

REQUEST FOR CHANGES PURSUANT TO G.S. 150B-21.10

AGENCY: Board of Examiners for Speech-Language Pathologists and Audiologists

RULE CITATION: 21 NCAC 64 .1003

DEADLINE FOR RECEIPT: September 16, 2026

PLEASE NOTE: This request may extend to several pages. Please be sure you have reached the end of the document.

The Rules Review Commission staff has completed its review of this Rule prior to the Commission's next meeting. The Commission has not yet reviewed this Rule and therefore there has not been a determination as to whether the Rule will be approved. You may email the reviewing attorney to inquire concerning the staff recommendation.

In reviewing this Rule, the staff recommends the following changes be made:

(a), lines 4-5: For clarity and proper grammar, consider revising this to read as, "Licensees shall hold a current, permanent license in North Carolina or an equivalent qualification from another state for a minimum of two years, prior to registering an Assistant."

(a), line 4: Change "must" to "shall".

(b): For clarity, consider rewriting this to state, "Licensees who register an Assistant shall demonstrate understanding of the elements of the registration and supervision process, including scope of practice, ethics, written protocols, and record keeping, by satisfactorily completing a knowledge demonstration."

(b), line 6: Change "must" to "shall".

(b), line 8: What is a "knowledge demonstration" and what do you consider to be "satisfactory"? Your rule does not provide a clear standard. Is it a written test? Something else? Is there a specific passing score? Be clear and specific.

(c), line 9: Change "must" to "shall".

(c), line 9: You mention an "application" here. Is that application form already prescribed in your rules or statutes? If so, cross-reference it here. If none exists, place the required fields and substantive requirements in rule. See our form guidance at <https://www.oah.nc.gov/rrc-final-guidance-forms/open>.

(d), line 11: Replace "must assure" with "shall ensure".

(d)(1): Replace "must" with "shall".

(d)(2): Replace "must" with "shall" on lines 14 and 15.

Christopher S. Miller
Commission Counsel

Date submitted to agency: September 3, 2026

(d)(2), line 14: Does “family” notification only apply if the patient is a minor? Or does family notification suffice in all circumstances?

(e), lines 17-18: Why is the first sentence of this paragraph needed? It doesn’t seem to do anything that isn’t already covered by those two rules. Consider deleting this.

(e), lines 18 and 19: Change “are” to “shall be” and “cannot” to “shall not”.

(e), lines 19-21, final sentence: Is this sentence still relevant now that you’ve set forth specific times and standards for supervision in (e)(7)? You may want to delete this or edit to avoid any confusion.

(e)(1), line 22: Delete “a” before “treatment tasks” and change “must” to “shall”.

(e)(2), line 28: Replace “must” with “shall”.

(e)(2), line 28: Consider deleting “reliable and effective”. These adjectives create an unclear standard and do not seem to be necessary here.

(e)(2), line 29: Add “Primary” before “Supervising Licensee” if that is your intent.

(e)(2), line 30: Replace “must assure” with “shall ensure”.

(e)(2), lines 30-31. This cross-reference is not precise. Revise to say, “... all three protocol elements in Parts (A) through (C) of Subparagraph (e)(1) of this Rule.”

(e)(2), line 31: What does “effectively” mean in this context? This may be seen as a vague standard.

(e)(3): What exactly is required to be signed? Your rule is not clear. Also, change “must” to “shall” on line 33.

(e)(4), line 34: Replace “must” with “shall”.

(e)(5): What statute(s) give the Board authority to conduct “random audits” for licensee compliance?

(e)(6), line 1: Change “must” to “shall”.

(e)(6), line 2: What does “accessible” mean in this context? In the same room? Available by phone? Your rule is not clear.

(e)(7), general comment: The length and organization of this paragraph makes it hard to parse. Consider breaking this out into sub-requirements for Supervisors to improve readability. Also, it may make more sense to designate this as paragraph (f) rather than subparagraph (7).

(e)(7), first sentence: Doesn't this first sentence go beyond the requirement of (e)(6)? Is (e)(6) still needed? "Direct supervision" seems to be a higher requirement than "accessible". Please consider and revise as needed.

(e)(7), line 6: What does it mean to "rectify" a form?

(e)(7), line 6: What is a "target behavior form"? Is this something that the Board creates and requires licensees to use? If so, is the form and its required contents set forth somewhere in your rules or statutes? See our form guidance document at <https://www.oah.nc.gov/rrc-final-guidance-forms/open>.

(e)(7), sentences 2-4, lines 5-10: The language used here is redundant. Consider breaking this up to say:

"Every 90 days, the Primary Supervising Licensee shall:

(A) update and recertify the target behavior form;

(B) provide to each full-time Assistant under his or her supervision a minimum of six hours of direct supervision and six hours of indirect supervision; and

(C) provide to each part-time Assistant under his or her supervision a minimum of three hours of direct supervision and three hours of indirect supervision."

(e)(7), sentences 2-4, lines 5-10: When does the first 90-day period begin? Once the first task is assigned? Upon registration? Be specific in your rule.

(e)(7), line 15: Change "session" to "sessions".

(e)(7), line 16: Add "made" before "available".

(e)(8), general comment: The length and organization of this paragraph makes it hard to parse. Consider breaking this out into sub-requirements for ratings/documentation for Supervisors to improve readability. Also, it may make more sense to designate this as paragraph (g) rather than subparagraph (8).

(e)(8), lines 17-18: Remove the parentheses around ("Form D") and add "entitled" before the form name. It would then read as "... Scale, entitled "Form D", for each ..."

(e)(8), line 21: What is considered to be "routine"? Specify a frequency.

(e)(8), line 22: Add "made" before "available".

*(e)(8)(A-E): Please confirm whether your rule captures **all** required information in the Form D. The rule should match the form.*

(e)(8)(C)(i-v), lines 30-35: Subparts at this level are not allowed in current rules. The listed competencies will need to stay at the Part level in (C). Please revise.

(e)(9): If you make some of the organizational changes suggested above, consider designating this as paragraph (h) rather than subparagraph (9).

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(e)(9), line 2: What is encompassed within “all documentation”? Do HR documents qualify? Only documents created in conjunction with performing services on patients? Be more specific.

(f), general comment: Is this requirement in addition to the Skills Assessment provided on a Form D? Or is this the same thing?

(f), line 8: If you are requiring Supervisors to complete and submit this form/information to you, you need to spell it out in your rule. Please describe the form contents here. For additional information, please see our form guidance at <https://www.oah.nc.gov/rrc-final-guidance-forms/open>.

(f), line 10: Is it an “orientation checklist” or a “competency checklist”? You use inconsistent terminology throughout this paragraph.

(g), line 13: “Any attempt” by whom? Who does this apply to? Be specific.

(g), line 13: What are “activities and responsibilities reserved solely for the Supervising Licensee”? Is this set forth in your rules? If so, cross-reference them here.

History Note, Authority: Consider adding G.S. 90-301A.

Please retype the rule accordingly and resubmit it to our office at 1711 New Hope Church Road, Raleigh, North Carolina 27609.

21 NCAC 64 .1003 is amended with changes as published in 40:21 NCR 1663-1664 as follows:

21 NCAC 64 .1003 LICENSEE REQUIREMENTS

(a) Licensees who register an Assistant must have held a current, permanent license in North Carolina for two years or equivalent qualifications from another state. Temporary license holders shall not register Assistants.

(b) Licensees who register an Assistant must demonstrate understanding of the ~~basic~~ elements of the registration and supervision process (scope of practice, ethics, written protocols, record keeping), and satisfactorily complete a knowledge demonstration on the registration/supervision process.

(c) Licensees must submit the application and annual fee for registration of the Assistant to the ~~Board~~. Board, as required in Rule .1002(e) of this Section.

(d) Licensees must assure that patients are informed when services are being provided by an ~~Assistant~~. Assistant through the following methods:

(1) The Assistant must wear a badge that includes the job title: "SLP-Assistant."

(2) When services are to be rendered by an Assistant, the patient or family must be informed in writing. This notification form must be kept on file in the patient's chart, indicating the patient's name and date notified.

(e) Tasks that are within the scope of responsibilities for an Assistant are listed in Rules .1004 and .1005 of this Section. The standards for all patient services provided by the Assistant are the full responsibility of the Supervising Licensee as defined in Rule .1001(b) and cannot be delegated. Therefore, the assignment of tasks and the amount and type of supervision must be determined by the Supervising Licensee to ensure quality of care considering: the skills of the Assistant, needs of the patient, the service-setting, the tasks assigned, and any other relevant factors.

(1) Before assigning a treatment tasks to an Assistant, the Primary Supervising Licensee must have first evaluated the patient, written a general treatment plan, and provided the Assistant with a written session protocol specifying the following for patient behaviors:

(A) eliciting conditions;

(B) target behavior; and

(C) contingent response.

(2) The Primary Supervising Licensee must document the Assistant's reliable and effective application of the treatment protocol with each patient. Each time a new protocol is introduced, the Supervising Licensee must assure and document that the Assistant is utilizing all three protocol elements (A, B, C) effectively.

(3) For every patient encounter (screening or treatment) in which an Assistant provides service, there must be legible signatures of the Assistant and one Supervising Licensee.

(4) These signed and dated patient encounter records must be retained as part of the patient's file for the time period specified in Rule .0209 of this Chapter and may be requested by the Board.

(5) The Board may do random audits of records to determine compliance with its rules.

- (6) When patient services are being rendered by an Assistant, the Primary Supervising Licensee must be accessible to the Assistant in order to assure that direct observation and supervision can occur when necessary.
- (7) The Primary Supervising Licensee shall provide direct supervision for each patient for whom the Assistant is providing services. Every 90 days the Primary Supervising Licensee shall update and recertify the target behavior form. Every 90 days, the Primary Supervising Licensee shall provide to each full-time Assistant under his or her supervision a minimum of six (6) hours of direct supervision and six (6) hours of indirect supervision. Every 90 days, the Primary Supervising Licensee shall provide to each part-time Assistant under his or her supervision a minimum of three (3) hours of direct supervision and three (3) hours of indirect supervision. Activities that provide direct supervision include observing in-person or recorded therapy sessions by the Assistant, providing co-treatment with the Assistant, or modeling therapy techniques during a session with the Assistant. Activities that provide indirect supervision include reviewing therapy notes prepared by the Assistant, lesson planning for the Assistant, communicating with the Assistant about sessions by telephone or email, or providing written feedback to the Assistant about session. The dates and amount of supervision provided shall be documented, dated, and available upon Board request.
- (8) The Primary Supervising Licensee shall complete and maintain a Competency Rating Scale ("Form D") for each Assistant on a form prescribed by the Board that is available on the Board's website. The Primary Supervising Licensee shall record on the Form D his or her observations regarding the Assistant's skills, as set forth in this Rule. The Primary Supervising Licensee shall update the Form D through routine observation, feedback, and performance evaluation sessions. The Form D shall be available for Board review upon request. The Primary Supervising Licensee shall provide written feedback to each Assistant and provide evidence of written feedback to the Board upon annual registration of the Assistant, the discontinuation of supervision of the Assistant, or upon request by the Board. A completed Form D shall contain the following:
- (A) The name and registration number of the Assistant;
 - (B) The name and license number of the Primary Supervising Licensee;
 - (C) The Primary Supervising Licensee's rating of the Assistant's demonstrated competencies in the following skills:
 - (i) Clerical skills;
 - (ii) Interpersonal skills;
 - (iii) Professional conduct in the work setting;
 - (iv) Technical skills; and
 - (v) Other skills decided by the Primary Supervising Licensee as necessary for the work performed by the Assistant.
 - (D) The Primary Supervising Licensee's plan to encourage further growth of the Assistant's skills; and

1 (E) The dated signature of the Primary Supervising Licensee and the Assistant.

2 (9) The Primary Supervising Licensee shall review and approve all documentation prepared by the
3 Assistant at least once every 30 days. This review shall be documented with the date of review and
4 Primary Supervising Licensee's initials or signature. This review shall be maintained in the patient
5 and Assistant supervision records.

6 (f) The Primary Supervising Licensee shall assess the Assistant's competencies during the initial 60 days of
7 employment using the performance-based competency assessment and orientation checklist provided by the Board on
8 the Board's website. The Primary Supervising Licensee shall submit the completed checklist ~~shall be submitted~~ to the
9 Board within 90 days of registration. ~~A Each time the Primary Supervising Licensee changes, the successor Primary~~
10 Supervising Licensee shall complete and file with the Board a new competency checklist ~~must be completed and filed~~
11 within 90 days ~~each time the primary supervising Licensee changes.~~ following the change in Primary Supervising
12 Licensee.

13 (g) Any attempt to engage in those activities and responsibilities reserved solely for the Supervising Licensee shall
14 be regarded as the unlicensed practice of speech-language pathology.

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16 *History Note: Authority G.S. 90-298.1; 90-304(a)(3);*

17 *Eff. July 1, 1998;*

18 *Amended Eff. December 1, 2013;*

19 *Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. October 4,*
20 ~~2016- 2016;~~

21 *Amended Eff. [September] October 1, 2026.*