Indiana

Speech-Language Guidelines

Best practice, eligibility, and dismissal/exit considerations

Indiana Speech-Language-Hearing Association (ISHA)
School-based SLP Task Force
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<u>Purpose of the Guidance Document</u>

Based on ASHA's Professional Issues Statement: Roles and Responsibilities of Speech-Language Pathologists in Schools

Historically, speech-language pathologists (SLPs) in the state of Indiana have experienced the highest median caseloads in the country (2010 Schools Survey, ASHA). Direct and indirect services (i.e., caseload) represents only a single facet of the total duties required for a student identified with a speech and/or language impairment. The school-based SLP has significant value educationally, beyond the direct/indirect services he/she provides, to improve the communication skills of identified students.

Based on the task force's work and collection of data nationally, states with guidance documents, even local districts within Indiana with guidance documents, have more reasonable caseloads (i.e., lower caseloads) than states / districts without guidance documents. *Why is this important*? High caseload numbers have a negative impact on the provision of FAPE and a negative impact on recruitment and retention of SLPs (2014 Schools Survey, ASHA). SLPs have **shared responsibilities** in schools to impact positive student outcomes. **This is at the heart of a move from a clinically-oriented model of service delivery as we transition to an integrated-educational model.** The purpose of this document is to identify critical issues related to eligibility determination and service provision for students with (and without) speech and/or language impairments and proactively provide guidance to SLPs and LEAs in decisions impacting students.

As we consider shared responsibilities and an integrated-educational model of service delivery, an understanding of the roles and responsibilities of the SLP is essential. The role of the SLP includes working across all grade levels, serving a range of disorders, ensuring educational relevance, providing unique contributions to curriculum, highlighting language/literacy, and providing culturally competent services. The SLP has a range of responsibilities (beyond intervention) that also includes prevention, assessment, program design, data collection and analysis, and compliance. In fact, SLPs have a role in serving all students, not just those identified with speech and/or language needs. In addition, **SLPs work in collaboration with others to meet student needs** (including parents, other school professionals, and within the community). SLPs demonstrate leadership skills to provide direction in defining their roles and responsibilities and ensuring delivery of appropriate services to students.

The American Speech-Language-Hearing-Association (ASHA) considers the following factors to be essential in implementing the SLP's roles and responsibilities: role and responsibility realignment, **reasonable workloads**, professional preparation, and lifelong learning.

a) School districts should consider a realignment of the roles and responsibilities of SLPs to maximize their expertise.   This realignment should be viewed in the larger context of the array of programs and services provided to students, including those with disabilities, and in light of the responsibility for student achievement that all educators share.
b) For SLPs to be productive in the many roles and responsibilities for which their expertise prepares them, they must have reasonable workloads. **School systems (and SLPs themselves) must make ethical and judicious decisions, consistent with legal mandates, about the services they provide.** They must balance their scope of work to use their expertise most effectively and efficiently. New or expanded roles cannot merely be additions to an already full workload.
c) The range and complexity of student problems require **at a minimum well-prepared, master's level professionals** with a strong knowledge base in speech-language/literacy development and speech-language/literacy disorder, as well as a strong skill set in diagnosis, intervention, and workload management at the pre-service level. **New or expanded roles (or working with low-incidence populations) may require high quality professional development for SLPs already in the schools.**
d) To keep abreast of changes in education and speech-language pathology, it is essential that SLPs seek out and be permitted to engage in continuing education experiences to update their knowledge base and hone their skills.

In summary, school districts (and SLPs) in Indiana who "make ethical and judicious decisions, consistent with legal mandates" (with guidance about eligibility and exit considerations) have reduced their caseloads from the 80-90 range to the 50-60 range. This has allowed districts (and the SLP) to realign roles "in the larger context of the array of programs and services provided to students, including those with disabilities." In other words, **more reasonable workloads have**

provided opportunities for SLPs to be productive in their *range of roles and responsibilities in schools* (i.e., to work more collaboratively with general education and special education teachers and to offer a continuum of services including push-in/inclusive services). This is crucial "in light of the responsibility for student achievement that all educators share."

The remaining sections of this document will provide guidance for LEAs and SLPs to apply when making decisions about best practice, eligibility, and exit considerations in serving struggling learners and students identified with special needs. Ultimately, decisions are made on an individual basis as part of a case conference committee decision.

Best Practice

Roles and responsibilities of the school-based SLP
(for more information click the following links)

American Speech-Language-Hearing Association. (2010). *Roles and responsibilities of speech-language pathologists in schools* [Professional Issues Statement]. Available from www.asha.org/policy. http://www.asha.org/policy/PI2010-00317/

American Speech-Language-Hearing Association. (2001). *Roles and responsibilities of speech-language pathologists with respect to reading and writing in children and adolescents* [Position Statement]. Available from www.asha.org/policy. http://www.asha.org/policy/PS2001-00104/

Workload / Caseload of the school-based SLP

Caseload refers to the number of students with Individualized Education Programs (IEPs) served by SLPs through direct and/or indirect service delivery options. In some school districts, caseloads may also include students who receive intervention and other services within general education designed to help prevent future difficulties with speech, language learning, and literacy. Caseloads can also be quantified in terms of the number of intervention sessions in a given time frame.

Workload refers to all activities required and performed by school-based SLPs. Workload includes the time for face-to-face direct services to students, as well as time spent performing other activities necessary to support students' education programs, implement best practices for school speech-language services, and ensure compliance with the Individuals with Disabilities Education Improvement Act of 2004 (IDEA, 2004) and other mandates.

The following chart depicts that "caseload" is just one of many responsibilities that impact workload for special education professionals (specifically speech-language pathologists).
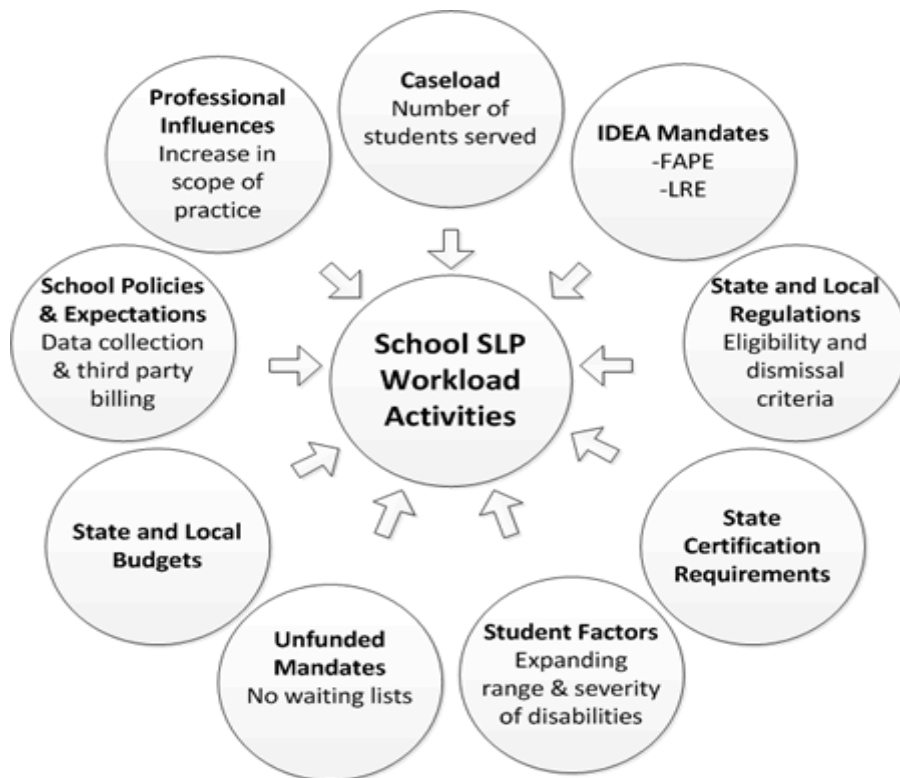
- "ASHA does not recommend a maximum caseload number, but recommends taking a workload analysis approach to setting caseloads to ensure that students receive the services they need to support their educational programs." (Vicker, Beverly 2009)

- "Students on smaller caseloads are more likely to make measurable progress on functional communication measures than those on large caseloads." (2014 Caseload and Workload Schools Survey, ASHA).

- "Large caseloads limit the ability to provide the _full continuum of services_ addressing individual needs and may no longer support individualized services that are required for the student's IEP." (Vicker, Beverly 2009)

Traditionally high caseload numbers in Indiana prevent school-based SLPs from implementing best practices. When assigning student services, it is important to take the entire workload into consideration. For more information about caseload/workload issues, including the impact of large caseloads, approaches to managing workload, scheduling strategies, service delivery models, and eligibility criteria considerations, click the following links:

American Speech-Language-Hearing Association. (n.d.). Practice Portal, Caseload and Workload
http://www.asha.org/practice-portal/professional-issues/Caseload-and-Workload/

http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589934681&section=Key_Issues#Conducting_a_Workload_Analysis

Focus on Eligibility Criteria

A significant consideration for caseload/workload is eligibility criteria (i.e. entrance and exit decisions).Appropriate and consistent identification of children who qualify for speech and language services will help prevent over-identification that unnecessarily expands caseload and workload. This document will provide guidelines for case conference committee considerations for eligibility criteria for Speech impairment and Language impairment.

ARTICLE 7 "Main Points"

https://www.in.gov/doe/files/art-7-english-may-2019-update-index.pdf

To be eligible for a language or speech impairment, the disability (or impairment) needs to have an adverse affect on the student's educational performance. **"Adversely affects educational performance" is defined as a consistent and significant negative impact on the student's academic achievement and/or functional performance** (i.e., social emotional / interpersonal adjustment).

Therefore, these questions need asked when determining eligibility:

1. Does the student have a speech and/or language impairment?
    a. If no, student would not meet eligibility criteria.
    b. If yes, consider question 2
2. Does the speech and/or language impairment have a **consistent and significant negative impact on the student's academic achievement and/or functional performance**?
    a. If no, student would not meet eligibility criteria.
    b. If yes, consider question 3
3. Does the student need special education or related services (i.e., specially designed instruction*)?
    a. If no, student would not meet eligibility criteria (but may be eligible for protections under Section 504).
    b. If yes, student meets eligibility criteria for special education.
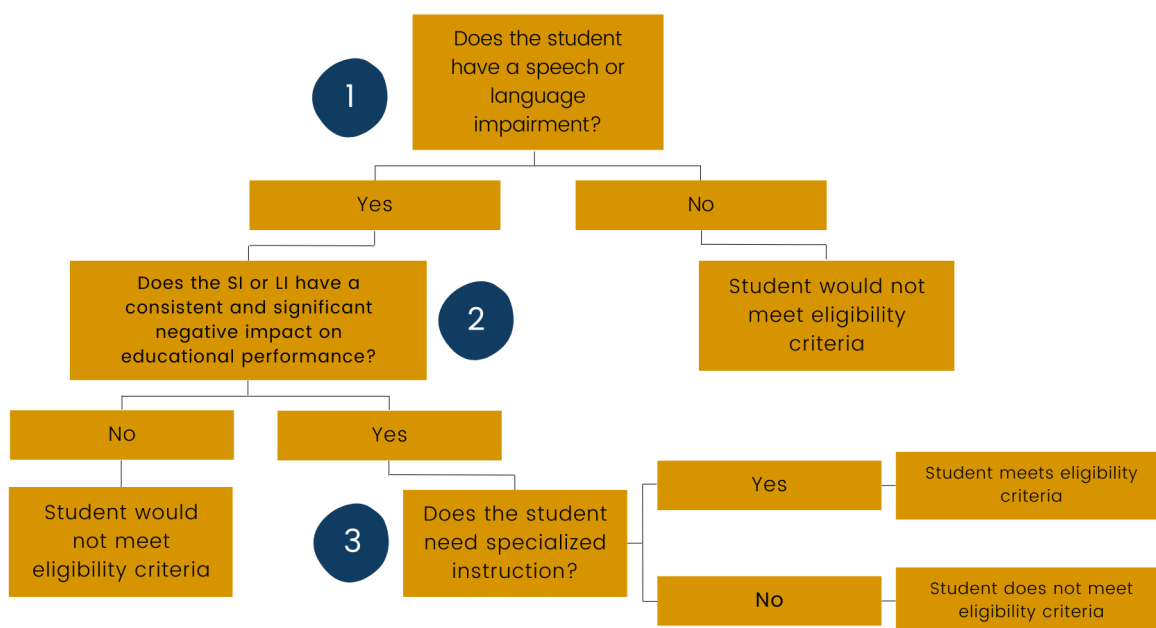
Specially Designed Instruction

What is specially designed instruction(SDI)? Article 7 (511 IAC 7-32-88) states that specially designed instruction means adapting, as appropriate to the needs of a student who is eligible for special education and related services, the content, methodology, or delivery of instruction to: (1) address the unique needs of the student that result from the student's disability; and (2) ensure the student's access to the general curriculum so that the student can meet the educational standards within the jurisdiction of the public agency that apply to all students.

*When determining if a given intervention is considered specially designed instruction, the following guiding questions should be addressed (2016, Hentz):
1. Is the special education teacher, speech-language pathologist, or related service provider teaching strategy which requires specialized training?
2. Is the instruction meaningful, specific, and direct - linked to curriculum standards?
3. Is the instruction intentional and specifically related to the development of skills needed for the achievement of IEP goals and objectives?
4. Is the content, methodology or delivery of instruction different from what is provided to general education peers?

If the answer is YES to these questions, the instruction / strategy is specially designed instruction.

Eligibility Overview

The initial evaluation or reevaluation results should help in determining if the student has a speech and/or language impairment. Keep in mind, per Article 7 (section 511 IAC 7-40-6): When determining eligibility for special education and related services, the CCC must: (1) consider all of the information contained in the educational evaluation report; and (2) not rely on any single measure or assessment as the sole criterion for determining eligibility or appropriate educational services.

The Present Levels / Existing Data section of the IEP for the student should help in addressing if the speech and/or language impairment has **a consistent and significant negative impact on the student's academic achievement and/or functional performance.**

Per Article 7 (section 511 IAC 7-42-6), when developing an individualized education program/IEP, the case conference committee must consider the following general factors:
1. The strengths of the student
2. The concerns of the parent for enhancing the education of the student
3. **The results and instructional implications of the initial or most recent educational evaluation and other assessments of the student**
4. **The: (A) academic; (B) developmental; (C) communication; and (D) functional; needs of the student**

Consider the use of a comprehensive outline, such as the following, in the Present Level / Existing Data section to help in addressing, and including, the data and information that is needed to help the case conference committee determine if there is a consistent and significant negative impact on the student's academic achievement and/or functional performance when determining eligibility (as an IEP must contain the following: (1) a statement of the student's present levels of academic achievement and functional performance, including: (A) how the student's disability affects the student's involvement and progress in the general education curriculum; or (B) for early childhood education students, as appropriate, how the disability affects the student's participation in appropriate activities).

COGNITIVE SKILLS:

ACADEMIC SKILLS (Reading, Writing, & Math)**:**

FINE/GROSS MOTOR SKILLS:

ADAPTIVE BEHAVIOR/VOCATIONAL/LEISURE SKILLS:

COMMUNICATION (Speech-Language) SKILLS:

SOCIAL & EMOTIONAL BEHAVIOR:

MEDICAL:

DESCRIPTION OF HOW THE (SUSPECTED) DISABILITY AFFECTS THE CHILD'S INVOLVEMENT/PROGRESS/ PARTICIPATION IN THE GENERAL EDUCATION CURRICULUM (K-12) OR IN APPROPRIATE EARLY CHILDHOOD ACTIVITIES:

DESCRIPTION OF OBSERVABLE BEHAVIORS OR OTHER FACTORS AFFECTING SCHOOL PERFORMANCE:

TIP: *In the COMMUNICATION (Speech-Language) SKILLS section, be sure that you are specific what the speech and/or language impairment is for the student. This helps support if there is a speech and/or language impairment. Does the student have an articulation disorder? A phonological impairment? A receptive and/or expressive language disorder? If so, how is it characterized? This will also help in the development / alignment of your IEP when developing goals and provisions (etc.).*

Information to consider to support an adverse affect on Academic Achievement and/or Functional Performance:state and local/district assessment data (e.g., NWEA, Acuity, ECAs, ISTEP+, IREAD, DIBELs, classroom grades, RAPS360, etc.); disciplinary information; classroom participation/contributions to discussions; intelligibility/oral expression; peer/adult perceptions; and student input (feeling/perceptions). Feeling/perceptions may include: social withdrawal, reluctance to interact, frustration, exclusion/rejection by peers

Click the following link from the IIEP Resource Center for a (summary) template to assist in collecting the data sources and types of evidence used when determining eligibility. Click on the download link for Eligibility Criteria and Determination Templates (eligibility areas are listed alphabetically):

https://www.indianaieprc.org/images/lcmats/Evaluations/Detelig/EligibilityDeterminationTemplatesRevisedUpdated9.29.20.docx

Dismissal / Exit Considerations

Consider the <u>Three Questions</u> of Eligibility
1.   Does the student have an impairment?
2.   If so, does the impairment adversely affect the student's academic achievement and/or functional performance?
3.   If so, does the student need specially designed instruction?

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1. Speech-language goals/objectives have been met and a speech-language impairment may no longer exist (i.e., the answer is NO to Question 1 of eligibility). Recommend the reevaluation process to consider dismissal.

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2. A communication disorder may still exist (YES to Question 1), though there is existing data/evidence that may suggest that the impairment is no longer adversely affecting academic achievement and/or functional performance (Question 2). Recommend the reevaluation process to consider dismissal.

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3. A communication disorder may still exist (YES to Question 1), though speech-language services may no longer be needed (i.e., consideration needs to be made for Question 3). See FOUR CONSIDERATIONS below.

FOUR CONSIDERATIONS for Question 3
You need your existing data/evidence to support; if not sufficient data/evidence, consider the need for a reevaluation.

#1: *Services no longer result in measurable benefit from specialized services; there is lack of progress*

This *may* be evidenced by:
● student not completing homework/practicing outside of the therapy session
● student expressing he/she no longer wants to be in speech-language services
● student sharing he/she is not bothered by speech/language
● student sharing "my speech is fine"
● student expressing that others say he/she "speaks with an accent"
● parents sharing that they don't have concerns

    a. <u>Review data/evidence</u> to support the above [e.g., documentation of the progress monitoring/session data that shows the consistent lack of progress over time; be sure the EBP/approaches/strategies that have been used are documented; consider/obtain student, teacher, parent input]
    b. <u>Discuss the data/evidence</u> about lack of progress with the student's team
    c. <u>Develop a plan</u> [e.g., review strategies already used/adjust as needed, review team input, consider redesigning/revising services/goals (e.g., direct/indirect, classroom-based, pull-out, frequency of service, appropriateness of goals), consider establishing a timeline to see if change in progress after redesigning/revising services / goals]
    d. <u>Obtain reevaluation permission</u> if no change in progress and rule-out a structural/functional oral motor impairment (if SI)
    e. <u>Schedule a case conference to review all data (existing and new)</u> and consider potentially harmful effects in consideration of recommendations as well as the efficiency of use of instructional time for the student

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#2: *Skills have been acquired and are used correctly in speech-language sessions, though not carried-over/generalized consistently outside of therapy.*

  a. Review data/evidence [e.g., documentation of goals being met in the speech room and data for performance in carry-over settings; be sure that all EBPs/approaches/strategies that have been used are documented]
  b. Discuss the data/evidence about limited carry-over with the student's team
  c. Develop a plan [e.g., review strategies already used/adjust as needed; input from the student, teachers, and parents; consider redesigning/revising services/goals (e.g., direct/indirect, classroom-based, pull-out, frequency of service, appropriateness of goals), consider establishing a timeline with team members to collect data/information pertaining to carry-over of skills (once adjustments to services are made)]
  d. Obtain reevaluation permission if no change in progress
  e. Schedule a case conference to review all data (existing and new) and consider potentially harmful effects in consideration of recommendations as well as the efficiency of use of instructional time for the student

#3: *Extenuating medical/dental limitations (after eligibility determined) limit the student's potential to achieve goals; therapy may not remediate disorder/impairment (e.g., stroke, tumors, certain medical treatments)*

  a. Review data/evidence [e.g., physician input, progress information]
  b. Discuss the data/evidence with the student's team
  c. Develop a plan [e.g., review strategies already used/adjust as needed; input from the student, teachers, and parents; consider redesigning/revising services/goals (e.g., direct/indirect, classroom-based, pull-out, frequency of service, appropriateness of goals), consider establishing a timeline with team members to collect data/information (once adjustments to services are made)]
  d. Obtain reevaluation permission if no change in medical/dental status
  e. Schedule a case conference to review all data (existing and new) and consider potentially harmful effects in consideration of recommendations as well as the efficiency of use of instructional time for the student; educate CCC members (including parents) about the nature of the speech-language issue and how the associated structural or medical factors affect the student's ability to benefit from continued SLP services

#4: *Functional communication across environments/communication has been achieved.*

This *may* be evidenced by:
● minimal evidence of communication breakdown
● student can functionally express self with little-to-no problem behaviors

  a. Review data/evidence [e.g., input from other disciplines/parents/teachers, progress information]
  b. Discuss the data/evidence with the student's team
  c. Develop a plan [e.g., review strategies already used; consider redesigning/revising services/goals (e.g., direct/indirect, classroom-based, pull-out, frequency of service, appropriateness of goals); consider if specially designed instruction from the SLP is needed or if the TOR and/or paraprofessional can implement communication strategies; consider transition planning (i.e., what does the student need to be successful in school/community)]
  d. Obtain reevaluation permission
  e. Schedule a case conference to review all data (existing and new) and consider potentially harmful effects in consideration of recommendations as well as the efficiency of use of instructional time for the student; educate CCC members (including parents) about the nature of the speech-language issue and how the associated primary disability (if applicable) affects the student's ability to benefit from continued SLP services

In Summary

Eligibility and dismissal decisions are made on an individual/student basis as part of a case conference committee decision. Considerations about best practice should be discussed with staff at the local/district level. These considerations should include meeting students' communication needs through a continuum of services that acknowledges the range of roles and responsibilities for school-based SLPs. In addition, processes and procedures (including paperwork) for implementing speech-language programming is a local/district discussion. The purpose of this document is to provide *guidance* for decision-making about entrance/exit and best practice/service delivery as a way to help address caseload sizes in Indiana (and the recruitment and retention of SLPs to address administrative concern about shortages in the field).

Credits

While the task force reviewed multiple local/district and national/state guidance documents, parts of this document were influenced by the work in two Indiana counties who should receive credit. In the *Eligibility Overview* section, the comprehensive outline is used by some districts in Hamilton County. In addition, the *Dismissal / Exit Considerations* section is based on the work from Earlywood Educational Services.

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