

# Review of Ethics Continuing Education Requirements in State Licensure Laws for Speech-Language Pathologists

Bess Sirmon-Taylor<sup>1\*</sup> and Robin L. Edge<sup>2</sup>

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## Abstract

Every state has autonomy in setting requirements for achieving and maintaining licensure for speech-language pathologists (SLPs), and there is no nationally accepted mandate for the content of CE in speech-language pathology. The purpose of this study was to analyze the continuing education/professional development requirements for ethics education necessary for renewal of licensure in speech-language pathology, and to recommend the consideration of ethics education by state licensure boards and regulatory agencies. All 50 states and the District of Columbia were found to require professional registration or licensure to practice as an SLP. Continuing education requirements were found in 49/51 states, ranging from zero hours to 40 hours per biennial renewal cycle. The mean CE contact hours per year was 11.14 (SD = 3.47; range 8-20) with licensure cycles ranging from annual to triennial. Ethics education requirements were identified in 8/51 states. As only eight states have specific requirements of professional development in ethics for licensure renewal, the importance of training in ethics as part of ongoing professional development is emphasized. In early 2016 the ASHA Council for Clinical Certification recommended inclusion of ethics education as a requirement for maintenance of the Certificate of Clinical Competence in the triennial renewal cycle for all certificate holders starting in 2019. Changing regulatory policy to include mandatory ethics education at the state level would ensure inclusion for all practicing clinicians, raising the bar and the standard of practice on a national level.

*Keywords:* Ethics; Speech-language pathology; Continuing Education; State licensure laws

## 1. Introduction and Literature Review

Every state has autonomy in setting requirements for achieving and maintaining licensure for professional practice in speech-language pathology (SLP). Ethics training has become a visible part of continuing education requirements for licensure renewal for SLPs in some states, as it is for many regulated professions, but this requirement has not diffused throughout the country.

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\*Corresponding e-mail: [sirmontaylor@utep.edu](mailto:sirmontaylor@utep.edu)

1 Speech-Language Pathology Program, University of Texas at El Paso, El Paso, TX

2 Department of Speech-Language Pathology, Jacksonville University, Jacksonville, FL

Although this is not yet a nation-wide requirement, the justification for ongoing ethics education is based on the concepts of maintenance of competency standards, staying current with ethical practices, and satisfying mandates that may have been implemented as across-the-board requirements across professions at the state level.

Review of literature from other professions suggests that ethics education has been widely discussed and debated, both as part of the training curriculum and as a part of ongoing professional development. In the field of medicine, Doukas, McCullough, and Wear (2012) discuss ethics in the educational context of a collaboration between medicine and humanities, as a means of developing “reasoning, discernment, and judgment” in the clinical decision-making process (p. 336). The field of nursing has been alive to the necessity of ethics as a cornerstone of care for decades, dealing with the moral issues related to constraints on care by external influences such as insurance guidelines and staff to patient ratios (Curtin, 2000). Interestingly, the American Bar Association has established standards for professional conduct for lawyers, but continuing legal education in ethics is not a requirement for renewal of licensure in every state, and there has been a call from within the profession to address this more intentionally (Hull, 2011).

In many cases, there is a mixed response to a continuing professional education requirement in ethics. This has been studied extensively in psychology; for example, Neimeyer, Taylor, and Wear (2011) examined the perceptions of the importance of ethics education for psychologists. They report that most licensed practitioners who choose to pursue continuing education in ethics, whether by choice or by mandate, report considerable value from this effort, even though there is a proportion of those under regulated licensure renewal requirements who indicate less of a personal investment in the process. However, as Craft (2013) notes, there is a positive impact on ethical behavior derived from existing in a culture in which ethics is a priority. Ponton (2015) described the perception of a relationship between a requirement for ethics education and the potential for more appropriate decision-making in ethical dilemmas, and explored the basic questions related to defining ethical behavior, moral decision-making, and cultural influences. Neimeyer and colleagues (2011) point out that participation in ethics education is higher when legally mandated, but that even in that context, such training was perceived as valuable, particularly as participants reported application of such knowledge into clinical practice, and more importantly, as a means of reducing liability. When deliberating voluntary participation in ethics education, disputes over intrinsic value to the individual are inconsequential when considering the service to the greater good.

The purpose of this study was to analyze the continuing education/professional development requirements for ethics education necessary for renewal of licensure in speech-language pathology, and to recommend the consideration of ethics education by state licensure boards and regulatory agencies. Three questions were addressed:

1. What are the general continuing education requirements for the practice of speech-language pathology in each state?
2. Which of the 51 states (including Washington DC) require continuing education in ethics for renewal of professional licensure?
3. Of those states with the ethics requirement, how many continuing education hours are mandated?

## 2. Methods

The requirements for continuing education (CE) in ethics vary, as there is no nationally-accepted mandate for the content of CE for speech-language pathology. For this analysis completed in summer of 2016, an internet search was conducted for the web addresses for each states' regulatory agency website and licensure laws. Each site was reviewed to analyze specific language regarding ongoing ethics education requirements. This fine-grained analysis included a review of parameters for continuing education hours, specific requirements for ethics education, if any, and if noted, acceptable content for renewal of licensure. As a reliability measure, the current review was a systematic and direct replication of a review performed summer of 2015 for a previous presentation (Sirmon-Taylor and Edge, 2015). In addition, further review was conducted of board action as reported on websites for the states which currently have the requirement for continuing education in ethics.

## 3. Results

Currently, all 50 states and the District of Columbia (collectively referred to as states herein; 51 total) require some version of professional registration or licensure to practice as a speech-language pathologist. However, not all of the licensure laws or regulatory policies are consistent, particularly in the area of continuing education. There are continuing education requirements, also referred to as continuing competency or professional development, in 49/51 states, ranging from zero hours (Alaska, Hawaii) to 40 hours per biennial renewal cycle (Montana). The common standard for most states requires 10 contact hours of continuing professional education per year (mean = 11.14 hrs (SD = 3.47); range = 8 - 20 per year), with licensure cycles ranging from annual to triennial.

In consideration of specific ethics requirements, this analysis revealed specific language dealing with ethics continuing education hours for licensure renewal in only 15.6% of states (8/51), ranging from one per biennium in the District of Columbia and West Virginia, to three hours in every two year renewal cycle in Oklahoma. Many states have adopted language from the ASHA Code of Ethics (2010r, 2016) into their own regulations, and individuals who hold the ASHA Certificate of Clinical Competence as well as the state license to practice are responsible for understanding and upholding both the state and national standards of ethical practice. The eight states that currently require formal ethics education as part of the licensure renewal process do so in an effort to ensure SLP license holders continue to focus on ethical practice.

A number of state statutes mentioned ethics as acceptable for a portion of the CE obligation, identifying *Level One* and *Level Two* (or similar nomenclature) requirements. For most states using this model, the Level One continuing education is directly relevant to clinical practice; for example, disordered communication, assessment techniques, models of intervention. Level Two CE hours may be in areas related to professional practice; for example, leadership training, private practice issues, medical billing and coding. Interestingly, the inclusion of continuing education in ethics has been noted in both Level One and Level Two, which speaks to the variable importance placed on this topic, historically.

Table 1 presents the continuing education hour requirements, the renewal cycles, and the required number of continuing education hours for each state, according to respective licensure board or regulatory agency websites.

**Table 1** Continuing education and ethics requirements by state.

<b>State</b>	<b>Total CE required per cycle</b>	<b>Ethics CE required per cycle</b>
Alabama	12 per year	One
Alaska	0 required	--
Arizona	20 per biennium	--
Arkansas	10 per year	--
California	24 per biennium	--
Colorado	10 per year	--
Connecticut	20 per biennium	--
Delaware	30 per biennium	--
District of Columbia	20 per biennium	One
Florida	30 per biennium	--
Georgia	20 per biennium	--
Hawaii	0 required	--
Idaho	10 per year	--
Illinois	20 per biennium	--
Indiana	36 per biennium	--
Iowa	30 per biennium	--
Kansas	20 per biennium	--
Kentucky	30 per biennium	Two
Louisiana	10 per year	--
Maine	10 per year	--
Maryland	30 per biennium	--
Massachusetts	20 per biennium	--
Michigan	20 per biennium	--
Minnesota	30 per biennium	--
Mississippi	20 per biennium	--
Missouri	30 per biennium	--
Montana	40 per biennium	--
Nebraska	20 per biennium	--
Nevada	15 per year	--
New Hampshire	30 per biennium	--
New Jersey	20 per biennium	--
New Mexico	20 per biennium	--
New York	30 per three years	--
North Carolina	30 per three years	--
North Dakota	10 per year	--
Ohio	20 per biennium	Two
Oklahoma	20 per biennium	Three
Oregon	30 per biennium	--
Pennsylvania	20 per biennium	--
Rhode Island	20 per biennium	--
South Carolina	16 per biennium	--

South Dakota	20 per biennium	--
Tennessee	10 per year	--
Texas	20 per biennium	Two
Utah	20 per biennium	--
Vermont	<i>*in process</i>	--
Virginia	30 per biennium	--
Washington	30 per three years	--
West Virginia	20 per biennium	Two
Wisconsin	20 per biennium	Two
Wyoming	12 per year	--

\* Excluded from calculation of mean. In Vermont, licensure for the practice of speech-language pathology is managed by the Director of Professional Regulation, and administrative rules are in the process of being finalized and adopted (Summer 2016). It is unlikely that an ethics requirement will be adopted at this time.

A secondary review of state licensure board or regulatory agency websites was conducted of a smaller sample of states to analyze the patterns in adjudicated complaints against speech-language pathologists, resulting in board action. The subset of states reviewed were the ones for which there currently exists ethics CE requirements. Of the eight states' websites reviewed, three included specific information about the cases for the year 2015 (i.e., Ohio, Texas, West Virginia); no specific information about board action was found on the remaining five sites.

## 4. Discussion

As of Fall 2016, eight states currently have specific requirements of professional development in ethics as a requirement for renewal of the license to practice as a speech-language pathologist. Despite this small ratio, the importance of training in ethics as part of ongoing professional development cannot be dismissed. All speech-language pathologists, across work settings, will be faced with ethical dilemmas in the process of making clinical, management, or supervisory decisions. These may involve direct patient care, allocation of resources, time management, grading or billing practices, supervision, referrals, or many other situations.

Ethics training as a component of continuing education for speech-language pathologists serves to maintain the standards of practice as outlined in the ASHA Code of Ethics (2016). Rather than serving strictly as reference materials or a prescriptive set of rules, the Code serves as "a framework and focused guide in support of day to day decision-making", and should underpin all aspects of professional life (ASHA, 2016, p.2). Brodhead and Higbee (2012) suggest that ethical behavior is a learned skill, and note that ongoing training can improve quality of care, and serve to prevent potential problems. Ponton (2015) expanded on this, describing the interaction of forces within and external to the individual, such as organizational culture and the imposed structure of a code of ethics, as a means of decreasing the likelihood of unethical behavior by members of that organization.

The adjudicated cases reported on the state licensure board or regulatory body websites for Ohio, Texas, and West Virginia listed violations which were prohibited by statute or rule, but were also clearly violations of the ASHA Code of Ethics (2016). For example, there were multiple cases of speech-language pathologists practicing without the appropriate license, which is a direct violation

of Principle III, Rule A, dealing with misrepresentation of credentials. Other cases were noted for falsifying records and charging for services not rendered, which is a violation of several principles, including Principle I, Rule Q, which addresses maintenance of timely records and accurate billing; Principle III, Rule D, regarding intent to defraud; and Principle IV, Rule E, which specifically states that “individuals shall not engage in dishonesty,...fraud, deceit, or misrepresentation” (ASHA, 2016). Licensed SLPs who were brought up on charges of failure to provide standard of care violated Principle I, Rule B regarding quality service, and Rule M, which speaks to evidence-based clinical judgment. Providers found to be practicing while engaged in substance abuse of alcohol or drugs are in direct violation of Principle I, Rule R which requires impaired practitioners to withdraw from the affected areas of practice, as well as Principle IV, Rule D, which prohibits conduct which adversely reflects on the professions or the individual’s fitness to serve in a professional role.

Ethics education is not without controversy, with some fundamental issues related to the definition of ethics. Ethics is presumed to be an orientation to good versus bad and right versus wrong, variously framed as values, morals, and judgment, and critics argue that such teaching is not the responsibility of the professions, but rather should be addressed in the home or religious institution. Indeed, Seedhouse (2002) argues that there is no common morality, and questions the necessity of codes of ethics across professions, but this appears to be a debate of semantic variation. Nonetheless, there is ample evidence of and support for ongoing exposure to ethics as a means of refreshing awareness of expected professional behavior, maintenance of quality standards, protection of consumers, and limiting litigation.

In early 2016, the ASHA Council for Clinical Certification recommended inclusion of ethics education as a requirement for maintenance of the Certificate of Clinical Competence in the triennial renewal cycle for all certificate holders. This will become the standard for all certificate holders starting in 2019<sup>1</sup>. The question becomes whether licensure boards across the rest of the country will respond to this trend of vertical diffusion, and promulgate state regulations to accommodate to this change in policy at the national level.

As noted, ethics education is clearly of benefit for all professionals, but given this circumstance, the national standard will supersede the state regulations, as all nationally certified SLPs are required to take the continuing education coursework. However, this will not capture the individuals who may hold a state-level credential, but not the national certification. Changing regulatory policy to include mandatory ethics education at the state level would ensure inclusion for all practicing clinicians, raising the bar and the standard of practice on a national level. The exception to this would be in the states with no continuing education requirements for renewal of licensure, in which speech-language pathologists who also hold the CCC would only be held to the national certification standard.

In terms of recommendations, state licensing agencies should consider the logistics and implications of a requirement for continuing professional education in ethics, particularly in the context of improved quality of care and fewer ethical complaints, as noted in other professions.

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<sup>1</sup> The exact date of implementation of the new standard has yet to be determined.

Although the national association standard requiring one hour of ethics education per triennium will be in effect in the near future, implementation of this requirement at the state level will serve to close the gap, to include SLPs who are licensed but not ASHA-certified.

This paper has answered a basic and time-limited question, which can serve as the starting point for further investigation into related areas, such as an analysis of the proportional percentage of ethics complaints made to state licensure boards in states with and without ethics education requirements, which would yield beneficial information in determining whether more states should make ethics a mandatory licensure requirement. As ASHA has recognized the importance of mandatory ethics education for all nationally certified SLPs in the near future, state licensure boards would benefit from investigating the possibility of mandatory ethics continuing education as well.

## Funding Source

None

## Conflict of Interest

None

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