

## SLP Caseload and Workload Characteristics

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## Executive Summary

In Spring 2022, the American Speech-Language-Hearing Association (ASHA) conducted a survey of speech-language pathologists (SLPs) and educational audiologists in school settings. The survey was designed to provide information about school-based service delivery and to update and expand information gathered during previous *Schools Surveys*.

The results are presented in a series of reports. This caseload and workload characteristics report is based on responses from SLPs in special day/residential schools, preschools, elementary schools, secondary schools, administrative offices, and a combination of types of facilities.

### ***Overall Findings***

- ◆ 90% of the SLPs employed full time or part time were clinical service providers.
- ◆ 78% of clinical service providers used a caseload approach to determine the number of students they served.
- ◆ Median (actual) caseload size was 48 students.
- ◆ The median manageable caseload size was 40.
- ◆ The median caseload sizes were highest in Indiana (72) and were lowest in New York (30).
- ◆ Median caseload sizes were smallest in the New England states (36) and largest in the East South Central states (55).
- ◆ At least 92% of SLPs served students with autism spectrum disorder; language disorders: semantics, morphology, syntax; and speech sound disorders.
- ◆ 55% of clinical service providers worked on MTSS/RTI activities during the current school year.
- ◆ Clinical service providers spent an average of 22 hours weekly in direct intervention.
- ◆ 12% of the clinical service providers had used the ASHA Workload Calculator.
- ◆ Most of the clinical service providers were required to make up a missed session.

**Function**

Most (90%) of the SLPs who were employed full time or part time were clinical service providers. The rest were diagnosticians (4%), administrators/supervisors/directors (3%), special education teachers (2%), or consultants (1%), or filled some other role (1%).

**Caseload or Workload**

Most of the clinical service providers who were employed full time or part time used a caseload approach to determine the number of students they served.

- 78% used a caseload approach.
- 18% used a workload approach.
- 4% used both a caseload approach and a workload approach.

**Facility**

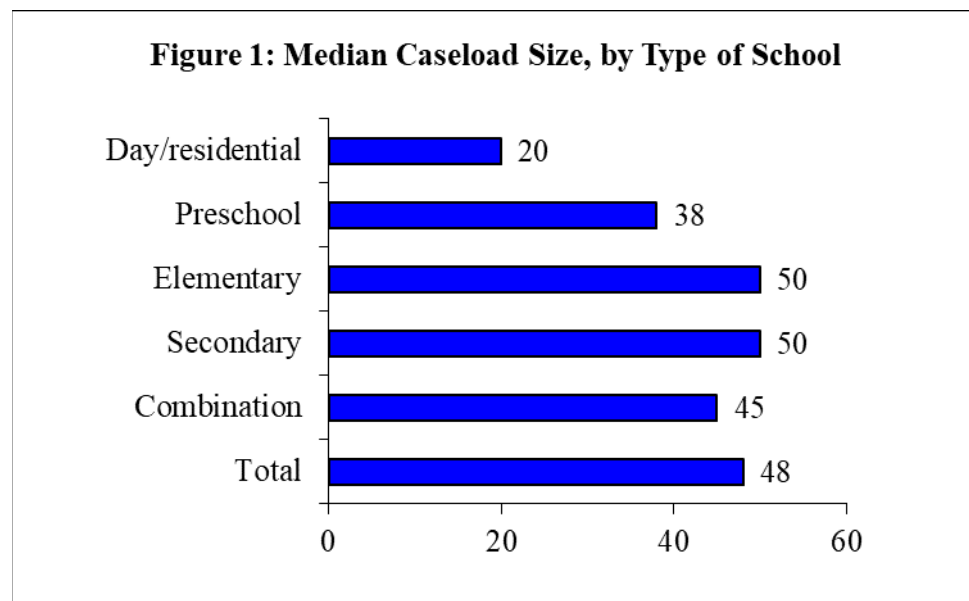
The use of caseload, workload, or both varied by the type of facility in which clinical service providers were employed ( $p = .021$ ).

- Caseload approach varied. It was 80% in secondary schools, 79% in elementary schools, 75% in combined schools, 73% in preschools, and 64% in special day/residential schools.
- Workload approach varied. It was 33% in special day/residential schools, 23% in preschools, 20% in combined schools, 17% in elementary schools, and 16% in secondary schools.
- The use of both caseload and workload approaches also varied. It was 5% in combined schools and elementary schools, 4% in secondary schools and preschools, and 3% in special day/residential schools.

**Caseload Size**

The median monthly caseload size of ASHA-certified, school-based SLPs who were clinical service providers working full time was 48 (range of 3–160). Caseload size was lowest in special day/residential schools (20) and highest in elementary and secondary schools (50; see Figure 1).

**Facility**



Note.  $n = 2,226$ .

**State**

Nearly two-thirds ( $n = 30$ ) of the states had a sufficient number of respondents to warrant reporting their caseload sizes. The highest reportable caseload size was in Indiana (72), and the lowest was in New York (30; see Table 1).

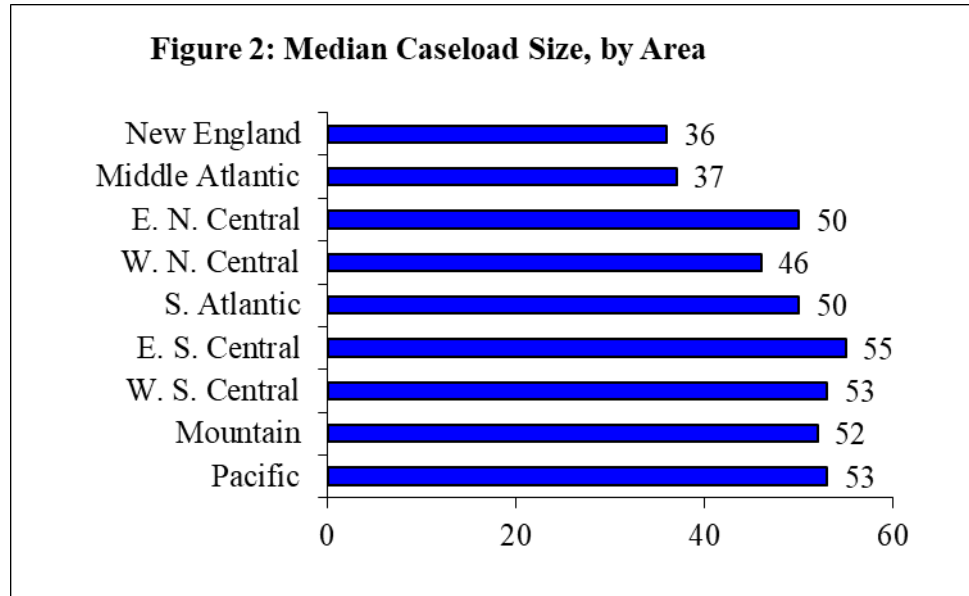
**Table 1: Median Caseload Size, by State**

State	Caseload	State	Caseload
Alabama (AL)		Montana (MT)	
Alaska (AK)		Nebraska (NE)	
Arizona (AZ)	57	Nevada (NV)	
Arkansas (AR)	40	New Hampshire (NH)	
California (CA)	55	New Jersey (NJ)	40
Colorado (CO)	45	New Mexico (NM)	
Connecticut (CT)	33	New York (NY)	30
Delaware (DE)		North Carolina (NC)	49
District of Columbia (DC)		North Dakota (ND)	
Florida (FL)	60	Ohio (OH)	58
Georgia (GA)	45	Oklahoma (OK)	50
Hawaii (HI)		Oregon (OR)	50
Idaho (ID)		Pennsylvania (PA)	49
Illinois (IL)	42	Rhode Island (RI)	
Indiana (IN)	72	South Carolina (SC)	50
Iowa (IA)		South Dakota (SD)	
Kansas (KS)	45	Tennessee (TN)	60
Kentucky (KY)	53	Texas (TX)	60
Louisiana (LA)	55	Utah (UT)	
Maine (ME)		Vermont (VT)	
Maryland (MD)	43	Virginia (VA)	50
Massachusetts (MA)	38	Washington (WA)	46
Michigan (MI)	53	West Virginia (WV)	
Minnesota (MN)	47	Wisconsin (WI)	40
Mississippi (MS)		Wyoming (WY)	
Missouri (MO)	44		

*Note.*  $n = 2,005$  for the 30 states with reportable data. Blank cells indicate that fewer than 25 respondents provided data.

**Area**

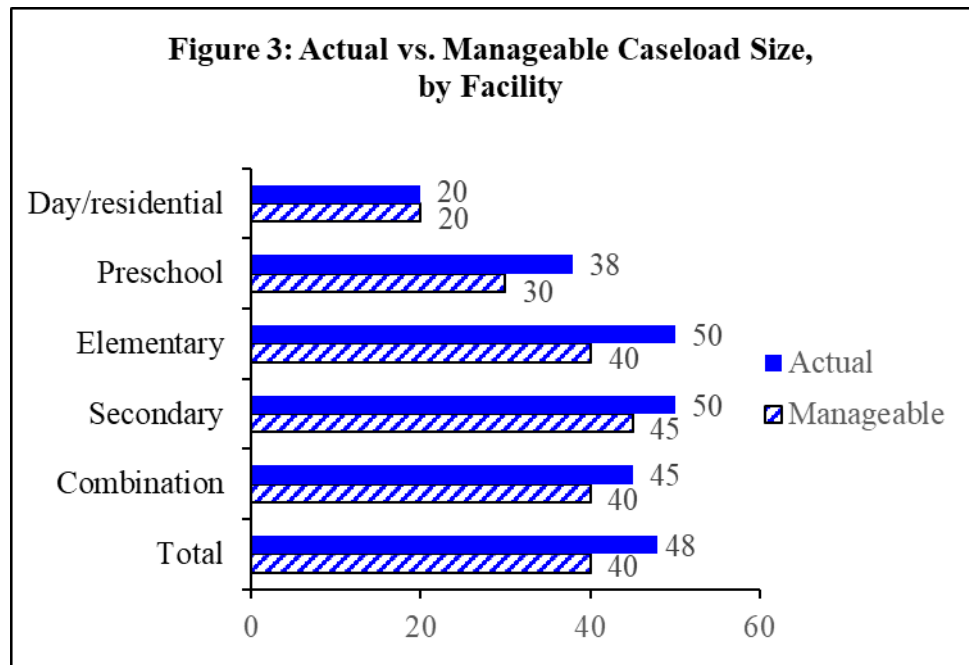
The median caseload size was lowest in the New England states and highest in the East South Central states ( $p = .000$ ; see Figure 2).



Note.  $n = 2,254$ . A list of states assigned to each area can be found in the Appendix.

**Manageable Caseload Size**

We added a new question to the *2022 Schools Survey*: What do you consider to be a manageable monthly caseload size for YOUR caseload? See Figure 3 for a comparison of actual caseload size with what clinical service providers who were employed full time considered to be a manageable caseload size.



Note.  $n = 2,254$  respondents provided actual caseload size and  $n = 2,234$  respondents provided manageable caseload size.

## Areas of Intervention

The four areas of intervention in which most of the school-based SLPs served students were (a) autism spectrum disorder (94%); (b) language disorders: semantics, morphology, syntax (93%); (c) speech sound disorders (92%); and (d) language disorders: pragmatics/social communication (89%; see Table 2).

The largest average number of students served, grouped by area of intervention, was for language disorders: semantics, morphology, syntax (22), followed by speech sound disorders (19).

<b>Area of intervention</b>	<b>Percentage of SLPs who regularly serve students in this area</b>	<b>Mean number of students regularly served*</b>
Acquired brain injury (ABI)	13.7	1.6
Auditory processing disorder (APD)	28.6	4.4
Augmentative and alternative communication (AAC)	71.2	5.7
Autism spectrum disorder (ASD)	93.7	11.4
Childhood apraxia of speech (CAS)	59.9	2.8
Cognitive communication disorders	47.5	9.6
Dysphagia (swallowing/feeding)	8.1	2.6
Fluency disorders	71.2	2.5
Gender affirming voice	0.9	6.5**
Hearing loss	41.6	2.6
Language disorders: pragmatics/social communication	88.8	13.2
Language disorders: semantics, morphology, syntax	93.4	21.6
Reading and writing (literacy)	27.5	12.9
Selective mutism	20.1	1.3
Speech sound disorders	91.8	19.4
Voice or resonance disorders	13.8	1.6

*Note.*  $n = 2,254$ . SLP = speech-language pathologist.

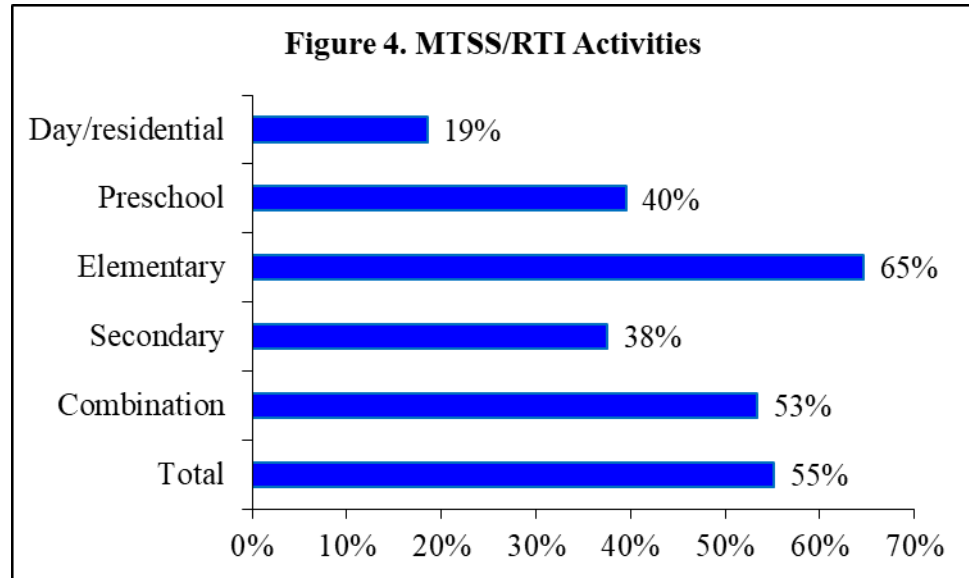
\*Includes only SLPs who do serve these students. \*\*This data point came from a small sample ( $n < 25$ ) and is less reliable.



**MTSS/RTI**

We asked the SLPs if they had worked on multi-tiered system of support/response to intervention (MTSS/RTI) activities during the current school year. Overall, 55% of clinical service providers said that they had, but the likelihood of saying *yes* varied by the type of facility where they were employed, by geographic area, and by population density. SLPs in elementary schools were more likely than those in other facilities to say that they had worked on MTSS/RTI activities ( $p = .000$ ; see Figure 4).

**Facility**



Note.  $n = 2,584$ .

**Geographic Area**

SLPs in the East North Central and West North Central states were the most likely to engage in MTSS/RTI activities ( $p = .000$ ), specifically:

- 67% in East North Central and West North Central states
- 65% in Mountain states
- 60% in South Atlantic states
- 59% in New England states
- 58% in East South Central states
- 51% in Pacific states
- 42% in Middle Atlantic states
- 41% in West South Central states

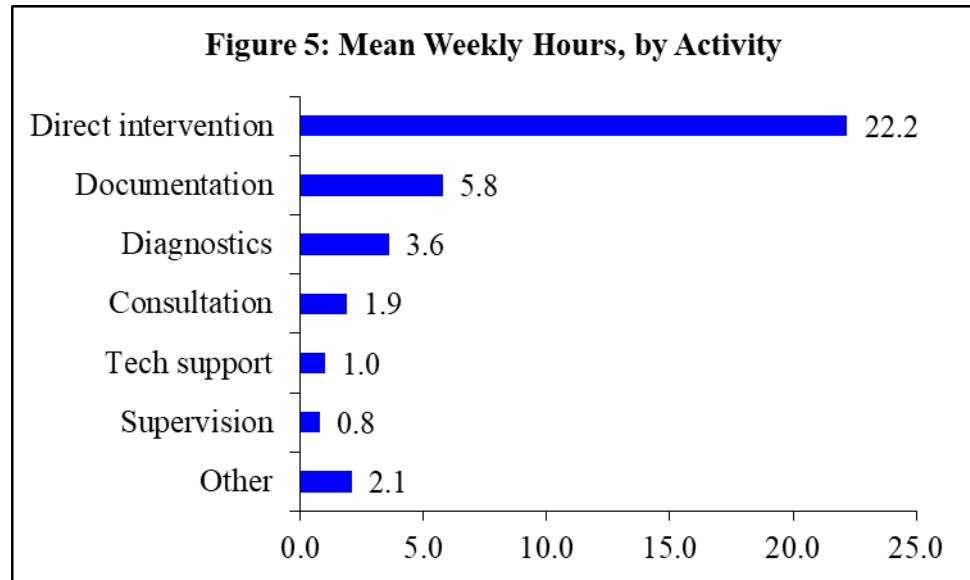
**Population Density**

Population density also had an effect on SLPs' responses ( $p = .008$ ).

- 61% in rural areas
- 56% in suburban areas
- 52% in city/urban areas

## Weekly Activities

The SLPs who were clinical service providers and were employed full time reported spending an average (i.e., mean) of 37.3 total hours in a typical week on a list of seven activities. More of their time was spent in direct intervention than in any other activity (see Figure 5).



Note. n = 2,024.

Respondents also reported that they spent a mean of

- 5.8 hours on documentation;
- 3.6 hours on diagnostic evaluations (e.g., observation, screening, scoring, analysis);
- 1.9 hours on collaborative consultation;
- 1.0 hour on technological support (e.g., hearing aids/CIs, AAC);
- 0.8 hours on supervision; and
- 2.1 hours on other duties, as assigned.



## Workload Calculator

We asked clinical service providers whether they had used the ASHA Workload Calculator that resides on ASHA’s website. Half (50%) did not know what it was, 12% said *Yes*; and 38% said *No, but I know what it is*.

The type of facility where they worked was related to their response ( $p = .000$ ), as was the region of the country where they worked ( $p = .000$ ), but population density was not related to their response ( $p = .074$ ; see Table 3) .

<b>Table 3: Use of ASHA’s Workload Calculator (%)</b>			
	<b>Yes</b>	<b>No, but I know what it is</b>	<b>Don’t know what it is</b>
<b>Facility</b>			
Special day/residential school	3.1	24.6	72.3
Preschool	8.1	33.1	58.8
Elementary school	12.4	40.1	47.5
Secondary school	16.0	35.1	48.9
Combination from list	10.9	40.6	48.4
<b>Geographic Area</b>			
New England	16.0	42.0	42.0
Middle Atlantic	5.0	30.4	64.6
East North Central	22.7	46.7	30.6
West North Central	9.5	40.5	50.0
South Atlantic	8.2	37.0	54.8
East South Central	11.9	39.0	49.2
West South Central	7.9	36.5	55.6
Mountain	13.9	37.0	49.1
Pacific	16.6	37.6	45.8

Note.  $n = 2,562$  respondents in facilities and  $n = 2,604$  respondents in geographic facilities.

## Missed Sessions

In previous years, we asked survey respondents to select which of four possible circumstances addressed whether they were required to make up missed sessions. They could select multiple responses from this list:

- I am not required to make up missed sessions.
- When the student misses a session due to assembly or classroom activity.
- Any time a student misses a session for any reason.
- Any time I miss a session for any reason.

This year, we repeated this version of the question with half of the sample, but we asked the other half a new version that included only three possible circumstances. We asked them to select only one response from this list:

- Yes – but only for a few circumstances
- Yes – always or almost always
- No – never or almost never

Of the clinical service providers who were employed either full- or part time and received the first version,

- 36% were not required to make up missed sessions,
- 14% were required to make up missed sessions when the student missed a session due to an assembly or classroom activity,
- 7% were required to make up missed sessions any time a student missed a session for any reason, and
- 60% were required to make up missed sessions any time the SLP missed a session for any reason.

The type of facility where they were employed had no effect on any of the four responses.

Responses on the second version of the question did vary by type of facility ( $p = .003$ ; see Table 4).

<b>Facility</b>	<b>Yes – but only for a few circumstances</b>	<b>Yes – always or almost always</b>	<b>No – never or almost never</b>
Special day/residential school	52.0	32.0	16.0
Preschool	45.4	31.1	23.5
Elementary school	44.6	32.7	22.8
Secondary school	54.0	30.2	15.8
Combination from list	29.7	54.1	16.2
Total	45.3	33.9	20.8

*Note.*  $n = 1,270$ .

## Survey Notes and Methodology

Since 2004, ASHA has fielded the *Schools Survey* in even-numbered years to gather information of interest to the professions. Members, volunteer leaders, and staff rely on data from the *Schools Survey* to better understand the priorities and needs of SLPs and educational audiologists.

The survey was fielded on February 15, 2022, to a random sample of 8,000 ASHA-certified SLPs and to all 649 ASHA-certified audiologists who were employed in school settings in the United States. Everyone received an electronic “be-on-the-lookout-for” message on February 15. Second and third postal mailings followed on March 28 and April 21 to individuals who had not responded.

The sample of SLPs was a random sample, stratified by state. Small groups, such as constituents in Wyoming, were oversampled. Weighting was used when presenting data to reflect the actual distribution of SLPs in each state based on ASHA’s membership database.

## Response Rate

Of the original 8,000 SLPs, 20 were retired, 21 were employed in other types of facilities, 114 were not employed in the field, and 39 had incorrect addresses, leaving 7,806 possible respondents. The actual number of respondents was 2,961, resulting in a **37.9%** response rate. The results presented in this report are based on responses from those 2,961 individuals.

## Reports

Results from the *2022 Schools Survey* are presented in a series of reports for SLPs:

- *Survey Summary Report: Numbers and Types of Responses, SLPs*
- *SLP Annual Salaries and Hourly Wages*
- *SLP Caseload and Workload Characteristics*
- *SLP Workforce and Work Conditions*
- *Survey Methodology, Respondent Demographics, and Glossary, SLPs*

Results from the educational audiologists are presented in a separate report: *Survey Summary Report: Numbers and Types of Responses, Educational Audiologists*.

## Suggested Citation

American Speech-Language-Hearing Association. (2022). *2022 Schools Survey report: SLP caseload and workload characteristics*. [www.asha.org/Research/memberdata/Schools-Survey/](http://www.asha.org/Research/memberdata/Schools-Survey/)

## Supplemental Resources

American Speech-Language-Hearing Association. (n.d.-a). *ASHA Assistants Program*. <https://www.asha.org/assistants-certification-program/>

American Speech-Language-Hearing Association. (n.d.-b). *ASHA Workload Calculator*. <https://www.asha.org/SLP/Schools/Workload-Calculator/>

American Speech-Language-Hearing Association. (n.d.-c). *The Practice Portal*. <https://www.asha.org/Practice-Portal/>

American Speech-Language-Hearing Association. (2002). *A workload analysis approach for establishing speech-language caseload standards in the school* [Position Statement]. [www.asha.org/policy/PS2002-00122/](http://www.asha.org/policy/PS2002-00122/)

American Speech-Language-Hearing Association. (2010a). *Roles and responsibilities of speech-language pathologists in schools* [Position Statement]. <https://www.asha.org/policy/PS2010-00318/>

American Speech-Language-Hearing Association. (2010b). *Roles and responsibilities of speech-language pathologists in schools* [Professional Issues Statement]. <https://www.asha.org/policy/PI2010-00317/>

American Speech-Language-Hearing Association. (2010c). *Working for change: A guide for speech-language pathologists and audiologists in schools*. <https://www.asha.org/uploadedFiles/Working-Change-Schools-SLPs-Audiologists-Guide.pdf>

## Additional Information

If you would like to speak with a member of the ASHA School Services in Speech-Language Pathology Team about the survey, please send a message to [schools@asha.org](mailto:schools@asha.org) or call ASHA's Action Center (800-498-2071) and ask to be connected to a School Services staff member. To learn more about how the Association is working on behalf of school-based ASHA Certified Members, visit the ASHA Schools webpages at [www.asha.org/slp/schools/](http://www.asha.org/slp/schools/).

## Thank You

ASHA would like to thank the SLPs who completed the *ASHA 2022 Schools Survey*. Reports like this one are possible only because people like *you* participate.

**Is this information valuable to you?** If so, please accept invitations to participate in other ASHA-sponsored surveys and focus groups. You are the experts, and we rely on you to provide data to share with your fellow members. ASHA surveys benefit *you*.

Appendix:  
State Listings

## Regions of the Country

### Northeast

- ◆ Middle Atlantic
  - New Jersey
  - New York
  - Pennsylvania
- ◆ New England
  - Connecticut
  - Maine
  - Massachusetts
  - New Hampshire
  - Rhode Island
  - Vermont

### South

- ◆ East South Central
  - Alabama
  - Kentucky
  - Mississippi
  - Tennessee
- ◆ South Atlantic
  - Delaware
  - District of Columbia
  - Florida
  - Georgia
  - Maryland
  - North Carolina
  - South Carolina
  - Virginia
  - West Virginia
- ◆ West South Central
  - Arkansas
  - Louisiana
  - Oklahoma
  - Texas

### Midwest

- ◆ East North Central
  - Illinois
  - Indiana
  - Michigan
  - Ohio
  - Wisconsin
- ◆ West North Central
  - Iowa
  - Kansas
  - Minnesota
  - Missouri
  - Nebraska
  - North Dakota
  - South Dakota

### West

- ◆ Mountain
  - Arizona
  - Colorado
  - Idaho
  - Montana
  - Nevada
  - New Mexico
  - Utah
  - Wyoming
- ◆ Pacific
  - Alaska
  - California
  - Hawaii
  - Oregon
  - Washington