

1 **THE INTERSECTION OF PROFESSIONAL BURNOUT AND THE ASHA CODE OF ETHICS**

2 **Agenda**

Time/Minutes

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Content Covered

Welcome/disclosures/introduction

Professional burnout

ASHA Code of Ethics

Professional implications of ethical violations

Strategies to counter professional burnout

Conclusion/wrap-up

3 **Presentation Abstract**

- This presentation provides attendees the opportunity to thoughtfully consider the intersectionality of professional burnout and the ASHA Code of Ethics. Topics covered will include: signs associated with professional burnout; the ASHA Code of Ethics; strategies to counter professional burnout; and, potential professional implications associated with ethical violations.

4 **Presentation Objectives**

LEARNER OUTCOME #1

- The participant will be able to identify signs of professional burnout.

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LEARNER OUTCOME #2

- The participant will be able to discuss the potential adverse impact(s) of professional burnout on adherence to the ASHA Code of Ethics.

LEARNER OUTCOME #3

- The participant will be able to describe strategies to counter professional burnout.

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5 **Disclosure Statement**

Drs. Tepper and Vaughn serve as academic faculty members in the Department of Communication Sciences and Disorders at Baldwin Wallace University in Berea, Ohio.

They have no other relevant financial or non-financial disclosures to share.

6 **About Us**

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Research interests: transformative educational practices, and clinical education/clinical skills facilitation

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Research interests: adult learning theory, clinical education/clinical skills facilitation, interprofessional education, transgender voice

7 **BURNOUT SYNDROME**

8 **Definition of Burnout Syndrome**

- A syndrome conceptualized as resulting from chronic workplace stress not successfully managed.
- Characterized by:
 1. feelings of energy depletion or exhaustion;
 2. increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and,
 3. a sense of ineffectiveness and lack of accomplishment.
- Refers specifically to phenomena in the occupational context and should not be applied to describe experiences in other areas of life.
(WHO, 2019)

9 **Signs**

10 **Who's At-Risk?**

11 **Identified Stressors**

1. Overwhelming paperwork
2. Overwork
3. Lack of time
4. Lack of preparation time
5. Large caseload sizes

(Blood et al., 2002)

12 **General Strategies to Manage Burnout**

- Recognizing and reducing overwhelm
 - Interprofessional collaboration
 - Education/Consultation
 - Crucial conversations (in which high stakes, opposing opinions, and strong emotions are present)
 - Workload considerations (evaluation process – collaborate and delegate; service delivery model)

- Workload-specific adjustments to reduce occupational stress
 - Scheduling and structure
 - Paperwork and billing
 - Indirect services and activities
 - Administrative support
 - Advocacy
 - Federal, state, local
- (Farquharson, K., & Marante, L., 2021)

13 **THE ASHA CODE OF ETHICS**

14 **The Four Principles in Health Care Ethics**

1. Autonomy - To honor another's right to make decisions
- 2.
2. Beneficence - To prevent/mitigate harm and positively act for others
- 3.
3. Non-Maleficence - To avoid causing harm
- 4.
4. Justice - To equitably and fairly provide needed care to clients

(Leslie and Krival, 2010)

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15 **The Purpose of the ASHA Code of Ethics**

"To protect the welfare of the consumer and protect the reputation and integrity of the professions"

(ASHA, 2018)

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16 **The ASHA Code of Ethics (ASHA, 2018)**

Four primary principles govern the ASHA Code of Ethics

- Most current revision effective March 1, 2016
- <https://www.asha.org/Code-of-Ethics/>

Principle I: Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

- The Big Idea: professional competence, nondiscriminatory practices, interprofessional collaboration, appropriate referrals, informed consent, effectiveness, evidence-based clinical decision-making, varied modes of service delivery, confidentiality, lifestyle choices.
- Honesty and integrity with paperwork/billing, reporting violations/violators, timeliness, task delegation, skills representation.

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Principle II: Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

- The Big idea: Stay within your scope of practice, maintain your CCCs, be a lifelong learner.

Principle III: Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

- The Big Idea: Accurate professional representation, objectivity and professional judgment, honesty and integrity regarding services provided, communicate with the public honestly, fiscal responsibility.

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(ASHA, 2018)

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Principle IV: Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

- The Big Idea: work well collaboratively, be honest in communications, refrain from abuse of power, credit other's work/contributions appropriately, do not allow others to violate code of ethics.
- Honesty and integrity: in communications, in professional relationships, disclosures, no sexual misconduct, appropriately support sources, report violations to appropriate organizations, no retaliation, self-report criminal activities, ethics violations.
- Self-report violations to the Code of Ethics and participate with the Board of Ethics appropriately.

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(ASHA, 2018)

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19 **Sanctions**

The more egregious the offense, the harsher the sanction imposed.

Four types of sanctions:

1. Reprimand
2. Censure
3. Suspension
4. Revocation
5. Other (Withholding, Cease and Desist)

(ASHA, 2018)

20 **Why are Sanctions Imposed?**

1. To penalize the person in violation;
2. To serve as a mechanism to educate and rehabilitate;

3. To protect the public;

4. To inform other ASHA members and certificate holders that the Association enforces its ethical standards and alerts them that there are penalties for engaging in professional misconduct.

([HTTP://WWW.ASHA.ORG/PRACTICE/ETHICS/SANCTIONS/](http://www.asha.org/practice/ethics/sanctions/))

21 **Reprimand**

- Confidential
- Imposed in cases where unethical conduct is of a minor nature
- Disclosed only to the person found in violation and to the individual who originally filed the complaint
- Further unauthorized disclosure of the sanction of Reprimand is, itself, a violation of the Code of Ethics

22 **Censure**

- A public reprimand
- Published in *The ASHA Leader* to the full membership (identifies the individual in violation, his or her city/state of residence, and the principles and rules of the Code of Ethics violated)
- Notice of the ethics violation may also be sent to, among others, any state agency that provides a license to the individual and to any other professional organization the individual is a member of that enforces a code of ethics or code of professional conduct

23 **Suspension**

- Employed for short periods of time (e.g., 6 months)
- During the period of suspension, the sanctioned member must pay all dues and fees as well as fulfill certification maintenance requirements
- At the end of the period of suspension, the sanctioned member must directly contact ASHA Certification to find out how to become current again; approval of the Board of Ethics is not required
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24 **Revocation**

- For cases of egregious misconduct
- The Board of Ethics can revoke the individual's ASHA membership and certification for a period of years, up to life
- Requires a two-thirds vote of the members of the Board of Ethics present and voting.
- After the period of revocation has expired, for the individual to seek reinstatement of ASHA membership and/or certification, a petition must be made to the Board of Ethics
- The board must approve reinstatement by a two-thirds vote
- The individual has the burden of demonstrating that conditions that led to the revocation have been rectified and that, upon reinstatement, the individual will abide by the Code of Ethics
- The individual must also satisfy all certification standards and procedures of the Council for Clinical Certification and/or membership requirements that are in effect at the time of the Board of Ethics Reinstatement Order
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25 **Withholding & Cease and Desist**

Withholding

- The Board of Ethics cannot revoke what the applicant does not yet have, but the board can impose the sanction of Withholding of membership and/or certification for a period of years up to life
- Similar process as revocation for consideration of membership/certification

Cease and Desist Orders

- In addition to the sanctions identified above, the Board of Ethics can also order an individual to cease and desist from any practice or conduct found to be in violation of the [Code of Ethics](#)
- Prohibits the individual from continuing a particular course of conduct and may require specific affirmative actions designed to comply with the order, including written confirmation of compliance
- Failure to comply with a cease and desist order is, in itself, a violation of the Code of Ethics and normally results in revocation of membership and certification.
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26 **THE INTERSECTION**

27 **Implications of Burnout and the Code**

Stressors may contribute to:

1. Reduced productivity
2. Increased feelings of helplessness
3. Adverse impact on the quality of services provided to clients

(Blood et al., 2002)

28 **Burnout and the Code**

Principle I

Individuals shall honor their responsibility to hold paramount the welfare of persons they serve professionally or who are participants in research and scholarly activities, and they shall treat animals involved in research in a humane manner.

- Professional competence and effectiveness – Feeling unable to perform job duties effectively; a sense of dread about work; cynicism; depression; lethargy.
- Nondiscriminatory practices – Dwindling compassion; irritability.
- Interprofessional collaboration – Feelings of emptiness, apathy, hopelessness.
- Lifestyle choices – Alcohol, drug, and/or food misuse; physical and mental exhaustion; fatigue.
- Honesty and integrity with paperwork/billing, reporting violations/violators, timeliness, task delegation, skills representation – Gastrointestinal duress; headaches; anger; heartburn.

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Principle II:

Individuals shall honor their responsibility to achieve and maintain the highest level of professional competence and performance.

- Stay within your scope of practice - A sense of dread about work; heartburn; gastrointestinal duress; dwindling compassion.

- Maintain your Cs - Feelings of emptiness, apathy, hopelessness; feeling unable to perform job duties effectively; depression; headaches; alcohol, drug, and/or food misuse; irritability.
- Be a lifelong learner – Anger; cynicism; lethargy; fatigue; physical and mental exhaustion.
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Principle III:

Individuals shall honor their responsibility to the public when advocating for the unmet communication and swallowing needs of the public and shall provide accurate information involving any aspect of the professions.

- Accurate professional representation - Physical and mental exhaustion; irritability.
- Objectivity and professional judgment - Depression; headaches; fatigue; alcohol, drug, and/or food misuse; feelings of emptiness, apathy, hopelessness.
- Honesty and integrity regarding services provided - Cynicism; dwindling compassion; feeling unable to perform job duties effectively.
- Communicate with the public honestly - Heartburn; gastrointestinal duress.
- Fiscal responsibility – Lethargy; a sense of dread about work; anger.
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Principle IV: Individuals shall uphold the dignity and autonomy of the professions, maintain collaborative and harmonious interprofessional and intraprofessional relationships, and accept the professions' self-imposed standards.

- Work well collaboratively - Depression; lethargy; a sense of dread about work.
- Be honest in communications - Feeling unable to perform job duties effectively.
- Refrain from abuse of power, credit others' work/contributions appropriately, do not allow others to violate code of ethics – Cynicism; headaches; fatigue; physical and mental exhaustion; dwindling compassion.
- Honesty and integrity - Heartburn; gastrointestinal duress
- Self-report violations - Alcohol, drug, and/or food misuse; anger; irritability; feelings of emptiness, apathy, hopelessness.

32 **Examples of Setting Specific Issues**

33 **How Burnout Manifests Day-to-Day**

34 **Possible Strategies/Solutions**

1. Wellness/Self-care with Intent
2. Interprofessional Collaboration
3. Address Overwhelm
4. Professional Development

5. Advocacy
6. Solutions-focused approach to problem solving ('What' vs. 'Why')
7. Deliberate Work-Life Integration
8. Professional Support
- 9.

35 **Next Steps**

- Studies of work, occupational stress and mental health in speech-language pathologists and audiologists should be encouraged in order to provide these professionals with the specialized care and attention they deserve. These studies could also have important implications for professional associations, unions and guilds as they seek better working conditions and improved wages for their workers.

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(Brito-Marcelino et al., 2020, 221)

36 **APPLICATION ACTIVITY**

- 37 **1. Click on the link below or copy/paste the address into your web browser;**
2. Complete the self-assessment;
3. Tally your scores;
4. Click on the link at the bottom of the inventory;
5. Interpret your results.

[Burnout-Self-Test-Inventory](https://www.mindtools.com/pages/article/newTCS_08.htm)

https://www.mindtools.com/pages/article/newTCS_08.htm

38 **Things to Reflect Upon**

Based on your individual results consider the following...

- How can you enact meaningful change?
- What are your next steps?
- Who are the members of your support system?
- When can you find time for self-care?
- Where can you locate/access resources and supports?
- Why not start today?

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40 **Contact Us – We'd Love to Hear from YOU!**

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