1. Complete internal self-studies of the Speech-Language Clinic training and service operations, review and discuss the feasibility of implementing recommendations including the creation of a new full time position, Speech-Language Clinic Director.

Our disciplines and programs have grown in size, scope and complexity over the past 10 years. Clinics and clinical training require evidence-based academic and service practices but also sound business management. In order to continue to grow our programs and services to the community, a full time Clinic Director is needed who can serve as primary manager as well as assist with clinical training, training and supervision of clinical faculty, and clinical research grant initiatives that contribute to the mission of SLHS. This individual would oversee a host of functions including day-to-day budgetary and staff operations, alumni/community relations, fund raising, accreditation/compliance functions and expansion of outreach and service. With a Speech-Language Clinic Director assuming these functions, the S-L clinical supervisors would then be free to devote their time to student training, client relations, and working with clinical and academic faculty to assure that the most advanced, evidence-based practices are being used in our clinics and incorporated into the clinical diagnostic and treatment training programs of our students. Because of the ‘business-oriented’ aspects of our clinic, we require a S-L Clinic Director with expertise in regulatory issues, reimbursement, and business planning. Additionally, a part-time staff member with experience in billing, procedural codes and documentation requirements for third party reimbursement will be needed. In our attempt to increase the revenue base for our clinic and to provide “real-world” clinical experiences for our students, we are moving toward increasing the marketing of our services, and importantly, toward accepting third-party reimbursements for our services to the community. The staff member should provide support towards migrating to new streamlined software and being in charge of our inventory and software.

2. Clinic Year-round clinical services: Currently, the Clinic is not operational year-round and is limited in terms of the hours the clinic is opened even during the academic year. Also, many persons who might require our clinical services sometimes can only be seen in late afternoon (for example, after work or school) or on weekends. Our students are therefore not receiving the best training and education, nor is the community receiving best services. Thus, to increase our graduate student training and to provide the best services to the community, the clinic is required to be operational 12 months of the year. This year-round
operation will also allow better integration with the goal of year-round operations of the University. Clinic year-round services will allow for the development of specialty clinics and to provide intensive services to local and non-local clients. For instance, the clinic would like to offer 6 week, intensive therapy programs for persons with aphasia or for those who stutter; currently such specialty programs cannot be accomplished given our hours of operation (and the restricted availability of clinical supervision). We would also like to offer a continuous speech-language pre-school program that would make available comprehensive assessment and therapy options for younger children, those who might not be best served by the limited opportunities available in the San Diego-area schools. Importantly, these specialty clinics will serve as a training ground for our graduate students, who might then go out into the community with a much better set of clinical experiences. Thus, ‘start-up’ funds and support for these specialty clinics are necessary, as well as support for general year-round operations of the clinic.

3. **Increase S-L clinical supervision faculty** in order to enhance and expand training opportunities for S-L students and services for clients. Increased supervision would allow 1st year S-L students to obtain more individual diagnostic hours than currently available and would support the development of specialty clinics (e.g., autism, early intervention) and school/community/home-based service delivery models.

4. **Conduct a faculty search** when funding is available to expand clinical and research training in the area of Speech Science with a focus on fluency or voice that can expand current training opportunities in low incidence disorders. This expertise would be of value to both the MA-SLP program and to our doctoral program in language and communicative disorders.

5. **Conduct a faculty search** when funding is available to expand clinical and research training in the area of Autism Spectrum Disorders, an area of need that has shown a dramatic increase in recent years at the State and national levels. Our program has relied on federal funding to provide specialized training to our students for many years. Yet, this training program needs to be institutionalized so that all students are able to acquire ASD-specific competencies in academic and clinical courses with this population. A faculty member with research and clinical expertise is needed to provide this training. This expertise would be of value to both the MA-SLP program and to our doctoral program in language and communicative disorders.

6. **Re-instate the newly developed undergraduate American Sign Language/Deaf Studies program** launched in 2008 (and currently suspended) **and obtain approval for the proposed ASL minor.** These programs would allow for the development of specialty certificates/training in areas such as sign language interpretation.
7. **Community Instructional Programs:** There is an increased need for providing continuing educational opportunities to the San Diego community of Speech-Language professionals. Our department and its clinical and academic faculty are particularly well suited to meet those needs. We thus propose establishing a formal continuing education curriculum that will eventually lead to a self-support program. For example, proposed topics include “current research in assessment and treatment”, “basic mechanisms of speech, language, and motor behavior”, “language development and disorders in children”, etc. Our vision is to have full-day colloquia on such topics, opened to students, professionals, and the general public. By serving the community in this way, we also will be able to improve the public relations of our various programs, and extend the marketing opportunities for our clinical services.

8. **Increase alum outreach efforts** so as to lay the groundwork for establishing a SLHS alumni group/association. An active alumni group would have many benefits including expanded networking opportunities for our students and greater visibility of our programs that could lead to increased “giving”.

9. **Increase outreach efforts in the public and private sectors** to obtain funds to support our training and research missions. Such funds would be used for graduate student scholarships to attract more students into the field so as to meet the critical shortages in SLHS and for seed money for faculty and doctoral students to support much needed clinical treatment research pilot studies for extramural grant applications.

Anticipated retirements next three years:

None