2013, Volume 2

THE OSHA OMMUNICATOR A PUBLICATION OF THE OREGON SPEECH-LANGUAGE & HEARING ASSOCIATION



MESSAGE FROM THE PRESIDENT OSHA wants you! By Linda D'Onofrio, OSHA President

Over the many years I've been an OSHA board member, I've been asked just what OSHA does for its

membership. I'm always excited to talk about the latest issue at hand or the hard work of our board members. I love to brag about the strength and influence of our state association as compared to many other states. However, I also get frustrated when I find out that many of the folks who don't know what OSHA does aren't even members or only occasionally attend the annual conferences. I find myself saying the same thing over and over: If you want to know what's going on, ask. If you want to change what's going on, engage.

To be fair, I think it's a pretty common thing for people to complain about fees or taxes and wonder aloud how these expenses benefit our daily lives. I also think it's pretty common for people not to see how hard it is to keep things running smoothly when you do a good job keeping things running smoothly.

I want to take a moment to brag about this year's fantastic OSHA board and what they are doing, not just for OSHA members, but for all the SLPs and audiologists in the state of Oregon. Your board members volunteer to represent our field in a wide variety of work and academic environments. They serve as conduits of information and advocacy from individual work places to the state level and from the state to the national level. They educate our members on how national policy impacts Oregon specifically and on how state policy impacts our individual work environments. They work hard to protect the integrity of our profession and our scopes of practice. They advocate and fight for the clients and patients we all serve. They volunteer to work on legislation and to testify before our legislature. They report and present on trends in our industry. They foster cooperation and communication between clinical environments and between different professions. OSHA's board members volunteer out of a sense of commitment to our field and to the people we serve.

OSHA requires the same level of democratic involvement as any other representative group. The more folks participate and make their voices heard, the more the association represents the needs of its members. The more folks complain about how things are going but choose to sit on the sidelines, the more likely it is that a small group of people will end up making decisions without the input of the majority. OSHA is not a regulating body or a policy-producing think tank. Our main priorities as an association are

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June Legislative Update

Karen Aguilera, Legislative Committee Chair

The legislature is scheduled to wrap up at the end of June after a busy session. More than 2,600 bills have been introduced, and as of this date 349 have been signed into law.

- Senate Bill 721, which is supported by OSHA, has passed both houses and is expected to be signed by the Governor. This bill requires coaches and referees of nonschool athletics to be trained in recognizing the warning signs of a concussion. Team members are not allowed to participate in events or training, if they are exhibiting symptoms of a concussion.
- Senate Bill 365 requires licensure for individuals who practice applied behavioral analysis in Oregon and also mandates insurance coverage for ABA treatment for people with a diagnosis of autism spectrum disorder. The bill requires that a speech-language pathologist be a member of this new licensure board. OSHA is in support of this particular "autism" bill, which has met the criteria set forth in the OSHA position statement regarding autism legislation. The bill is currently still in committee.
- House Bill 2013 directs the Early Learning Council and the Department of Education to assist school districts in screening children for kindergarten readiness and establishing a standardized screening and referral process. This bill is in committee at the time of this writing.
- Senate Bill 302 would have transferred the duties and powers of the Board of Examiners for Speech-Language Pathology and Audiology, along with those of numerous other health-related licensing boards, to the Oregon Health Licensing Agency (OHLA). This bill was strongly opposed by OSHA and failed to arrive at a vote.

You can search bills by keywords and can learn more about pending legislation by going to the official state website: <u>http://www.leg.state.or.us/</u> or by using the "bill tracker" site of the Oregonian: <u>http://gov.oregonlive.com/bill/</u>

OSHA members who are interested in legislative issues are encouraged to join the legislative committee and may contact me directly: <u>kaguilera@kidtalkoregon.org</u>

Message from the President

Continued from page 1

to promote the highest standards in our field, advocate for persons with communications disorders, support the interests of our association's members, and keep our membership fully informed of academic, clinical, business, and political trends.

This May, several board members and I presented to the membership of the Oregon Speech Pathology Academy. Our goal was to create bridges between our two groups and to let folks know, in person, who their OSHA representatives were and what they were currently involved in. I think the meeting was a great success. There were lots of great questions and several of their members expressed an interest in OSHA and in participating on our board. As always, I invite you to contact your region representative, seek out of the committee chair representing your scope of practice, or contact me directly. We are here to represent you and look forward to hearing from you. See you all in October!

Linda D'Onofrio

linda@donofrioslp.com

Oregon Speech-Language & Hearing Association Newsletter Advertising Rates

2013 Deadlines: Copy must	Size Options and Cost					
be received by February 4	Quarterly Newsletter: (8 1/2" x 11" format)					
for Vol. 1, March 25 for Vol. 2, June 10 for Vol. 3, and October 21 for Vol. 4.	Size Business Card (3 1/2" x 2") 1/4 pg (3 1/2" x 4 3/4" vertical) 1/2 pg (7 1/2" x 4 3/4" horizontal)	<u>Single Issue</u> \$25 \$45 \$110	<u>2 Issues</u> \$40 \$80 \$200	<u>3 Issues</u> \$60 \$120 \$300	<u>4 Issues</u> \$80 \$160 \$400	
Requirements: All ads must be in black and white – Word or PDF format.	Full Page (8" x 10 1/2") The OSHA Newsletter is published (early May), Vol. 3 (mid July), Vol.	\$180 4 times per year	\$300 : Vol. 1 (earl	\$450	\$600	

OSHA Awards - Nominate Now!

Nancy Fulton, Honors and Awards Chair

"Appreciation is a wonderful thing: It makes what is excellent in others belong to us as well." VOLTAIRE

Recognition is important to us all. Each year at the Fall OSHA conference, we take time to acknowledge and pay tribute to exemplary individuals or organizations across the state. It is time to start thinking about your colleagues and peers who serve as powerful role models or provide valuable inspiration within our professional community. Nominees can be colleagues with whom you work every day, people who have served as your professional mentors, tireless professional advocates, or organizations that support our professions.

The process is simple. More details can be found on the OSHA website. Please take a look at the award descriptions below and nominate a worthy colleague or organization today!

Honors of the Association

- Designated as a "lifetime achievement" award. The intent of this award is to recognize an individual for outstanding history of clinical practice in the field of speech-language pathology, audiology or education of the deaf/HOH.
- This award may also be used to recognize outstanding advocacy or program sponsorship by an agency or organization.

Outstanding Clinician Award: Schools/ EI/ECSE

• Recognizes a speech-language pathologist, speechlanguage pathology assistant, audiologist, or educator of the deaf/HOH who consistently demonstrates outstanding clinical, advocacy, or leadership skills in the public school system. This award may recognize general clinical work or a specific, recent clinical achievement.

Outstanding Clinician Award: Clinics, Hospitals, Private Practice

• Recognizes a speech-language pathologist, speechlanguage pathology assistant, audiologist, or educator of the deaf/HOH in a clinic, hospital, or private practice who consistently demonstrates outstanding clinical, advocacy, and/or leadership skills. This award may recognize general clinical work or a specific, recent clinical achievement.

Award of Clinicianship

• Recognizes a speech-language pathologist, speechlanguage pathology assistant, audiologist, or educator of the deaf/HOH whose dedication to the field is reflected in strong clinical and/or leadership skills paired with compassion, empathy, humor, and acts of support to colleagues and clients. Beyond clinical skills, this person's spirit touches and inspires those around them. This award may also be used to recognize an individual who has made a contribution to the profession in an unusual way.

Award of Outstanding Research or Teaching

• Recognizes a colleague whose published research or teaching (professional preparation or continuing education) has contributed to advancing clinical knowledge and/or practice in the fields of speechlanguage pathology, audiology, or education of the deaf/HOH.

OSHA Professional Advocacy Award

• Honors a person who has contributed to the advancement of the visibility, viability, or vitality of our professions. Potential nominees include legislators,

2013

OSHA

Awards

Outstanding

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philanthropists, SLPs, SLPAs, Audiologists, or any public figure who has shown outstanding advocacy for our professions.

Detailed information on the nomination process is available on the OSHA website, <u>www.</u> <u>oregonspeechandhearing.org</u>, under the "Honors and Awards" link. The deadline for submission is September 1, 2013.

If you have questions, please contact Nancy Fulton at (503) 571-7112 or <u>ancynay@comcast.net</u>.

OSHA Health Care Committee Report Originally March 2013 - Updated June 2013

Below are resources regarding healthcare-related changes that impact speech-language pathologists working in healthcare or private practice settings. New information is being released on a regular basis, so please consult the ASHA website and ASHA Leader for additional and updated resources.

National Outcomes Measurement System (NOMS) Update:

- Value of using NOMS:
 - benchmarking your data vs. national data
 - > providing a functional measurement tool
 - supplying and accessing data that can be used to advocate for SLP services
- Eight of the 15 impairment areas are in the public domain and do not require NOMS registration/training
- New version of NOMS launching in July 2013 to include G-code converter, more flexible reporting, and ability to interface with electronic medical records.



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- Frequently Asked Questions about how Medicare's Claims-based Reporting Relates to NOMS: <u>http://www.asha.org/Members/research/NOMS/FAQs-About-How-Medicare-Claims-based-Reporting-Relates-to-NOMS/</u>
- For more information on ASHA NOMS contact Tobi Frymark at tfrymark@asha.org

G-codes update:

- G-codes and severity modifiers will be required for Medicare Part B, Health Net/Medicare Advantage patients beginning July 1, 2013.
- G-code functional modifier conversion calculator:
 - <u>http://www.mediserve.com/cbor-old-browser/</u>
- G-codes Basics: "What do I Need to Know?" (ASHA Live Web Chat) key points:
 - Recommend <u>SLPs serving Medicare Part B patients</u> minimally begin documenting G-codes according to CMS standards, even if facility is not yet reporting them on claims
 - If patient seen for a one-time visit (e.g., No ongoing treatment recommended or patient to be seen at another facility), then must report all three G-codes (e.g., current status, projected goal & discharge status).
 - Still waiting on clarification from CMS regarding whether ED/observation patients need G-codes but current recommendation from ASHA is to report them.
 - If seeing patient for multiple service types (e.g., swallowing & cognition), then must report G-codes for each evaluation but select only one area (most clinically relevant) to report on for ongoing treatment.
 - To view the complete web chat, go to: <u>http://www.asha.org/events/live/</u>

Changes in Medicare Reporting CE presentation by Nancy Swigert:

- http://swallowingdisorders.org/index.php?option=com_ content&view=article&id=83:preview-medicare&catid= 13:previews&Itemid=171
- 1.5 hours, 0.15 CEUs, \$25

Continued on page 5

OSHA Ethics Committee Update

Ethical issues and questions have many variables and may differ significantly in their level of severity. Each individual will also have a corresponding range of reactions to any given ethical issue. Potential ramifications of ethical dilemmas may affect a person professionally, socially, emotionally and financially. Navigating a questionable ethical situation is challenging. Help is available.

Speech-language pathologists and audiologists work with individuals on a daily basis to ensure the basic human right of communication. We work with people, and as such, ethics and morality are part of our lives.

In an effort to provide support to its members, the OSHA Ethics Committee is expanding. We are honored to welcome two new members.

Caitlin McDonnell, Clinical Faculty at Pacific University is joining the Ethics Committee. Caitlin is a specialist in Pediatric Feeding and Craniofacial/Cleft Palate. She previously worked at Legacy Emanuel Hospital. She will be able to provide guidance on ethical issues in medical settings. Caitlin can be reached by e-mail at <u>caitlin</u>. <u>mcdonnell@pacificu.edu</u> and by phone at 503-352-1596.

We also welcome Patricia Grady, SLP. Patricia provides direct services through private practice and teletherapy services through Presence Learning. She previously worked in a public school setting. She will be able to provide guidance on ethical issues in private practice and teletherapy. Patricia is available by e-mail at <u>tricia.grady@</u> <u>presencelearning.com</u> and by phone at 541-357-7586.

Caitlin and Patricia are joining Teresa Roberts. Teresa specializes in services in educational settings. Teresa can be reached by email at <u>t.roberts@pacificu.edu</u>, and by phone at 503-352-1524.

Please feel encouraged to contact Caitlin, Patricia, or Teresa for any and all questions about ethics.

OSHA Health Care Committee Report

Continued from page 4

ICD-10 begins Oct. 1, 2014:

- Greater specificity and clearer instructions than ICD-9
- 3-7 alphanumeric characters vs. 3-5 digits in ICD-9
- Code descriptors have more detail, so goal is to have less room for error.
- ASHA is preparing a FREE ICD-9 to ICD-10 conversation tool that will be ready June 2013: <u>http://</u>www.asha.org/practice/reimbursement/coding/icd-10/

Affordable Care Act (ACA):

- Established 10 essential healthcare benefits to be covered by Healthcare Exchanges and Medicaid:
 - Both habilitative and rehabilitative services are part of the essential health benefits
 - Included services are detailed and defined by individual states.
 - Oregon's plan covers speech-language pathology services and hearing aids: <u>http://www.cms.gov/</u> <u>CCIIO/Resources/Data-Resources/Downloads/</u> <u>oregon-ehb-benchmark-plan.pdf</u>

- Healthcare Exchanges
 - Oregon is being recognized as a leader and example for other states
 - Goal is to provide services for those who are currently uninsured (e.g., employers of <50 employees, selfemployed)
- Medicaid expansion:
 - ➤ 2014: an estimated additional 17 million people will become Medicaid eligible
 - Medicaid expansion to cover people under the age of 65 with income less than or equal to 133% of the federal poverty level.

FREE Educational modules on ASHA website on billing and coding (developed by Health Care Economics Committee); additional modules coming in 2014: <u>http://</u> www.asha.org/practice/reimbursement/modules/

Nicole Collings

Nicole.Collings@salemhospital.org

Australian Researcher in Stuttering Visits the University of Oregon - Spring 2013

By Marilyn A. Nippold & Lezlie Pearce-Hopper University of Oregon CDS Program

Dr. Sally Hewat, Senior Lecturer and Head of the Speech Pathology Program at the University of Newcastle, Australia, recently visited the University of Oregon Communication Disorders and Sciences Program. While in Eugene, Dr. Hewat consulted with clinical supervisors and student clinicians, and on February 22, she gave an outstanding lecture on the treatment of stuttering in schoolage children.

A researcher and practicing clinician herself, Dr. Hewat emphasized the importance of conducting evidence-based treatment of stuttering, which in her view, includes finding out first of all what school-age children who stutter (CWS) think about the disorder and what they wish to accomplish in treatment. For example, Dr. Hewat's research indicates that many school-age CWS want to meet other children who stutter and they want to stop stuttering! Also, they want to understand the disorder an they prefer group rather than individual therapy.

> Do you have an upcoming event or job opening?

Post It!

Take advantage of the OSHA website and post today!

Post an Event - \$50

Post a Job - FREE (for OSHA Members) As a result of this research, Dr. Hewat and her colleagues at the University of Newcastle regularly conduct an intensive five-day stuttering treatment program for school-age children, emphasizing group activities. During the program, children learn fluency enhancing and speech restructuring techniques in a supportive environment and gain practice using their techniques



during frequent "speech missions" and excursions into the community where they speak fluently. They also learn basic information about stuttering, including some of the myths surrounding the causes of the disorder, and they come to appreciate the long-term nature of stuttering and the need to continue to manage their own speech once the formal treatment sessions have ended. Regular booster sessions are offered as well, where children come back to the clinic as needed to practice their fluency techniques. As a result of attending the intensive program, many school-age CWS become more talkative, interactive, and confident in their speech.

Dr. Hewat's lecture was attended by over 50 practicing SLPs, CDS faculty, and graduate students. It was indeed a pleasure to have the opportunity to hear about her research, for Australia has long been known for its groundbreaking research and progressive attitude toward the treatment of stuttering disorders.

For instance, back in the late 1980s and early 1990s, many SLPs in the US were still blaming parents for their children's stuttering, and the predominant approach to treatment for preschool children in this country was indirect -- trying to keep the young child "unaware" of his or her stuttering, and coaching the parents to modify their own speaking patterns (slowing down, not interrupting, not asking questions), as if this would transfer to the young child's speech.

Despite numerous studies, however, there was no evidence to show that these sorts of parental speech behaviors had anything to do with the causes or amelioration of stuttering.

Definition of Medical Necessity

- **1.** A covered service or item is medically necessary if it will do, or is reasonably expected to do, one or more of the following:
- Arrive at a correct medical diagnosis.
- Prevent the onset of an illness, condition, injury, or disability (in the individual or in covered relatives, as appropriate).
- Reduce, correct, or ameliorate the physical, mental, developmental, or behavioral effects of an illness, condition, injury, or disability.
- Assist the individual in achieving or maintaining sufficient functional capacity to perform age-appropriate or developmentally appropriate daily activities.
- 2. The managed care organization (MCO) or insurer must determine medical necessity on the basis of health information provided by the following persons: the individual (as appropriate to his or her age and communicative abilities), the individual's family, the primary care physician, and consultants with appropriate specialty training, as well as other providers, programs, multidisciplinary teams, educational institutions, or agencies that have evaluated the individual.

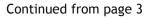
Australian Researcher in Stuttering Visits U of O

- **3.** The determination of medical necessity must be made on an individual basis and must consider:
- The functional capacity of the person and those capacities, which are appropriate for persons of the same age or developmental level.
- Available research findings, health care practice guidelines, and standards issued by professionally recognized organizations or government agencies.
- **4.** Final determinations will be made by a physician in concert with the following persons:
- The individual's primary care physician;
- a consultant with experience appropriate to the individual's age, disability, or chronic condition; and
- the individual and/or his/her family.
- 5. Medically necessary services must be delivered in a setting (e.g., an individual's home, school, child care center, workplace, or community-based agency) that is appropriate to the specific health needs of the individual.

Reproduced from Ireys, H.T., Wehr, E. & Cooke, R.E., (1999). *Defining medical necessity; Strategies for promoting access to quality care for persons with developmental disabilities, mental retardation, and other special health care needs*. (Report No. LO71). Vienna, VA: National Maternal and Child Health Clearinghouse.

Nicole Collings

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Meanwhile, researchers in Australia were busy conducting and publishing high quality studies that showed that parents did not cause their preschool children to stutter, but rather, that parents could play an important role in directly treating the disorder by working closely with a well-trained SLP and using the Lidcombe Program, a validated treatment method.

We look forward to learning more about Dr. Hewat's research in the years ahead.

Lezlie Pearce-Hopper lpearceh@uoregon.edu

Marilyn A. Nippold nippold@uoregon.edu Pacific University School of Communication Sciences and Disorders

Master of Science in Speech-Language Pathology

For more information: Email csd@pacificu.edu or call 503-352-1435.

pacificu.edu/coe/csd

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Report from the CSAP Conference

On May 17th and 18th, I had the honor of attending the national conference of the Council of State Association Presidents (CSAP) in Rockville, MD, along with the current OSHA president, Linda D'Onofrio. The mission statement of CSAP is to promote communication of professional matters between speech-language-hearing associations, ASHA and other related professional organizations, and this meeting was an excellent forum for collaboration and networking.

One of the highlights was touring ASHA headquarters (the Mothership!), which is recognized with a Gold LEED (Leadership in Energy and Environmental Design) certified green building designation. In addition, we met Dr. Patricia Prelock, ASHA president, as well as many ASHA executives.

Over the two conference days, a variety of topics were covered, including leadership, telepractice and the use of

social media. Two of the most relevant topics, Medicare reimbursement and coverage policies and comprehensive (universal) licensure, mirrored discussions going on at the Oregon state level.

As most of you know, much of the value of conferences is the incidental learning that goes in between formal sessions, such as when you are standing in the lunch line or elevator and begin talking to the SLP next to you. This conference gave us the opportunity to meet many committed and passionate state leaders and we came back equipped with a much broader perspective of issues at the national level. I would encourage you to learn more about the topics addressed at this conference, as well as finding out more about CSAP as an organization at <u>www.csap.org</u>.

Lauretta Manning

OSHA President Elect lmannin1@pps.net









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News Updates from the University of Oregon

Drs. Heather Moore and Jessica Fanning received a Williams Fund Undergraduate Education Grant and will be developing a bank of case examples profiling a range of clinical interventions to use in instruction. We are excited to have support to develop materials to strengthen the clinical education at the undergraduate level.

Dr. McKay Sohlberg was awarded a Pioneer Award by the Brain Injury Alliance of Oregon for Outstanding Academic and Clinical Research over the last 30 years.

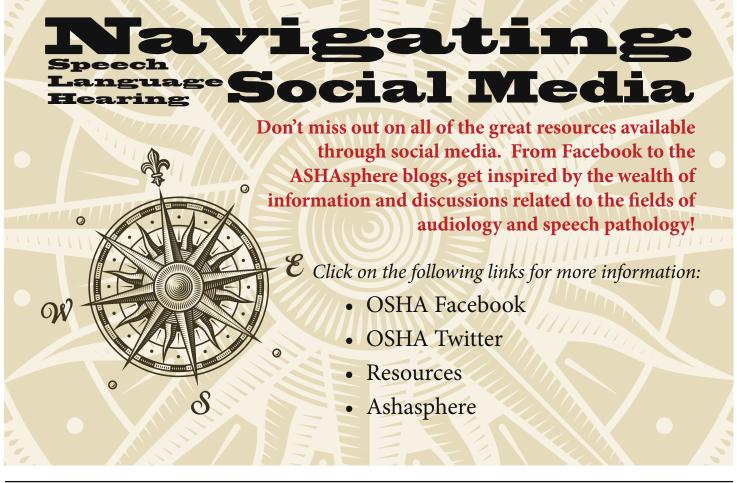
Dr. Marilyn Nippold was an invited speaker at an international fluency conference in Dubrovnik, Croatia focused on the science of stuttering. The conference was attended by clinicians and researchers from twenty countries.

Our state has a new PhD! Dr. Gina Griffiths successfully defended her dissertation evaluating strategy intervention for deficits in high level reading comprehension. She will be continuing her research next year at the University of Oregon and will be teaching courses in motor speech, evidence-based practice and cognitive rehabilitation.

In May, we had 19 masters students successfully present their Evidence-Based Practice projects as part of our EBP project conference that is attended by community slps. These are capstone projects integrating clinical implementation with research evidence. Eleven more students will present their projects June 13th. Congrats to our students and thank you to the support of our community slps!

The ASL sequence of classes added a full-time instructor and this academic year we were able to offer twenty-three different ASL courses. Recent events on the U of O campus included performances in sign by internationally known poet and comedian, Peter Cook, as well as by K-12 students from Oregon School for Deaf.

Lezlie K Pearce-Hopper lpearceh@uoregon.edu



OSHA Conference 2013

Our annual conference will be held on October 11th &12th at the Salem Conference Center. Your program committee has been working hard to invite some great speakers for this fall's conference. Our confirmed invited all-day speakers this year include Dr. Judy Montgomery from Chapman University in Orange, California, who will discuss intervention of school age language disorders; Dr. Michelle Bougeois from Ohio State University, who will discuss intervention for Dementia; Dr. Walter Manning, from the University of Memphis, who will discuss intervention for fluency disorders and Dr. Ann Mastergeorge from the University of Arizona, who will discuss early intervention for Autism Spectrum Disorders. We will soon confirm the presenters for our half-day presentations on the second conference day (Saturday).

I want to take this opportunity to thank all of you who have given our committee recommendations for speakers to invite. We take every one of those into consideration. Sometimes we invite those speakers and they are unable to join us due to scheduling conflicts. Other years, we are unable to invite them because we had a recent speaker on the same topic and strive to have diversity of themes from year to year. There have been a small number of recommended speakers we do not invite, because they do not meet OSHA's evidence-based standards for presenters. Please keep making recommendations; we want to invite the speakers that are of greatest interest to you!

Our full brochure will be emailed to you in August - so please check your inbox and/or our website for more details. Please note that registration will be online again this year.

> Amy Costanza-Smith • Conference Chair <u>costanza@ohsu.edu</u> • 503.418.1651

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Registration Fees:

OSHA Members: \$230 full conference / \$140 one day only Non-Members: \$305 full conference / \$215 one day only Student Members: \$70 full conference / \$45 one day only Student Non-Members: \$90 full conference / \$65 one day only SLPA Members: \$100 full conference / \$65 one day only SLPA Non-Members: \$120 full conference / \$85 one day only ASHA CEUS: \$5



The Oregon Speech-Language-Hearing Association is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

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OSHA Regions:

Region 1: Clatsop, Columbia, Tillamook, Washington, Yamhill, Polk, Lincoln, and Benton counties.

Region 2: Multnomah, Hood River, Clackamas, Marion, and Linn counties.

Region 3: Lane, Douglas, Coos, Curry, Josephine, Jackson, Klamath, and Lake counties.

Region 4: Wasco, Sherman, Gilliam, Morrow, Umatilla, Union, Wallowa, Jefferson, Wheeler, Grant, Baker, Deschutes, Crook, Harney, and Malheur counties.

Has Your Contact Information Changed?

Since OSHA's membership is now all online, you can check and make changes to your account information at any time on OSHA's website:

www.oregon speech and hearing.org.

Please add OSHAstaff@gmail.com to your address book to be sure you will receive any email notices that are generated from the website. Be sure to log in and check that the information (especially your email address) is correct. It is easy to make changes, and if you need help or don't remember your username and password, contact the OSHA Office at 503-659-7365 or OSHAstaff@gmail.com.