![BCASLPA - BC ASSOCIATION OF SPEECH/LANGUAGE PATHOLOGISTS & AUDIOLOGISTS]

Position Paper: Guidelines For Determining A Manageable Caseload
For SLPs Working With The School – Age Population

Demands on a school SLP vary considerably throughout the school year. There is a significant start-up time each Fall due to screenings, observations, assessments, collaboration, training of assistants and IEP meetings. Based on once a week service for an average school, it is realistic for this to take 4 to 8 weeks dependent on the time allotted, school size, transitory nature of the population, complexity of students on the caseload, familiarity of the SLP with the caseload and other school-based demands placed on the SLP. At year-end, assessment, review of the consultative caseload, documentation and IEP meetings require a considerable amount of time. This typically requires approximately 4 weeks. During these time periods, direct intervention may be limited or non-existent.

A variety of service delivery models are in operation around the province. Some districts have blocked time periods when only assessment or intervention occurs. Some provide intensive support on a rotating basis. Others provide assessment and consultation with only a minimal amount of direct intervention. Districts vary in the number and size of schools served by each SLP, distance between schools, type and intensity of service provided, and specialized staff available (e.g.: AAC specialist). A system to establish caseloads must be flexible to allow for the variety of service provided across the province.

Students in the school population are available for direct service only 5 hours a day or 25 hours per week. Although not specified in most contracts, it is expected that an SLP working full-time would work at least 35-40 hours per week. It is recognized many SLPs work considerably longer hours on their own time usually in preparation or documentation. Considering the large number of individuals in our profession suffering from burn-out and stress-related disorders, it is important that we set and stick to reasonable limits.

Although it is difficult to establish definitive guidelines for caseloads, by considering amounts of time required to complete specific tasks and manage specific kinds of cases, it is possible to determine reasonable limits.

Estimating a Caseload

1. Determine the number of hours worked in a week (e.g.: 35 hours).
2. Determine the number of potential student contact hours (e.g.: 25 hours for 1.0 FTE)
3. Subtract #2 from #1. This gives you the total # of hours available for non-student contact related activities.
4. a) Determine the average number of hours per week spent in meetings and non- clinical activities (e.g.: School Based Team meetings, staff meetings, etc.)
b) From this number, determine how much of this time is during potential student contact time.
c) Determine the remainder number of hours that are spent during these activities in non-student contact time.
5. Subtract #4b) from #2. (This gives you the number of potential student contact hours you have available.)
6. Subtract #4c) from #3. (This gives you the number of non-student hours available)
7. Rate each student in terms of hours required for management using the Time Allocation Guidelines below. Once the total of available clinical hours has been reached, the caseload should be capped.

Form for Calculating School Age Caseload Limits

#1	Hours worked in a week	
#2	Subtract potential student contact hours	-
#3	Hours available for non-student contact related activities	=

#4	Average # of hours per week spent in meetings	
#5	Subtract # of these hours that are in potential student contact time	-
#6	Hours spent doing these activities in non-student contact time	=

#7	Potential student contact hours (#2)	
#8	Subtract time in meetings (#5)	-
#9	Available student contact hours	=

#10	Total non-student contact hours (#3)	
#11	Subtract time in meetings, administration, etc. (#6)	-
#12	Available non-student contact hours	=

#13	Rate each student in terms of hours required for management using the Time Allocation Guidelines. Once the total number of available clinical hours (#9 available student contact hours and #12 non-student contact hours) have been reached, the caseload should be capped.