

# SLP Workplace Survey Conducted June 2023 Summary of Responses

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# Intent of Survey



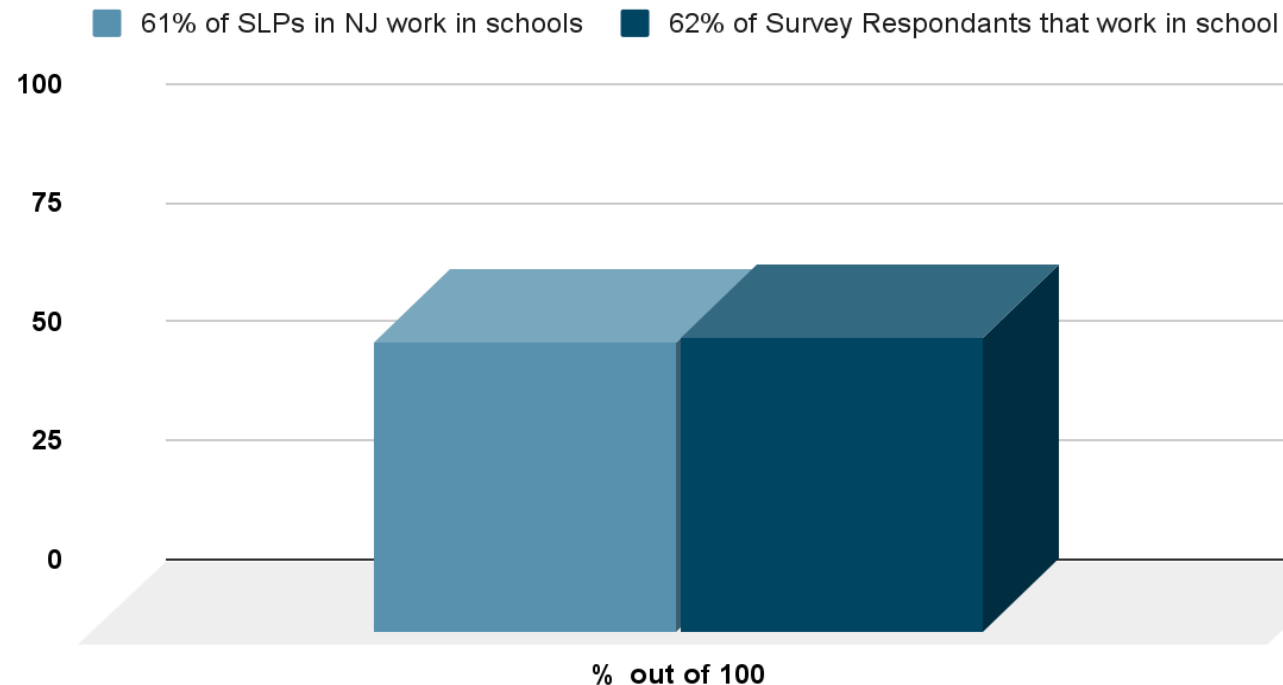
To obtain objective data:

- To identify trends related to perceived shortage of SLPs in New Jersey
- If so, to determine if any shortage is specific to a particular work setting or settings
- To identify trends in hiring, work satisfaction
- To gather information about general workplace satisfaction and concerns
- To identify potential issues that NJSHA can address

# Survey distribution

- The survey was sent out via email to all NJSHA members as well as the NJ licensure list. A link to the survey was posted on social media.
- We had 1197 responses
- Demographic distribution by work setting is disproportional but matches state breakdowns (i.e. per ASHA about 61% of SLPs in NJ work in the schools and 62% of our survey respondents work in schools)

## Survey Distribution (1197 Responses)



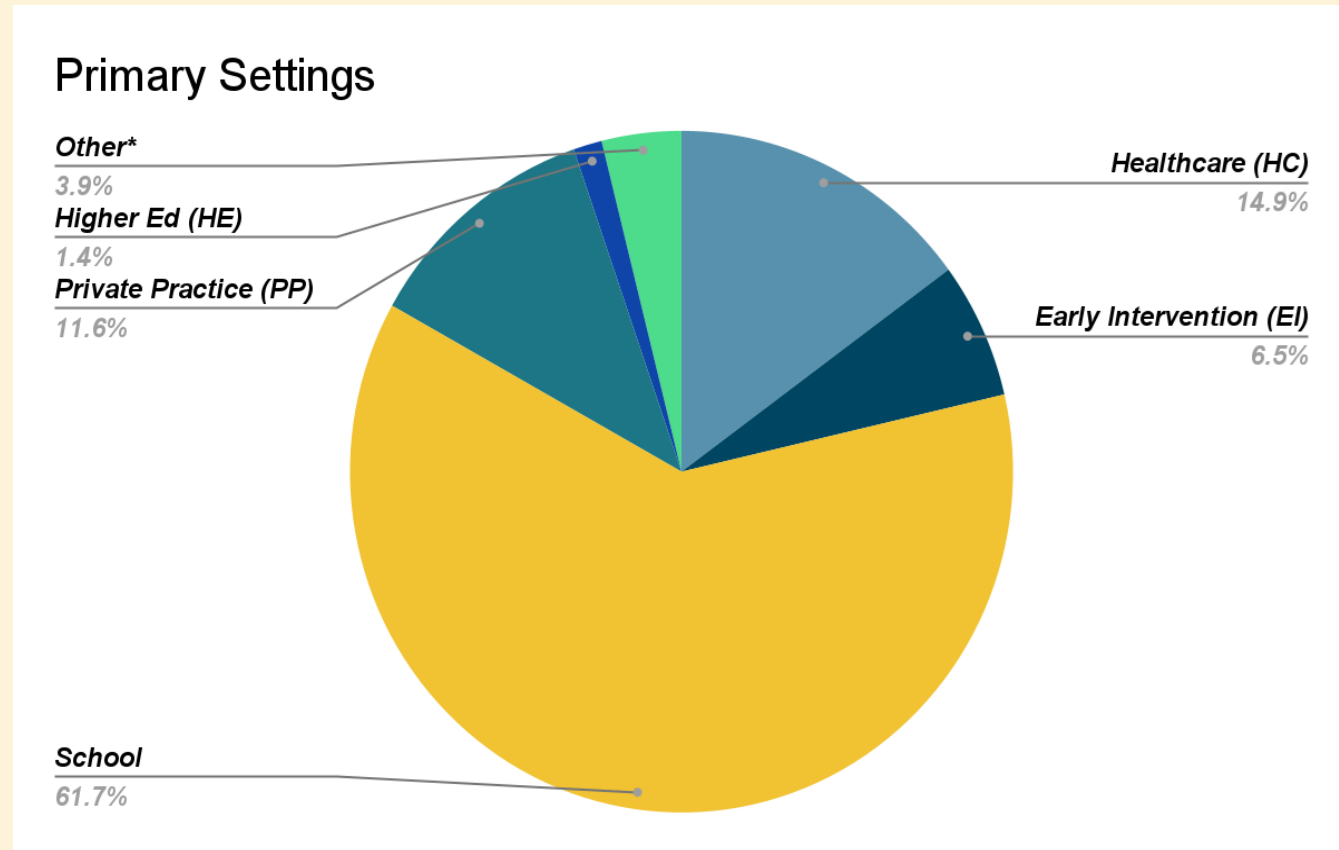
# Respondent pool

The respondents' demographics:

- 78.88% work full time,
- 20% work full and part time (only 1.1% would like to work only full time)
- 40.26% work part time,
- 56.23% do not work part time (however 3.5% would like to)

Primary settings:

14.9%	Healthcare (HC)
6.46%	Early Intervention (EI)
61.73%	School
11.63%	Private Practice (PP)
1.39%	Higher Ed (HE)
3.88%	Other*



\*Other = pediatric rehab (5), outpatient (4), adult day care and community support program (7), home health (6), NJ State Dept of Human Services, placement agency, telehealth (5), rehab center, traveler, AAC sales, ENT office, private school, DDD center, non-profit.

# Limitations of Survey

- We do not know how many respondents work in a single school district, private practice, agency or health care facility. Thus, some of the calculations might over represent a worksite.
- Groups were not even so between group comparisons are disproportional
- Open ended questions may have resulted in biased results - are personal reflections
- Self selecting bias possible as those generally less satisfied may have been more likely to respond
- Wording some questions differently might have yielded different information
- We don't know if openings are true, advertised and funded positions or are needs perceived by respondents due to waiting lists and increasing workloads.



**Pilot study - In the future, plan to conduct another survey with more targeted questions and address limitations.**

# Responses/Results

# Global Trends

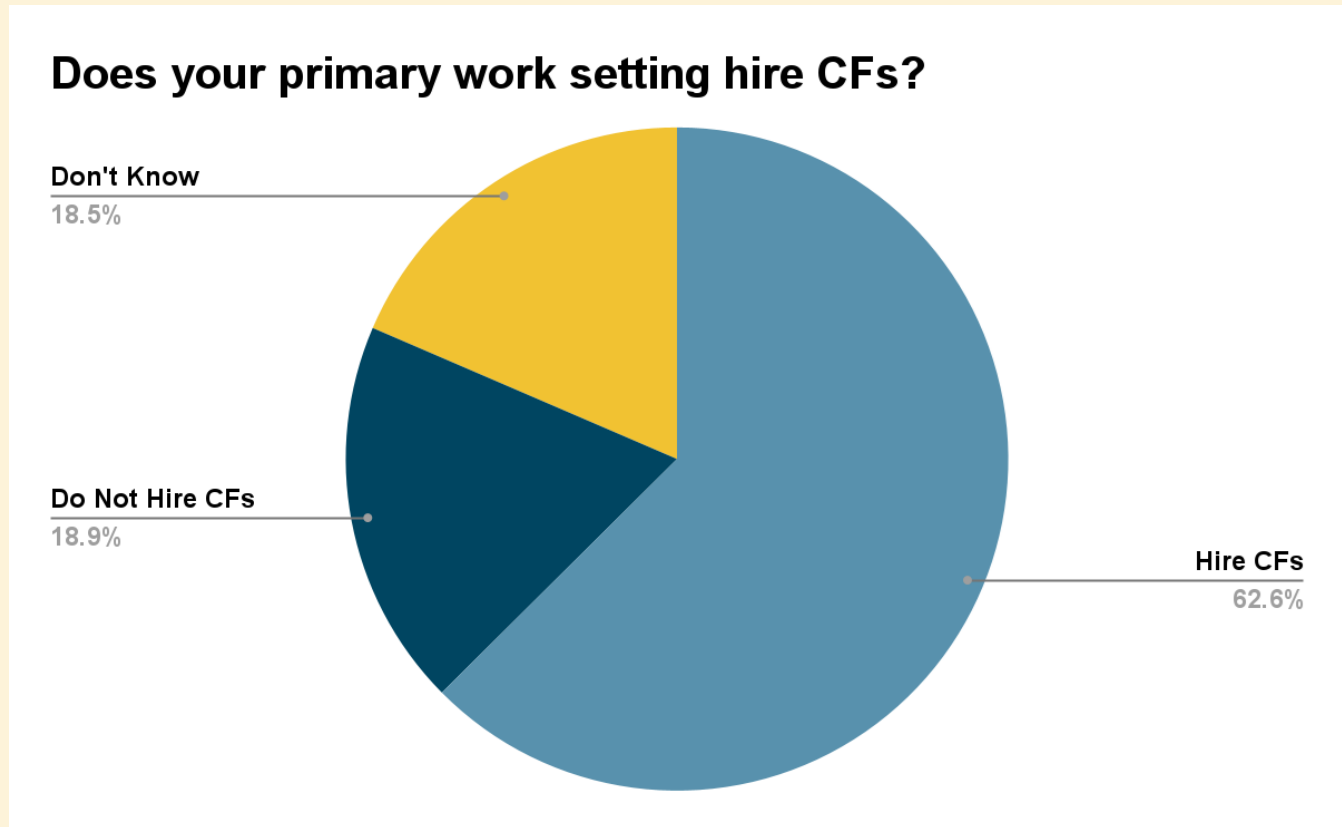
Does your primary work setting hire CFs?

➤ 62.55% of hire CFs

➤ 18.9% do not hire CFs

➤ 18.53% don't know

➤ 78.62% of those who hire CFs have no accommodations to supervise CFs and 16.86% do (e.g. time in schedule, compensation, etc).

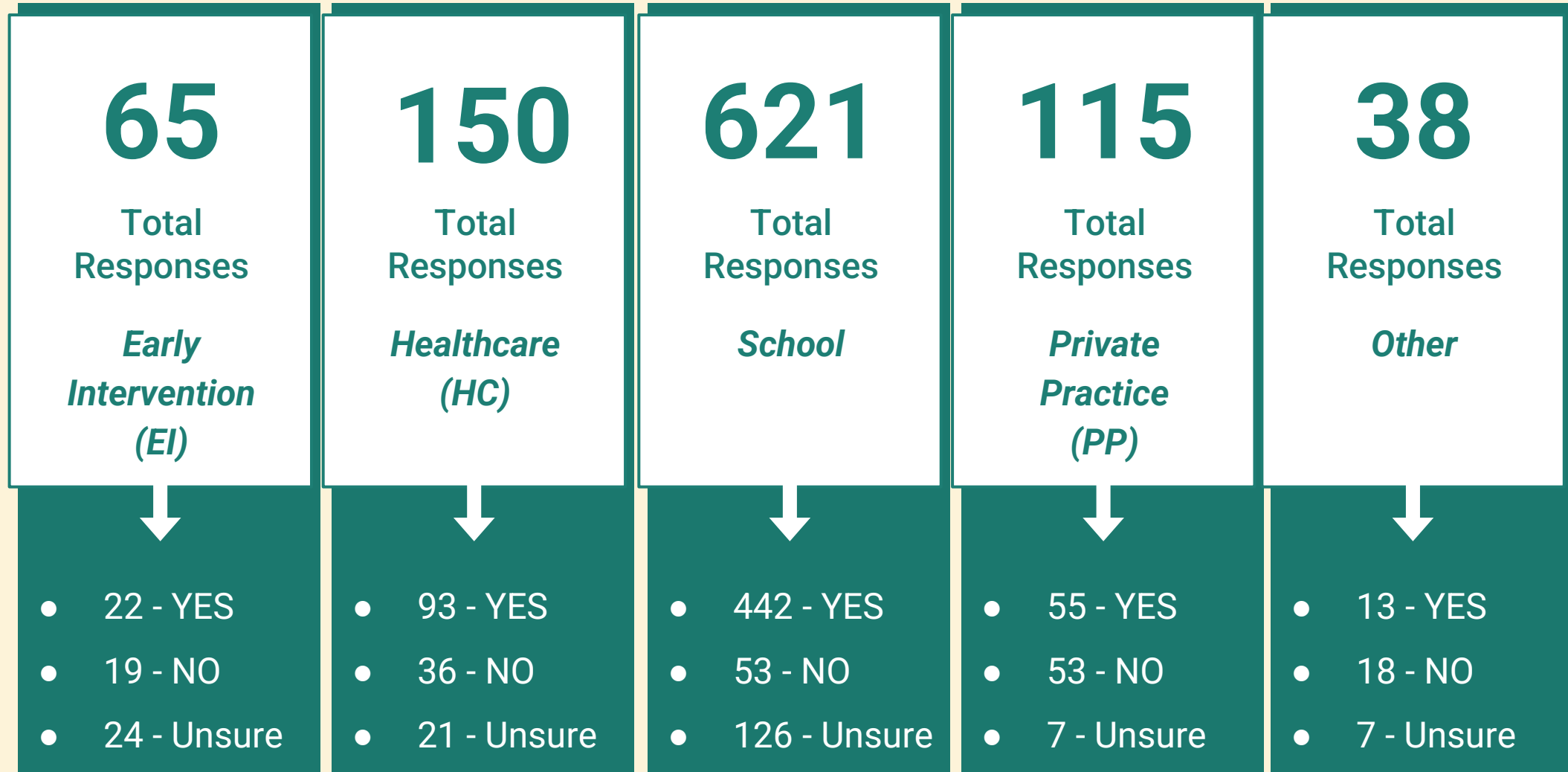


# Analysis - By Primary Work Setting



# Looking at primary work settings

Question: Does your workplace hire CFs?



➤ From this it appears that schools do hire CF

# Looking at primary work settings

Does your primary work setting hire SLPs directly or through an agency?

Primary Setting	Total Responses	Hire Directly	Hire Through an Agency	Use Both to Hire SLPs	Don't Know/ Unsure	% Direct Only	% Agency	% Both
EI	42	27	4	7	4	64%	10%	17%
Healthcare	124	93	7	20	4	75%	6%	16%
School	470	155	21	295	20	33%	4%	63%
PP	78	63	4	5	6	81%	5%	6%
Other	29	25	2	2	0	86%	7%	7%

- It seems that schools have the highest percentage of employers using “both”, however the lowest percentage of using agency only.
- If a person applies directly to a school, they will not be told to go to an agency
- However, schools definitely hire through agencies when they have openings

# Looking at primary work settings

Have you been told to apply for a position through an agency, and not apply directly to the work setting?

<b>Total 40</b>	<b>Early Intervention (EI)</b>	<ul style="list-style-type: none"><li>• 7 answered YES (18%)</li><li>• 33 answered NO</li></ul>
<b>Total 120</b>	<b>Healthcare (HC)</b>	<ul style="list-style-type: none"><li>• 16 answered YES (13%)</li><li>• 104 answered NO</li></ul>
<b>Total 471</b>	<b>School</b>	<ul style="list-style-type: none"><li>• 31 answered YES (7%)</li><li>• 440 answered NO</li></ul>
<b>Total 71</b>	<b>Private Practice (PP)</b>	<ul style="list-style-type: none"><li>• 9 answered YES (13%)</li><li>• 62 answered NO</li></ul>
<b>Total 30</b>	<b>Other</b>	<ul style="list-style-type: none"><li>• 4 answered YES (13%)</li><li>• 26 answered NO</li></ul>

Contrary to anecdotal reports, those applying for school positions are less likely to be told they have to obtain the job through an agency rather than by direct hire by the district.

# Looking at primary work settings

Does your primary work setting have openings?

Primary Setting	TOTAL	YES	NO	%YES
EI	65	52	13	80%
Healthcare	150	89	61	59%
School	621	274	347	44%
PP	117	65	52	56%
Other	38	19	19	50%
Higher Ed	14	6	8	43%

# How does your work setting advertise for open positions?

32% Overall Use - Indeed

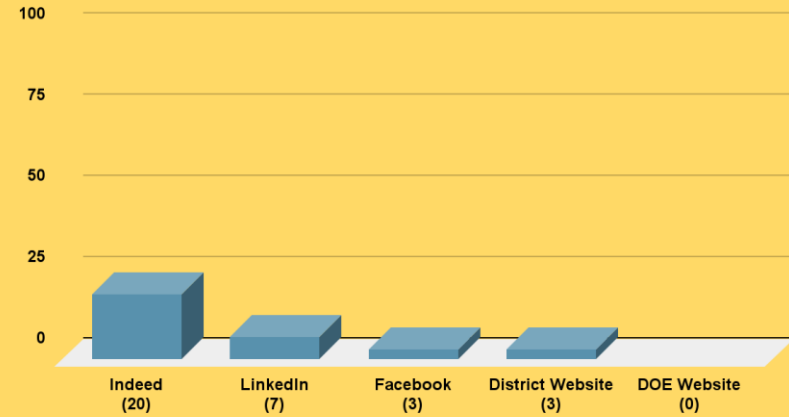
10% Overall - Use LinkedIn

7% Overall - Use Facebook

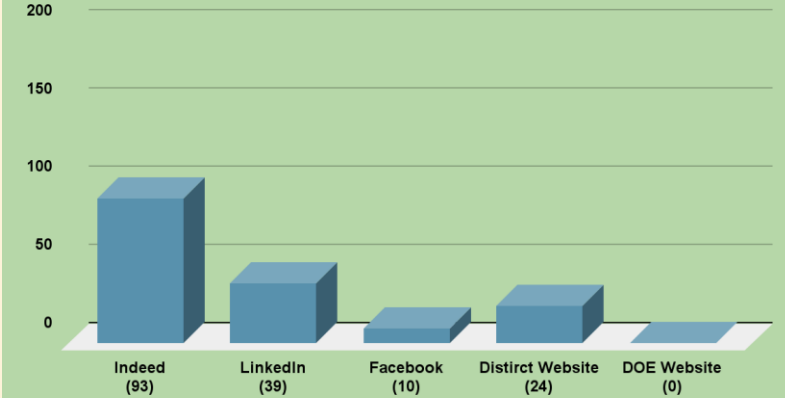
40% Overall - Use District Website

11% Overall - Use DOE Website

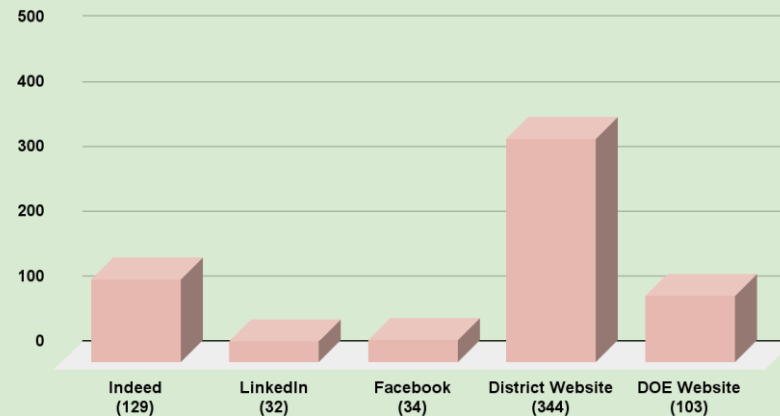
Early Intervention (EI) / Total = 33



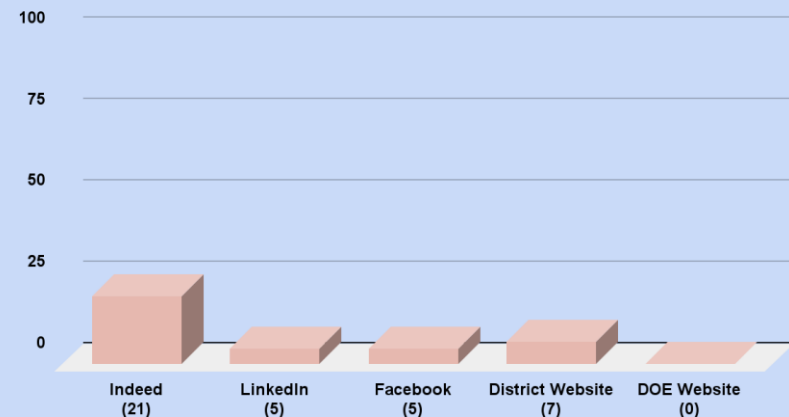
Healthcare (HC) / Total = 166



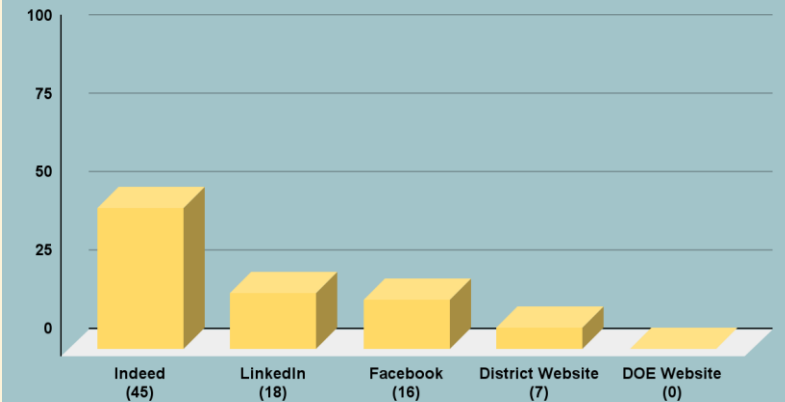
School / Total 103



Other / Total = 38



Private Practice (PP) / Total = 86



# What are the most important factors in deciding to take a job?

Primary Setting	Pay	Benefits	CE Opp	Prof/ Growth	Schedule/ Flex	Commute	Supervision	Caseload/ Productivity	Caseload/ Population
EI	38	24	4	18	31	22	4	22	12
HC	122	79	22	49	79	60	6	72	45
PP	58	32	6	22	43	32	6	35	28
OTHER	25	21	4	9	17	10	2	15	11
SCHOOL	413	307	57	130	112	216	37	311	229
TOTALS	656	463	93	228	282	340	55	455	325
OVERALL %	23%	16%	3%	8%	10%	12%	2%	16%	11%

- The numbers in red are the top 3 factors for each setting.
- Overall, pay and benefits are top priority across the board.
- Next is schedule/flexibility which relates to workload, quality of life, perception of pay matching job requirements.
- In Private Practice and schools, caseload/productivity are highly mentioned.

# Factors why people leave positions/resign:

Setting	Pay	Productivity/ Required	Schedule/ Hours	Commute	Caseload/Clt Type	Restrictions/On tx	Benefits/ PTO/Med	Atmosphere/ with supervisor	Atmosphere with peers	Opportunity/ Growth	CE Supp .	Personal
EI	22	10	10	14	6	0	20	4	3	7	7	14
HC	68	71	35	18	28	21	34	25	11	43	19	25
PP	25	16	33	12	10	2	16	7	1	12	4	12
School	213	187	28	36	194	56	44	132	49	67	56	6
Other	13	8	7	4	5	3	7	4	2	3	3	9

- Again, the primary reason SLPs report leaving jobs is due to low pay.
- However, secondary reasons vary by setting.
- For EI, which is typically a 1099 or hourly position, the lack of benefits and regular salary are most likely cited.
- In Healthcare, high productivity requirements are the biggest concern.
- In Private Practice the hours required (evenings and weekends) are the biggest negatives.
- In schools, the change in caseload and client severity are big factors. Many people mentioned feeling unprepared and inexperienced with the types of clients they are required to treat. In addition, they are being pushed to see these children in large groups and with less frequency than is ideal.

# Comments from respondents

**Early Intervention:** No pay if client cancels, no pay for travel. Difficult to have consistent compensation, since is often part time, no benefits (PTO, medical, etc). Concerns re going into people's homes.

**Private Practice:** frequently cited were late hours and weekends required, lack of experienced SLPs who want this work, work ethic in younger SLPs, many 1099 jobs without benefits, low insurance reimbursements keep pay down.

- ✓ "There is a very limited number of applicants. in addition to that, **employees want benefits** and the positions available at my private practice are contract (1099) positions."
- ✓ "Candidates are shopping around, **Most recent graduates since 2020 have not been fully trained and are overwhelmed by the prospect of full time employment and the responsibilities of a position**"
- ✓ "I own and run NAME OF PRACTICE. We are in network providers with insurance. **We get reimbursed too poorly to 1) pay top dollar 2) give benefits. Insurance won't reimburse CF hours due to temp licensure so I can't hire them. Whenever I hire new folks, I have to credential them which takes forever and in meantime I am treating with them in order to bill in network. We have waiting list for patients and cannot find people to treat in office and have had to close an office and decrease hours at another due to this issue.**"



# Comments from respondents - Healthcare

**Healthcare:** high stress, incommensurate pay, acute rehab time restrictions, limited time for admin tasks, extra role responsibilities and need further clinical skill development. Many jobs offered are per diem only. Departments are slow to hire needed additional SLPs, big demand for bilingual (Spanish) SLPs, difficult to get hired without healthcare experience, school SLPs take positions but then leave because are overwhelmed, specialized skills needed but SLPs not trained on these, high turnover and paperwork.

- ✓“No one wants to work in nursing homes because of high productivity expectations, nursing and cna shortages, limited treatment ranges, slp have to work in multiple buildings to get full time hours, too much documentation”
- ✓“My primary healthcare job has poor management with no support for SLPs, POOR PAY and MINIMAL raises/bonuses each year. In addition, it is difficult to take PTO and provides little to no flexibility. Staffing is so short and hard to fill that caseloads are large and there is no time given for advancement and growth opportunities. These examples seem to be across the board with SLPs I know in the area. WE NEED YOUR HELP! I switched from full time to per diem due to all of the above.”
- ✓“Hourly rate is not competitive. License, certification and CEUs are not paid for. Productivity requirement of 85-90% negatively impacting patient care and management of non billable time i.e. documentation.”

# Comments from respondents - Healthcare

- ✓“I feel that we are overworked and underpaid. Working conditions since the pandemic have changed drastically and ethically. No one seems to be doing much about it.”
- ✓“As with most SLP positions we are underpaid for the level of education we must have in order to practice and we are often relegated to attempting to conduct cognitive-communication, voice, and swallowing evaluation and treatment in crowded noisy PT/OT gyms or at bedside with nursing, housekeeping, recreation, family members walking in and out of rooms or roommates talking loudly/interfering with our work. The lack of respect from many physicians and the lack of understanding about basic swallow function is disheartening and leads to quick burn-out.”
- ✓“For the skilled nursing facility the problem is a severe shortage of PRN therapists where I am being pulled from my primary site despite high clinical need to cover at other sites because they can only get a prn 1 or 2 days a week and for my secondary job (EI) I think the problem is the unsteady nature of the employment. You aren't guaranteed to have full time income if your caseload dips too low and you can't fill your slots.”
- ✓“I think globally workplaces are having challenges due to workload expectations, funding, burnout, pandemic practices, client/student/family/admin expectations, pressure”

# Comments from respondents - Schools

**SCHOOLS:** often cited: workload (27), lack of funds to hire SLPs (21), many short term or part time positions filled by agencies leading to quick and frequent turnover, being paid and treated as teachers. Several people mentioned long time for new grads or new to NJ SLPs to obtain their DOE certification. Several respondents (33) stated their districts have no difficulty hiring SLPs.

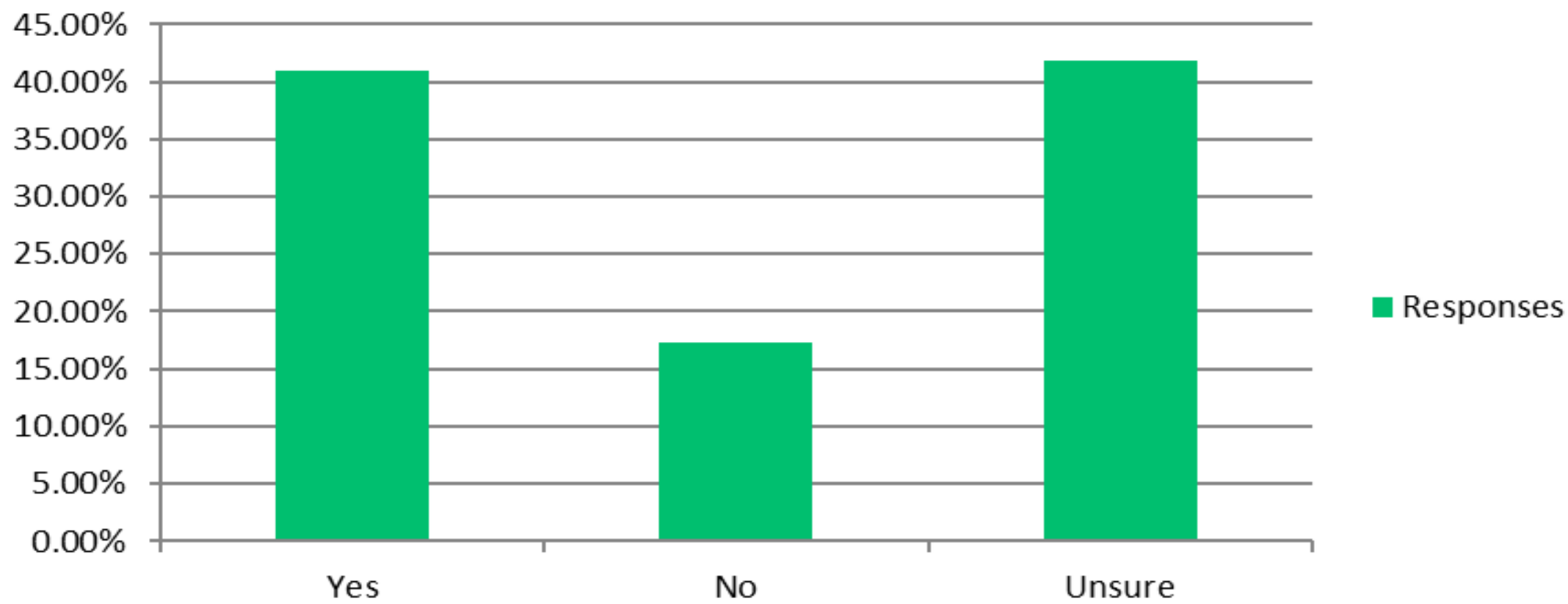
- ✓“Director wants to add more in district therapists but **board blocks any new hiring**”
- ✓“I believe it is a budget issue. **They could fill a position, however, I believe they don't have the money.**”
- ✓“They usually prefer experienced professionals. **In education there is no budget or physical space to hire another SLP.**”
- ✓“My district does not want to spend money on hiring more SLPs”
- ✓“Superintendent and school board release funds for other things and other new personnel but not more CST personnel. Starting salaries for CST members are bottom of the pay scale.”
- ✓“To the best of my knowledge, our admin has yet to attempt to hire extra help”
- ✓“Huge caseloads - Disconnect between the value of school Speech Pathology & the administration understanding of our role - less and less students will want to work for undervalued positions such as schools”

# Comments from respondents - Schools

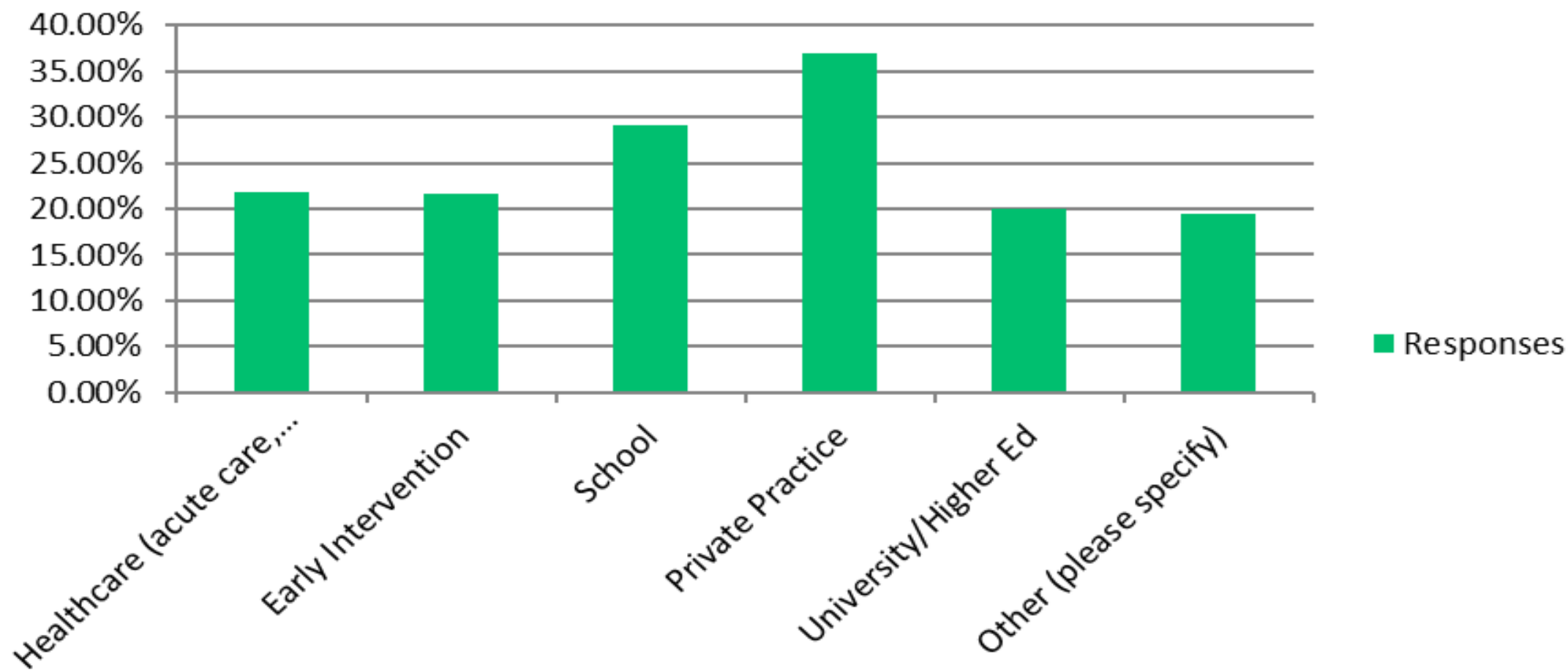
- ✓“Low pay. Bit just our workplace but NJ pays SLPs low. It is disrespectful to pay SLPs on a teachers scale while we are not teachers and we have more credits than them. As NJSHA your governing body has done nothing to advocate or rectify this situation”
- ✓“No cap in case load (some slps have 70+ students to service a week). Not enough time to complete all the work. Schedules don't accurately represent duties of the job (ex no case management time built into schedule as well as no allotted time for meetings, gcn training, filling out iep). Lastly, directives from special services (not allowed to change student programs) go against team recommendations.”
- ✓“I work in a public school. The workload is very demanding. While the salary is adequate, the day-to-day tasks that are expected of the SLPs makes it almost impossible to do the job. My district also attempts to fill vacancies through the use of an agency which does not pay well so has a high turnover rate.”
- ✓“Underpaid, overworked, micromanaged, disrespected”
- ✓ “The workload is simply unbearable and the pay does not suffice for what is being asked of us. We need a caseload cap.. universally!!! Therapists have become so overwhelmed, at least in the school setting, as so much is expected of us that cannot possibly be accomplished in a 35-40 hour full time work week! Between IEP meetings, daily notes, assessments, report writing, counseling families, consulting with teachers and staff, planning for sessions (... the list goes on), keeping up is close to impossible. This profession was one I was extremely passionate about becoming part of but not I almost am regretting becoming an SLP because of the toll it takes on my mental health. We are underpaid, under appreciated.

# Some Global Trends

## Is there a funding limitation to add new positions despite expanding caseload/needs?



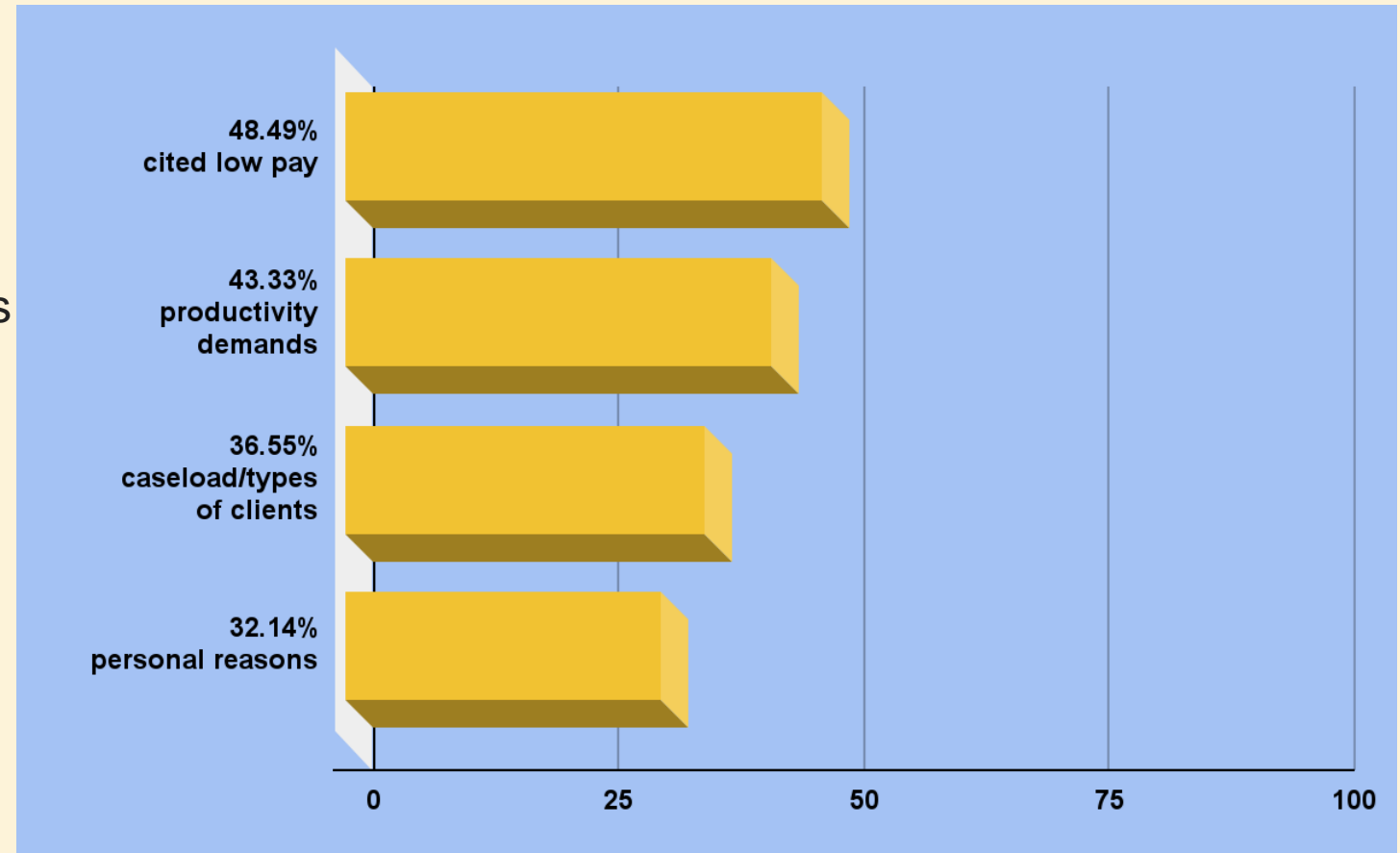
## If looking to change employment, what setting are you interested in?



# Global Trends

Top reasons given why SLPs resign from their jobs

- 48.49% cited low pay
- 43.33% productivity demands
- 36.55% caseload/type of clients
- 32.14% personal reasons (e.g. moving, family)





# Discussion



- 63% of all settings hire CFs. The highest percentage is in the schools, 71% said yes they do hire CFs.
- One reason for the high number of unfilled positions, especially in schools, may be how the jobs are advertised. Most school jobs (54%) are advertised on individual district websites. Thus, a job seeker would need to peruse multiple sites to know where the openings are. That is cumbersome and not efficient. Further, it speaks to why districts might go with an agency that hones in and advertises to a wider group.
- There are openings for SLPs in all settings and there are lots of SLPs looking to change settings or remain in setting but with a different employer. Perhaps instead of referring to this as a shortage, it may be more accurate to refer to these openings as unfilled positions.

# Discussion

- While all settings have openings, the biggest percentage is in EI (80%). The lowest is in Higher Ed (43%) and Schools (44%).
- Our perception that schools are leaning heavily on using agencies to hire doesn't seem to be supported by this data. Those who hire using solely agencies are lowest for schools (4%). That being said, 31.5% of schools hire only directly vs. other settings that are much higher. It seems that many schools resort to agencies AND direct hiring because advertising on district websites is not getting them enough candidates. Further, based on comments made by respondents, it seems many districts hire full time SLPs directly and then supplement for part time, temporary, and maternity leave positions through an agency. This leads to high turnover, continuity of services for students, and poor morale.
- Until the job advertising and hiring process in schools and other factors are addressed, we cannot say for certain that there is a shortage of SLPs in the schools.
- The results of this survey support addressing the reasons positions are unfilled and why people want to leave their jobs.



# New SLPs in NJ



- Per ASHA's fact sheet, there are currently 7675 SLPs in NJ. From 2020-2030 expect increased demand of 27%. This = 2072 more SLPs will be needed over 10 years, or 207 per year. The good news is that our grad programs are graduating over 260 per year! (in 2023 NJ schools will graduate 262 masters level SLPs)  
<https://www.asha.org/siteassets/advocacy/state-fliers/new-jersey-state-flyer.pdf>
- 7 graduate SLP programs in NJ we can anticipate more than 260 new SLP grads per year which is pretty high number to meet the projected demand over the 10 year period noted on the NJ Fact Sheet. We do see unfilled positions in NJ but see many of these unfulfilled due to multiple reasons.

# Summary

- The overwhelming theme: SLPs feel overworked, undervalued and underappreciated.
- SLPs across settings also cite
  - graduating with high student loans
  - pay that does not allow them to pay the loans back.
- Some common themes among school SLPs:
  - school administrators that do not understand the role of the SLP,
  - thinking SLPs are "teachers" and thus do not understand why children cannot be arbitrarily grouped together, or why SLPs should not participate in teacher tasks like bus and lunch duties.
  - significantly increased caseloads
  - increasing severity of disorders requiring additional skills and smaller group size to meet the IEP needs.
  - workloads have increased significantly.
  - many districts offer pay that is well below what is reasonable for a master's level professional.
- In healthcare,
  - productivity requirements have exploded.
  - burden of excessive documentation requirements
  - many SLPs report feeling burnt out and ready to leave the field.
- Administrators and private practice owners
  - low insurance reimbursements and difficulty even getting insurance to reimburse (delays, high deductibles, high copays, incorrect denials, requirements for preauthorization that take long)
  - result in the inability to compensate SLPs adequately for their work.
  - limited CPT codes no CPT codes that reflect the work/time spent on collaboration with other professionals, parent/caregiver training/counseling.
  - much of the SLPs' time is not reimbursable.

# Is there a shortage of SLPs in New Jersey?

- Data does clearly point to unfilled positions across a variety of work settings
- We don't know if openings are full or part time, if they are funded openings, and why they remain unfilled in the presence of active job seekers
- Demand for SLPs in NJ is for on site, in person services
- Participation in the SLP-IC could potentially CAUSE a shortage of SLPs in NJ as many SLPs (as in other fields) prefer working virtually to working on site

# NJSHA successes and thoughts moving forward

- We heard you!
- NJSHA has been working on initiatives to address issues identified through this survey
- There is more to address. Join NJSHA and be part of the solution! Together we can make a difference in NJ!



# NJSHA Action Plan – Increase Awareness

- Pursue multiple opportunities to advance awareness of the contributions SLPs and AUDs make in various settings.
- PR statewide campaign to focus on: What is an SLP? What do SLP's do? Casting a wide net of public awareness.
- NJSHA representatives will continue to meet with NJ government agencies such as NJDOE, OSEP, Consumer Affairs, Legislators.
- NJSHA will develop various opportunities to promote SLPs and to connect with Superintendents, New Jersey Principals & Supervisors Association (NJPSA) , and interactions with a variety of other state agencies
- Develop standard materials and self advocacy resources for our members to share at their workplaces

# NJSHA Action Plan – Legislative/Advocacy

- Develop resources to help SLPs advocate for increased compensation and realistic workloads
- Actively advocating for a single advertising method for school based (and other work settings) job opportunities
- Constant monitoring of legislation and being a voice at the table
- Recent successes: A2227 gross income tax deduction, A5422 allows retirees to return to work temporarily without loss of pension, pay parity for telepractice.



# NJSHA Action Plan –Mentoring and Training Opportunities

- Develop and implement resources to teach SLPs and AUDS self advocacy skills
- Helping those who wish to transition from one work setting to another through pairing with a mentor in the area

