workers to represent the largest share of the workforce.

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More than one in three workers is a millennial.

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By 2025, 75% of the workforce will be comprised by millennials.

# Evolution of Teaching and Learning

*From Sage on the Stage to Guide by Your Side*

## **Instructional Paradigm**

- Provide/deliver instruction
- Offer courses and programs
- Enrollment, quantity and quality of resources
- Achieve access for diverse students
- Time held constant; learning varies
- Learning is teacher-centered and controlled

## **Learning Paradigm**

- Produce learning
- Create powerful learning environments
- Efficiency, quantity and quality of outcomes
- Achieve success for diverse students
- Learning held constant; time varies
- Learning is student-centered and controlled

Barr RB, Tagg J (1995) From Teaching to Learning: A New Paradigm for Undergraduate Education, *Change* 27(6), 13-26.  
Tagg J (2003) *The Learning Paradigm College*. Anker Publishing



# Innovations in Teaching



Evidence-based teaching



Active learning and flipped classrooms



Case-based and problem-based learning



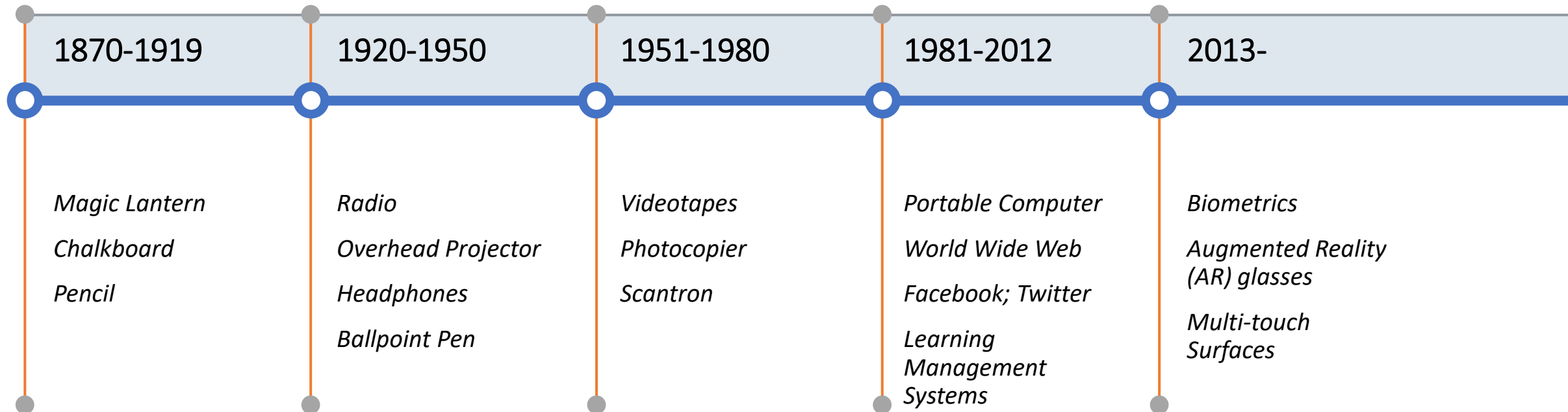
Collaborative learning



Hybrid Model

# Evolution of Technology

*Slow and Limited to Global, Connected, and Fast*



# General Developments in Audiology and Speech Language Pathology

Expanding Scope of Practice

Ever Expanding Knowledge

Transition from Clock Hours to Outcomes

Content Based to Competency Based Education

Profession-Centered to Patient- and Family-Centered

Changing Health Care Environment/Reimbursement

Service Delivery: Tele-medicine; Tele-supervision

State Standards; RTI, MTSS require collaboration

What else?

# Developments in Audiology

Automated Hearing Testing

Over the Counter and Online Hearing Aids

Audiology Assistants and Technicians

Advanced Technologies

Molecular & Pharmaceutical Therapeutics

Renewed Emphasis on Rehabilitation

Preventive Care

Addressing National Health Issues

What else?



# Developments in Speech Language Pathology

SLP Assistants and Other Support Personnel

Caseloads and Productivity Expectations

Advanced Technologies

Preventive Care

Addressing National Health Issues

Continuum of Care; Increased Documentation

Entry-level clinical doctoral degree?

What else?

# Skate to the Puck: Vision

- Independent – autonomous providers, entry portal for hearing and balance health
- Well-recognized and Highly Respected – experts, sought out for services, trusted, valued
- Comprehensive – scope of practice is large and expanding, patient/family centered care
- Thriving – patients seek us out, professionals routinely refer, we contribute to research base
- United – work collectively to advocate, unrelenting resilience to innovate, shared set of goals



# Skate to the Puck: Next Steps

- Identify a clear set of core undergraduate courses that students must have.
- Thinking forward to changing healthcare landscapes – we need to get on the ‘team’.
- Think about training that allows students to graduate at various levels (e.g., AA, AA with HA dispensing skills, and then specialties).
- Training should cover the knowledge and skills of the entire scope of practice and should be available for people who are currently practicing.
- Take ownership of all facets of rehabilitation
- Develop meaningful approaches to defining and measuring competencies
- Collaborate or converse with a variety of groups that are working on similar activities



# Throwback Thursday

THE ASHA  
**LEADER**  
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

April 17, 2007

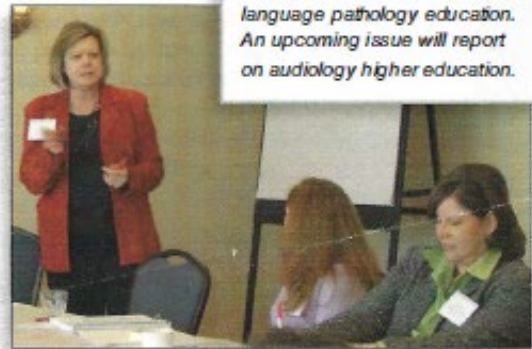
## Summits Probe Future of CSD Education

by Lemmietta McNeilly

**M**ore than 100 invited speech-language pathologists, including department chairs, clinical coordinators, and practitioners from health care, school, and private-practice settings, convened in New Orleans to brainstorm issues related to future speech-language pathology education and preparation at the Speech-Language Pathology Education Summit Feb. 1-4.

The conference was designed to explore, develop, and extend paradigms for the preparation of successful speech-language pathologists of the future through presentations, general sessions, eight breakout groups, and a town meeting. ASHA led a group that included the Council of Academic


*This article focuses on speech-language pathology education. An upcoming issue will report on audiology higher education.*



From L-R: Celia R. Hooper, University of North Carolina, Greensboro; Amy C. Georgeadis, National Rehabilitation Hospital, Washington, DC; Theresa Rodgers, Ascension Parish Public Schools, Donaldville, LA

Programs in Communication Sciences and Disorders (CAPCSD), the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA), and the Council for Clinical Certification (CFCC).

Speakers included several leading SLPs, including keynoter Danielle Ripich, president of the University of New England, who alerted participants to college enrollment demographics through 2020 and to other factors that will affect future SLPs. Gloria Kellum, vice chancellor of university relations and professor of communicative disorders at the University of Mississippi, addressed training models from other



Joe A. Melcher, Xavier University, New Orleans, LA

See *Summit* page 21

McNeilly, L. (2007). Summits probe future of CSD Education. *The ASHA Leader*, 12(5), p 1, 21.

*What are the historical, current, and emerging contexts, challenges, and opportunities for consideration as we prepare the future SLP and AUD?*

Which of these issues or challenges exist in 2019?

### **Academic Issues**

- Scheduling of practicum
- Providing competency-based learning experiences
- Integrating knowledge, clinical skills, and research
- Recruitment and preparation of PhD faculty
- Faculty workloads may constrain innovation in programs
- Student outcomes may not be explicit
- Need for students to be independent and critical thinkers
- Need for students to be strong consumers of research
- Cultural competence infused throughout the curriculum
- Preparation of *specialists* versus *generalists*

American Speech-Language-Hearing Association. (2007, February). Speech-Language Pathology Education Summit Proceedings. Retrieved from <https://www.asha.org/Events/SLP-Summit-Future/>

American Speech-Language Hearing Association (2007, May). Core Audiology Education Considered. Retrieved from <https://leader.pubs.asha.org/doi/full/10.1044/leader.AN2.12062007.1>

*What are the historical, current, and emerging contexts, challenges, and opportunities for consideration as we prepare the future SLP and AUD?*

Which of these issues or challenges exist in 2019?

### **Generational/Cultural Issues**

- Current models of education may be inappropriate for or devalued by the current generation of students.
- Current generation of students' goals, thinking, attitudes, knowledge, skills, and expectations differ from faculty's expectations.
- Employment considerations are affected by generational differences.
- Need to balance educational debt with employment salaries.
- Increasing diversity of students presents opportunities for a more diverse workforce.
- Cultural differences present challenges in regard to language, speaking, and writing styles of faculty/supervisors and students.

*What are the historical, current, and emerging contexts, challenges, and opportunities for consideration as we prepare the future SLP and AUD?*

Which of these issues or challenges exist in 2019?

### **Financial Issues**

- University and program funding limits enrollment in many programs.
- Limited financial support for longer and/or more innovative educational models
- Limited ability for university academic programs to provide clinical practicum themselves
- Low salaries and perceived difficult working conditions decrease desire to seek careers in higher education.
- The expense of our programs in relationship to enrollment may draw attention from higher administration settings.



*What are the historical, current, and emerging contexts, challenges, and opportunities for consideration as we prepare the future SLP and AUD?*

Which of these issues or challenges exist in 2019?

### **Professional Practice Issues**

- Employers want entry-level clinicians to be able to “hit the ground running” when work setting demands are high.
- Patient/client base becoming larger and more diverse with regard to age, range and severity of disorders, and ethnicity and cultures
- Scope of practice expanding with limited elimination of current/past areas of practice
- Professional practice requirements and expectations continue to evolve and increase.



# *What is the ideal SLP and AUD of the future?*

- Teachable
- Strong ethics
- Good communication skills
- Capable technologically
- Analytic ability
- Patience
- Advocacy for the profession
- Strong values
- Civility
- Entrepreneurship
- Conversant with good business practice
- Empathy
- Social consciousness
- Objectivity
- Positive

American Speech-Language-Hearing Association. (2007, February). Speech-Language Pathology Education Summit Proceedings. Retrieved from <https://www.asha.org/Events/SLP-Summit-Future/>

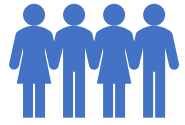
American Speech-Language Hearing Association (2007, May). Core Audiology Education Considered. Retrieved from <https://leader.pubs.asha.org/doi/full/10.1044/leader.AN2.12062007.1>

- Outcomes of Professional Preparation
- Program Contents
- Program Sequences
- Role of Faculty in Reforms
- Pedagogical Reforms Dealing with Delivery (expand use of distance learning, increase student and faculty diversity, make better use of academic resources in allied disciplines, continue movement from “get your hours” to “develop your competencies”, demonstrate greater sensitivity to different styles of learning in curricular structure and teaching approaches....)

**What reforms are  
needed in 2019?**

American Speech-Language-Hearing Association. (2007, February). Speech-Language Pathology Education Summit Proceedings. Retrieved from <https://www.asha.org/Events/SLP-Summit-Future/>

American Speech-Language Hearing Association (2007, May). Core Audiology Education Considered. Retrieved from <https://leader.pubs.asha.org/doi/full/10.1044/leader.AN2.12062007.1>



# Changing Education Landscape

- Emphasis on standardized testing/accountability – Percentage of students with disabilities who are proficient
- Data-driven decision-making (for the district, schools, and students)
- MTSS and RtI – Multitiered Systems of Support and Response to Intervention – progress monitoring/interventions; mandated prior to referral for evaluation
- Paperwork Burden
- Lack of relief for caseloads



# The Changing Health Care Landscape

# Paradigm Shift: Value (Not Volume)

Fee-for-service reimbursement models reward volume.

- Encourages increased utilization
- More services => more payment



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## Value Based Purchasing

- Based on vision of “the right care for every person every time”
- Aligns payment to efficiency and quality of care delivery
- Rewards providers for measured performance (read: outcomes)

Fifer, R. (2012). A sea change in reimbursement principles: Outcomes not procedures. Presentation at the Annual Convention of the American Speech-Language-Hearing Association, Atlanta, GA.



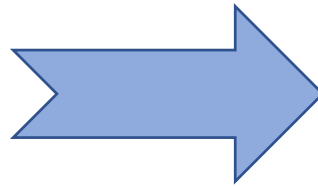
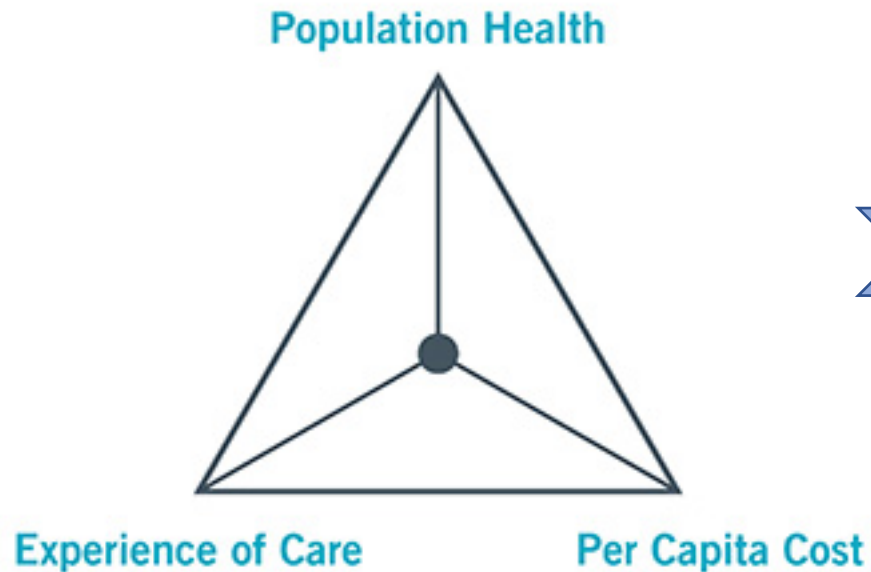
# Value – Not Volume

“Value is measured by outputs, not inputs. Value in health care depends on actual patient health outcomes, not the volume of services delivered. More care is not always better care, and shifting the focus from volume to value is a central challenge.”

*Porter, M. What is Value in Health Care?  
NEJM, 2010, 363: 2477-81.*

# Care of the Patient/Client/Student Requires Care of the Provider

## The IHI Triple Aim



## The Quadruple Aim



Institute for Healthcare Improvement. IHI Triple Aim Initiative. Retrieved March 28, 2019 from <http://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>

Bodenheimer, T. & Sinsky, C. (2014). From triple to quadruple aim: Care of the patient requires care of the provider. *Annals of Family Medicine*, 12(6), 573-576. doi: 10.1370/afm.1713

# Quality Interprofessional Education (IPE)

- Health care in the U.S. has become more complex.
- It is rapidly evolving to be more team-based across professions.
- Health care provision must be high quality and cost-effective.





# Quality Interprofessional Education (IPE)

- These factors are driving the need to better prepare health professionals to collaborate in interprofessional teams.
- The goal is improving Quadruple Aim outcomes.



# Issues for Interprofessional Education

Dentzer, S. (2018). Health care without walls: What it means for practice, education, and training [Powerpoint slides]. Presentation at the Annual Nexus Summit, Minneapolis, MN.

- Individuals will not only have to be educated and trained to work with each other on teams, but also with technologies.
- Individuals will have to be educated and trained to be as adaptable and flexible as ever as knowledge and technologies change.
- Individuals will have to undergo much more continuing professional and interprofessional education over the course of their careers.



# Training Students to become:

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- Advocates:
  - for themselves in the workplace
  - for patients/clients
  - for state & federal-level legislative and regulatory issues
- Supervisors

ADVOCACY



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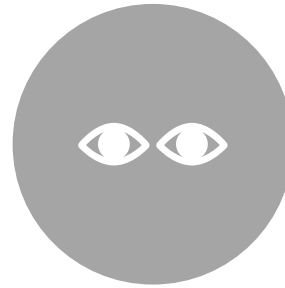
# State of the Union February 2013

“skyrocketing costs  
price too many young  
people out of a  
higher education, or  
saddle them with  
unsustainable debt.”

# Lessons to Inform the Future



Curriculum is always a work in progress.



Find our vision that “pushes” the field forward.



Be prepared for ever-changing external pressures and constraints.



Enjoy the ride!

Sherri Jones

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