BYLAWS

SPECIALTY BOARD ON SWALLOWING AND SWALLOWING DISORDERS

Article I—Name

The name of this Specialty Board is the Specialty Board on Swallowing and Swallowing Disorders, hereinafter referred to as the Specialty Board.

Article II—Organization

2.1. Principal Office and Address. Contact information for principle office of the Specialty Board shall be at:

Badger Bay Management Company
563 Carter court, Suite B
Kimberly WI 54136
Phone: (920)560-5611
Fax: (920)882-3655
Website: www.swallowingdisorders.org

2.2. Definition of Organization. The Specialty Board has oversight for the specialty recognition program in the area of swallowing and swallowing disorders. As defined in the Plan for Specialty Recognition the area of Swallowing and Swallowing Disorders is defined as the following:

Clinical management of patients with dysphagia (disordered swallowing) is considered a specialty within speech-language pathology. In this document, dysphagia is defined as difficulty accepting food into the mouth, the inability to reduce food to a consistency ready for swallowing, and difficulty moving food from the mouth to the stomach. Dysphagia can include the oral, oropharyngeal transit, pharyngeal, and esophageal phases of swallowing. Clinical services in dysphagia include evaluation and (re)habilitation of the ability to swallow, resumption or progression toward a normal diet, promotion of optimum nutrition and hydration, and prevention of respiratory and nutritional complications resulting from oropharyngeal swallowing disorders and aspiration.

The professional scope of practice in swallowing and swallowing disorders incorporates a distinct body of knowledge and specific skills within speech-language pathology encompassing clinical evaluation, imaging and instrumentation, and treatment. The evaluation and treatment of individuals with swallowing disorders requires integration of highly specialized knowledge and skills and is not parallel to nor subsumed within the scope of practice of any other area of specialization in the profession of speech-language pathology. The practice incorporates basic information and research in gastroenterology, gerontology, neurology, nutrition, oncology, otolaryngology, pulmonary medicine, pediatrics, developmental pediatrics, pharmacology, radiology, rehabilitation, physical and
occupational therapies. Numerous textbooks, graduate and post-graduate courses, workshops, seminars, and educational and clinical materials are devoted solely to swallowing disorders.

**Article III—Purposes**

The purpose(s) of this Specialty Board shall be to:

3.1 Establish, maintain, and periodically update the Standards for Recognition as a Specialist in the area of Swallowing and Swallowing Disorders.

3.2 Maintain a fair and equitable process by which ASHA certified speech-language pathologists can apply for Recognition as a Specialist in the area of Swallowing and Swallowing Disorders.

3.3 Encourage scientific study of the processes of individual performance in the area of Swallowing and Swallowing Disorders.

3.4 Foster improvement of clinical services and procedures in the area of Swallowing and Swallowing Disorders.

3.5 Advocate for the rights and interests of persons with swallowing disorders.

3.6 Other activities as deemed appropriate by the Board members, such as recognition of meritorious service, provision of continuing education programs, and dissemination of public awareness literature, consistent with the purposes of the Specialty Recognition Program and Articles of Incorporation.

**Article IV—Specialty Board Members**

4.1 Duties and Responsibilities. The Specialty Board shall manage, supervise, and control its business, property, and affairs, including establishment of its budget, raising and disbursement of funds, and the adoption of rules and regulations for the conduct of its business consistent with the Specialty Board’s purpose(s).

4.2 Composition. The Specialty Board must be composed of not fewer than three members, one of whom will be a consumer of services of the particular specialty area (or a family member of such a consumer.)

4.3 Selection. The Board will be comprised of twelve (12) affiliates who meet the qualifications for board recognition and one (1) consumer (or a family member of such a consumer) of services of swallowing and swallowing disorders. Henceforth, affiliates elected to serve on the Board will be referred to as Board Members. (Section IV of Manual)

4.4 Removal and Vacancies. A member of the Specialty Board may be removed from office by a majority vote of other members of the Board. Vacancies, whether by end of term, resignation, death, incapacity, or otherwise, shall be filled by Board appointment for the duration of the term. The Board member appointed to an unexpired term shall be eligible to be elected to serve one full 3-year term when the time remaining in the unexpired term is greater than one (1) year or two full 3-year terms when the remaining time in the unexpired term is less than one (1) year.
4.5 Committees. The Specialty Board shall create and dissolve committees, designate and change their charges, and determine their size, composition, and terms as needed.

4.6 Chair. The Chair shall be selected by a majority vote of the Board and be the presiding member of the Specialty Board. The Chair shall convene the annual meeting and any other meetings of the Specialty Board.

4.7 Other Officers. Other officers of the Specialty Board will be Vice-Chair, Secretary, and Treasurer. The Vice-Chair will assume the duties of the Chair when so designated by the Board. The Vice-Chair shall be selected by the Chair. A Secretary will keep minutes of Board meetings, and a Treasurer will be responsible for fiscal affairs of the Board, including receipt of fees for Specialty Recognition in Swallowing and Swallowing Disorders. The Chair may also assign other duties and responsibilities.

**Article V—Meetings**

5.1 Annual Meeting. The Specialty Board shall meet at least once a year. A quorum shall consist of two-thirds of the members of the Specialty Board.

5.2 Meetings. The Specialty Board shall have one telephone conference monthly. Additional conference calls or meetings may be called at any time by the Chair or a majority of the Specialty Board. At the direction of the Chair, meetings may be held and business conducted by conference telephone or similar communications equipment if all persons participating in the meeting can hear each other at the same time. Participation in a meeting by such means shall constitute presence in person at the meeting. Meetings shall be accessible to accommodate members with special needs.

5.3 Notice. Notice of the time, date, and place of each meeting shall be given at least 90 days prior thereto by notice by telecommunications and mail to each member of the Specialty Board at his or her address. The purpose or purposes for each meeting will be stated in the notice thereof.

**Article VI—Administration**

6.1 Reports. The Specialty Board shall submit to ASHA’s Council for Clinical Specialty Recognition an Annual Report in the specified format.

6.2 Fiscal Year. The fiscal year of the Specialty Board shall commence on January 1st and terminate on December 31st.

6.3 Amendments. These By-Laws may be amended by a two-thirds vote of the BRS-S affiliates at any time after at least 30 days written notice of the proposed amendment to the Board members and holders of Specialty Recognition.

6.4 Staff. As needed.

**Article VII – Dissolution**

The Specialty Board may be dissolved by a unanimous vote of the Board and the majority vote of the holders of Specialty Recognition in Swallowing and Swallowing Disorders.