



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

Schools Survey Report:
SLP Caseload Characteristics Trends
2000–2018

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Introduction

The American Speech-Language-Hearing Association (ASHA) conducted the *2018 Schools Survey* to gather information about professional issues related to school-based services. Results from this survey are presented in a series of reports, including this report on speech-language pathologist (SLP) caseload characteristics trends.

Findings from the 2000, 2004, 2006, 2008, 2010, 2012, 2014, and 2016 *ASHA Schools Surveys* and the 2000 *ASHA Omnibus Survey* are included in this report for comparative purposes. Questions differ among surveys, so data on all topics are not available for all survey years.

Survey Report Highlights

- In 2018, SLPs had a median monthly caseload size of 48—up slightly from 47 in 2012 and the same as in 2014 and 2016.
- From 2000 to 2018, caseload size was lower in special day or residential schools (23–30) and in preschools (37–41) than in other types of schools.
- SLPs in Ohio consistently had among the largest caseload sizes (55–61) from 2000 to 2018. SLPs in New York consistently had among the smallest caseload sizes (30–50).
- In 2016 and 2018, SLPs in the Northeast had smaller caseload sizes (36–38) than did SLPs in other regions of the country.
- From 2014 to 2018, about 90% of SLPs treated students with autism spectrum disorder, language disorders, and speech sound disorders.
- From 2014 to 2018, SLPs' caseloads included a higher number of students with language disorders, reading and writing difficulties, and speech sound disorders than with other disorders.
- From 2014 to 2018, overall, SLPs spent much of their time each week (18–20 hours) in pullout services to students.
- From 2014 to 2018, SLPs in elementary schools spent more time in pullout services per week (20–22 hours) than did SLPs in other types of schools.
- In 2016 and 2018, most SLPs (54%) were required to make up missed sessions with students any time they missed a session for any reason.
- From 2010 to 2018, most SLPs participated in Multi-Tiered System of Supports (MTSS)/Response to Intervention (RtI) or pre-referral. About half of SLPs conducted screenings, provided consultation as a member of the pre-referral team, and offered strategies to classroom teachers.

Caseload Size

In 2018, SLPs had a median monthly caseload size of 48—up slightly from 47 in 2012 and the same as in 2014 and 2016 (see Appendix Table 1). In other words, each SLP treated about 48 different students in a typical month.

Caseload Size, by School Setting

Caseload size differed by school setting. From 2000 to 2018, caseload size was lower in special day or residential schools and preschools than in other school settings (23–30 for special day or residential schools and 37–41 for preschools; see Appendix Table 1).

Caseload Size, by State

Caseload size varied by state. From 2000 to 2018, SLPs in California and Ohio consistently had among the largest caseload sizes (55–60 and 55–61, respectively). SLPs in New York and Missouri consistently had among the smallest caseload sizes (30–50 and 39–50, respectively; see Appendix Table 2).

Caseload Size, by Geographic Region

Caseload size varied by geographic region. In 2016 and 2018, SLPs in the Northeast—especially in the Mid-Atlantic states—had smaller caseload sizes than did SLPs in other regions of the country (see Table 1 and page 10 for a key of geographic regions/divisions and corresponding states).

Table 1. Median monthly caseload size of school-based SLPs, by geographic region and year.

Geographic region	#	
	2016 (n = 1,328)	2018 (n = 1,539)
Northeast	38	36
New England	40	40
Mid-Atlantic	37	35
Midwest	48	49
East North Central	50	50
West North Central	41	43
South	50	50
South Atlantic	50	50
East South Central	55	57
West South Central	50	50
West	52	54
Mountain	52	55
Pacific	48	52

Note. These data are from the 2016 and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time.

Areas of Intervention

SLPs served students in numerous areas of intervention. From 2014 to 2018, about 90% of SLPs served students with autism spectrum disorder, language disorders, and speech sound disorders. About 70% of SLPs served students with fluency disorders (see Appendix Table 3).

From 2014 to 2018, SLPs' caseloads included a higher number of students with language disorders, reading and writing (literacy) difficulties, and speech sound disorders than with other disorders (see Appendix Table 4).

Weekly Activities

From 2014 to 2018, SLPs spent much of their time each week (18–20 hours) in pullout services to students (see Table 2).

Table 2. Number of hours per week that school-based SLPs spend on activities, by year.

Weekly activity	#		
	2014 (<i>n</i> ≥ 989)	2016 (<i>n</i> ≥ 1,033)	2018 (<i>n</i> = 1,423)
Collaborative consultation	—	—	2
Direct intervention: Classroom-based/ integrated services	4	5	7
Direct intervention: Pullout	18	19	20
Services to Section 504 students	< 1	< 1	2
Documentation/paperwork	7	7	—
Medicaid billing	—	2	—
Other indirect activities	4	2	—
MTSS/RtI activities	1	1	2
Diagnostic evaluations (e.g., observation, screening, scoring, analysis)	3	3	4
Technological support (e.g., hearing aids/ cochlear implants, augmentative and alternative communication)	1	1	2
Supervision	1	1	4

Note. These data are from the 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time, worked a maximum of 52 hours per week, and had a caseload size of at least one student. Dash indicates that the item was not included in the survey. MTSS = Multitiered System of Supports; RtI = Response to Intervention.

Weekly Activities, by School Setting

The amount of time spent on activities varied by school setting. From 2014 to 2018, SLPs in elementary schools spent more time in pullout services per week (20–22 hours) than did SLPs in other school settings. SLPs in special day or residential schools and preschools spent the least amount of time per week in pullout services (14–17 hours). (These data are not presented in any table.)

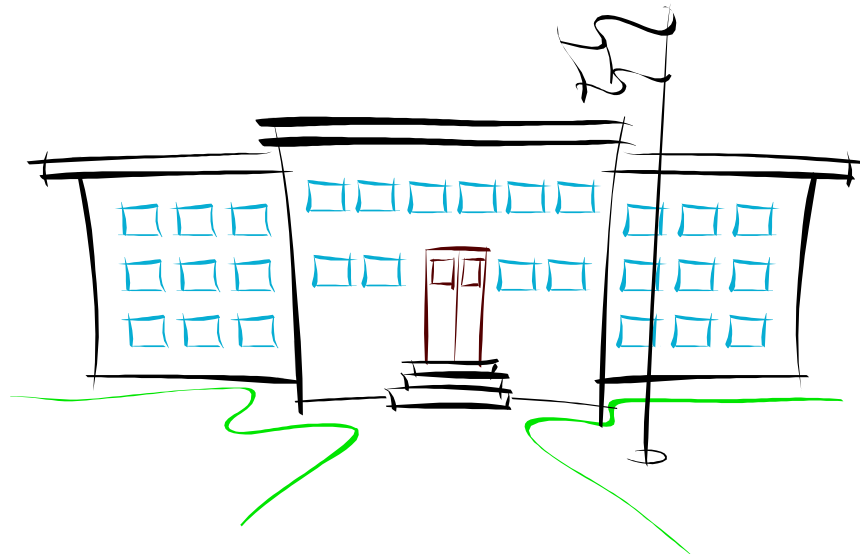
Missed Sessions With Students

In 2016 and 2018, most SLPs (54%) were required to make up missed sessions with students any time they missed a session for any reason. Nearly half of SLPs (40%) were *not* required to make up missed sessions (see Table 3).

Table 3. Percentage of school-based SLPs who are required to make up missed sessions, by circumstance and year.

Circumstance	%	
	2016 (n = 1,597)	2018 (n = 1,864)
I am not required to make up missed sessions.	40	40
When the student misses a session due to an assembly or a classroom activity	12	13
Any time a student misses a session for any reason	8	9
Any time I miss a session for any reason	54	54

Note. These data are from the 2016 and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full or part time. There is not enough evidence from the data to say that the responses varied by school setting.



Role in MTSS/RtI

From 2010 to 2018, most SLPs participated in MTSS/RtI or pre-referral. About half of SLPs conducted screenings, provided consultation as a member of the pre-referral team, and provided strategies to classroom teachers. About one third of SLPs (27%–41%) provided direct services within general education. Fewer than one third of SLPs (23%–32%) did *not* participate in MTSS/RtI or pre-referral (see Table 4).

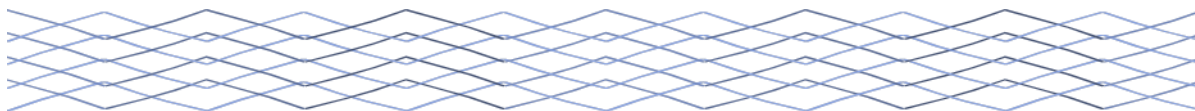
Table 4. Percentage of school-based SLPs participating on MTSS/RtI or pre-referral teams, by role and year.

Role	%				
	2010 (n = 2,198)	2012 (n = 2,202)	2014 (n = 1,517)	2016 (n = 1,597)	2018 (n = 1,864)
Conduct screenings	47	56	60	55	54
Provide consultation as a member of the pre-referral team ^a	52	60	64	55	55
Provide direct services within general education	32	35	41	30	27
Provide strategies to classroom teachers	52	56	61	58	57
Not applicable; I don't participate in MTSS/RtI or pre-referral.	32	26	23	27	28

Note. These data are from the 2010, 2012, 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full or part time. ^aIn the 2010, 2012, and 2014 surveys, this item was *provide consultation*.

Role in MTSS/RtI, by School Setting

Participation in MTSS/RtI or pre-referral varied greatly by school setting. From 2010 to 2018, participation was *most* common in elementary schools and *least* common in special day or residential schools. Fewer than one quarter (13%–24%) of SLPs in elementary schools did *not* participate in MTSS/RtI or pre-referral compared with about three-quarters (67%–85%) of SLPs in special day or residential schools. (These data are not presented in any table.)



Survey Methodology

The survey was mailed in February 2018 to a random sample of 4,500 ASHA-certified SLPs and 500 ASHA-certified audiologists employed in school settings in the United States. The sample was stratified by state. Small groups, such as SLPs and audiologists in Wyoming, were oversampled. A survey notification email was sent at the time of the mailing. Second and third mailings followed, at approximately 3- or 4-week intervals, to individuals who had not responded to earlier mailings.

Response Rates

Of the original 4,500 SLPs in the sample plus four other SLPs who returned surveys without any identifying number, six had incorrect mailing addresses, nine had retired, 29 were employed in other types of facilities, six were not employed in the profession, and four were ineligible for other reasons, which left 4,450 possible respondents. The actual number of respondents was 2,170—a 48.8% response rate.

Past *ASHA Schools Survey* response rates were as follows:

- 2000: 43.0% (*ASHA Schools Survey*); 61.0% (*ASHA Omnibus Survey*)
- 2004: 69.7%
- 2006: 64.9%
- 2008: 64.0%
- 2010: 64.8% (overall); 65.5% (among SLPs)
- 2012: 63.6% (overall); 64.7% (among SLPs)
- 2014: 46.0% (overall); 47.0% (among SLPs)
- 2016: 47.4% (overall); 47.9% (among SLPs)

Suggested Citation

American Speech-Language-Hearing Association. (2018). *Schools survey report: Caseload characteristics trends, 2000–2018*. Available from www.asha.org

Additional Information

Companion reports are available on the ASHA website at www.asha.org/research/memberdata/schoolssurvey/.

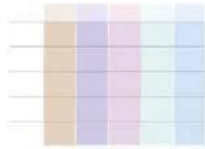
Questions?

For additional information regarding this report or school services generally, please contact Jaumeiko Coleman, director of school services, at jcoleman@asha.org.

Acknowledgment

Without the generous cooperation of the members who participate in our surveys, ASHA could not fulfill its mission to provide vital information about the professions and discipline to the Association membership and public. Thank you!

Appendix



Key of geographic regions/divisions and corresponding states.

Geographic region/division	Corresponding states
Northeast	
New England	CT, ME, MA, NH, RI, VT
Mid-Atlantic	NJ, NY, PA
Midwest	
East North Central	IL, IN, MI, OH, WI
West North Central	IA, KS, MN, MO, NE, ND, SD
South	
South Atlantic	DE, DC, FL, GA, MD, NC, SC, VA, WV
East South Central	AL, KY, MS, TN
West South Central	AR, LA, OK, TX
West	
Mountain	AZ, CO, ID, MT, NV, NM, UT, WY
Pacific	AK, CA, HI, OR, WA

Appendix Table 1. Median monthly caseload size of SLPs, by school setting and year.

School setting	#								
	2000 (n ≤ 519)	2004 (n = 2,052)	2006 (n = 1,772)	2008 (n = 1,721)	2010 (n = 1,749)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,539)
Overall ^a	48	50	50	50	50	47	48	48	48
Special day or residential school	23	25	27	28	28	25	24	30	27
Preschool	40	40	40	40	40	37	41	38	40
Elementary school	50	52	52	50	50	50	50	50	50
Secondary school (middle school, junior high, or senior high)	48	50	55	49	50	48	50	50	48
Combination of the above school settings	48	50	55	50	50	50	52	45	48

Note. These data are from the 2000 ASHA Omnibus Survey and from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^aOverall includes respondents who did not indicate a school setting.

Appendix Table 2. Median monthly caseload size of school-based SLPs, by state and year.

State	#								
	2000 (n = 2,067)	2004 (n = 2,067)	2006 (n = 1,742)	2008 (n = 1,707)	2010 (n = 1,785)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,231)
Alabama	50	n/r	50	n/r	n/r	n/r	n/r	n/r	n/r
Alaska	55	n/r	n/r	n/r	49	n/r	n/r	n/r	n/r
Arizona	55	54	55	57	60	57	n/r	n/r	60
Arkansas	48	40	41	40	40	42	n/r	n/r	40
California	60	58	58	55	55	55	55	55	55
Colorado	60	48	n/r	48	n/r	55	n/r	n/r	n/r
Connecticut	47	42	40	37	40	32	n/r	35	n/r
Delaware	n/r	n/r	50	55	54	n/r	n/r	n/r	n/r
District of Columbia	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r
Florida	64	72	65	46	65	59	60	64	60
Georgia	55	50	46	43	46	45	52	42	43
Hawaii	50	n/r	35	40	40	n/r	n/r	n/r	n/r
Idaho	60	n/r	57	61	58	n/r	n/r	n/r	n/r
Illinois	60	50	55	50	50	48	49	50	49
Indiana	75	74	78	75	80	72	n/r	n/r	76
Iowa	45	50	49	55	50	n/r	n/r	n/r	n/r
Kansas	47	47	n/r	46	45	n/r	n/r	n/r	n/r
Kentucky	62	63	60	65	59	52	n/r	60	60
Louisiana	48	50	n/r	45	46	45	n/r	n/r	n/r
Maine	45	n/r	n/r	n/r	30	n/r	n/r	n/r	n/r
Maryland	60	50	52	45	43	45	47	45	44
Massachusetts	50	45	40	40	43	42	41	40	41
Michigan	55	57	57	55	60	55	58	50	54
Minnesota	40	42	45	45	42	43	n/r	36	38
Mississippi	58	55	55	50	45	n/r	n/r	n/r	n/r
Missouri	50	45	42	48	45	39	40	40	42

(Table continues)

Appendix Table 2. Continued

State	#								
	2000 (n = 2,067)	2004 (n = 2,067)	2006 (n = 1,742)	2008 (n = 1,707)	2010 (n = 1,785)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,231)
Montana	50	n/r	45	43	45	n/r	n/r	n/r	n/r
Nebraska	50	n/r	54	53	55	n/r	n/r	n/r	n/r
Nevada	60	n/r	55	n/r	60	n/r	n/r	n/r	n/r
New Hampshire	40	n/r	n/r	n/r	31	n/r	n/r	n/r	n/r
New Jersey	55	48	46	42	40	40	40	40	40
New Mexico	44	35	40	35	45	n/r	n/r	n/r	n/r
New York	50	35	40	40	32	32	35	31	30
North Carolina	55	45	56	50	47	43	46	48	48
North Dakota	32	n/r	32	33	35	n/r	n/r	n/r	n/r
Ohio	60	55	60	60	61	60	57	55	55
Oklahoma	55	52	54	55	50	50	n/r	n/r	50
Oregon	56	n/r	60	n/r	50	n/r	n/r	n/r	n/r
Pennsylvania	60	60	53	53	60	50	50	50	54
Rhode Island	55	n/r	n/r	n/r	n/r	n/r	n/r	n/r	n/r
South Carolina	60	58	55	n/r	48	50	n/r	n/r	n/r
South Dakota	n/r	n/r	49	40	n/r	n/r	n/r	n/r	n/r
Tennessee	59	n/r	61	57	60	n/r	n/r	n/r	n/r
Texas	60	55	55	50	50	50	50	51	55
Utah	61	n/r	n/r	65	60	n/r	n/r	n/r	n/r
Vermont	40	n/r	30	n/r	31	n/r	n/r	n/r	n/r
Virginia	55	55	55	55	56	53	55	55	49
Washington	57	50	51	52	53	n/r	n/r	n/r	48
West Virginia	50	n/r	50	50	49	n/r	n/r	n/r	n/r
Wisconsin	37	38	40	40	38	40	n/r	40	40
Wyoming	47	n/r	50	45	n/r	n/r	n/r	n/r	n/r

Note. These data are from the 2000, 2004, 2006, 2008, 2010, 2012, 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. *n/r* = not reported (to preserve confidentiality and provide more certain results, we have not reported data for groups of fewer than 25).

Appendix Table 3. *Percentage of school-based SLPs treating students, by area of intervention and year.*

Area of intervention	%							
	2004 (n = 2,051)	2006 (n = 1,769)	2008 (n = 1,718)	2010 (n = 1,747)	2012 (n = 1,760)	2014 (n = 1,224)	2016 (n = 1,328)	2018 (n = 1,539)
Acquired brain injury ^a	19	18	14	17	17	0	17	15
Auditory processing disorder	67	61	54	47	58	46	37	32
Autism spectrum disorder ^b	80	84	84	88	90	90	91	90
Childhood apraxia of speech	60	56	58	59	57	63	63	60
Cognitive communication disorders	52	—	—	—	—	61	60	48
Dysphagia (swallowing/feeding disorders)	12	10	9	9	11	14	11	11
Fluency disorders	70	69	67	67	67	68	69	67
Hearing loss ^c	49	48	44	46	45	51	46	45
Language disorders: Pragmatics/social communication	76	77	75	81	83	89	90	85
Language disorders: Semantics, morphology, syntax	—	—	—	—	—	92	91	91
Nonverbal, augmentative and alternative communication	49	50	45	53	49	55	55	60
Reading and writing (literacy) difficulties	40	37	32	32	30	36	33	31
Selective mutism	—	—	—	16	17	18	18	19
Speech sound disorders ^d	93	91	94	92	93	93	89	90
Voice or resonance disorders	32	29	24	23	22	22	18	19

Note. These data are from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^aFrom 2004 to 2016, this item was *Traumatic brain injury*. ^bFrom 2004 to 2008, this item was *Autism/pervasive developmental disorder*; from 2010 to 2012, it was *Autism spectrum disorders, including pervasive developmental disorder and Asperger's*. ^cFrom 2004 to 2012, this item was *hearing disorders*. ^dFrom 2004 to 2014, this item was *articulation/phonological disorders*. Dash indicates that the item was not included in the survey.

Appendix Table 4. Average number of students on school-based SLPs' caseloads, by area of intervention and year.

Area of intervention	#							
	2004 (<i>n</i> varies)	2006 (<i>n</i> varies)	2008 (<i>n</i> varies)	2010 (<i>n</i> varies)	2012 (<i>n</i> varies)	2014 (<i>n</i> varies)	2016 (<i>n</i> varies)	2018 (<i>n</i> varies)
Acquired brain injury ^a	2	2	1	2	1	1	2	2
Auditory processing disorder	9	9	8	7	10	7	6	5
Autism spectrum disorder ^b	5	6	7	8	8	9	10	10
Childhood apraxia of speech	3	3	3	3	3	3	3	3
Cognitive communication disorders	—	—	—	—	—	10	10	9
Dysphagia (swallowing/feeding disorders)	3	4	3	3	3	3	2	3
Fluency disorders	3	3	2	2	3	3	3	3
Hearing loss ^c	3	3	3	3	3	3	3	2
Language disorders: Pragmatics/social communication	8	8	8	8	10	11	12	11
Language disorders: Semantics, morphology, syntax	—	—	—	—	—	22	22	21
Nonverbal, augmentative and alternative communication	5	5	4	5	4	5	5	5
Reading and writing (literacy) difficulties	14	15	15	14	14	15	15	14
Selective mutism	—	—	—	1	1	1	1	1
Speech sound disorders ^d	23	23	22	21	19	21	18	18
Voice or resonance disorders	2	2	2	2	2	2	1	2

Note. These data are from the 2004, 2006, 2008, 2010, 2012, 2014, 2016, and 2018 ASHA Schools Surveys. Analysis was limited to clinicians who were employed full time. ^aFrom 2004 to 2016, this item was *Traumatic brain injury*. ^bFrom 2004 to 2008, this item was *Autism/pervasive developmental disorder*; from 2010–2012, it was *Autism spectrum disorders, including pervasive developmental disorder and Asperger's*. ^cFrom 2004 to 2012, this item was *hearing disorders*. ^dFrom 2004 to 2014, this item was *articulation/phonological disorders*. The numbers included in this table were provided by SLPs who do treat students in the areas of intervention listed. The *n* values vary widely because SLPs did not treat students in all areas. Dash indicates that the item was not included in the survey.