

**WORKLOAD MANAGEABILITY: EXPLORING THE PERCEPTIONS OF  
SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGISTS**

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# **WORKLOAD MANAGEABILITY: EXPLORING THE PERCEPTIONS OF SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGISTS**

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Slippery Rock University, 2021

Legal reform measures and evidence-based referral processes significantly expanded speech-language pathologists' scope of practice; however, contemporary research initiatives fail to directly address perceived challenges that arise as a result of workload inequities. Therefore, the purpose of this qualitative research study was to investigate speech-language pathologists' perceptions of workload management within the public-school setting. The contents of this narrative systematically describe federal and state legislative actions pertaining to professional responsibilities and the conceptual frameworks that are often used to evaluate personal and job-related workload implications. A purposeful sampling approach allowed the co-investigator to assemble a team of eight school-based speech-language pathologists, currently employed in public-school districts located in Southwestern Pennsylvania, who met an explicit set of criteria relevant to the premise of the investigation. Participants were interviewed and data was analyzed utilizing descriptive coding followed by NVivo coding in order to identify major themes and patterns in regard to the following research questions: What workload responsibilities do school-based speech-language pathologists perceive as the most demanding? How do school-based speech-language pathologists describe the relationship between perceived workload demands and job performance? How do school-based speech-language pathologists view the impact of perceived workload demands on their body, mood, and/or behavior? Four major

themes emerged from the data and indicate the following: SLPs have a clear understanding of the terms caseload and workload in regard to school-based speech and language support services; Workload obligations perceivably cause SLPs to encounter psychological and physical implications, including stress, anxiety, and frustration; Workload obligations perceivably impact SLPs' ability to meaningfully provide therapeutic services; and the roles and responsibilities of school-based SLPs are perceivably misinterpreted and/or misunderstood by educational stakeholders, including administrators, teachers, and parents. Findings from this study may contribute to future professional development initiatives, caseload dissemination methods, and the growing body of literature related to the topic.

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## **DEDICATION**

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## **Introduction**

Workload inconsistencies have plagued school-based speech-language pathologists (SLP) for decades. During the early 1990's, a shift in the roles and responsibilities of SLPs generated a substantial increase in an already wide scope of practice ("Roles and Responsibilities of Speech-Language Pathologists in Schools," 2010). Additionally, in 2004, federal legislative modifications required special educators, including SLPs, to review and revise operational and procedural standards in order to maintain compliance. As a result of the aforementioned transformation, thousands of SLPs, throughout the United States, experienced a wealthy expansion of professional responsibilities (Thompson, 2019). Further, SLPs reported feelings of stress and anxiety as related to increased workload demands. Specifically, Harn et al. (1999) cited reputable evidence ascertaining perceived theoretical assumptions pertaining to workload manageability and engagement within the public-school setting. Generally, SLPs described cognitive uncertainties relative to the demands set forth by occupational workloads. Additionally, secondary effects produced legal ramifications, increased rates of attrition, and professional performance challenges. Preceding statistics suggest the importance of obtaining a comprehensive understanding of SLPs' professional obligations and the perceived implications that may arise as a result of notable workload challenges.

According to the American Speech-Language-Hearing Association (ASHA), the national credentialing association for speech-language pathologists and audiologists, SLPs are qualified to prevent, assess, identify, and address areas of communicative need. Additionally, such individuals must obtain and maintain appropriate certifications in order to ethically provide services within a public-school setting ("Who are Speech Pathologists," n.d.). As per the Individuals with Disabilities Education Act (IDEA) and the Commonwealth of Pennsylvania's

Chapter 14, reputable federal and state laws pertaining to special education services, SLPs must additionally provide parents and general education teachers with supportive guidance relative to a student's speech or language impairment (Thompson, 2019). Unambiguous descriptions pertaining to SLPs' professional duties offer baseline counsel relevant to forthcoming legal and ethical workload attestations. As federal and state mandates further obstruct flexibility in terms of management, ASHA remains focused on advocacy efforts that emphasize public-school systems' use of contemporary approaches related to workload feasibility (Armstrong et al., 2008). Given progressive amendments, in regard to school-based SLPs and associated workload demands, it is an area of inquiry deserving of further exploration via qualitative research methods.

### **Statement of the Problem**

Despite support from the American Speech-Language-Hearing Association, workload inconsistencies continue to overwhelm SLPs both professionally and personally (Schraeder, 2019). Specifically, conservative special education referral processes typically lead to an overrepresentation of students diagnosed with speech or language impairments and SLPs subsequently experience an automatic increase in associated workload obligations. Additionally, stagnate legal mandates offer limited support relative to state sponsored mitigation efforts ("Workload and Caseload," n.d.). Unfortunately, as the number of students diagnosed with moderate to severe speech or language impairments increases, a significant growth in associated workload obligations is likely (Hutchins et al., 2010). Therefore, comprehensive collection and analysis of qualitative data are necessary in order to understand the philosophical perplexities that occur as a result of workload demands.

A substantial examination of the perceptual deviations and conceptual misunderstandings of participating SLPs employed within school districts located in southwestern Pennsylvania could reveal relevant findings in order to alter current methods of caseload dissemination. Additionally, evidence-based findings may be of significant interest to educational stakeholders, including school administrators and state policy advisors, seeking to revise and refine school-based procedures and policies. Furthermore, data may potentially impact valuable methods of service delivery, student progress, and rates of attrition.

The proceeding chapters in this dissertation address functional information relevant to the course of the investigation. Chapter 1 outlines prominent literature pertaining to SLPs' scope of practice and evidenced-based workload models while Chapter 2 comprehensively describes the study's design, methodology, and appropriate sources of data collection. Chapter 3 includes methods of data analysis and functional outcome measures. An extensive examination of notable findings, recommendations, and suggestions for future research will be included in Chapter 4.

### **Research Questions**

The purpose of this qualitative study is to investigate the perceived personal and professional implications that arise as a result of SLP workload obligations. The overarching research question focuses on perceptual anomalies relative to workload responsibilities while supplemental areas of inquiry address job performance and personal perceptions relative to workload demands. The study includes the comprehensive research questions indicated in Table 1, where RQ1 reflects the primary topic of interest. RQ2 and RQ3 reflect supplemental areas of inquiry relative to this investigative journey.

**Table 1**

*Research Questions*

Coding	Research Question
RQ1	What workload responsibilities do school-based speech-language pathologists perceive as the most demanding?
RQ2	How do school-based speech-language pathologists describe the relationship between perceived workload demands and job performance?
RQ3	How do school-based speech-language pathologists view the impact of perceived workload demands on their body, mood, and/or behavior?

**Definition of Terms**

***American Speech-Language Hearing Association (ASHA):*** A national organization that accommodates the professional needs of approximately two-hundred thousand speech-language pathologists, audiologists, students, and related support personnel (“Caseload and Workload,” n.d.).

***Caseload:*** Inherently, caseload is conceptualized as the number of students that maintain an Individualized Education Plan (IEP) and are serviced by SLPs within the school setting (“Implementation Guide,” n.d.).

***Certificate of Clinical Competence (CCC):*** A level of national accreditation for speech pathologists who demonstrate a high-level of excellence relative to clinical services (“General Information,” n.d.).

***Conceptualization:*** The formulation of a concept, idea, or opinion (Walsh, 2009).

***Individuals with Disabilities Education Act (IDEA):*** A prominent federal law that outlines precise guidelines enforcing evidence-based instructional practices for the purpose of educating all students within the general education setting (“Individuals with Disabilities”, n.d.).

***Related Service:*** Specialized supports that are required under the guidelines set forth by IDEA in order to provide meaningful educational services to students with disabilities (“Section 300.34 Related Services,” 2017).

***Workload:*** The concept of workload refers to the full range of activities that encompass an SLP’s scope of practice (“A Workload Analysis,” n.d.).

## Chapter 1: Review of Literature

The forthcoming review of literature is intended to provide stakeholders with a comprehensive summary of evidence-based information relevant to school-based speech-language pathologists' (SLP) perceptions of workload manageability. Workload, as universally defined, refers to the total amount of physical and cognitive effort needed in order to complete required functions ("A Workload Analysis," 2002). Workload, as it relates to manageability, is the process by which individuals are able to successfully complete required tasks (Choudhary, 2019). Over the past thirty years, considerable changes pertaining to workload prompted school-based SLPs to review and refine practice standards, including, but not limited to, evaluation measures, documentation procedures, and habilitation methods (Katz et al., 2010). Irrefutable pedagogical modifications and subsequent ethical dilemmas prompted the American Speech-Language-Hearing Association (ASHA) to formally advocate for acceptable workload dissemination standards. According to ASHA, successful workload management systems seemingly uphold the integrity of the profession while simultaneously fostering critical special education mandates (Armstrong et al., 2008). Imminent guidance, with respect to effective workload principles, justifies the importance of examining manageability of job tasks as it pertains to professional employees, specifically public-school speech-language pathologists.

Information relevant to antiquated and contemporary federal mandates emphasizes a distinct shift in the scope of practice of special education professionals, including SLPs. Therefore, a historical review of content-specific documentation is necessary in order to develop a clear understanding of workload capacities and the perceived implications that arise as a result. Additionally, supplemental narratives briefly focus on the concept of caseload as it pertains to the evolvement of and contribution to SLPs' workload responsibilities.

Subsequent sections of this review of literature provide readers with a clear understanding of the research topic and approach via succinct descriptions of various conceptual frameworks related to workload manageability. Conceptual frameworks seek to explain qualitative phenomenon within specific social settings (Collins & Stockton, 2018). The Job Demands-Resources (JD-R) theory, a renowned conceptual framework designed to understand the relationship between the psycho-social well-being and professional engagement of employed professionals, serves as the primary framework for this study and is described in greater detail in latter sections of this chapter (Granziera et al., 2021).

### **The Evolving Roles and Responsibilities of School-Based Speech-Language Pathologists: Organizations, Federal Laws, and State Mandates**

Documented intelligence chronologically outlines notable changes in regard to the roles and responsibilities of SLPs employed within educational settings. Prior to the inception of the American Speech-Language-Hearing Association in 1925, speech pathology was unrecognized as a formal profession and consisted of a small number of non-certified practitioners with a limited repertoire of skills (“History of ASHA,” n.d.). In 1950, the development of standardized assessment procedures, neurological discoveries, and advances in technology prompted post-secondary education institutions to expand certification requirements. By 1980, results of evidence-based studies further enhanced SLPs’ knowledge and capability to implement interventions beyond typical speech correction services (Duchan, 2021; Du, 2016; “Roles and Responsibilities of Speech-Language Pathologists in Schools,” 2010). In 2021, approximately 100 years post professional recognition, the workload of a school-based speech-language pathologists is characterized by clerical, evaluative, therapeutic, consultative, and collaborative demands. According to Prasad (2019), scientific

revelations, guidance from ASHA, and revitalized legal mandates are viewed as significant contributors to current practice standards.

As previously noted, historic amendments and revitalized legal mandates broadened an initially small scope of practice and subsequently generated additional workload requirements for school-based speech-language pathologists (Means, 2006). Therefore, a thorough understanding of the organizational, contextual, and legal underpinnings of current workload methods is necessary in order to comprehend SLPs' perceptions relevant to manageability of job-related tasks.

### **American Speech-Language Hearing Association (ASHA)**

ASHA, initially referred to as the American Academy of Speech Correction (AASC), is the national credentialing association for speech-language pathologists and audiologists. The overarching goal of ASHA is to support the principles and ethical guidelines that govern professional practice ("Roles and Responsibilities of Speech-Language Pathologists in Schools," 2010.). Prior to the inception of 21<sup>st</sup> Century credentialing and advocacy standards, representatives focused on "scientific, organized work in the field of speech correction." In 1925, promotional efforts resulted in the development of the AASC. Multiple name changes proceeded prior to settling on what is currently referred to as the American Speech-Language-Hearing Association ("History of ASHA," n.d.). Table 2 outlines the historic progression.

**Table 2**

*Inception of the American Speech-Language-Hearing Association*

Year	Name
1925	American Academy of Speech Correction
1927	American Society for the Study of Disorders of Speech



Year	Name
1934	American Speech Correction Association
1947	American Speech and Hearing Association
1978	American Speech-Language-Hearing Association

ASHA’s rich history is marked by theoretic and academic advancements coupled with progressive programming modifications. Despite valiant support from prolific stakeholders, for at least 40 years the occupational duties of SLPs primarily focused on evaluation and treatment of basic communication skills, including articulation and fluency; however, substantial growth was noted in 1973 with the inclusion of additional focus areas, including linguistic and psycholinguistic disorders (“Category Archives: SLP History,” 2011.).

Almost 50 years later, ASHA certification standards and practice guidelines reflect a spectrum of new professional accountabilities. In order to be considered as a nationally recognized professional, one must obtain a Certificate of Clinical Competence (CCC). Certification requirements necessitate the need to meet a stringent set of explicit standards, including, but not limited to, demonstration of exemplary clinical skills, academic excellence, and compliance relevant to continuing education. Specifically, SLPs are responsible for securing a university dependent Master of Arts (M.A.) or Master of Science (M.S.) degree from an accredited institution and achieve passing scores on state issued and national PRAXIS examinations (“General Information About ASHA Certification,” n.d.). Additionally, regulations require SLPs to complete 1,260 clinical fellowship hours in the presence of a fully certified professional. Furthermore, the American Speech-Language-Hearing Association and state licensing agencies necessitate procurement of 20 to 30 hours of continuing education credits for

certification maintenance (“Apply for Certification in Speech-Language Pathology”, n.d.). Table 3 highlights explicit CCC certification requirements.

**Table 3**

*Certificate of Clinical Competence Requirements*

Standard Number	Standard Name	Standard Description
I	Degree	Candidate must obtain and hold post-baccalaureate degree.
II	Education Program	Graduate coursework and related clinical experience must be obtained from an accredited college or university.
III	Program of Study	The candidate is required to complete advanced coursework and clinical field experiences.
IV	Knowledge of Outcomes	The candidate must demonstrate knowledge in statistics, the sciences, swallowing processes, articulation and linguistics, ethical conduct, professional issues, and evidence-based research.
V	Skills Outcomes	Candidates must demonstrate appropriate communication skills, including written and oral. Additionally, the candidate must demonstrate applicable evaluative, diagnostic, and habilitative skills. Further, candidates must complete 400 hours of supervised clinical experience.
VI	Assessment	The candidate must pass the national certification exam in speech-language pathology.

Standard Number	Standard Name	Standard Description
VII	Clinical Fellowship	The candidate must complete a supervised clinical fellowship as directed.
VIII	Maintenance of Certification	Members must obtain at least 30 hours of continuing education credits, every three years, in order to maintain certification.

Contemporary workload responsibilities of ASHA certified SLPs substantially differ from antiquated practice standards. Present-day CCC-SLPs are now recognized as contributing members of multidisciplinary teams, offer profitable consultative services, and are able to diagnose and treat a broad range of disordered communication skills (Powell, 2018). Specifically, qualified professionals prevent, diagnose, and rehabilitate explicit areas of communicative need related to articulation, language, voice, fluency, and swallowing. Additional areas of intervention may include weaknesses associated with social-emotional, behavioral, academic, and vocational abilities. Related clerical expectations, such as evaluation documentation, Individualized Education Program (IEP) development, parent relations, medical billing, data collection and analysis, progress monitoring, and standard lesson planning add to SLPs’ comprehensive workload obligations within the school setting (“Roles and Responsibilities of Speech-Language Pathologists in Schools,” 2010.). In addition to primary occupational obligations, ASHA certified SLPs may also be expected to offer mentoring services, participate in professional development initiatives, and promote academic growth through the use of evidence-based pedagogical methods (Brandel, 2020).

As the history of the profession evolved, so too did the roles and responsibilities of speech-language pathologists. Unfortunately, despite focused time and attention from ASHA

leaders, legislative interference intermittently displaced practice standards resulting in nationwide caseload disparities and subsequent workload challenges, including service delivery constraints, scheduling conflicts, and child-find obstacles (Dowden et al., 2006). A review of applicable state and federal laws related to special education services within the public school setting further supports the importance of understanding workload from a historic perspective.

### **Elementary and Secondary Education Act (ESEA) of 1965**

The Elementary and Secondary Education Act (ESEA), a prolific federal law, was nationally recognized for providing schools with significant financial support in order to ensure equitable services for vulnerable populations of students, including those diagnosed with a speech or language impairment. Originally signed into law in 1965, by former President of the United States, Lyndon B. Johnson, ESEA outlined specific requirements that enabled educational professionals to provide a wide range of services within the school setting. Additionally, ESEA sought to improve antiquated educational practices by challenging existing economic systems and reforming valued assessment procedures (Jennings, 2015). Specifically, an unidentified percentage of SLPs were expected to conduct unconventional tasks, including informal baseline assessments and related consultative sessions for the purpose of reducing special education placements. However, time constraints coupled with a substantial increase in the demand for services resulted in unexpected workload pressures and subsequent program inadequacies (“Every Student Succeeds Act,” n.d.).

### **Public Law 94-142 (P.L. 94-142) 1975**

In 1975, the passage of Public Law 94-142 (P.L. 94-142) required school systems to provide a free, appropriate public education (FAPE) for students with disabilities through the development of individualized education programs (IEP) and due process procedures. Formally

recognized as the Education of All Handicapped Children Act (EHCA), P.L. 94-142 aggressively reformed educational policies and programs in order to promote integrated learning opportunities within students' least restrictive environments (LRE) (Dunn, 2013). Transformative mitigation efforts laid the groundwork for inclusivity, diversity, and individuality in regard to teaching and learning within the public-school setting ("Changes in Services," n.d.).

Special education teachers and related service providers, including SLPs, experienced a substantial growth in caseload numbers and subsequent workload obligations as a result of P.L. 94-142 (Dunn, 2013). Reputable guidance described caseload modifications relevant to the amount, type, and severity of disabilities serviced. Related workload amendments outlined comprehensive assessment procedures, documentation standards, and methods of service delivery. Prior to P.L. 94-142, students diagnosed with moderate to severe speech or language impairments were excluded from this narrative ("Changes in Services," n.d.).

### **No Child Left Behind (NCLB) 2001**

ESEA was reauthorized and renamed in 2001 ("Reauthorizing the Elementary and Secondary," 2013). The freshly labeled No Child Left Behind (NCLB) sought to narrow a documented achievement gap between typical learners and disproportionate groups of students through flexibility, preparedness, assessment, and evidence-based instruction. Additionally, NCLB mandated the use of appropriate, academic adaptations and accommodations for students with disabilities in order to accurately evaluate state-based learning standards (Wright & Wright, 2007).

NCLB placed additional demands on speech-language pathologists working within the school setting via goal-based reform measures and school performance expectations (Clarke, 2003). In addition to traditional pedagogical methods, SLPs were required to utilize scientifically

accepted resources in order to improve student performance expectations. Relatedly, educational team meetings now included participation from SLPs for the purpose of identifying appropriate testing accommodations and tools for students with disabilities. Further, as per NCLB guidelines, special education teachers and related service providers, including speech-language pathologists, experienced changes relevant to IEP goal writing. Notable modifications prompted the need for support professionals to develop measurable annual goals based on individualized state standards as opposed to general, needs-based objectives (Schraeder & Seidel, 2022).

### **Individuals with Disabilities Education Improvement Act (IDEA) of 2004**

The Individuals with Disabilities Education Act (IDEA) was introduced in 1997 proceeding the reauthorization of P.L. 94-142. IDEA 1997, or Public Law 105-17 (P.L. 105-17), further reinforced the importance of narrowing the achievement gap for students with disabilities via competitive accountability and strengthened academic standards (Johnson, 2005). According to McLaughlin (1999), despite purposeful ratifications, including increased instructional flexibility, IDEA 1997 had a profound financial and procedural impact on public-school systems across the nation. However, as educational leaders struggled to locate funding sources students with disabilities continued to receive a free, appropriate public education within a least restrictive environment. As federal legislators sought to further review, amend, and expand fundamental guidelines in order to comply with contemporary pedagogical and learning needs, SLPs' range of responsibilities continued to expand.

In 2004, IDEA was once again thrust into the national spotlight. Newly reauthorized standards provided extensive guidance relevant to formal special education identification measures, “peer-reviewed” adaptations and accommodations, as well as related service supports (Johnson, 2005). Redefined tasks of school-based speech pathologists sought to improve

educational reform measures and narrow the aforementioned achievement gap through multi-disciplinary procedures, methods of service delivery, and collaboration (Means, 2006). However, previously mentioned legislative modifications subsequently expanded both the caseload and workload of school-based SLPs. For example, in order to be considered for speech and language support services, students were expected to meet federally-defined eligibility criteria. Therefore, a highly qualified SLP was required to complete evidence-based assessments and gather extensive documentation from a skilled team of professionals for the purpose of determining if a suspected disability was negatively impacting students' academic and/or social performance (Thompson, 2019). Additional workload requirements included a comprehensive and accurate analysis of obtained data through written correspondence (Johnson, 2005). Additionally, IDEA 2004 amendments outlined explicit modifications pertaining to SLP caseload demographics ("Individuals with Disabilities," n.d.; Means, 2006). An increase in the number of students serviced, who presented with a moderate to severe disability, resulting in substantial communication needs, aggressively altered associated workload responsibilities. According to Edgar and Rosa-Lugo (2007), diminutive caseload adjustments extensively amplified corresponding interventions, assessments, and service delivery obligations. As a result, the occurrence of associated legal implications, including challenges relative to compliance, reasonably triggered perceptual deviations. Additionally, researchers suggested probable personal implications secondary to looming denials of FAPE (Estomin, 2003).

### **Every Student Succeeds Act (ESSA) 2015**

On December 10, 2015, Congressional leaders agreed to replace the nationally recognized No Child Left Behind with the contemporary Every Student Succeeds Act (ESSA). The new law maintained specific aspects of NCLB, including progress monitoring procedures;

however, less favorable mandates were notably absent (Lee, 2015). Reshaped guidelines focused on the development of alternate state-level assessment procedures for students with significant cognitive impairments, literacy standards, and school-wide performance measures. ESSA also recognized specific concepts relevant to school-based speech and language support services. In regard to workload, explicit provisions set forth by ESSA commission professional employees, including speech-language pathologists, to provide students with supplemental academic support in the area of literacy. Specifically, newly adopted professional responsibilities authorize SLPs to assess, enrich, and remediate students' foundational reading abilities in addition to providing typical speech therapy services. Despite enthusiastic legal reform efforts, the aforementioned legislative guidance further increased speech pathologists' scope of practice and subsequently induced reflexive reactions from certified speech and language specialists ("Every Student Succeeds Act:Key Issues," n.d).

### **Aligning State Special Education Law with Federal Legislation**

In order for public school systems to receive financial resources, states are required to develop and implement rules and regulations that align with federal special education guidelines, specifically, those outlined by IDEA. In doing so, states must maintain students' educational rights as documented by federal law; however, ancillary statutes may reflect additional protections. For example, under IDEA, students with disabilities are entitled to a free and appropriate public education; however, each state is granted flexibility in regard to the type of instructional services utilized. Additionally, special education eligibility standards may differ across and within each state despite legislation related to IDEA's 13 standard disability categories ("Special Education: Federal Law vs. State Law," n.d.). Public-school constituents across the nation adhere to differing state policies in regard to special education. In



Pennsylvania, special education professionals are required to abide by the policies set forth by Chapter 14 (PA Code 22) to ensure compliance with the Individuals with Disabilities Education Act of 2004 (“Chapter 14,” 2018). Additional documentation relevant to Chapter 14 is offered in the preceding section of this narrative.

**Chapter 14 (PA Code 22)**

Adopted in 1990 and subsequently revised in 2008, Chapter 14 inherently intends to secure a free and appropriate public education, within a least restrictive environment, for students with disabilities. Comprehensive guidance in regard to evaluation procedures and succeeding special education programming, including related services, is also emphasized within Chapter 14 standards. It further stands to protect the educational rights of students with disabilities and their families by means of procedural safeguards. Additionally, Chapter 14 provides specific guidance in regard to maximum caseload numbers as well as caseload-related terminology (Priel, 2009). See Table 4 for information related to disability-based caseload standards within the state of Pennsylvania.

**Table 4**

*Maximum Caseload Standards-Pennsylvania*

Name	Itinerant	Supplemental	Full-Time
Learning Support	50	20	12
Life Skills Support	20	20	12
Emotional Support	50	20	12
Deaf and Hearing Impaired Support	50	15	8
Blind and Visually Impaired Support	50	15	12

Name	Itinerant	Supplemental	Full-Time
Speech and Language Support	65		8
Physical Support	50	15	12
Autistic Support	12	8	8
Multiple Disabilities Support	12	8	8

Note: Itinerant: Special education services are provided by qualified professionals for 20% or less of a student’s school day. Supplemental: Special education services are provided by qualified professionals for more than 20% but less than 80% of a student’s school day. Full-Time: Special education services are provided by qualified professionals for 80% or more of a student’s school day (“Chapter 14,” 2021).

### **Caseload Standards**

Inherently, caseload is conceptualized as the number of students that maintain an Individualized Education Plan (IEP) and are serviced by SLPs within the school setting. Caseload is also valued as a portion of an SLP’s total workload, despite synonymous use of the terms (“Implementation Guide,” n.d.). According to Cirrin et al. (2003), publicized documentation validates a dynamic relationship between the aforementioned concepts. Specifically, a notable increase in caseload immediately prompts additional workload variations. Moreover, caseload adaptations appear to capriciously induce affective uncertainties while contemporaneously altering SLPs’ ability to provide adequate intervention services. As a result, students experience limited progress, unwanted academic uncertainties, and non-threatening behavioral challenges (Thompson, 2019). Larger caseloads perceivably interfere with collaborative and/or interprofessional practices. Additionally, subsequent time constraints and

class size modifications impact the SLP's ability to provide a free and appropriate public education (Dowden et al., 2006). Nonetheless, SLPs across the nation proceed to willingly render necessary interventions to students who present with diverse communicative needs despite caseload encumbrances that continue to disrupt profitable methods of service delivery (Blood et al., 2002).

Caseload management is a substantial element of SLPs' broad and expansive scope of practice. According to Karr and Clausen (2013), caseload characteristics and caps are established at the state level and differ between each state prompting ASHA to announce a significant shift in their stance on caseload caps. In 2002, ASHA formally recommended a workload analysis approach for setting caseloads as opposed to archaic dissemination methods. The aforementioned framework is believed to uphold the integrity of the profession while simultaneously fostering critical special education mandates (Armstrong et al., 2008). Additionally, employment of a workload analysis approach seemingly reduces national and state-wide caseload inconsistencies and satisfies provisional legal manifestations (Edgar & Rosa-Lugo, 2007; Schraeder, 2019). In contrast to workload approaches, research has demonstrated that teachers with large caseloads or caseloads including more challenging students are at higher risk for burnout and leaving the field (Russ et al., 2001; Nichols & Sosnowsky, 2002). See Table 5 for comprehensive information pertaining to individualized state caseload regulations.

**Table 5**

*State by State Maximum Caseload Regulations*

States with No Caseload Cap	States with a Caseload Cap of 0-49	States with a Caseload Cap of 50-59	States with a Caseload cap of 60 or more
Arizona, Arkansas, Colorado, Connecticut, District of Columbia, Delaware, Florida, Hawaii, Idaho, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Missouri, Montana, Nebraska, New Hampshire, New Jersey, North Dakota, Oregon, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Wisconsin, Wyoming	Alabama, California, Washington	Georgia, Maine, Nevada, North Carolina, Oklahoma, Utah, West Virginia	Illinois, Michigan, Mississippi, New Mexico, New York, Ohio, Pennsylvania, South Carolina, Virginia

The decades old caseload-workload controversy continues to aggravate dormant mandates and intrigue dedicated speech pathologists. As invested strategists continue to advocate for comprehensive policy reform, interested parties remain focused on best practice and meeting the individualized needs of students (Katz et al., 2010).

**Summary**

The evolution of the roles and responsibilities of school-based SLPs is marked by a rich history of educational reform and exclusive guidance from the American Speech-Language-Hearing Association. Between 1925 and 2015, congressional leaders staunchly resurrected the field of special education through progressive legislative actions and achievements. Recent reform efforts further expanded the occupational responsibilities of

nearly half of ASHA's estimated 200,000 members working within the school setting; therefore, the credentialing association remains focused on consulting with Congress in order to protect the integrity of the profession. Specifically, ASHA's current advocacy standards focus on reducing pathologists' clerical hindrances while preserving due process for students' parents and/or guardians (Prasad, 2019).

### **Conceptual Frameworks**

A conceptual framework as related to qualitative research, is a body of empirically-based theories or concepts that support the relationship between ideologies and how those ideologies connect to the investigation. General frameworks are often used to organize various topics of research despite an indirect correlation (Green, 2014). The proceeding section briefly outlines several universally identified frameworks that correspond to occupational workload and workload manageability. A more comprehensive summary of the conceptual framework utilized in this study proceeds initial baseline guidance.

#### **General Frameworks Related to Workload Management**

A variety of conceptual frameworks elucidate the presence of negatively perceived workload-related implications that arise within industrial and nonindustrial occupational settings by identifying functional patterns and/or themes through obtained data. For example, the job characteristic model, developed in 1976, is a standard approach that supports occupational growth through explicit assessment measures. The model evaluates specific features, including range of tasks performed, ability to complete work obligations, performance implications, independence, and feedback that could impact an employees' social-emotional well-being within the workplace (Towler, 2020.). A lack of appropriate exposure to the aforementioned core attributes may have a negative impact on an individual employee and/or the organization itself.

Conversely, application of this model universally improves employee motivation and engagement (Blanz, 2017). Relatedly, the job-demand-control-support (JDCS) model, developed by R. Karasek and colleagues in the 1980s, is a universally accepted theory that outlines how certain job specificities affect employees' social-emotional health. According to the model, employees with high workloads and limited support are at risk for developing adverse psychological complications, including stress, anxiety, and burnout. However, in contrast to the previously described framework, the JDCS model outlines specific stress management strategies in order to decrease negative perceptions and increase productivity of services. Similarly, in 1986 the effort-reward imbalance (ERI) model was introduced by Swiss sociology professor, Johannes Segrist. ERI theories identify emotional and stress-related reactions of employees that are exposed to effortful occupational experiences and limited rewards. Specifically, employees who are insufficiently reinforced for their occupational efforts experience effort–reward imbalance and are therefore at risk for exposure to distressing psychological situations. Violanti et al. (2018) examined connections of ERI and work-associated exhaustion in police officers. Quantitative results showed a direct relationship between overcommitted officers and negative perceptions relevant to the profession. External and internal characteristics, including predisposed personality traits and experiences lent support to statistically relevant outcome measures. Examining the association of the ERI model and demanding SLP workloads may offer school administrators with valuable data in order to review existing dissemination standards. At the present time, a lack of direct empirical evidence supports the preceding assertion. Historic and contemporary data primarily address ERI in regard to international educational services (Segrist, 2017). In comparison to the previously described frameworks, the person-environment fit model, defined by Jacquelynne Eccles in 1989, measures the correlational impact of personal

characteristics on environmental variables and vice versa. As a case in point, Ugwu and Onyishi (2020) sought to determine the existence of a relationship between job-related demands and the biological makeup of practicing nurses using the person-environment fit model. Results of the aforementioned study suggested an explicit negative correlation between perceived high workloads and occupational engagement of nurses employed within a Nigerian hospital. Relatedly, Alson (2019) used the same model as a guide to evaluate the impact of work-related demands on public high school teachers. In congruence with related studies, external factors, including a paucity of functional resource materials seemingly induced emotional stress and task incompliance.

A systematic review of the forenamed conceptual frameworks offered baseline guidance relevant to the presumed relationship between high occupational workloads and cognitive management. According to documented research, working class citizens' workload perceptions often induced pathological symptoms, such as cognitive fatigue, general malaise, and anxiety (Bettini et al., 2018). Table 6 offers a brief summary of the previously described frameworks.

**Table 6**

*General Frameworks for the Evaluation of Workload Manageability*

Framework (Year)	Dimensions	Elements
Job Characteristics Model (1976)	Five core dimensions	<ol style="list-style-type: none"> <li>1. Range of tasks performed</li> <li>2. Ability to complete work obligations</li> <li>3. Performance implications,</li> <li>4. Independence</li> <li>5. Feedback</li> </ol>
Job-Demand-Support-Control Model (1980)	Three core dimensions	<ol style="list-style-type: none"> <li>1. Job demands</li> <li>2. Job decision latitude</li> <li>3. Job social support</li> </ol>

Framework (Year)	Dimensions	Elements
Effort-Reward Imbalance Model (1986)	Three core dimensions	<ol style="list-style-type: none"> <li>1. Overcommitment</li> <li>2. Effort</li> <li>3. Reward</li> </ol>
Person-Environment Fit Model (1989)	Three core dimensions	<ol style="list-style-type: none"> <li>1. Person</li> <li>2. Occupation</li> <li>3. Environment</li> </ol>

### **Job Demands-Resources Theory**

The job-demands-resources (JD-R) theory was introduced in 2001 by experienced researchers, Arnold Bakker and Evangelia Demerouti (Schaufeli, 2017). Galvanized by concepts related to occupational structure and stress, JD-R theory offers contextual guidance in order to understand discrepancies between job requirements and the available resources individuals have access to in order to fulfill those requirements. In addition, JD-R theory posits that professionals are more likely to experience psycho-social angst resultant of high workload demands and limited resources. The JD-R theory provides a framework for this investigation in order to better understand the perceived personal and professional implications that high workloads place on practicing school-based SLPs (Zeijen et al., 2021).

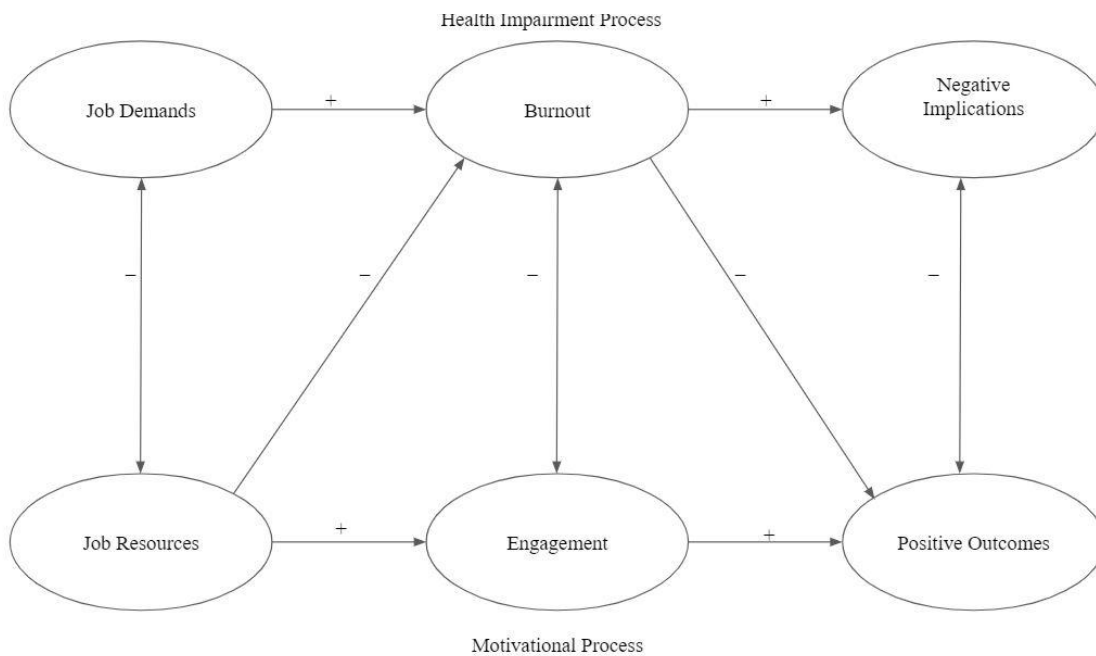
To date, empirical evidence fails to insightfully address specific strategies that employers, including school leaders, could use in order to support employees' workload demands; therefore, there is a substantial need to evaluate specific job characteristics and how those characteristics promote the well-being of related service providers, specifically, speech-language pathologists. The JD-R model assumes a direct correlation between job traits and overall performance standards (De Carlo et al., 2019). According to Lesener et al. (2019), the JD-R model recognizes two explicit areas of concentration that identify psychological wellness and physical engagement. The concepts of *job demands* and *job resources* can be generalized



across a variety of occupational settings and applicably identify consequential shortcomings relevant to specific work environments. Relatedly, Schaufeli (2017) described additional ideas, including the *health impairment process* and *motivational process*. The preceding psychological processes discern relevancies pertaining to perceived psychogenic threats and overall performance measures. Meticulous identification of related characteristics could be utilized in order to improve task manageability and decrease consequential health complaints. Figure 1 offers a visual representation of the JD-R model.

**Figure 1**

*The Job Demands-Resources Model*



*Note:* From “Applying the job-demands resources model: A how to guide to measuring and tackling work engagement and burnout,” *Organizational Dynamics*, 46(2), 120-132.

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### ***Job Demands***

In relation to the JD-R theory, job demands can include the “physical, social, or organizational aspects of the job that require sustained physical or mental effort and are therefore associated with certain physiological and psychological costs” (Lesener et al., 2019). Specific physical and/or psychological efforts can include time constraints, high workload demands, environmental stressors, an obscure scope of practice, and substandard peer interactions. Caesar (2007) examined factors indicative of work-related stress, non-work-related stress, and overall mental health of SLPs employed within educational settings. A mixed-methods approach offered usable data and found a positive correlation between professionally induced “chronic stress” and mental health. Aggressive job demands and complicated service delivery methods were determined to inveterately induce psychological implications in employees. Similarly, Harris et al. (2009) delved into factors impacting “burnout” and “stress.” In regard to job stress, participating SLPs reported a higher incidence of prescription drug use given symptoms of depression. The authors unambiguously determined high job demands and a paucity of professional support to be implicating factors. Despite a lack of positive press, job demands are not always perceived as negative. However, job demands have the potential to morph into stress-related health and performance implications if extreme effort is required in order to fulfill occupational responsibilities (Demerouti & Bakker, 2011).

### ***Job Resources***

Job resources are defined as “physical, psychological, social, or organizational aspects of the job that may [...] be functional in achieving work goals, reduce job demands and related costs, or stimulate personal growth and development” (Lesener et al., 2019). Such resources may include administrative feedback, job flexibility, positive school climate, and access to functional

intervention tools (Schaufeli, 2017). For example, general educators may experience increased feelings of self-worth and subsequent performance improvements given access to meaningful resources, including an encouraging work environment (Granziera et al., 2021). Educational studies pertaining to resources found a positive correlational impact between individuals' inherent characteristics and the availability of JD-R defined job resources. Buric and Macuka (2018) determined that the presence of intrinsic traits (personal resources), including self-worth and confidence, to be indicators of increased participation and decreased rates of attrition amongst international teachers. Comparatively, Granziera and Perera (2019) found a reciprocal relationship between teachers' positive personality traits, work engagement, and overall complacency at work. A balanced correlation supports teachers' ability to quickly adapt and evolve given challenging job tasks and or occupational change.

### ***Health Impairment Process***

The health impairment process may occur in occupational environments where high job demands and limited job resources result in employee exhaustion. Exhaustion is considered to be a basic component of burnout (Lesener et al., 2019). Burnout, as noted by Demerouti et al. (2011), is the most common health-related implication identified by the JD-R model and is considered to be a chief prognostic factor for predicting the impact that stress has on the well-being of employees. Researchers often hypothesize decreased job satisfaction given a negative relationship between job demands and exhaustion. Ewen et al. (2020), investigated influential factors impacting burnout rates in SLPs. A review of literature, using various online databases, revealed conclusive evidence citing a link between job satisfaction, job stress, and burnout. Specifically, high demands, limited support, and low rewards led to perceived feelings of stress and subsequent burnout. Participants associated job demands with high workloads,

administrative support, and inequitable wage discrepancies. Corresponding findings were noted in an outdated study completed by McLaughlin et al. (2008) regarding attrition and the personal and professional views of SLPs. Results substantiated relatively similar outcome measures and additionally conceded a probable relationship between workload demands, occupational stress, and a lack of participation in typical residential activities, including family-oriented tasks.

### ***Motivational Process***

The motivational process asserts that adequate resources and supportive reinforcement lead to high work engagement, increased confidence, and suitable performance efforts. For example, sufficient tools and materials promote functional participation in regard to work-related tasks and subsequently induce positive outcome measures (Lesener, 2019). According to Flores et al. (2021), “job resources are the most important predictors of engagement.” Therefore, professional environments that are rich in resources are more likely to induce effortful work, increased productivity, and may subsequently impact the overall well-being of the individual and the organization.

### **Summary**

The implicating factors associated with high workload demands, as identified by the JD-R model, offer baseline guidance relevant to understanding the impact that perceived scope of practice challenges have on individuals working within a variety of occupational settings. While substantial documentation, in the form of quantitative and qualitative studies, supports general work environments, additional discourse is in needed in order to comprehend perceived personal and professional matters that SLPs may encounter while managing workload obligations within public-school systems. This study will aim to do so by gathering qualitative data pertaining to SLPs’ experiences, perceptions, and knowledge. Outcome measures may enlighten educational

stakeholders seeking to review and revise current special education caseload and/or workload dissemination methods. Further, results of this study may support ongoing discourse which strives to improve the quantity and quality of practicing speech-language pathologists.

## **Chapter 2: Methodology**

The contents of this study are representative of the guidelines that outline typical qualitative inquiry. Qualitative methods seek to better understand specific phenomena based upon individualized experiences. Additionally, qualitative studies “permit cross-site comparisons without necessarily compromising within-site understanding” and support investigative efforts via multidimensional theories (McLaughlin, 1999; Polkinghorne, 2005). Relatedly, qualitative studies flexibly establish meaningful connections via in-depth interviews and open-ended questionnaires in order to preserve the integrity of the investigation (DiCecco-Bloom & Crabtree, 2006). Research specialists often rely on qualitative analysis in order to determine *how* and *why* specific feelings emerge as a result of extrinsic interference (Sutton & Austin, 2015). According to Gerring (2017), skilled qualitative empiricists value the explication of causal relationships and perceptual similarities for the purpose of reducing hypothetical bias.

This qualitative study sought to explore the perceptions of speech-language pathologists in relation to workload manageability within public-school settings in Southwestern Pennsylvania. A deeper understanding of SLPs’ perceptions foundationally increased the probability of manufacturing usable strategies for remediation purposes. Additionally, supplemental assistance, in respect to conceptualization certainty and/or uncertainty, relevantly influenced philosophical findings (Finn, 2011). The remainder of this chapter focuses on associated procedural efforts, sample size and selection processes, as well as methods of data collection and analysis.

## Participants

This study explored the perceptions of speech-language pathologists in regard to workload manageability. Therefore, a small sample of certified speech-language pathologists served as the primary demographic. All participants were employed within public-school systems located in Southwestern Pennsylvania and held a certificate of clinical competence (CCC) through the American Speech-Language-Hearing Association at the time of the investigation. As previously stated, nationally credentialed SLPs are required to maintain a high-level of excellence relative to clinical services, are accomplished supervisors, and are also able to participate in third-party billing tasks (“General Information,” n.d.). CCC maintenance was of paramount importance for this study given the additional workload responsibilities that accompany the aforementioned level of certification. Additionally, all participants managed a caseload of at least 50 or more students diagnosed with a variety of disabilities ranging from mild communication disorders to non-verbal students who present with multiple disabilities, including autism and Down syndrome. Comprehensive demographic characteristics are documented in Table 7.

**Table 7**

### *Sample Demographics*

Participant	Gender	Years of Service	Caseload Size	Range of Disability	District	District Population (Approximation)
P1	Female	18	65	Mild-Severe	D1	5,300
P2	Female		65	Mild-Severe	D2	3,800
P3	Male		50	Mild-Severe	D3	2,300
P4	Female		76	Mild-Severe	D4	3,200

Participant	Gender	Years of Service	Caseload Size	Range of Disability	District	District Population (Approximation)
P5	Female		55	Mild-Severe	D1	5,300
P6	Female		67	Mild-Severe	D4	3,200
P7	Female		70	Mild-Severe	D1	5,300
P8	Female		62	Mild-Severe	D4	3,200

*Note:* Demographic characteristics, specifically, district population, reflect 2019-2020 school-based data. (“Special Education Data Reporting,” 2020).

Eight SLPs within four public school districts, located in Southwestern Pennsylvania, participated throughout the course of a two-month investigation. Despite a desire to arrange a diverse sample of participants, a paucity of male CCC-SLPs prompted the researcher to utilize a purposeful sampling approach in order to recruit interested individuals. Purposeful sampling is an explicit process by which individuals are chosen based upon the presence of precise characteristics (Etikan, 2016). All individuals presented with applicable capabilities pertaining to job performance expectations and demonstrated knowledge in regard to the field of speech pathology.

### **Site Permission**

Following approval from the Institutional Review Board (IRB), school-based SLPs were contacted in April of 2021, via an introductory email. A formal letter of request proceeded primary induction measures followed by descriptive correspondence in the form of a comprehensive contract of agreement. Documentation outlined specific participatory requirements and timeline ordinances. Additional inclusionary factors summarized the premise

of the investigation as well as predetermined sources of data collection, risks, benefits, and methods of data analysis.

### **Sources of Data**

Multiple sources of data were utilized in order to obtain relevant information pertaining to SLPs' perceptions of workload within the public-school setting. The use of multiple sources of data increased reliability while also reducing the potential for erroneous interpretation (Amanfi, 2019). This study primarily focused on the use of synchronous interview sessions and anecdotal documentation. Semi-structured inquiries targeted individualized experiences within the field of speech pathology, workload responsibilities, professional competencies, and perceptual adaptations relevant to caseload growth and workload manageability. Additionally, open-ended discussions emphasized perceived personal challenges that arose as a result of suspected workload variations. Moreover, open-ended questions allowed the co-investigator to implore basic demographic information while also examining perceptual certainties in regard to personal philosophies.

### **Synchronous Interviews**

Semi-structured interviews were conducted via Zoom technology, a twenty-first century video-conferencing tool (Gerring, 2017). The interviews were prescheduled and conducted prior to or after participants' professional work day. Lasting no longer than sixty minutes and taking place throughout the months of April and May, the synchronous format allowed the co-investigator to capture SLPs' nonverbal cues, including facial expressions and body language, which appeared to humanize opened-ended responses. Jamshed (2014) validated the use of interviews when conducting qualitative research despite the fact that formidable outcome measures may be impacted secondary to subjective interference. Table 8 offers a comprehensive



view of the semi-structured interview questions that were used in order to explore this study's research questions.

**Table 8**

*Research and Interview Questions*

Research Questions	Interview Questions
RQ1: What workload responsibilities do school-based speech-language pathologists perceive as the most demanding?	Describe your experience as a school-based speech-language pathologist, including years of professional service.  What is your understanding of the terms caseload and workload in relation to school-based speech and language support services?  Describe your caseload in terms of student population and range of disability.
RQ2: How do school-based speech-language pathologists describe the relationship between perceived workload demands and job performance?	Describe your current workload responsibilities.  What, if any, factors impact your perception of workload?  Describe any professional barriers that you may have encountered while managing workload responsibilities?
RQ3: How do school-based speech-language pathologists view the impact of perceived workload demands on their body, mood, and/or behavior?	Describe any psychological responses that you may have experienced while managing occupational responsibilities.  Describe what administrative support is available to enable you to manage workload obligations.

**Procedures**

Following IRB approval, an introductory email was submitted to 12 school-based SLPs in order to gauge interest. SLPs were purposefully selected based upon certification requirements, caseload size, and district population. It is to be noted that email addresses were obtained from

school district websites. Eight SLPs responded in agreement therefore prompting the co-investigator to forward a formal consent to participate via electronic methods. Upon review of returned consents to participate, all eight SLPs were chosen to participate in a semi-structured interview session in which they were subjected to questions pertaining to professional experiences and perceptual understandings of SLP workload obligations. The interview sessions lasted no longer than one hour and took place via Zoom technology during a mutually agreed upon day and time. In order to preserve the integrity of participants' responses, semi-structured interview sessions occurred outside of professional work hours.

Interview sessions mirrored traditional question-response methods with periods of open-dialogue which allowed the co-investigator to observe and document aspects of participants' nonverbal cues, including body language. Participants were exposed to questions pertaining to demographic characteristics, workload responsibilities, administrative support, best practice guidelines, and perceptual beliefs. Meticulous analyses of data, utilizing a qualitative coding system, proceeded semi structured data collection methods.

Throughout the course of the investigation, participants and public school entities were respectfully referred to as P1-P8 (participant) and D1-D4 (district) in order to maintain confidentiality and anonymity. Additionally, all identifiable documentation remained classified on a password protected computer and/or was stored within restricted locations. Further, participants were provided with the opportunity to withdraw from the study without penalty. Minimal risk for coercion was noted given the co-investigator's current level of employment as a certified school-based speech-language pathologist; however, all necessary measures were taken in order to reduce the presence of coercive behaviors during synchronous interview sessions, including tone of voice and body language.

## **Data Analysis**

Data for this study was analyzed using qualitative data analysis software. This method of analysis supported the interpretation of anecdotal documentation and increased the authenticity and validity of the research. Additionally, reputable software provided the co-investigator with a meticulous coding system that defined themes and patterns that were identified within the data (Nassaji, 2015). Specific data points, including synchronous interview responses, interview transcripts, and observational notes were automatically coded using thematic analysis. Thematic analysis is the process of defining specific patterns and themes through the use of codes (Nowell, et al., 2017). Thematic analysis methods supported the premise of this investigation because uncovering patterns and/or themes related to the perceptual anomalies of speech pathologists who manage demanding workloads was necessary in order to address the documented research questions.

Obtained evidence from the aforementioned sources of data were individually defined using descriptive coding proceeded by NVivo coding. Descriptive coding assigns a relevant code to specific topics while NVivo coding adds meaning to data by accentuating participants' verbalizations (Castelberry & Nolen, 2018). As per thematic analysis guidelines, functional software systems automatically aggregated, systematized, and analyzed codes in order to generate meaningful themes relevant to the premise of the investigation (Nowell, et al., 2017).

## **Summary**

The purpose for conducting this qualitative study was to explore the individualized perceptual philosophies of school-based SLPs who manage demanding workloads and the personal and professional implications that arise as a result. Therefore, it was necessary to utilize a qualitative methodology in order to be able to intricately deduce thematic patterns relevant to

the premise of the investigation (Patton, 2015). A comprehensive understanding of participants' experiences and feelings vitally contributed to plausible problem-solving certainties.

Additionally, establishing meaningful connections, via in-depth interviews, preserved the integrity of the investigation (Amanfi, 2019).

Empirical evidence historically supports the use of open-ending dialogue for the purpose of conducting an in-depth exploration of a person, a group, and/or a specific situation (Starman, 2013). This study's qualitative design allowed the researcher to capture personalized data relative to a specialized group of school-based professionals. Despite a lack of generalizability in terms of qualitative inquiry, multiple sources of data and associated methods of analysis prompted a specific level of subjective inference in regard to suspected outcome measures.

In order to preserve the integrity of this qualitative investigation, the researcher maintained appropriate and ethical treatment of all participants throughout the entirety of the data collection process. Additionally, in accordance with the Belmont Report, subjects were notified of participatory requirements, minimal risks, and potential benefits ("The Belmont Report," n.d). Moreover, in compliance with ASHA's Code of Ethics, SLPs were treated professionally and with respect ("Code of Ethics," 2016).

Proceeding chapters of this report focus on a more comprehensive view of noted data collection methods. Additionally, forthcoming narratives provide a thorough analysis of qualitative results. Moreover, conclusive information documents overall limitations and future investigative needs.

### **Chapter 3: Findings**

As previously mentioned, federal and state legislative actions have drastically expanded the roles and responsibilities of school-based speech-language pathologists. As a result, SLPs are seemingly confronted with a broad scope of practice marked by challenging clerical, instructional, and collaborative obligations (“Roles and Responsibilities of Speech-Language Pathologists in Schools,” 2010). Therefore, this qualitative study sought to better understand the concept of workload manageability by exploring the perspectives of practicing SLPs. The use of semi-structured interviews allowed the co-investigator to gather data relevant to SLPs’ knowledge, viewpoints, and attitudes as related to expected occupational obligations. Proceeding narratives outline common themes that emerged as result of the aforementioned data collection methods.

#### **Theme 1: School-Based Speech-Language Pathologists’ Perceptions of Workload and Caseload**

In regard to special education, caseload refers to the total number of students that teachers and support personnel are responsible for servicing within the public-school setting. Relatedly, workload summarizes all job-specific tasks and obligations performed by educational professionals (“A Workload Analysis”, n.d.; “Implementation Guide,” n.d.). Despite a positive correlation, reputable advocacy organizations, including ASHA, discourage synonymous use of the terms. Unfortunately, lawmakers continue to ignore unequivocal conceptual variations therefore prompting educational leaders to remain idle relative to archaic caseload dissemination methods. Generally, public-school systems adhere to state caseload caps as opposed to evidence-based workload approaches when distributing students amongst districts’ certified SLPs. As a result, SLPs are likely to experience workload inequities (Woltman & Camron, 2009).

To effectively evaluate SLPs' perceptions of workload manageability it was necessary to first obtain data relevant to participants' understanding of caseload and workload. An open-ended level of inquiry was used and allowed the participants to share explicit definitions and characteristics based upon personalized experiences. Semi-structured questioning techniques further enabled participants to provide detailed and customized responses without restrictions. For example, when defining caseload, all participants offered a concrete description and consistently utilized the phrase "number of students." P6, a veteran SLP, further concluded caseload to be a manifestation of federal and state legislature, stating "caseload would be the number that you're allowed to have, so in Pennsylvania it would be 65 students." According to the American Speech-Language-Hearing Association, the preceding assertion reflects the viewpoints of most professionals within the field and coincides with standard denotations ("Workload and Caseload," n.d.).

A more customized approach framed discussions pertaining to workload. Five participants recounted specific occupational responsibilities, including paperwork, parent/teacher contacts, collaborative planning sessions, evaluations, interventions, and lesson plan development. Severity of disability was also a significant topic of interest in regard to workload. P1, P5 and P8 perceived a positive correlation between students' level of cognitive and/or communicative impairment and occupational responsibilities. Specifically, students with more severe disabilities require additional time and effort, thus amplifying workload tasks.

P1 asserts:

Workload would be what is expected as far as how many [speech and language support] sessions that you are required to provide to each student, what is involved in their level of programming, making sure that you're following their specially designed instruction,

communicating with parents, and working with other professionals. So obviously some students are more involved than other students. You may have a caseload of 65 students, however, the severity of need or level of support drastically impact SLPs' workloads. P1's recollection reflects the importance of viewing caseload as an aspect of workload rather than as an exclusive entity. This finding corresponds with ASHA's position on the caseload-workload debate. According to ASHA, "total workload activities must be taken into account when setting caseload standards" ("A Workload Analysis Approach," 2002).

Another SLP, P5, further contends a relationship between caseload and workload. The participant described workload in terms of the number of student interactions and volume of time consumed, stating "workload would be understanding that certain students on your caseload, dependent upon their needs, may take up more hours of your time based on the frequency of sessions that they are serviced." P5's response further validates the insignificance of evaluating arbitrary caseload caps. Instead, state education agencies and public-school entities are encouraged to consider the needs of students in conjunction with availability of time in order to maximize students' progress (Woltman & Camron, 2009).

All participants' responses appeared to align with the aforementioned statements; however, supplementary evidence, in the form of side-bar conversations, suggests a lack of confidence in regard to stakeholders' knowledge-base and the adverse consequences that may occur as a result. Multiple participants, particularly those with less than 10 years of professional service, agreed that educational experts, outside of the speech pathology profession, recognize caseload as a quantitative concept; however, "they don't fully understand the need to consider workload as an aspect of caseload." Exclusive findings offer insight in regard to the potential relationship between employment longevity and fieldwork perceptions. Specifically, the

perceptions of practicing SLPs with less than 10 years of service may significantly differ from those with more experience.

## **Theme 2: School-Based Speech-Language Pathologists' Perceptions of Workload on Professional Performance Measures**

SLPs' scope of practice within a public-school setting includes a wide range of professional undertakings. Such activities are representative of those assigned to both general and special education teachers, including clerical competencies and non-instructional duties, while others primarily focus on a breadth of services specific to the field of speech pathology. Additional labors target clinically-based habilitative and advocacy domains relevant to areas of student need. Failure to comply with operational policies and procedures could result in personnel challenges, legal repercussions, and/or pedagogical quandaries (Caeser, 2007). The following statements support the aforementioned notion and presumptively authenticate previously derived theories and/or beliefs relevant to professional performance predicaments. Specific interview questions directly addressed participants' caseload characteristics, including number of students serviced, range of disability, and frequency of intervention sessions. Additional areas of discussion focused on SLPs' perceptions of and experiences with supposed vocational hinderances.

### **Methods of Service Delivery**

During discussions pertaining to professional implications, six participants identified service delivery as an area of concern. Service delivery, as defined within the school setting, is a flexible method whereby intervention setting, frequency, duration, and format of direct services are dependent upon the individualized needs of each student. Research suggests improved student progress given continual review and modification of methods of service delivery



(“School-Based Service Delivery in Speech-Language Pathology,” n.d.). In this study, respondents expressed a desire to manipulate students’ prescribed treatment sessions; however, caseload and workload demands perceivably impact their ability to do so. Semi-structured conversational threads revealed specific examples of service delivery inadequacies with P5 stating the following:

If my workload wasn't high, then I would be able to provide more direct services to students or provide services more frequently. Similarly, I think that I would be able to, not that services aren't individualized, but I think that I would be able to provide even more individualized instruction if I didn't have a higher workload which I think would probably help students meet goals faster.

Similarly, P8 expressed a desire to limit class size in order to maximize student progress; however, caseload inequities and “taxing” workload obligations interdict the ability to do so. P8 shared the following statement:

So, I wish that I could see kids in smaller groups. I feel, especially with articulation students, when you have a big group, you just don't get as many repetitions in with them. If you could have a smaller group, I feel like you could provide repetition after repetition after repetition in order to improve progress.

Seven of eight participants agreed that it often difficult to liberally adjust services rendered secondary to “heavy” workload expectations. P7 and P8 further contend subsequent obstacles with respect to meeting the needs of students with complex disabilities. It can be argued that students who present with significant cognitive impairments may benefit from aggressive intervention plans; however, time constraints impact SLPs’ ability to do so. It is worth noting that P3’s viewpoints directly contradict those of the other participating SLPs. P3 maintains a caseload of

approximately 50 students within three of the districts' five buildings. Caseload characteristics range from mild articulation differences to severe communication needs. Despite onerous workload expectations, P3 is able to “adequately” render “appropriate” speech and language support services to all students regardless of disability.

### **Clerical Expectations**

SLPs are required to comply with a plethora of administrative tasks in order to maintain adherence to legal mandates. More than half of the interviewees agreed that it is often “difficult” to “keep up with” clerical expectations, including electronic/written correspondence, report documentation, data collection, and Medicaid billing. The “pressure” to complete paperwork obligations in a timely manner often interferes with intervention planning and/or programming assignments. P7, manages to comply with necessary requirements; however, not without compromising other areas of professional engagement.

I would definitely say progress report writing, data collection, and medical access take time away from direct therapy sessions. I know that we're taking data during therapy sessions as well, but we're also having to enter it in a way that we can, you know, keep it for years to come in case we would get audited and then also have it in an organized way so that we're able to do our progress report writing more efficiently. I definitely feel that data collection and paperwork tasks impact your ability to accurately service students.

The corresponding statement reputedly aligns with empirical data and alleges a positive relationship between SLPs' caseload characteristics and workload implications, specifically, clerical conundrums. P7 presented with five years of full-time experience as a school-based SLP at the time of the interview. Approximately 30 of the participant's 70 students carry diagnoses that require substantial rehabilitative services. According to ASHA, 59% of SLPs who manage

caseloads of at least 50 students perceive workload obligations, such as paperwork, as unmanageable (“Challenges of Successful Recruitment,” n.d.).

## **COVID**

In March of 2020, Pennsylvania state education systems experienced unprecedented instructional challenges related to COVID-19, a highly contagious respiratory disease (“Basics of COVID-19,” 2021). Government-issued mandates, under the direction of the Centers for Disease Control and Prevention (CDC) as well as the Pennsylvania Department of Health (PDOH), subsequently prompted school closures and forced educational leaders to promptly implement unique models of instruction in order to ensure continuity of services. During the latter half of the 2019-2020 school year and throughout the entirety of the 2020-2021 academic season educators faced incomparable pedagogical challenges centered upon hybrid-based models of instruction and learning. Further, special education teachers and related service providers, including speech-language pathologists, experienced additional obstacles, marked by the appearance of supplementary roles and responsibilities, including virtual methods of service delivery and compensatory-related obligations.

Semi-structured interview questions failed to directly address COVID-19; however, given the timeframe of this study, the participants frequently referenced pandemic-linked complications and concerns. For example, P4 stated the following:

During the day, especially this year, it's hard. We see the kids during the daytime and then our afternoon is for planning and online instruction. The students only come a half of day. So, this year with workload, we had a lot of extra requirements, specifically, learning to Zoom and providing online services.

Additionally, P4 described “pressures” related to maintaining compliance in regard to paperwork, and providing online therapy services to students who are primarily non-verbal. Similarly, P6 and P7 described service delivery challenges, scheduling inadequacies, and organizational dilemmas as a result of the district’s ability to fluidly manipulate available models of instruction.

### **Theme 3: School-Based Speech-Language Pathologists’ Perceptions of Workload on Physical and Emotional Wellness**

Scientific evidence strongly supports a positive correlation between workload characteristics and employees’ social-emotional well-being. Physical and/or emotional factors, including job satisfaction, stress, burnout, and/or anxiety often arise as a result of limited supply (resources) and increased demand (occupational responsibilities) (Ewen et al., 2020). The following data are indicative of such theories and add relevance to documented assertions.

#### **Physical Responses**

Irregular heart rate, high blood pressure, rapid breathing, and muscle tension are common physical responses to stress. The American Psychological Association (APA), affirms the presence of these chronic ailments in individuals who experience stress within the workplace (“Stress Effects on the Body,” 2018). The APA, a professional organization, strives to improve societal conflicts via psychology-based initiatives (“About APA,” 2021). Relatedly, the World Health Organization (WHO), a global leadership group responsible for improving the health and safety of others, outlines additional physical symptoms of work-related stress, including loss of sleep, weight gain, back pain, headaches, and muscle spasms (“Occupational Health: Stress at the Workplace,” 2020; “About WHO”, 2021). According to Min Oh (2019), speech-language pathologists are often subject to high levels of stress given their wide scope of practice which often result in the aforementioned health-related physical conditions. In regard to the current

investigation, P1 often experiences moments of “high blood pressure” while P5 receives monthly chiropractic care in order to relieve work-related tension headaches and neck spasms. It is to be noted that P1 and P5 provide speech and language support services within the same school district and manage a perceivably high caseload of students with mild to severe communication needs. Additionally, as previously documented, both SLPs reported service delivery challenges, clerical dilemmas, and frequently endure instructional hindrances that may impact students’ level of progress.

### **Emotional Responses**

Stress is a subjectively diagnosed emotional reaction to situational experiences which can metamorphosize into or co-occur with other mental health conditions, including generalized anxiety (Felman, 2018). Similarly, stress and subsequent feelings of anxiety can result from perseverative thoughts pertaining to specific stimuli and rank amongst the most common of mental health impairments. Defining characteristics include, but are not limited to, social phobia, disinterest, worry, fear, irritation, loss of sleep, and lack of concentration. Occurring simultaneously or in autonomy of one another, symptomatic traits may result in disabling psychosocial pathologies (Camposano, 2011). In regard to work-induced stress and anxiety, long-term exposure may negatively impact productivity of services, lead to low job satisfaction, and produce high rates of attrition (Caeser, 2007).

All participants within this study utilized one or more of the following terms when discussing workload: stress, anxiety, and/or frustration. However, according to the obtained data, the degree to which the aforementioned emotional responses are experienced, varies. P3, the sole male participant, described himself as a “very laid-back person” who at times experiences occupational stress; however, for the most part his workload is generally manageable.

Conversely, workload tasks “can be mentally upsetting” and “overwhelming” for others, including P4. In an effort to complete required tasks in a timely manner, including collaborative activities and paperwork, P4 further describes “feeling anxious” and occasionally experiences “increased stress levels” during the school year. Relatedly, an excerpt from P1’s interview comprehensively summarizes similar conceptions and is as follows:

I think that any SLP that really, truly has passion like we're all helpers, right? We all want to help. However, you get frustrated a lot of times with your job because suddenly paperwork or additional responsibilities that you weren't expecting arise and you can't give 100 percent to everything right? And it frustrates you because you want to, you know, do your job well, but you just don't have the time to do that and then it stresses you out. How are you supposed to get all of your medical billing done, and your progress monitoring, and data collection, and your IEPs, and your ERs? And then you may have to screen a student. It's a balance that's really hard to achieve.

The previous statement coincides with the viewpoints of a vast majority of participants in this investigation and seemingly insinuates a positive correlation between occupational tasks and social-emotional wellness. Similar studies offer comparable findings and consequently emphasize the need to re-evaluate fixed policies and procedures in order to establish objective caseload standards (Garfinkel, 2018).

#### **Theme 4: Educational Stakeholders’ Understanding of the Roles and Responsibilities of School-Based Speech-Language Pathologists**

In order to obtain employment as a speech-language pathologist within a public-school setting, candidates must meet a standard set of requirements. In the state of Pennsylvania, applicants need to complete predetermined baccalaureate and post baccalaureate programming

requisites, achieve passing scores on local and national standardized assessments, and display solid professional and interprofessional skills (“Pennsylvania Teacher Requirements for Audiologists and Speech-Language Pathologists,” n.d.). Educational stakeholders, specifically school administrators, are typically acutely aware of the aforementioned terms and often reference generalized competences during routine interviews (Jones, 2009). Despite baseline field knowledge, forthcoming data indicates potential misunderstandings in regard to SLPs’ full scope of practice.

### **Family Representatives**

Parents and/or guardians are considered to be valuable members of IEP teams. As primary advocates for students’ educational rights, familial representatives are legally required to engage in professional discussions pertaining to their child’s special education programming plans and options. However, parents may not fully comprehend participatory guidelines and often fail to fully comply. The authors also assert a paucity of knowledge in regard to supplementary aids and services, including those related to areas of communicative need (Senay and Konuk, 2019).

The current investigation adds relevance to previously documented assertions via opinionized statements from several participating SLPs. As per P7, “unrealistic parent expectations” often interfere with the timely implementation of recommended service plans and subsequently generate “additional workload assignments for affected practitioners.” Another SLP agreed that “parents don’t always truly understand service delivery procedures and tend to make requests that don’t align with the needs of the students.” Further, comparable proclamations from multiple respondents assume that noted misunderstandings impact SLPs’

ability to adequately perform work-related tasks and seemingly influence the relationship between clinician and parent.

### **General Educators**

It is common for speech-language pathologists to collaborate with both regular and special education teachers throughout the course of an IEP year. Intermittent consultative sessions allow team members to review and revise special education plans in order to adequately address the changing academic needs of students. However, SLPs are often viewed as invalid members of IEP teams given a lack of educators' knowledge pertaining to their assigned school-based roles and responsibilities. As a result, practicing clinicians are frequently excluded from cooperative conferencing sessions that focus on students' strengths and documented areas of need (Hatcher, 2017). While similar studies emphasize general educators' perspectives in regard to the field of speech pathology, current investigative efforts focus on individualized feelings, attitudes, and beliefs of practicing SLPs. Nonetheless, novel data lend supplemental support to related empirical findings while simultaneously fostering the premise of the present study.

Semi-structured interview questions pertaining to workload and the potential psychological responses experienced by SLPs prompted several discussions related to feelings of inadequacy within the workplace. Participants believe that required IEP members, including general education teachers, do not fully understand the importance of school-based speech services and therefore refrain from engaging in professional discourse. Participant 8 (P8) explains:

There are some individuals, including teachers, that don't think that we have a job because we may only have one or two students at a time. They assume that we don't have any complicated professional responsibilities. Additionally, I feel that teachers, not all teachers,



presume that our workload is easily managed. They don't always understand the range of tasks that we are responsible for completing on a daily basis.

Likewise, participant 7 (P7), further explains:

I receive a lot of pushback regarding pull-out services; therefore, scheduling is often difficult as general education professionals would prefer that students attend speech and language support during non-academic times. Teachers aren't always aware that we are required to travel to multiple buildings, attend meetings, and complete paperwork in addition to servicing students. The pressure to comply often causes unwanted and unnecessary stress.

Professional misunderstandings are partially attributed to a lack of cross-industry training. As per research-based findings, pre-service and within-service educators would benefit from opportunities to further their awareness of related fields of study in order to eliminate barriers that seemingly impact collaborative relationships and student outcomes (Pfeffer et al., 2019).

### **Administrative Leaders**

According to Jones (2009), administrative leaders, including, but not limited to, superintendents, special education directors, and/or principals are responsible for improving educators' level of instructional proficiency via reputable evaluation systems. In order to effectively assess professional competencies, including those relevant to SLPs, supervisors are required to hold state-level certifications. However, administrators' credentials are generally better suited to address the abilities of regular and special educators as opposed to those affiliated with clinically-based speech services. In essence, a lack of ASHA certified school leaders within public-school settings may inherently impact proficiency of speech and language support services and induce a variety of ambiguous feelings in practicing pathologists.

Participant 6 (P6), a 16-year practicing pathologist, considers school administrators, specifically principals and directors of special education, to be invaluable members of multidisciplinary support teams. Interactions are described as positive in nature. Support, in regard to physical resources, is typically provided when needed. However, when responding to specific questions pertaining to administrative support and workload, P6 provided the following statement:

Honestly, I haven't gone to an administrator with concerns about managing everything recently. I don't think that there is really anything that they can do. In the past, I have mentioned to the Director of Special Education that my caseload is getting high. As a result, my methods of evaluation and instruction were questioned. Administrators asked if students were being service properly or if any should be dismissed.

Relatedly, other participants described feeling “unnoticed” and “misunderstood” as professionals. Three SLPs utilized the term “frustrating” when discussing instructional situations that required administrative approval. For example, P4 stated the following:

We may ask administration for things that we need for students. For instance, I had a few students that needed a communication device and it was frustrating because the district continuously questioned the recommendation. It can be emotionally tolling when you aren't able to provide students with necessary resources.

Similarly, P3, stated that support is “great” when a request doesn't require financial assistance; however, in regard to workload, “they don't know what we do, so they can't help. Sometimes they don't understand what we want because they don't know what we do.”

As previously mentioned, the efficacy of intervention services is somewhat dependent upon the “leadership of the supervisor” (Salloukh, 2019). Therefore, it may be necessary to

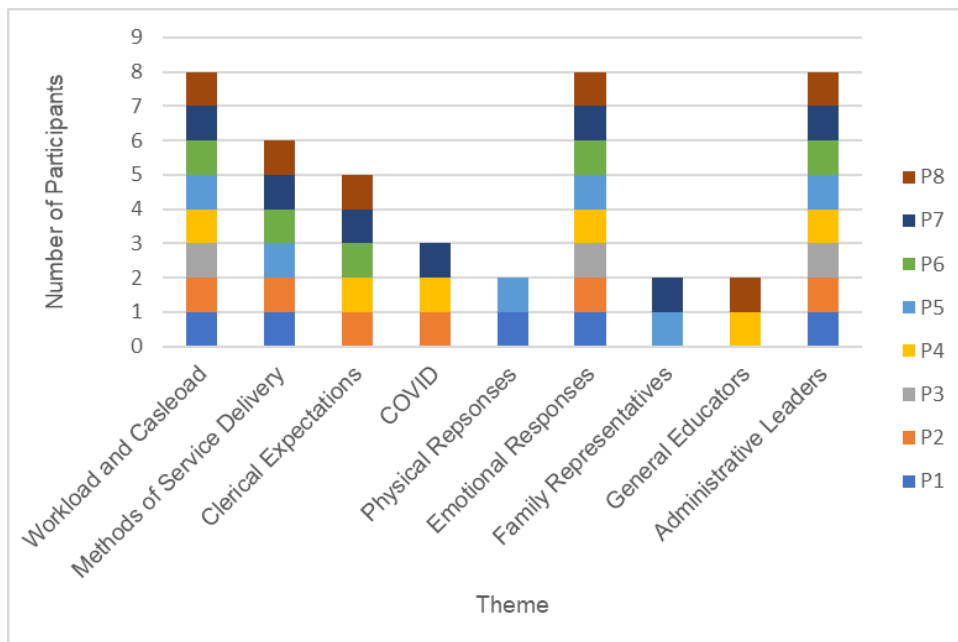
extend research efforts in order to examine school administrators’ perceptions of school-based speech and language support services. Forthcoming narratives will address a more comprehensive summary of future investigative needs.

### Summary

Analyses of qualitative data revealed several major themes in regard to SLPs’ perceptions of workload within a public-school environment. Generally, practicing pathologists understand the difference between caseload and workload; however, somatic symptoms as well as feelings of stress and anxiety often emerge as a result of associated workload inequities. Further, professional implications, including those related to methods of service delivery and student progress are perceivably impacted by a wide scope of practice and associated occupational tasks. Lastly, educational stakeholders’ misconceptions of the roles and responsibilities of related service providers ostensibly influence pedagogical practices. For additional clarification, Figure 2 references participants’ responses in relation to documented themes.

**Figure 2**

*Participants’ Responses in Relation to Themes*



Chapter 4 explores meaningful relationships between collected data and emergent themes as well as suspected limitations. Concluding narratives describe expectations for future investigative studies.

## **Chapter 4: Discussion and Conclusion**

This qualitative investigation utilized semi-structured interviews in order to gather information relevant to school-based speech-language pathologists' perceptions of workload within a public-school environment. Analyses of obtained data revealed several major themes in addition to viable supplemental support with respect to the topic of interest. Pending narratives re-examine those themes and add relevance to empirical support by comparing current data to preexisting evidence. Chapter 4 dynamics also address noted limitations, including investigative drawbacks and/or oversights. Concluding remarks consider suggestions for future research.

### **Perceptions of Caseload and Workload**

As indicated in the results, speech-language pathologists are acutely aware of the defining characteristics of caseload and workload. Despite a mildly diverse sample, in regard to each districts' student population and socioeconomic status, all of the subjects willingly engaged in conversational speaking tasks pertaining to the conceptualization of the aforementioned terms. In accordance with the American Speech-Language-Hearing Association, participants consistently used the phrase "total number of" when referring to caseload. However, transcriptions indicated slight variations in relation to the verbiage used to describe workload.

Despite noted similarities amongst SLPs, differences appeared to be marked by depth of professional knowledge and experience. For example, participants with more than seven years of service provided comprehensive explanations marked by references to state and federal laws while others offered straightforward descriptions. Additionally, six seasoned clinicians responded to questions without hesitation and within five seconds of presentation. The two remaining SLPs required longer processing time and intermittently produced hesitations, including "um" and "ah" when replying. In congruence with outcome measures produced by Sawatzky (2019), SLPs' level of preparedness is generally impacted by pre-service and within-

service experiences. Therefore, an assumption can be made that the perceptions of the participants in this study are generally aligned with the understandings of subjects who participated in previously conducted investigations that were similar in nature. These findings may be of importance to postsecondary preparation programs and school district administrators seeking to review professional development plans and policies in order to ensure that speech-language pathologists are prepared to provide effective and efficient support services.

### **Perceptions of Workload on Professional Performance Measures**

As per analyses of interview-based data, one could assume that a wide scope of practice coupled with an above average caseload impact SLPs' abilities to adequately complete designated workload tasks. Disadvantaged areas include: service delivery and clerical work. All of the participants in this study manage caseloads of at least 50 or more students with diverse disabilities ranging from mild articulation disorders to severe expressive/receptive language impairments and all participants described some level of discontent in regard to professional performance measures. However, workload characteristics varied and appeared to negatively impact SLPs with caseloads higher than sixty and those responsible for overseeing more than ten students with multiple disabilities. As per transcribed responses, speech and language support students assigned to life skills and or autism support classrooms seemingly require SLPs to put forth more occupational effort than those who exclusively participate in the general education environment. Specifically, the aforementioned group of students require additional time and attention in order to adequately address related clerical expectations as well as documented areas of communicative and/or cognitive need. According to the job demands-resources theory, substantial workload requirements and limited resources may lead to noncompliance and subsequent social-emotional challenges (Granziera et al., 2021). Therefore, it may be beneficial

for school districts to consider utilizing a workload analysis approach in lieu of alleged problematic caseload distribution methods.

Relatedly, a comparison of themed evidence and participants' demographic data indicate a correlation between years of service and caseload characteristics. For example, the two subjects with the least amount of experience, less than 10 years, are responsible for providing speech and language support services to more than twenty students with severe disabilities, including those assigned to specialized support classrooms. It is to be noted that the SLPs are employed in two different school districts with vastly different total student populations but similar socio-economic statuses. Participant 2 (P2) and participant 7 (P7) perceive workload size to be a predictor of student progress, stating that "workload demands impact my ability to functionally support the needs of students." Additionally, "students with severe disabilities would most likely benefit from increased services;" however, paperwork challenges and time constraints generate service delivery obstacles. Other SLPs described similar experiences but to a lesser degree.

In addition to occupational demands set forth by high caseloads and students' level of disability, participants reported increased workload responsibilities secondary to an unexpected global pandemic. As state mandated mitigation efforts prompted school districts to substantially modify existing models of instruction, practicing SLPs reportedly experienced an influx of assignments. More than half of the participants referenced "COVID" when prompted to respond to questions pertaining to workload characteristics and/or potential professional implications. A review of demographic content failed to validate an association between years of service, gender, and/or student population and COVID implications therefore leading the co-investigator to believe the pandemic to be a nondiscriminatory factor. Given the timing of the study, it was difficult to locate evidence-based research findings for comparison purposes.

## **Perceptions of Workload on Physical and Emotional Wellness**

The third major theme primarily focused on stress and anxiety as related to the roles and responsibilities of school-based speech-language pathologists. According to research-based outcomes, working class individuals, including SLPs, may experience emotional and/or physical setbacks secondary to perceived occupational challenges, including deadlines relevant to designated workload tasks (Caeser, 2007). In reference to the current study, all of the participants mentioned either stress, anxiety, and/or frustration when discussing potential personal implications. However, despite consistent use of the aforementioned terminology amongst the sample, the degree to which emotional and/or physical consistencies were experienced, varied. In congruence with previous findings, qualitative characteristics, including years of service and gender, appeared to contribute to the range of responses offered by the participants. As an example, the sole male subject reported intermittent feelings of stress in regard to workload; however, job tasks are generally completed with ease. Conversely, seven female SLPs, two with less than 10 years of professional experience, frequently experience physical ailments and/or mental sensitivities, such as high blood pressure, muscle tension, and/or crying to the extent to which interfere with efficient completion of assignments.

According to themed analyses of data, SLPs servicing more than 20 students with severe speech or language impairments are more likely to experience symptoms related to stress and/or anxiety. As described by several participants, students with significant communicative needs are more likely to require substantial interventions; therefore, additional time and attention may be needed in order to satisfy associated workload requirements. According to evidence-based workload theories, including the framework that the current investigation is based upon,



subsequent mental and/or physical instabilities may occur as a result of the aforementioned assertions (Lesener et al., 2019).

### **Educational Stakeholders' Understanding of SLPs' Roles and Responsibilities**

Perceived misunderstanding of the roles and responsibilities of school-based speech-language pathologists emerged as the fourth major theme. As noted, SLPs value the opinions of various educational stakeholders, including families, administrators, and general educators. For example, in response to open-ended questions pertaining to administrative support and professional implications, the majority of participants feel supported at times; however, they are often “left-out” of the IEP decision-making process and educational suggestions are “devalued” leading to feelings of animosity and/or limited productivity. Salloukh (2019) suggests that practicing educators are generally unaware of the logistics surrounding SLPs’ scope of practice secondary to a lack of pre-service support and within-service professional development. This information may be of importance to postsecondary education systems and school administrators seeking to review and revise current professional development guidelines.

In general, participants within this study consider school administrators, specifically building principals, to be cognizant of professional needs, including those related to necessary instructional resources. However, sometimes “their hands are tied” and additional approval and/or support is required by central office administrators. As per the majority of SLPs’ responses, professional requests and concerns are typically met with resistance and often denied upon climbing the chain of command. It is to be noted that the opinions of three participants vastly differed from the other six SLPs. P1, P5, and P7, all employed within the same financially stable school district, typically feel supported by school administrators in regard to tangible materials and supplies; however, SLPs may need to provide decision-makers with additional

evidence and/or encouragement in order to substantiate initiated requisitions. Further research may be needed in order to understand the perceptions of school administrators in relation to the field of speech pathology.

### **Limitations**

Despite notable advantages pertaining to qualitative research, including intimate sample size and flexibility, apparent disadvantages seemingly eclipsed ambiguous characteristics. Qualitative methodologies customarily failed to quantify necessary data and seemingly obfuscated an already limited repertoire of information. Additionally, a limited sample size and lack of generalizability obscured fundamental outcome measures. Moreover, the potential for subjective bias significantly increased given the use of specific data collection methods.

The interview process was somewhat time consuming and increased the probability of added bias. Open-ended responses were also impacted by differing variables including time of day, pre-existing relationships, weather, lighting, and personal matters. Environmental interference certainly impacted the validity of results while simultaneously influencing a subject's level of participation. Conversely, dissecting information obtained from invasive questioning techniques generated an accumulation of necessary evidence required for substantial procedural and instructional modifications. Although speculative testimony abrogated fundamental learning opportunities and seemingly impacted investigative outcomes, quantitative data produced significant findings and assumingly elucidated valued evidence.

### **Further Research**

The findings from this qualitative investigation add validity to previously conducted studies and offer baseline guidance for future research opportunities relative to school-based

speech-language pathologists and workload management. The proceeding narrative outlines specific recommendations for prospective studies.

Given the dynamics of the current investigation, including a small sample of participants, it may be advantageous to replicate portions of the methodology using a larger and more diverse sample in order to authenticate current outcome measures. Relatedly, the moderately dissimilar responses from the one male participant prompt the need to explore the perceptions of male SLPs in relation to female SLPs. This would allow for a broader understanding of the factors that impact the opinions of practicing clinicians. Second, qualitative studies focused on the knowledge, feelings, and attitudes of educational stakeholders, in regard to the field of speech pathology, could yield results that create systemic change in the policies that govern pre-service and within-service programs. A study of this nature could also improve professional relationships and subsequently strengthen instructional practices. Additionally, a review of student records, including progress monitoring, could add relevance to the investigation.

Perceivably high caseloads coupled with caseload characteristics, including severity of disability, emerged as significant factors in SLPs' overall stress and anxiety. Therefore, forthcoming research opportunities could compare the perceptions of SLPs who work in districts that utilize caseload approaches with the viewpoints of those who manage caseloads based on a workload analysis approach. Should significant results arise, they may support the efforts of advocates seeking to alter the rules and regulations set forth by state education agencies in regard to inequitable caseload caps. Further, findings could decrease rates of attrition, maximize the productivity of practicing speech-language pathologists, and subsequently accelerate students' level of progress.

## APPENDIX A

### INTERVIEW SCRIPT AND QUESTIONS

Participant Name:

Participant Number:

District Name:

District Number:

Date:

Time:

Good Morning/Evening,

How are you today? First, I would like to offer my sincere appreciation to you for taking the time to participate in this study. As I mentioned in emailed correspondence, the title of this investigation is: Workload Manageability: Exploring the Perceptions of School-Based Speech-Language Pathologists. The overarching goal of this investigation is to develop an understanding of practicing SLPs' occupational responsibilities in order to determine if those responsibilities perceivably impact you personally and/or professionally. A comprehensive examination of the perceptual deviations and conceptual misunderstandings of participating SLPs employed within public-school districts could reveal relevant findings in order to alter current methods of caseload dissemination.

I would like to provide a reminder that names of participants and districts will remain confidential and you are permitted to refrain from answering specific questions. Additionally, I would like to record this session in order to accurately analyze collected data. The interview should last no longer than 30 minutes. Do you have any questions before we begin? The recording will start with the presentation of the first question.

---

Interview Questions:

1. Describe your experience as a school-based speech-language pathologist, including years of professional service.
2. What is your understanding of the terms caseload and workload in relation to school-based speech and language support services?

3. Describe your caseload in terms of student population and range of disability.
4. Describe your current workload responsibilities.
5. What, if any, factors impact your perception of workload?
6. Describe any professional barriers that you may have encountered while managing workload responsibilities?
7. Describe any psychological responses that you may have experienced while managing occupational responsibilities.
8. Describe what administrative support is available to enable you to manage workload obligations.
9. Please provide any additional thoughts you have regarding your speech workload.

## APPENDIX B

### DISTRICT RECRUITMENT LETTER AND CONSENT FORM

(NAME OF SCHOOL ADMINISTRATOR),

I am writing to request permission to conduct a research study within the (NAME OF SCHOOL DISTRICT). I am currently enrolled in Slippery Rock University's Doctor of Education in Special Education program and am in the process of completing my dissertation.

The study is entitled: **WORKLOAD MANAGEABILITY: EXPLORING THE PERCEPTIONS OF SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGISTS**

The purpose of the study is to investigate the perceived personal and professional implications that arise as a result of speech-language pathologists' (SLP) workload obligations. A comprehensive examination of the perceptual deviations and conceptual misunderstandings of participating SLPs employed within public-school districts in southwestern Pennsylvania could reveal relevant findings in order to alter current methods of caseload dissemination. Additionally, evidence-based findings may be of significant interest to educational stakeholders, including school administrators and state policy advisors, seeking to revise and refine school-based procedures and policies. Furthermore, data may potentially impact valuable methods of service delivery, student progress, and problematic rates of attrition.

I hope that the school administration will allow me to recruit qualifying speech-language pathologists within your district in order to participate in a synchronous interview session pertaining to the premise of the investigation. Interested SLPs who volunteer to participate will be given a consent form to be signed and returned to the co-investigator prior to the onset of the interview process (copy enclosed).

The interview will last no longer than one hour and will take place via Zoom technology during a mutually agreed upon day and time. Additionally, in order to preserve the integrity of participants' responses, semi-structured interview sessions will occur outside of professional work hours.

If approval is granted, feel free to use the attached template (you will need to add district letterhead and signature) and return via email. Do not hesitate to reach out regarding questions and/or concerns. I look forward to hearing from you soon.

With Appreciation,

(NAME OF CO-INVESTIGATOR)

(CONTACT INFORMATION FOR CO-INVESTIGATOR)

## APPENDIX C

### SCHOOL PERMISSION TO CONDUCT RESEARCH

Dear Institutional Review Board:

The purpose of this letter is to inform you that the (NAME OF SCHOOL DISTRICT), grants permission to Dr. Robert Isherwood and Kerry Pringle to conduct the research titled, **Workload Manageability: Exploring The Perceptions Of School-Based Speech-Language Pathologists**, under the assumption that data will be coded in order to eliminate the risk of disclosure of identifiable information. This also serves as assurance that this school complies with requirements of the Family Educational Rights and Privacy Act (FERPA) and will ensure that these requirements are followed in the conduct of this research.

Sincerely,

*<Name of Signatory>*

*<Title of Signatory>*

**APPENDIX D**  
**INFORMED CONSENT**

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CONSENT TO PARTICIPATE IN RESEARCH

**WORKLOAD MANAGEABILITY: EXPLORING THE PERCEPTIONS OF SCHOOL-BASED SPEECH-LANGUAGE  
PATHOLOGISTS**

Dr. Robert Isherwood, Ed.D. | robert.isherwood@sru.edu | 724-738-2453

Kerry Pringle, M.S., CCC-SLP | kxp1054@sru.edu | 412-400-8334

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**Invitation to be Part of a Research Study**

You are invited to participate in a research study. In order to participate, you must be at least 18 years of age, a practicing speech-language pathologist within a public-school system, and hold a certificate of clinical competence (CCC) from the American Speech-Language-Hearing Association (ASHA). Taking part in this research project is voluntary.

**Important Information about the Research Study**

Things you should know:

- The purpose of the study is to investigate the perceived personal and professional implications that arise as a result of speech-language pathologist (SLP) workload obligations. If you choose to participate, you will be asked to engage in a synchronous interview session via technology-based methods during a mutually agreed upon day and time. This will take approximately one hour.
- Risks or discomforts from this research include breach of confidentiality and coercion; however, the co-investigator will take all proper steps in order to minimize the potential for risks and discomforts that participants of the study may encounter during the course of this investigation.
- The study will offer no direct benefit; however, participants may feel a sense of accomplishment should outcome measures align with internal perceptions.
- Taking part in this research project is voluntary. You do not have to participate and you can stop at any time. Further, it is acknowledged that you may feel obligated to participate based on the professional relationship with the co-investigator; however, please know that your non-participation in this project will have no effect on this professional relationship moving forward.

Please take time to read this entire form and ask questions before deciding whether to take part in this research project.

**What is the Study About and Why are We Doing it?**

The purpose of the study is to investigate the perceived personal and professional implications that arise as a result of speech-language pathologist (SLP) workload obligations. A comprehensive examination of the perceptual deviations and conceptual misunderstandings of participating SLPs employed within a public-school district in southwestern Pennsylvania could reveal relevant findings in order to alter current methods of caseload dissemination. Additionally, evidence-based findings may be of significant interest to educational stakeholders, including school administrators and state policy advisors, seeking to revise and refine school-based procedures and



policies. Furthermore, data may potentially impact valuable methods of service delivery, student progress, and problematic rates of attrition.

#### **What Will Happen if You Take Part in This Study?**

If you agree to take part in this study, you will be asked to participate in a semi-structured interview session in which you will be subject to questions pertaining to professional experiences and perceptual understandings of SLP workload demands. Specific questions may include but are not limited to the following:

- Describe your experience as a school-based speech-language pathologist, including years of professional service.
- What is your understanding of the terms caseload and workload in relation to school-based speech and language support services?
- Describe your caseload in terms of student population and range of disability.
- What factors impact your perception of workload?

The interview will last no longer than one hour and will take place via Zoom technology during a mutually agreed upon day and time. In order to preserve the integrity of participants' responses, synchronous interview sessions will be recorded and will occur outside of professional work hours.

#### **How Could You Benefit From This Study?**

Although you will not directly benefit from being in this study, others might benefit because irrefutable data may potentially impact methods of service delivery, student progress, and rates of attrition.

#### **What Risks Might Result From Being in This Study?**

You might experience some risks from being in this study. They are coercion and breach of confidentiality. There is minimal risk for coercion given the co-investigator's current level of employment as a certified school-based speech-language pathologist; however, all necessary measures will be taken in order to reduce the presence of coercive behaviors during synchronous interview sessions, including tone of voice and body language. Additionally, in order to reduce the risk of breach of confidentiality, qualitative data will be classified. Participants will not be explicitly identified and places of employment will be unidentifiable.

#### **How Will We Protect Your Information?**

We plan to publish the results of this study. To protect your privacy, we will not include information that could directly identify you.

We will protect the confidentiality of your research records by storing sources of data on a password protected laptop, exclusively owned and utilized by the co-investigator. Additionally, hard copies of obtained data will be stored in a locked storage area with keyed access. Furthermore, primary and secondary sources of confidential data will be deleted and/or destroyed. Specifically, email correspondence will be deleted from the server's "trash" folder and paper documentation will be shredded. Your name and any other information that can directly identify you will be stored separately from the data collected as part of the project.

#### **What Will Happen to the Information We Collect About You After the Study is Over?**

We will not keep your research data to use for future research or other purposes. Your name and other information that can directly identify you will be kept secure and stored separately from the research data collected as part of the project.

**What Other Choices do I Have if I Don't Take Part in this Study?**

If you choose not to participate, there are no alternatives. There will be no consequences for choosing not to participate in this study.

**Your Participation in this Research is Voluntary**

It is totally up to you to decide to be in this research study. Participating in this study is voluntary. Even if you decide to be part of the study now, you may change your mind and stop at any time. You do not have to answer any questions you do not want to answer. If you decide to withdraw prior to the completion of this study then you may choose to have any provided data deleted or destroyed or you may allow the investigators to utilize the data for the good of the study.

**Contact Information for the Study Team and Questions about the Research**

If you have questions about this research, you may contact

Dr. Robert Isherwood, Ed.D. | robert.isherwood@sru.edu | 724-738-2453

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**Contact Information for Questions about Your Rights as a Research Participant**

If you have questions about your rights as a research participant, or wish to obtain information, ask questions, or discuss any concerns about this study with someone other than the researcher(s), please contact the following:

Institutional Review Board  
Slippery Rock University  
104 Maltby, Suite 008  
Slippery Rock, PA 16057  
Phone: (724)738-4846  
Email: [irb@sru.edu](mailto:irb@sru.edu)

**Your Consent**

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. I/We will give you a copy of this document for your records. I/We will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

*I understand what the study is about and my questions so far have been answered. I agree to take part in this study. I understand that I can withdraw at any time. A copy of this signed Consent Form has been given to me.*

\_\_\_\_\_  
Printed Participant Name

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date

By signing below, I indicate that the participant has read and to the best of my knowledge understands the details contained in this document and have been given a copy.

\_\_\_\_\_  
Printed Name of Investigator

\_\_\_\_\_  
Signature of Investigator

\_\_\_\_\_  
Date

**Audiotape/Videotape Release Form:**

We request the use of photographic/audiotape/videotape (specify which is used) material of you as part of our study. We specifically ask your consent to use this material, as we deem proper, specifically, for news releases, professional publications, websites and pictorial exhibits related to our study. We also emphasize that the appearance of these materials on certain media (websites, professional publication, news releases) may require transfer of copyright of the images. This means that other individuals may use your image. Regarding the use of your likeness in photographs/audiotape/videotape, please check one of the following boxes below:

- I do...
- I do not...

Give unconditional permission for the investigators to utilize photographs/audiotapes/videotapes (specify which is used) of me.

\_\_\_\_\_

Print Name

\_\_\_\_\_

Participant Signature

\_\_\_\_\_

Date

PLEASE NOTE: Should you choose not to allow your image or voice to be used, we can still benefit from your inclusion as a research study participant.

**APPENDIX E**

**LETTER OF APPROVAL FROM INSTITUTIONAL REVIEW BOARD**



TO: Dr. Robert Isherwood  
Special Education

A handwritten signature in blue ink that reads "James A. Preston".

FROM: \_\_\_\_\_  
James A. Preston, D.Ed., Vice Chairperson  
Institutional Review Board (IRB)

DATE: April 20, 2021

RE: Protocol Approved

Protocol #: 2021-063-88-B  
Protocol Title: Workload Manageability: Exploring the Perceptions of  
School-Based Speech-Language Pathologists

The Institutional Review Board (IRB) of Slippery Rock University has received and reviewed the requested modification(s) to the above-referenced protocol utilizing the expedited review process. The IRB has approved the protocol effective April 20, 2021.

You may begin your project as of April 20, 2021. Your approved protocol will expire on April 19, 2022. You will need to submit a Progress/Final Report at least 7 days prior to the expiration date.

Enclosed are copies of the approved consent and assent forms to be copied for participants to sign. (if applicable)

If you complete the study within the next year, please notify the IRB with a Final Report. The Final Report form and instructions can be found on the IRB website.

Please contact the IRB Office by phone at (724)738-4846 or via email at [irb@sru.edu](mailto:irb@sru.edu) should your protocol change in any way.

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