President's Message - Strengthening Our Resolve

It is too early to talk about New Year’s resolutions, but it is never too early to think about resolve. Resolve helps us in our personal and professional lives, especially when it comes to leadership in our respective state associations.

Look up the word resolve in a dictionary and you will find that it means figuring out a way to untie a knot, answering a mathematical problem, committing to a pre-defined course of action and—in its most basic sense—following through on a decision that one has made in earnest.

What is consistent among these different definitions? There is a course of action that requires completion. I see at least three commonalities across the definitions:

1. **Resolutions require commitment**: I have to decide upon a course of action and begin to walk the path that leads to its completion. What am I willing to do? Is what I am willing to do consistent with the original resolution? Commitment is easier when there are definable and measurable goals.

2. **Resolutions require measurement**: I have to be able to prove that I am walking the course so that others can confirm it in a quantifiable way. Vague commitments have no meaning. How are my goals measurable? Measurement is easier when there are others who can hold me accountable to my goals.

3. **Resolutions require accountability**: I have to have a network of supporters who will help me as I walk the course. How—and by whom—am I held accountable as a professional? Accountability is easier when everyone is committed to the same goal.

These three commonalities are integral parts to being committed, and they require support from others. That support comes not only from family and friends, but also from the guild of professionals within our discipline.

As a state association leader, what are you resolved to do? How do you strengthen your resolve when it starts to weaken? Who do you include in your support system? Don’t forget to include CSAP. We all can be committed together.

Douglas F. Parham
Douglas F. Parham, PhD, CCC-SLP
CSAP President
The Benefits of Professional Association Membership

Given the number of responsibilities that you juggle on a daily basis, joining a professional organization may not be one of your top priorities. After all, what speech-language pathologist or audiologist has time for more meetings and activities? But such thinking can cause you to miss out on the numerous benefits that membership in your professional association offers. You will make valuable professional contacts and gain access to a wealth of useful information.

Exclusive Online Resources
The Mississippi Speech-Language-Hearing Association (MSHA) website has a “members-only” section that provides access to a variety of professional information, as well as online CEU courses that may not be open to the general public. Some feature content on a variety of topics, advancing your career or boosting your technology expertise.

Networking Opportunities
When you join the MSHA professional organization, you’ll deepen existing business relationships and make new contacts on a regular basis. Such networking goes beyond the exchange of business cards – as you attend periodic meetings, become active on a committee or take a prominent leadership role, you’ll forge lasting ties with others who have common professional interests and similar business concerns. These relationships will be a rich, ongoing source of inspiration and ideas.

Education
MSHA offers their members the chance to update their knowledge of business and trade basics or acquire new therapy skills through seminars, workshops, break-out sessions at conferences and online courses. Typical subject matter can run the gamut from new billing requirements to IEP changes in the school system.

Conferences and Seminars
MSHA members are given priority registration for the MSHA Convention and receive discounts on convention fees or special rates on related expenses, such as hotel reservations.

Support Systems
MSHA members can often take advantage of mentoring relationships with more experienced professionals who provide guidance and useful insights. Even on an informal basis, such relationships can be a source of answers and solutions when you’re facing a challenging situation in your field. At the very least, the feeling that you have a support network behind you can boost your confidence when problems arise.

Political Clout
MSHA has committees to track federal and state legislative developments that will have an impact on our industry. MSHA has a significant political presence that far exceeds that of individual members. MSHA enables you to tap into the association’s political influence and resources.

Civic Leadership
As an individual, you may not have the time or resources to sponsor a charitable event, partner with an educational institution or otherwise participate in community activities. However, MSHA is active in civic and philanthropic ventures which helps you become involved in many worthwhile projects. MSHA contributes to their communities in a variety of ways.

Joining MSHA is beneficial for your own professional development and the future of your profession. The connections you’ll make, the resources made available to you and the ideas and advice you’ll discover represent an outstanding return on what amounts to a modest, manageable investment of time and effort. It could turn out to be one of the best things you could do for yourself and your profession.

Edie Jones
VP PR & Marketing
Mississippi Speech-Language-Hearing Association
Do we behave ethically out of a desire to do what is right or out of a fear of punishment? For most of us, the answer is “both.” Ethics is all about being personally strong enough to take responsibility for our actions and the actions we observe in our workplace. In any work setting, a high level of personal integrity builds an atmosphere or culture that can help a company thrive. Being responsible can inspire others, creating a culture of ethical behavior. Conversely, avoiding responsibility sets a model for others that can be contagious, degrading the level of the ethical atmosphere. When we avoid responsibility, we are in effect trying to dump the burden of responsibility onto someone else.

Ethical behavior includes being responsible to observe what happens around us. Most of us would report a blatantly illegal activity to authorities, but many times we look the other way when we notice “merely” unethical behavior. Why is that? Below are some reasons that speech-language pathologists and audiologists may have for being unwilling to confront unethical actions. The list is not all-inclusive. Please feel free to add your own ideas.

1. We surely belong to a “live and let live” culture. If I don’t hold the other person to a high standard, I won’t be bothered if I sometimes “slide by.”

2. It would be uncomfortable. Few of us are willing to take the responsibility to call unethical behavior to the offender’s or a supervisor’s attention—that would mean confrontation. If I don’t get involved it will be more peaceful.

3. There is though a subtle motivation that actually stems from concern for the offender and their dependents. It is the underlying assumption that the offender’s license will be lost. I don’t want to be responsible for putting someone out of work. This reason circles back to the first. If someone reports me for something, I’ll lose my CCC and my license.

If an issue cannot be resolved by talking it over at the work site, the individual should be formally reported to ASHA and the Illinois Department of Financial and Professional Regulation (IDFPR). The ASHA and AAA Codes of Ethics are incorporated into our Practice Act, but being reported does not necessarily result in the loss of CCC and/or license. The loss of the CCC and loss of license to practice are rare and reserved for the most serious cases.

When incidents are reported to ASHA or the IDFPR, some complaints are dismissed for lack of merit. For those that go forward, the accused individuals (respondents) are given ample opportunities to present their side of the issue. There is a continuum of discipline that can be imposed by ASHA and IDFPR. At the state level there is often a fine, but the goal of this process is to promote ethical behavior in order to protect all concerned. The respondents may simply be directed to stop whatever action they were doing.

Other disciplines may be to limit the scope or extent of practice or to suspend the CCC or license for a period of time. Respondents may be required to seek needed medical/professional help for themselves. Increasingly, respondents are required to take continuing education hours on specific topics. Consequences may be kept confidential or publicized, depending on the situation.

Hopefully, this article will generate conversations that will raise the level of personal ethical responsibility and reduce resistance to dealing with inappropriate behavior.

Celeste Kobulnicky, MS, CCC-SLP
Illinois
The Journey or the Destination?

We have all heard some variant of the quote “It’s about the journey, not the destination.” The origin of the quote is highly disputed (http://quoteinvestigator.com/2012/08/31/life-journey/) and I will leave it to you to explore its origin. Regardless of where the quote originated, it is the quote’s message that is important to consider.

A focus on the “journey” is actually considered radical, meaning both novel and controversial. A recent article in Sports Illustrated describes how a successful NCAA football coach, the University of Alabama’s Nick Saban, and his protégés focus on the “process,” defined as “concentrating on the steps to success rather than worrying about the end result.” (Andy Staples, The Sabanization of College Football, Sports Illustrated, August 20, 2012; page 54). In short, the “process” means that each football player should not focus on winning the national championship, but on winning each play of each game.

This is not to say that end results are not important. Case in point: for our communication sciences and disorders (CSD) students, graduation is the goal. I understand this fact. I speak constantly in my courses about how students’ grades are their most important “currency.” I define “currency” as that which we as individuals use to navigate a specific situation with a reasonable and calculated measure of success. You cannot buy a loaf of bread without money in your wallet or—if you have no money—the ability to barter for it. CSD students need grades, clinical fellows and AuD students on externships need hours and we professionals need successful outcomes for our clients.

As speech-language pathologists (SLP) and audiologists, we have our eyes on some end result. We write goals based on our expectations of a client’s ultimate outcomes. We work to assist a client in reaching those outcomes. We focus on the future, relying on our confidence in our client’s present progress to facilitate goal achievement. But does our expectation on meeting future goals prevent us from appreciating the present moment that we can recognize only in hour-by-hour or minute-by-minute reflection? In other words, as speech-language pathologists and audiologists, we are rightly focused on end-result outcomes; however, in our effort and desire to meet them, do we miss out on celebrating daily accomplishments and victories that have little to do with the formal plan of care?

I work pro re nata (PRN) in several skilled nursing facilities in Sedgwick County, Kansas. The truth is that I merely serve as a placeholder for the highly skilled SLPs for whom I provide occasional assistance. In my role as a PRN SLP, I have the luxury of walking into a clinical situation, providing clinical services, reporting what the client and I did and passing off the “journey” to the full-time SLP. This does not mean that I can “wing it” rather, I have flexibility in how I am able to provide clinical services because the clients and residents do not expect to see me again. Do the clients and residents view me as a part of their “journey” or their “destination”? I don’t know the answer.

A Personal Note About a Journey

Because I am an SLP, one thing that I have learned about planning is that things rarely go as planned. This summer, our “planned” family vacation—the first one in four years, excluding our move to Wichita, Kansas in 2008—had been scheduled to take us to three stopovers including the Kansas (http://www.kansastravel.org/littlehouseontheprairie.htm) and Missouri (http://laurainingallswilderhome.com/) connection of the Laura Ingalls Wilder biographical trek, a brief respite in Memphis, Tennessee, which is the birthplace of my immediate family and the return trip to Kansas through Missouri, during which time we had planned to go to Six Flags, visit the St. Louis Arch, and actually accomplish what most people refer to as a break from the normal routine. In short, we had planned a day-by-day agenda, with a designated “destination.”

We left Wichita on July 3. As it turned out, we really enjoyed the Laura Ingalls Wilder leg of the trip. We took many pictures, bought some souvenirs and half-heartedly speculated about the idea of living between the end of the 19th century and the beginning of the 20th century. But we didn’t stay in that moment for very long.

On July 4, we arrived in Memphis and all of us greeted my mother and father in anticipation of spending July 5 with them. At some point after midnight of July 5, my father died. We spent the remainder of the week preparing for my father’s memorial service. What was the “destination?” In my opinion, none of us know what the “destination” is at this time. During daily pauses, we all reveled in joyful and relevant memories of my father’s habits, mannerisms and quirks. And aren’t our family members’ quirks the most interesting things about them?

The experience of losing my father has changed me, hopefully for the better. When I am providing clinical service, I am overwhelmed by the sense that the client or resident is in some way—closely or distantly—related to a family who has some interest in the client’s or resident’s well-being. It is not my place to determine if that interest is genuine, self-serving or both. We all embark—or have embarked—on multiple journeys. One of my “journeys” is to provide quality skilled service, which—hopefully—will be reflected in successful outcomes. What are yours?

This article appeared in its original form in the September-October 2012 issue of the Kansas Speech-Language-Hearing Association Connection. Reprinted by permission of the author.

Douglas F. Parham, PhD, CCC-SLP
CSAP President
A Medicaid Minute

Medicaid and Your State Plan

The saying goes, “If you know Medicaid in one state, you know Medicaid in one state.” Each state implements Medicaid in its own manner and administers its own programs. This creates a great deal of variation between states in what services are covered. Medical necessity is a key ingredient for provided services. States are permitted to set their own parameters on what constitutes medical necessity. However, those parameters may not contradict or be more restrictive than the federal statutory requirement. Each state specifies in their plan whether they follow the federal guidelines for medical necessity or have their own standards. Knowledge of your state’s plan, the amendments and their definition of medical necessity are some of the first steps a state association can take to collaborate with agencies and advocate for membership in this ever-changing health care environment. In order to know what your state covers. Check your state’s Medicaid State Plan. Bookmark ASHA’s Medicaid Toolkit for resources and advocacy information.

This information is brought to you by ASHA’s Committee on Medicaid.

Molly Thompson
Alaska Speech-Language Hearing Association

Plan Ahead

Future CSAP Meetings

2016

Spring
May 13-14
Santa Fe, New Mexico

Fall
November 16
Philadelphia, Pennsylvania

2017

Spring
May 19-20
Biloxi, Mississippi

Fall
November 8
Los Angeles, California

2018

Spring
Watch the CSAP website for information, www.csap.org.

Fall
November 14
Boston, Massachusetts

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Student Call to Action!

Students who get involved at some level of their state Convention and have a positive experience, are more likely to join their state association. Set them on the pathway to becoming a member by getting them involved in:

1. NSSLHA National Office:
   National Student Speech Language Hearing Association
   2200 Research Boulevard #322
   Rockville, MD 20850-3289
   E-mail: nsslha@asha.org

2. Volunteering at Convention
3. Advocacy day
4. Committee members
EBS began as a non-profit organization founded by speech-language pathologists, occupational therapists, physical therapists and special education directors more than 30 years ago. We have remained the global leader of birth to 21 year-old programs and the largest provider of services for the pediatric population.

EBS empowers clinicians to become leaders in their field, while providing the highest-quality services for families and communities around the world. Our mission is to make a difference every day in every life we touch.

The support that our CF Program provides exceeds ASHA and state requirements for obtaining a Certificate of Clinical Competence and professional state license.

EBS understands the importance of mentorship and training. We have assembled a team with years of experience to mentor our clinicians throughout their career with us.

EBS is proud to award scholarships and grants to outstanding second year graduate students and Clinical Fellows.

EBS is dedicated to empowering clinicians to become leaders in their fields, while providing the highest-quality services for families and communities around the world.

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