



Louisiana Board of Examiners for **SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY**

MISSION STATEMENT: *We exist because the legislature declared that "in order to safeguard the public health, safety, and welfare, to protect the public from incompetent, unscrupulous, and unauthorized persons, and from unprofessional conduct by speech-language pathologists, audiologists, and speech-language pathology assistants, it is necessary to provide regulatory authority over persons offering speech-language pathology and audiology services to the public."*



RENEWAL UPDATES



In the recent Rules revisions, the Board shortened the time frame allowed for licensure renewal. Renewals will now be accepted April 15th – July 31st annually. Licenses will lapse on August 1st annually if not renewed.

The Board will no longer send renewal notification postcards on April 15th annually. All renewal notifications will be sent via email only. Please ensure that your email address remains current with LBESPA to ensure that you receive all notifications.

Beginning April 15, 2020, all fully licensed individuals will be required to renew online.

UPCOMING MEETINGS:

June 7th, 8:30 a.m.,

Board Meeting, Doubletree Hotel, Lafayette

August 2nd, 8:30 a.m.,

Board Meeting, Board Office, Prairieville

October 18th, 8:30 a.m.,

Board Meeting, Board Office,
Prairieville

December 6th, 8:30 a.m.

Board Meeting,
Loews Hotel, New Orleans

Presentations

Board members are available to provide university presentations on the transition from school to work. This presentation provides students with information regarding licensure and certification and helps to develop an understanding of the need to apply for licensure before beginning work in Louisiana.

Board members can also provide presentations regarding updates on supervision, as well as ethical considerations. If you are interested in having the Board present, please contact us at aud-slp@lbespa.org.

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TELEHEALTH | KNOW THE CODE!*

CRIMINAL BACKGROUND CHECKS Jolie Jones, Executive Director

Effective May 1, 2019, all new and reinstatement applicants who wish to obtain licensure from the Louisiana Board of Examiners for Speech-Language Pathology and Audiology (the "Board") are required to furnish a full set of fingerprints to facilitate a state and federal criminal background check. The Louisiana State Police (LSP) shall report the result of the criminal background check to the Board, which may use that information to determine the applicant's moral character and suitability for licensing. LA R.S. 37:2659.1 authorizes the Board to conduct a criminal background check on applicants as a condition for eligibility for licensure. It is the responsibility of the applicant to read and understand the instructions below to complete a criminal background check with the Louisiana Department of Public Safety and the Federal Bureau of Investigation (FBI). Criminal background reports generated for or by another agency cannot be accepted to satisfy this requirement.

The Board is not permitted to issue a grace period or license until the results of the report and a completed application have been received.

Completion time varies from 1 to 8 weeks, depending on circumstances. Criminal history rap sheet findings will extend the completion time. Note that inadequate fingerprints and incorrect payment amount (either too much or too little) will result in delays with the Louisiana State Police (LSP).

Background checks are only valid for 90 days upon receipt from the Louisiana State Police (LSP) without an application submitted to the Board. If 90 days passes without a completed application, the background check must be completely reprocessed and resubmitted.

There are two options to complete the required criminal background check:

1. In person at the Louisiana State Police Headquarters

2. By Mail to the Louisiana State Police Headquarters

Please carefully review the instruction sheet below on how to complete the criminal background check for initial and reinstatement applications. The current fee for the state and federal background check is \$39.25. The fee must be made payable to "Louisiana State Police" as specified in the instruction sheet. Upon completion, the Louisiana State Police will forward the results directly to the Board office.

Forms and additional information can be found at

<https://www.lbespa.org/page/CBC>.



REVISIONS TO LBESPA LAW AND RULES

Glenn M. Waguespack, MS, L-AUD, CCC-A

As changes to the professions of audiology and speech-language pathology have occurred, so have the laws and rules governing the practice. Designed to protect the public, licensure conforms to standards that are specific to this purpose. As a result of changing scopes of practice, changing technology, significant events such as a national disaster, and the need to clarify existing provisions, the Louisiana Board of Examiners in Speech-Language Pathology and Audiology (LBESPA) has made changes to both its enabling statute, the Practice Act, and to the rules and regulations that serve to define the provisions

in the statute. The Code of Ethics also received significant changes. What may have been considered a perfect result of legislative changes at the time later became outdated and not always applicable to the dynamic professions of audiology and speech-language pathology.

Since legislation for licensure in audiology and speech-language pathology was introduced by LBESPA in 1972, there have been numerous changes to both the enabling statute and to the rules and regulations. In 1972 licensure was established for private practitioners and was later modified in 1978 to include licensure in all job settings. Sweeping changes were made to the law in 1995, including allowing audiologists to dispense hearing aids with an audiology license, as well as the implementation of licensure for speech-language pathology assistants.

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License, Renewals, Delinquencies, Oh My!

Jerrilyn Frasier, Au.D., L-SLP/AUD

As June quickly approaches, we all look forward to summer vacations, LSHA meetings, and the annual LBESPA licensure renewal deadline. You may ask, “Why June?” Well the answer is simple, the LBESPA fiscal year runs July 1 to June 30.

We all know that June is the last opportunity to obtain continuing education (CE) for the previous fiscal year. But, did you know, that CE obtained in June may be used for either the previous year or the upcoming year; however, hours may not be split. You can also avoid the June rush and renew before June if you have obtained your CE. Online renewals are encouraged as the quickest and easiest method of renewing.

But what happens if life takes over and you forget to renew in June? Delinquent applications will be accepted through July for \$130 (\$180 for dual) along with the usual proof of CE. As part of the recent Rules revisions, the renewal period was shortened to end on July 31st annually. Licenses will lapsed on August 1st. Anyone attempting to renew after August 1 must submit a reinstatement application with their proof of CE and both the initial application fee of \$125 plus the delinquent fee of \$130 for a total of \$255 (\$305 for dual). Cease and desist letters will be mailed to the last known address for all non-renewed individuals. If we do not receive a renewal by April 1 of the following year, LBESPA will send an email to the last known email address with your steps to reinstate.

So what are some important facts to keep in mind going forward about licensure renewal? First, June, June, June. Timely renewals are your most cost effective renewals. Second, it is your responsibility as a licensed professional to keep LBESPA up to date with address and email changes. Third, as we become a technological world, LBESPA is moving to a more digital format for renewals, notices, and information. Lastly, CE can be entered in your LBESPA account as you accrue it to make renewals quicker and easier.

REMINDER: When entering dates for CE, ensure that the correct year is entered. This is the most common mistake made with online renewals!



Facebook

Make sure you are following the LBESPA Facebook page (www.facebook.com/LBESPA).

Our Facebook page is a convenient place to receive helpful reminders during the renewal process and to stay updated with any licensure changes.



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REVISIONS TO LBESPA LAW AND RULES

No changes were made again until 2016, and since that time criminal background checks are to be required for new applicants and for reinstatements. Additionally, the doctoral degree was mandated as the entry level qualification for audiologists, guidelines for a conditional license were delineated, and the medical advisor was eliminated as a non-voting member of the Board. The composition of the Board was changed to include three speech-language pathologists and three audiologists in addition to a consumer member. All of these changes were the result of legislation requiring testimony before House and Senate committees.

What did not require legislation have been modifications to the rules and regulations. These changes occurred as a result of a promulgation process that includes the publishing of proposed changes, a public hearing, and written responses to changes that may have been brought forth at the public hearing. Many of the modifications result from a proposed list maintained by the Board office, but may also come from practitioners or from professional associations.

The latest modifications to the rules and regulations became effective in February 2019 and are available on the LBESPA web site. However, it should be noted that there is a need for further clarification of some rules, another set of rules is currently in the promulgation process. It is hopeful that these rules will be adopted and available on the Board's web site by the end of the summer.

As is customary, the General Rules begin with definitions that are applicable to terminology employed in the context of the document. To maintain currency with the professions, it was necessary to re-define some terms and create definitions for others. Some of the definitions include accredited educational program, criminal history record information, direct and indirect supervision, facilitator, full-time supervised professional employment, part-time postgraduate professional employment, and telehealth (telepractice).



Since implementation of the doctoral degree in audiology as the entry-level credential, the provisional audiology license was eliminated. Audiologists are generally enrolled in a 4-year program, and that fourth year comprises of an externship comparable to the clinical fellowship. Audiologists who apply for licensure may obtain an audiology license with no supervision mandates as was previously required with a provisional license. Although the current rules (February 2019) specify 1820 clinical practicum hours, the newly promulgated rules will eliminate the specific hour requirement.

Little has changed in the original application process except that a criminal background check will be required prior to the processing of the application. University programs have been furnished with suggestions for obtaining the background check. What is new in the application process is the application for telehealth registration. Individuals who hold an active license in speech-language pathology or audiology may apply for registration to provide services by telepractice, provided they meet the requirements as specified in the rules.

The fee structure has changed somewhat although there has been no increase in fees for initial licensure and for renewals. A separate fee will be assessed for telehealth registration, and the delinquent renewal dates have been modified. Modifications have been made to the continuing education requirements, specifically related to acceptable continuing education activities such as workshops and in-services.

Changes to the supervision requirements have been implemented with specific mandates for direct and indirect (terminology changed from on-site in-view and alternative) supervision activities. Form 200, utilized for SLP Assistant and Provisional SLP Assistant supervision, has been updated and is available on the web site. The actual amount of supervision for both categories of assistants has not changed. Special attention is requested regarding duties outside the scope of practice for SLP Assistants and Provisional SLP Assistants.

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REVISIONS TO LBESPA LAW AND RULES

Assistants cannot conduct evaluations and interpret test results, even under supervision, nor can they engage in service delivery via telepractice. A clarification specific to duties outside the scope for an assistant will be delineated in the rules to be adopted later this summer.

No significant changes were made to the Impaired Practitioner Program or to the disciplinary proceedings. The Code of Ethics has undergone a major revision, and licensees are encouraged to read this document in its entirety. Categories specific to each principle in the Code of Ethics are included as a separate attachment.

Licensees are encouraged to log on to the LBESPA web site at www.lbespa.org for a complete copy of the rules and regulations and also the law. As soon as the revisions and clarifications to the rules have been promulgated later this summer, that document will be uploaded to the web site. Please contact the Board office if there are questions concerning either the law or the rules and regulations. LBESPA thanks you for your continuing efforts to protect the consumers of our services.

Did you know that LBESPA has updated Supervision Form 200?

Erica A. Chatelain, M.Ed., L-SLP

Supervision Form 200 for the Speech-Language Pathology Assistant and Provisional Speech-Language Pathology Assistant has been updated and is now a one page form! We hope this change makes the form more user friendly! You can find the new form on the LBESPA website (www.lbespa.org).

Since we have a new form, please take this opportunity to also refresh yourself on the Supervision Requirements for SLPA's and Provisional SLPA's.

Speech-Language Pathology Assistant Full-Time and Part-Time Supervision Requirements

Hours Worked	Required Direct Supervision	Required Indirect Supervision
21-40 hours	1 hour/week	1 hour/week
20 hours or less	1 hour/every 2 weeks	1 hour/every 2 weeks

Supervision Requirements for the Provisional Speech-Language Pathology Assistant

1. A minimum of three clock hours of direct supervision shall be completed in the primary work setting each week for each licensee. If the provisional speech-language pathology assistant is employed in more than one work setting, additional direct supervision must occur in the secondary work setting.
2. A minimum of two clock hours of indirect supervision shall be completed each week for each licensee.

Please remember that supervisory records, including supervision logs and other documentation of supervision (should include supervisory visits with date, time, content, etc), shall be maintained by both the supervisor and supervisee for a period of three years. Documentation of supervision may be requested by the board. (131.L) The Board also recommends that the Supervision Form 200s be filled out as supervision occurs on a weekly basis or at a minimum, that they be completed on a monthly basis, to ensure accuracy. The Board also recommends shading in Saturdays and Sundays on the Forms 200s. Also, if no therapy is done for a certain week, write that across the week and include the reason, for example "LEAP Testing/No Tx".



**"On-Site In-View"
and "Alternative"
supervision terminology
has been changed to
"Direct" and "Indirect"
supervision.**



Telehealth

Annette E. Hurley, Ph.D., L-AUD

The World Health Organization (WHO) (2010) has defined telemedicine and telehealth as “The delivery of health care services, where distance is a critical factor, by all health care professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation and for the continuing education of health care providers, all in the interest of advancing the health of individuals and their

communities.” LBESPA defines telehealth as “a mode of delivering audiology and speech-language pathology services that utilizes information and communication technologies to enable the diagnosis, consultation, treatment, education, care management, and self-management of clients at a distance from the audiologist or speech-language pathologist provider. Telehealth allows services to be accessed when providers are in a distant site and patients are in the originating site. Telehealth facilitates self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.”

During the past few years, the use of telehealth has expanded a way to provide services for audiology and speech-language pathology. The current literature reports growth in telemedicine and its application and use for audiologists and speech-language pathologists.

In February 2019, the new Rules and Regulations were promulgated to include Telehealth Registration as an option rather than licensure for telepractice. Louisiana state licensure is required for any in-state practitioners who are practicing audiology or speech-language pathology by telehealth. If a provider is out-of-state, but providing services in Louisiana, the practitioner may obtain a Louisiana license, or opt to apply for Telehealth Registration. Telehealth registration is only available to licensees who do not require supervision and hold an unrestricted and unencumbered current license granted in the home state based on standards at least equivalent to those in Louisiana. The initial application fee for telehealth registration is \$50 and can be renewed for \$25 prior to June 30th.

What are the differences in registration and licensure? Licensure is the process by which the State of Louisiana grants permission for an individual to engage in the practice of audiology or speech-language pathology. Registration for telehealth ensures the individual currently holds an active and unrestricted professional license in audiology or speech-language pathology in another state (referred to as the home state) requiring similar qualifications. Louisiana is 1 of 14 states that allows telepractice with the appropriate licensure or registration in which the service is rendered and delivered.

Providers of telehealth services shall be competent in both the types of services provided and the methodology and equipment used to provide the services. Providers of telehealth services must use methods for protecting client information that include authentication and encryption technology. The standard of care shall be the same as if the audiology or speech-language pathology services were delivered face-to-face. It is the responsibility of the provider to determine candidacy and to ensure that the client is comfortable with the technology being utilized.

Continuing education must be completed consistent with the license the individual possesses for the state in which the provider is located. Telehealth registrants residing in states which do not require continuing education for audiologists and/or speech-language pathologists shall complete the annual continuing education requirements specified in Rule 127.

Individuals who hold telehealth registration in Louisiana are only authorized to practice via telepractice. Licensure is required if an individual wishes to practice face-to-face in Louisiana.

KNOW THE CODE! *

Theresa H. Rodgers, MA, CCC-SLP, ASHA Fellow, L-SLP, EdS (LD)

“Ethical dilemmas are a common and difficult part of the practice of speech-language pathology and audiology.” (Anderson & Chabon, 2007)

The topic is a pervasive and sometimes challenging one, applicable to all professionals, practice settings, and types of clients. Resolution of ethical challenges begins with knowledge of applicable codes of ethics as well as recognition of the dilemma.

The LBESPA Code of Ethics was revised effective February 20, 2019. Two separate codes continue to exist – (§701.E.) one for audiologists, speech-language pathologists, provisional speech-language pathologists, restricted speech-language pathologists and telepractice registrants, and (§701.F.) one for speech-language pathology assistants and provisional speech-language pathology assistants. New rules as well as edits to already-existing rules address: interprofessional collaboration, supervision, informed consent, technology, impaired practitioner, patient/client abandonment, research conduct, administrative/supervisory roles, conflict of interest, disclosures, reporting members of other professions, and self-reporting.

A document has been developed to assist licensees in the review, study, and ultimately application of the revised Codes in daily practice. The document can be found in the attachment. It serves to capture the focus of each of the Principles and Rules of Ethics.

It is incumbent upon each audiologist, speech-language pathologist, and assistant to conduct oneself in an ethical manner whether faced with a straightforward dilemma or one involving practice constraints and multiple considerations. Reaching the best possible outcome in all situations begins with *knowing the Code*.

*Training in the area of ethics can be requested by contacting the LBESPA office.

Anderson, N. & Chabon, S. (2007). Providing ethically responsible services to children from culturally and linguistically diverse backgrounds. Seminar presented at ASHA Schools Conference, Pittsburgh, Pennsylvania.



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Louisiana Board of Examiners for



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LBESPA Code of Ethics (Modified Format for Training Purposes)

§701. Preamble

A. The CODE OF ETHICS of the Louisiana Board of Examiners for Speech-Language Pathology and Audiology specifies professional standards that govern clinical and scientific practice, direct professional conduct, provide for proper implementation of professionals' responsibilities to those served, and ensure the welfare of the consumer.

B. ANY ACTION THAT VIOLATES THE INTENT AND PURPOSE OF THIS CODE SHALL BE CONSIDERED UNETHICAL. Although the Code of Ethics cannot be inclusive of all specific situations, failure to delineate any particular responsibility or practice in this Code of Ethics shall not be construed as denial of the existence of such responsibilities or practices.

C. PRINCIPLES OF ETHICS FORM THE UNDERLYING MORAL BASIS FOR THE CODE OF ETHICS. Individuals shall observe these principles as affirmative obligations under all conditions of professional activity.

D. RULES OF ETHICS ARE SPECIFIC STATEMENTS OF MINIMALLY ACCEPTABLE AS WELL AS UNACCEPTABLE PROFESSIONAL CONDUCT which are applicable to all individuals.

E. Rules of Ethics for Audiology, Speech-Language Pathology, Provisional Speech-Language Pathology, and Restricted Speech-Language Pathology Licensees

1. PRINCIPLE OF ETHICS I. RESPONSIBILITY TO PERSONS SERVED PROFESSIONALLY. Licensees shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, provide professional services with honesty and compassion, and respect the rights of those served. The licensee shall take all reasonable precautions to avoid harm to the individual served professionally.

a. COMPETENCE. Individuals shall provide all clinical services and scientific activities competently.

b. USE OF RESOURCES/REFERRAL. Individuals shall use every resource, including interprofessional collaboration and referral when applicable, to ensure that appropriate service is provided.

c. DISCRIMINATION. Individuals shall not discriminate in the delivery of professional services or in the conduct of research and scholarly activities on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

d. MISREPRESENTATION OF CREDENTIALS. Individuals shall not misrepresent their credentials nor those under their supervision including aides, assistants, technicians, other support personnel, students, research interns, or individuals completing the postgraduate professional employment/experience, and they shall fully inform those they serve professionally of the name, role, and credentials of persons providing services.

e. DELEGATION OF TASKS. Individuals may delegate tasks related to the provision of clinical services to students, aides, assistants, technicians, or other support personnel only if those persons are adequately trained and appropriately supervised. The responsibility for the welfare of those served remains with the fully licensed individual.

f. DELEGATION OF TASKS. Individuals shall not delegate tasks that require the unique skills, knowledge, judgment or credentials that are within the scope of practice of their profession to aides, assistants, technicians, other support personnel or nonprofessionals over whom they have supervisory authority.

g. FULLY INFORMED CONSENT. Individuals shall obtain consent from the persons they serve only after a description of and discussion about the nature and possible risks and effects of services to be rendered, technology to be employed, and products to be dispensed. Consumers shall also be informed about possible effects of not engaging in treatment or following clinical recommendations. When the consumer is incapable of providing informed consent, individuals should seek authorization from a legally authorized/appointed representative or family member.

h. INFORMED CONSENT. Individuals shall enroll and include persons as participants in research only if participation is voluntary, without coercion, and with informed consent.

i. ACCURATE REPRESENTATION OF SERVICE/PRODUCT/RESEARCH. Individuals shall accurately represent the intended purpose of a service, product, or research endeavor and shall abide by established standards for clinical practice and the responsible conduct of research.

j. EVALUATION OF SERVICES/TECHNOLOGY/PRODUCTS. Individuals shall evaluate the effectiveness of services rendered, technology employed, and products dispensed and shall provide services or dispense products only when benefits can reasonably be expected.

k. GUARANTEE OF RESULTS. Individuals shall not guarantee, directly or by implication, the results of any treatment or procedure; however, they may make a reasonable statement of prognosis.

l. INDEPENDENT EVIDENCE-BASED DECISIONS. Individuals shall use independent and evidence-based clinical judgment, keeping paramount the welfare of those served.

m. SERVICES VIA CORRESPONDENCE ONLY. Individuals shall not provide clinical services solely by correspondence but may provide services via telepractice consistent with professional standards and state and federal regulations.

n. CONFIDENTIALITY. Individuals shall protect the confidentiality of any professional or personal information about persons served professionally or participants involved in research and scholarly activities, and may disclose confidential information only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

o. CONFIDENTIALITY AND SECURITY OF RECORDS. Individuals shall protect the confidentiality and security of records of professional services rendered, research and scholarly activities conducted, and products dispensed. Access to these records shall be allowed only when doing so is necessary to protect the welfare of the person or of the community, is legally authorized, or is otherwise required by law.

p. MAINTENANCE OF RECORDS/ACCURATE BILLING. Individuals shall maintain timely records and accurately record and bill for services provided and products dispensed, and shall not misrepresent services rendered, products dispensed, or research and scholarly activities conducted.

q. IMPAIRED PRACTITIONER. Individuals whose professional practice is adversely affected by substance abuse or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.

r. REPORTING OF IMPAIRED PRACTITIONER. Individuals who have knowledge a practitioner is unable to provide professional services with reasonable skill and safety shall report this information to the appropriate authority including the licensure board.

s. PATIENT/CLIENT ABANDONMENT. Individuals shall provide reasonable notice and information about alternatives for obtaining care in the event that the individual can no longer provide professional services.

2. **PRINCIPLE OF ETHICS II. RESPONSIBILITY FOR ONE'S PROFESSIONAL COMPETENCE.** Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance consistent with prevailing practice standards.

a. **COMPETENCE.** Individuals shall engage in only those aspects of the professions that are within the scope of their practice and competence, considering their level of licensure, registration, education, training and experience.

b. **COMPLIANCE WITH RESEARCH STANDARDS.** Individuals who engage in research shall comply with institutional, state, and federal regulations that address any aspects of research.

c. **PROFESSIONAL DEVELOPMENT/CONTINUING EDUCATION.** Individuals shall enhance and refine their professional competence and expertise through engagement in lifelong learning applicable to their professional activities and skills.

d. **ADMINISTRATIVE/SUPERVISORY ROLES.** Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct research activities that exceed their competence, education, training, experience, and licensure status.

e. **ADMINISTRATIVE/SUPERVISORY ROLES.** Individuals in administrative or supervisory roles shall not require or permit their professional staff to provide services or conduct clinical activities that compromise their independent and objective professional judgment.

f. **USE OF TECHNOLOGY/INSTRUMENTATION.** Individuals shall make use of technology and instrumentation consistent with accepted professional practice guidelines and shall ensure that all technology and instrumentation use to provide services or to conduct research and scholarly activities are in proper working order and are properly calibrated. When such technology is not available, and appropriate referral should be made.

3. **PRINCIPLE OF ETHICS III.** Individuals shall honor their **RESPONSIBILITY TO THE PUBLIC** when advocating for communication, swallowing, and vestibular needs of the public, and shall provide accurate information involving any aspect of the professions.

a. **MISREPRESENTATION OF CREDENTIALS, ETC.** Individuals shall not misrepresent their credentials, competence, education, training, experience, or scholarly contributions.

b. **CONFLICT OF INTEREST.** Individuals shall avoid engaging in conflicts of interest whereby personal, financial, or other considerations have the potential to influence or compromise professional judgment and objectivity.

c. **MISREPRESENTATION OF SERVICES/PRODUCTS/RESEARCH.** Individuals shall not misrepresent research and scholarly activities, diagnostic information, services rendered, results of services provided, products dispensed, or the effects of products dispensed.

d. **FRAUD.** Individuals shall not defraud through intent, ignorance, or negligence, or engage in any scheme to defraud in connection with obtaining payment, reimbursement, or grants and contracts for services provided, research conducted, or products dispensed.

e. **ACCURATE, COMPLETE STATEMENTS TO THE PUBLIC.** Individuals' statements to the public shall provide accurate and complete information about the nature and management of communication disorders, about the professions, about professional services, about products, and about research and scholarly activities.

f. **ACCURATE STATEMENTS TO THE PUBLIC** Individuals' statements to the public shall adhere to prevailing

professional norms and shall not contain misrepresentations when advertising, announcing and promoting their professional services and products or when reporting research results.

g. FALSE STATEMENTS/COMPLETION OF MATERIALS. Individuals shall not make false statements regarding areas of professional practice and shall complete all materials honestly and without omission.

4. **PRINCIPLE OF ETHICS IV. RESPONSIBILITY TO THE PROFESSIONS**. Individuals shall uphold the dignity and autonomy of the professions, maintain harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

a. WORKING COLLABORATIVELY. Individuals shall work collaboratively, when appropriate, with members of one's own profession and members of other professions to deliver the highest quality of care.

b. Individuals shall exercise INDEPENDENT PROFESSIONAL JUDGMENT in recommending and providing professional services when an administrative mandate, referral source, or prescription prevents keeping the welfare of persons served paramount.

c. Individuals' STATEMENTS TO COLLEAGUES about professional services, research results, and products shall adhere to prevailing professional standards and shall contain no misrepresentations.

d. Individuals SHALL NOT ENGAGE IN ANY FORM OF CONDUCT THAT ADVERSELY REFLECTS ON THE PROFESSIONS or on the individual's fitness to serve persons professionally.

e. Individuals shall not engage in DISHONESTY, NEGLIGENCE, FRAUD, DECEIT, OR MISREPRESENTATION.

f. APPLICANTS for licensure or registration, AND INDIVIDUALS MAKING DISCLOSURES SHALL NOT MAKE FALSE STATEMENTS and shall complete all application and disclosure materials honestly and without omission.

g. Individuals shall not engage in any form of HARASSMENT, POWER ABUSE, OR SEXUAL HARASSMENT.

h. Individuals shall not engage in SEXUAL ACTIVITY with students, patients/clients, research participants, speech-language pathology assistants, aides, or licensees over whom they exercise professional authority or power.

i. SUPERVISEE VIOLATING STATUTE, RULES, CODE OF ETHICS. Individuals shall not allow anyone under their supervision to engage in any practice that violates any provision of the practice act or Rules and Regulations including the Code of Ethics.

j. CREDIT FOR AUTHORSHIP. Individuals shall assign credit only to those who have contributed to a publication, presentation, protocol, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

k. PLAGIARISM, MANDATORY REFERENCING OF SOURCES/IDEAS/RESEARCH/ PRESENTATIONS/ PRODUCTS. Individuals shall not engage in plagiarism and shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.

l. DISCRIMINATION IN PROFESSIONAL RELATIONSHIPS. Individuals shall not discriminate in their relationships with colleagues, assistants, other support personnel, students, and members of other professions and disciplines on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

m. Individuals shall COMPLY WITH LOCAL, STATE, AND FEDERAL LAWS AND REGULATIONS applicable to professional practice, research ethics, and the responsible conduct of research.

n. Individuals shall INFORM THE BOARD OF ANY VIOLATIONS of the practice act and the Rules and Regulations including the Code of Ethics.

o. Individuals shall COOPERATE FULLY WITH THE BOARD on matters of professional conduct relative to the practice act and the Rules and Regulations including the Code of Ethics, and shall not make false statements of fact or withhold relevant facts necessary to fairly adjudicate complaints.

p. MANDATORY SELF-REPORTING OF SANCTIONS OR DENIAL OF CREDENTIAL. Individuals who have been publicly sanctioned or denied a license, registration, or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying the Board in writing within thirty (30) days of the final action or disposition. Such written notification shall consist of a certified copy of the final action, sanction, or disposition.

q. MANDATORY SELF-REPORTING OF CONVICTION. Individuals who have been convicted, been found guilty, or entered a plea of nolo contendere to any misdemeanor involving dishonesty, physical harm or the threat of physical harm to the person or property of another, or any felony, shall self-report by notifying the Board in writing within thirty (30) days of the conviction, plea, or finding of guilt. Such written notification shall consist of a certified copy of the conviction, plea, nolo contendere record, or minute/docket entry.

F. Rules of Ethics for Speech-Language Pathology Assistant and Provisional Speech-Language Pathology Assistant Licensees

1. **PRINCIPLE OF ETHICS I**. Licensees shall honor their RESPONSIBILITY TO HOLD PARAMOUNT THE WELFARE OF PERSONS THEY SERVE or who are participants in research and scholarly activities, provide services with honesty and compassion, and respect the rights of those served. The licensee shall take all reasonable precautions to avoid harm to the individual served.

a. COMPETENCE/PRESCRIPTION BY SUPERVISING SLP. Individuals shall provide clinical services and scientific activities competently and engage only in those activities prescribed by the supervising speech-language pathologist.

b. DISCRIMINATION. Individuals shall not discriminate in the delivery of services or in the conduct of research and scholarly activities on the basis of race, ethnicity, citizenship, sex, gender, identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language, or dialect.

c. MISREPRESENTATION OF CREDENTIALS. Individuals shall not misrepresent their credentials and shall fully inform those they serve of their name, role, and credentials.

d. SERVICE PROVISION OUTSIDE SCOPE OF PRACTICE/WITHOUT APPROVAL OF SUPERVISING SLP. Individuals shall not provide services via telepractice, interpret test or assessment results, guarantee results, make referrals, discharge patients/clients, provide patient/client or family counseling, nor perform clinical tasks without the knowledge and approval of the supervising speech-language pathologist.

e. CONFIDENTIALITY. Individuals shall protect the confidentiality of clinical or personal information about persons served or participants involved in research and scholarly activities and shall not disclose confidential information orally or in writing to anyone not designated by the supervising speech-language pathologist and without the authorization of the patient/client or their designee.

f. CONFIDENTIALITY AND SECURITY OF RECORDS. Individuals shall protect the confidentiality and security of records of services rendered, research and scholarly activities conducted, and products dispensed. Access to these records shall not be allowed unless directed by the supervising speech-language pathologist.

g. MAINTENANCE OF RECORDS/MISREPRESENTATION OF SERVICES. Individuals shall maintain timely and adequate records of services rendered, shall not charge for services not rendered, and shall not misrepresent services rendered, or research and scholarly activities conducted.

h. IMPAIRED PRACTITIONER. Individuals whose services are adversely affected by substance abuse or other health-related conditions are impaired practitioners and shall seek professional assistance and, where appropriate, withdraw from the affected areas of practice.

i. REPORTING OF IMPAIRED PRACTITIONER. Individuals who have knowledge that a licensee is unable to provide services with reasonable skill and safety shall report this information to the appropriate authority including the licensure board.

2. **PRINCIPLE OF ETHICS II. RESPONSIBILITY FOR COMPETENCE AND PERFORMANCE**. Individuals shall honor their responsibility to achieve and maintain the highest level of competence and performance.

a. SERVICE PROVISION WITHIN SCOPE OF PRACTICE. Individuals shall engage in only those aspects of service provision that are within the scope of their practice and competence, considering their level of licensure, education, training and experience.

b. QUALIFICATIONS. Individuals shall hold the appropriate qualifications for the area(s) in which they are providing services. Individuals shall engage in lifelong learning throughout their careers.

c. SUPERVISION REQUIRED. Individuals shall not provide services unless appropriately supervised.

d. PREPARATION FOR SERVICE PROVISION. Individuals shall not provide services for which the licensee has not been properly prepared.

e. USE OF TECHNOLOGY/INSTRUMENTATION. Individuals shall utilize technology and instrumentation as directed by the supervising speech-language pathologist, ensuring that proper working order is maintained and calibration has been established.

3. **PRINCIPLE OF ETHICS III. RESPONSIBILITY TO THE PUBLIC** by providing accurate information in all communications.

a. MISREPRESENTATION OF CREDENTIALS, ETC. Individuals shall not misrepresent their credentials, competence, education, training or experience.

b. CONFLICT OF INTEREST. Individuals shall not participate in professional activities that constitute a conflict of interest.

c. MISREPRESENTATION OF SERVICES/RESEARCH. Individuals shall not misrepresent research and scholarly activities, services rendered or any information, or engage in any scheme or maneuver to defraud in connection with obtaining payment or reimbursement for services.

d. FALSE STATEMENTS/COMPLETION OF MATERIALS. Individuals shall not make false statements regarding areas of practice and shall complete all materials honestly and without omission.

4. **PRINCIPLE OF ETHICS IV. RESPONSIBILITY TO THE PROFESSIONS**. Individuals shall honor their responsibilities and their relationships with colleagues and members of other professions and disciplines. Individuals shall maintain harmonious interprofessional and intraprofessional relationships and accept the standards delineated for assistants.

a. Individuals' STATEMENTS TO COLLEAGUES about services, research, or products shall adhere to prevailing standards and contain no misrepresentations.

b. Individuals shall not engage in DISHONESTY, NEGLIGENCE, FRAUD, DECEIT, OR MISREPRESENTATION.

c. APPLICANTS for licensure and INDIVIDUALS MAKING DISCLOSURES SHALL NOT MAKE FALSE STATEMENTS and shall complete all application and disclosure materials honestly and without omission.

d. Individuals shall not engage in any form of HARASSMENT, POWER ABUSE, OR SEXUAL HARASSMENT, or any other form of conduct that adversely reflects on service delivery or on the individual's fitness to serve persons.

e. Individuals shall not engage in SEXUAL ACTIVITY with a patient/client or research participant.

f. CREDIT FOR AUTHORSHIP. Individuals shall assign credit only to those who have contributed to a publication, presentation, protocol, process, or product. Credit shall be assigned in proportion to the contribution and only with the contributor's consent.

g. PLAGIARISM, MANDATORY REFERENCING OF SOURCES/IDEAS/RESEARCH/ PRESENTATIONS/ PRODUCTS. Individuals shall not engage in plagiarism and shall reference the source when using other persons' ideas, research, presentations, or products in written, oral, or any other media presentation or summary.

h. DISCRIMINATION IN PROFESSIONAL RELATIONSHIPS. Individuals shall not discriminate in their relationships with colleagues and members of other professions and disciplines on the basis of race, ethnicity, citizenship, sex, gender identity/gender expression, sexual orientation, age, religion, national origin, disability, culture, language or dialect.

i. Individuals shall COMPLY WITH LOCAL, STATE, AND FEDERAL LAWS AND REGULATIONS applicable to practice and research.

j. Individuals shall INFORM THE BOARD OF ANY VIOLATIONS of the practice act or the Rules and Regulations including the Code of Ethics.

k. Individuals shall COOPERATE FULLY WITH THE BOARD of matters of professional conduct relative to the practice act or the Rules and Regulations including the Code of Ethics and shall not make false statements of fact or withhold relevant facts necessary to fairly adjudicate complaints.

l. MANDATORY SELF-REPORTING OF SANCTIONS OR DENIAL OF CREDENTIAL Individuals who have been publicly sanctioned or denied a license or a professional credential by any professional association, professional licensing authority or board, or other professional regulatory body shall self-report by notifying the Board in writing within (30) days of the final action or disposition.

m. MANDATORY SELF-REPORTING OF CONVICTION. Individuals who have been convicted, been found guilty, or entered a plea of nolo contendere to any misdemeanor involving dishonesty, physical harm or the threat of physical harm to the person or property of another, or any felony, shall self-report by notifying the Board in writing within thirty (30) days of the conviction, plea, or finding of guilt. Such written notification shall consist of a certified copy of the conviction, plea, nolo contendere record, or minute/docket entry.

AUTHORITY NOTE: Promulgated in accordance with R.S. 37:2650 et seq.

HISTORICAL NOTE: Promulgated by the Department of Health and Hospitals, Board of Examiners for Speech-Language Pathology and Audiology, LR 17:370 (April 1991), amended LR 22:360 (May 1996), LR 30:2324 (October 2004), LR 33:2201 (October 2007), LR 37:2399 (August 2011), LR 39:1044 (April 2013), amended by the Department of Health, Board of Speech-Language Pathology and Audiology, LR 45:266 (February 2019).