

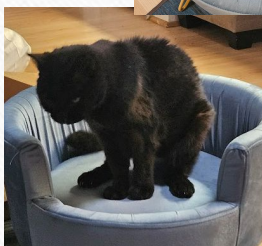
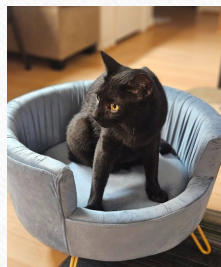
School-Based Speech and Language Services

That Promote Efficient and Effective Student
Outcome

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January 16, 2025

About me





What are the duties of a school-based SLP?



School-Based Speech- Language Pathologists:

Who We Are and What We Do

A presentation for school personnel and parents.

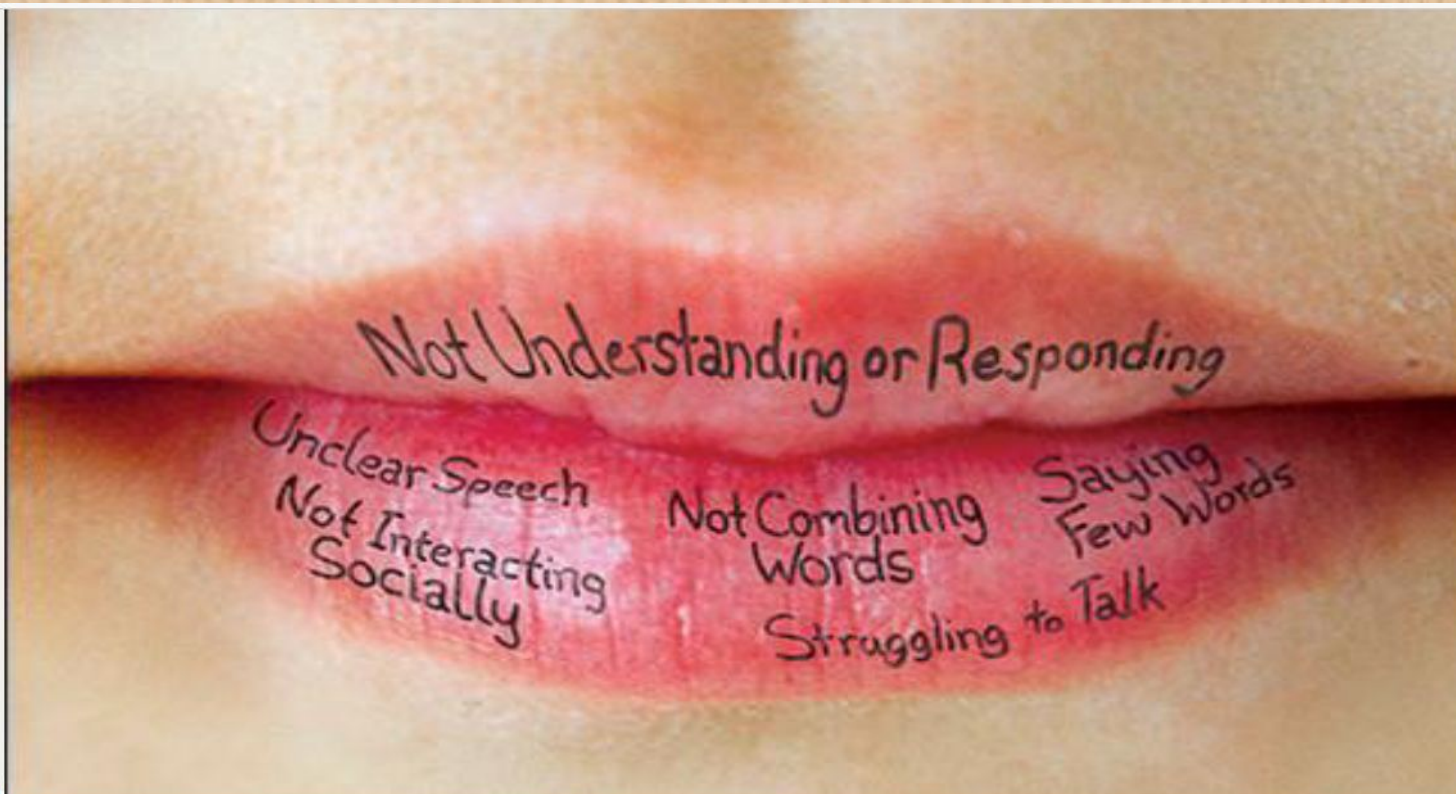
Speech- Language Pathologist (SLP)



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SLPs receive specialized preparation and training through masters or doctoral education programs. Highly qualified SLPs hold the ASHA Certificate of Clinical Competence (CCC).

School-Based SLPs Diagnose and Treat Speech, Language, and Swallowing Disorders



- A speech-language disorder is an impairment in the ability to understand and/or express thoughts and ideas.
- It may affect speaking, reading, writing, processing information or interacting socially.
- Feeding and swallowing disorders interfere with the ability to safely eat and swallow food and liquids and impacts overall well-being and educational performance of students.

Speech-Language Pathologists Diagnose and Treat:



Speech sound disorders that may be characterized by:

- Substitutions (e.g., "fink" for "think")
- Omissions/deletions (e.g., "ca" for "cat")
- Distortions –sounds are altered or changed (e.g., lisp "th" for "s" or lateral lisp)
- Additions (e.g., "buhlack" for "black")

Speech-Language Pathologists Diagnose and Treat:



Childhood Apraxia of Speech, which may be characterized by:

- Inconsistent sound errors on consonants and vowels
- Inappropriate prosody
- Pausing between sounds, syllables, or words

Speech-Language Pathologists Diagnose and Treat:

Spoken language disorders, which may include difficulties with:

- Phonological skills (e.g., learning and producing sounds, associating letters and sounds)
- Morphology and syntax (e.g., formulating sentences, correct use of grammar and word endings)
- Vocabulary and word finding
- Listening and comprehension



Speech-Language Pathologists Diagnose and Treat:

Written language disorders, which may include difficulties with:

- Reading
- Writing
- Spelling



Speech-Language Pathologists Diagnose and Treat:



Social communication disorders, which may include difficulties with:

- Pragmatics
- Social cognition and interaction
- Language processing

Speech-Language Pathologists Diagnose and Treat:

Cognitive-communication disorders, which may include difficulties with:

- Learning
- Memory
- Perception
- Problem solving



Speech-Language Pathologists Diagnose and Treat:

Voice and resonance disorders, which may be characterized by:

- Pitch that is too high or low
- Hoarse, raspy quality
- Loss of voice
- Abnormal resonance (e.g., hypernasality, hyponasality, or cul de sac resonance)



Speech-Language Pathologists Diagnose and Treat:

Fluency disorders, which may include difficulties such as:

- Stuttering
- Cluttering



Speech-Language Pathologists Diagnose and Treat:



Feeding and swallowing disorders, which may be characterized by

- Eating a limited number of foods
- Inability to use age-appropriate utensils or cups
- Taking longer than 30 min to finish meals or snacks
- Coughing/choking during or after swallowing
- Wet/gurgly vocal quality after eating or drinking
- Limited weight gain and growth

Speech-Language Pathologists Help Students

To have a voice and communicate with an augmentative or alternative communication (AAC) system.

AAC systems may be:

- High tech or low tech
- Temporary or permanent
- A tool to facilitate natural speech and reduce challenging behaviors due to communication breakdowns



Additional Roles of SLPs in Schools

Speech-Language Pathologists Assist With Screenings



- Work as members of multi-tiered systems of support (MTSS) teams and collaborate with teachers and families.
- Select and implement universal screening measures and interventions in areas such as literacy.

Speech-Language Pathologists Develop, Implement, and Monitor Individualized Education Programs

- Help develop Individualized Education Programs (IEPs)
- Plan and implement intervention based on IEP goals
- Collect data on student progress toward IEP goals
- Complete compliance paperwork (e.g., therapy logs, Medicaid billing)
- Attend IEP meetings



Speech-Language Pathologists Work With Staff, Families, and Other Professionals



- Collaborate with teachers, parents, administrators, and support staff
- Provide training to staff and families
- Serve as case manager
- Supervise paraprofessionals, student SLPs, and Clinical Fellows

Speech-Language Pathologists Are Required To:



- Remain current on ASHA practice policy as well as federal, state, and local directives
- Attend professional development courses to maintain state licensure and ASHA certification (CCC)
- Uphold ASHA Code of Ethics as well as code(s) for all states in which they practice.

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Visit
www.asha.org/slp/schools
to learn more.

Additional duties

- Student/ classroom observations
- Evaluation reports
- EPT meetings
- Staffings (initial or new EE placements)
- Medicaid billing, must be within 48 hours of seeing student
- Progress notes
- Bus and car duties
- Test proctoring
- Faculty meetings
- Attend PD intended for teachers
- Speech initial staffings
- Speech/Language dismissals
- In-state and out-of state transfers
- Transition surveys
- AAC programming and low tech
- Planning sessions
- Creating own schedule
- Parent contacts
- Hearing aid assistance
- Functional vision and hearing screenings
- CEUs to maintain license and certification – not provided or paid for by district
- Monitoring swallowing and feeding plans
- Attend monthly district meetings
- creating student visual schedules
- creating student visual supports

Federal Law

IDEA - Individuals with Disabilities Education Act

IDEA - Individuals with Disabilities Education Act

- The Individuals with Disabilities Education Act (IDEA) works by providing a framework for how public schools in the U.S. must serve students with disabilities. Here's how IDEA works in practice:

Child Identification and Evaluation

- **Child Find:** Schools are required to identify, locate, and evaluate children suspected of having disabilities from birth through age 21.
- **Evaluation:** If a child is suspected of having a disability, they undergo a comprehensive evaluation to determine eligibility for special education services. This evaluation is conducted by a team of professionals and must be completed within a set time.

How does your district handle early intervention referrals?

Part C to Part B?

Community referrals?

Who makes up your evaluation team?

Eligibility for Services

- After evaluation, the team determines if the child has a disability defined under IDEA (e.g., autism, hearing impairment, specific learning disabilities) and if it adversely affects the child's educational performance.
- If eligible, the child qualifies for special education and related services.

Individualized Education Program (IEP)

- Once a child is eligible, an IEP is developed by a team that includes the child's parents, teachers, school administrators, and other relevant professionals.
- The **IEP** outlines the child's present level of performance, measurable goals, and the specific services and accommodations needed, such as speech therapy, assistive technology, or modifications in the classroom.

Least Restrictive Environment (LRE)

- IDEA requires that students with disabilities be educated in the **least restrictive environment**. This means they should be included in general education classrooms whenever possible, with appropriate supports and accommodations.
- Placement in special education or separate classes is only considered when the child's needs cannot be met in a general education setting.

What does SLP service delivery look like in your district?



Related Services and Supports

- Beyond academic instruction, IDEA mandates that schools provide related services needed for a student's success. These can include occupational therapy, physical therapy, transportation, or counseling services.

Parent and Student Rights

- **Parents** are key participants in the IEP process and have the right to be involved in all decisions. They also have procedural safeguards, including the right to dispute decisions or request mediation if they disagree with the school's approach.
- **Due Process:** Parents can request a hearing if they believe the school is not complying with IDEA or their child's IEP.

Progress Monitoring and Reevaluation

- A child's progress is monitored regularly to ensure the IEP is being followed and the goals are being met. Adjustments to the IEP can be made as needed.
- Reevaluations are required at least every three years to determine whether the child continues to be eligible for services and to assess their progress.

Transition Services

- Starting no later than age 12 or 7th grade, IDEA requires schools to provide transition services, preparing students for life after high school. This could include post-secondary education, vocational training, employment, or independent living skills.

Eligibility and Dismissal

Eligibility Under IDEA

- To qualify for services under the Individuals with Disabilities Education Act (IDEA), a child must meet the following two key criteria:
 - **1. Disability Classification**
 - **2. Educational Impact**
- The child's disability must **adversely affect their educational performance**, meaning it impacts their ability to learn in a general education setting without special education services or supports.

Exceptionality Codes

Autism Spectrum Disorder	P
Deaf or Hard of Hearing	H
Developmental Delay (age 0-5)	T
Dual Sensory Impairment	O
Emotional or Behavioral Disability	J
Gifted	L
Hospitalized or Homebound	M
Intellectual Disability	W
Language Impairment	G
Language Therapy	X
Occupational Therapy	D
Orthopedic Impairment	C
Other Health Impairment	V
Physical Therapy	E
Specific Learning Disability	K
Speech Impairment	F
Speech Therapy	Y
Traumatic Brain Injury	S
Visual Impairment	I

SP&P – ESE Policies and Procedures

- **SE Policies & Procedures (P&P)**
- Section 1003.57(1)(b)1., Florida Statutes (F.S.), requires that district school boards submit to the Florida Department of Education (FDOE) proposed procedures for the provision of special instruction and services for exceptional students once every three years. Approval of this document by FDOE is required by Rule 6A-6.03411, Florida Administrative Code (F.A.C.), for district's use of weighted cost factors under the Florida Education Finance Program (FEFP). This document also serves as the basis for the identification, evaluation, eligibility determination, and placement of students to receive exceptional education services, and is a component of the district's application for funds available under the Individuals with Disabilities Education Act (IDEA).

C-4. Is a medical prescription for language therapy sufficient to determine eligibility?

No. Clinical diagnosis of a language impairment and a medical prescription for language therapy are reflective of requirements based in a medical setting (e.g., private clinics and independent contract service providers, hospitals, inpatient and outpatient therapy providers). Diagnoses of communication disorders by a health care provider can be important information for the school to review when considering all factors relevant to the student's educational needs. Diagnoses such as these are helpful for access to research, advocacy, and support networks. However, a medical or clinical diagnosis of a language impairment or medical prescription for language therapy alone is not sufficient to establish ESE eligibility. The student must meet all of the eligibility criteria in the rule and need services that can only be provided through ESE.

- **The Centers for Medicaid and Medicare Services (CMS) define Communication Disorders and Speech Language Pathology Services as services medically necessary for the diagnosis and treatment of swallowing (dysphagia), speech-language, and cognitive-communication disorders that result in communication disabilities.**
- ● A communication disorder is an impairment in the ability to receive, send, process, and comprehend concepts of verbal, nonverbal, and graphic symbol systems (ASHA, 1993). A communication disorder may be evident in the processes of hearing, language, and/or speech resulting from injury, illness, congenital anomaly, or developmental conditions, and may be habilitative or rehabilitative in nature.
- ● Speech-language pathology services must be reasonable and necessary for the treatment of illness, injury, disease, disability, or developmental condition.

- **The Florida Department of Education (FLDOE) defines Speech and Language Impairments relative to their potential adverse impact on educational performance.**
- ● **Language impairments** are disorders of language that interfere with communication, adversely affect performance and/or functioning in the student's typical learning environment, and result in the need for exceptional student education.
- ● Due to deficits in the student's language skills, the student does not perform and/or function adequately for the student's chronological age or to meet grade-level standards as adopted in Rule 6A-1.09401, F.A.C., in one or more of the following areas, when provided with learning experiences and instruction appropriate for the student's chronological age or grade:
 - 1. Oral expression;
 - 2. Listening comprehension;
 - 3. Social interaction;
 - 4. Written expression;
 - 5. Phonological processing; or
 - 6. Reading comprehension.

- ● **Speech impairments** are disorders of speech sounds, fluency, or voice that interfere with communication, adversely affect performance and/or functioning in the educational environment, and result in the need for exceptional student education.
- ● School districts are required to locate, identify and evaluate all children with disabilities from birth through age 21. The Child Find mandate applies to all children who reside within a State, including children who attend private schools and public schools, highly mobile children, migrant children, homeless children, and children who are wards of the state. (20 U.S.C. 1412(a)(3))

• **Educational**

- Team includes parents, educators, and therapist(s). Using therapist(s) evaluations, the team collaborates to determine focus on service as well as frequency and duration based on the student's educationally-related therapy needs.
- Therapy focuses on intervention to improve the student's ability to learn and function in the school environment.

• **Medical**

- Medical team recommends focus, frequency, and duration of therapy.
- Third party (insurance) may be ultimate decision maker.
- Therapy focuses on treatment to alleviate or cure specific underlying medical pathologies

• **Educational**

- Services are provided primarily on school grounds and through school-sponsored community integration and vocational programs.
- Services are usually provided in a variety of settings in the student's educational environment (e.g., cafeteria, classrooms, bus, etc.)
- Student's ages range from 0-21.
- Services are provided at no cost to parents.
- Documentation of intervention is related to IEP. Emphasis is placed on educational terminology.

• **Medical**

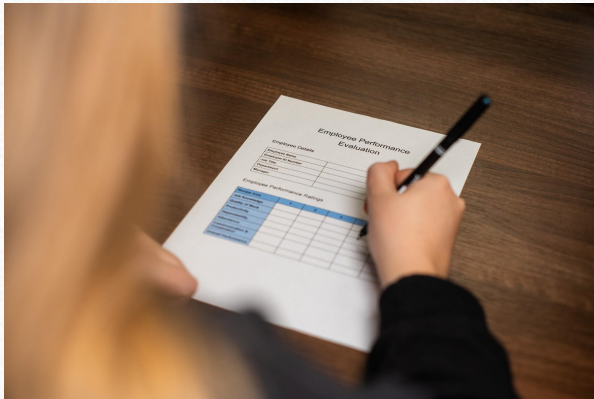
- Treatment settings usually include clinic, hospital and home.
- Treatment usually is one-on-one in a clinical setting.
- Clients/patients span all age ranges.
- Payment is on fee-for-service basis, covered by private insurance, governmental assistance or family.
- Therapy documentation is dictated guidelines of the setting and insurance requirements. Emphasis is placed on medical terminology.

Dismissal (discontinuation of services)

Are there specific criteria for dismissal?

- No. Section (2)(c) of the SP&P states that a student must be dismissed from ESE if, upon reevaluation, the student is no longer determined to be a student with a disability in need of ESE and related services, or the parent of the student revokes consent for services. There are no dismissal criteria specific to individual disability categories included in the state rules and regulations. **The IEP team for an individual student must determine, based on reevaluation data reviewed, whether the student continues to be a student with a language impairment in need of ESE and related services.** For example, if the student no longer has a language impairment, or continues to have a language impairment but no longer needs ESE and related services, then the student must be dismissed. Dismissal is a determination to be made on a case-by-case basis by the student's IEP team. This would be considered a change of a free appropriate public education (FAPE) and requires prior written notice.

Is a formal evaluation required to dismiss a student for speech or language impaired?



Dismissal

- Dismissals can occur after a formal re-evaluation
- Students can also be dismissed based on progress toward IEP goals
- Other data used for dismissal includes teacher and parent input, classroom grades, FST (Florida Standards Test) test scores, district progress monitoring tools

Monitoring Progress

Progress monitoring is essential for ensuring that the student is responding to the therapy and meeting their IEP goals.

Here are common ways SLPs track student progress:

Baseline Data Collection

- **Initial Assessment:** Before beginning intervention, the SLP collects baseline data to understand the student's current abilities. This data serves as a starting point to compare future progress.

Ongoing Data Collection

- **Session Notes and Logs:** After each therapy session, the SLP records the student's performance, noting whether they met specific targets or how well they responded to interventions.
- **Frequency and Accuracy:** SLPs track how often the student uses a particular skill and how accurately they perform it, such as correctly articulating a sound in a certain number of attempts or using appropriate grammar in conversation.
- **Progress Monitoring Tools:** SLPs may use structured activities, checklists, or rubrics to measure progress on specific skills (e.g., phonological awareness, vocabulary use).

Goal-Specific Tracking

- **Data Sheets for IEP Goals:** Each IEP goal is broken down into measurable objectives. The SLP uses data sheets to record the student's performance on these objectives during sessions, tracking progress over time.
- **Percentage of Accuracy:** For goals that involve skill mastery (e.g., sound production, vocabulary use), the SLP often tracks how accurately the student performs the task (e.g., 80% accuracy over three consecutive sessions).

Parent and Teacher Input

- **Collaboration:** SLPs often gather feedback from teachers and parents regarding the student's communication skills in different environments (e.g., classroom participation, social interactions).
- **Communication Logs:** These can be shared between home, classroom, and therapy sessions to ensure consistency in tracking progress.

Formal and Informal Assessments

- **Progress Reports:** Regular progress reports are created, usually quarterly, to reflect the student's improvement toward IEP goals. These reports include data on the percentage of progress made and whether any changes to goals or interventions are needed.
- **Reevaluations:** At least every three years (or sooner if needed), students are reevaluated to assess overall progress and determine continued eligibility for services.
- **Classroom grades and classroom progress monitoring assessments (including FAST scores)**

Progress Toward IEP Goals

- **IEP Meetings:** Progress is formally reviewed at regular IEP meetings, where the SLP reports on how well the student is meeting the goals outlined in the IEP. Adjustments to goals or interventions are made if necessary.

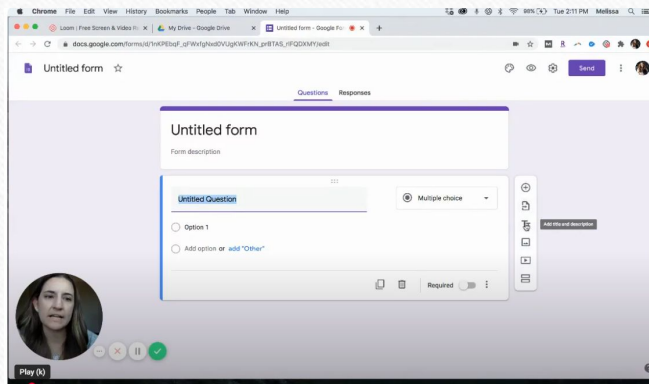
Therapy data collection

- **Digital options:**
- Most modern SLPs utilize digital platforms like SLP Toolkit, SLP Now, and Swivel Scheduler to store data electronically, allowing for easy access, data analysis, and progress visualization through graphs and charts.

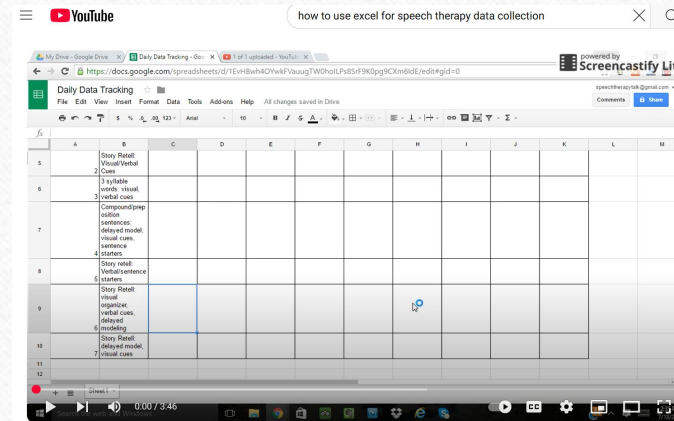


Spreadsheet usage:

Both Google Sheets, Google Forms and Excel are widely used to create customized data collection sheets, enabling therapists to track specific goals and easily generate reports.



Google Forms

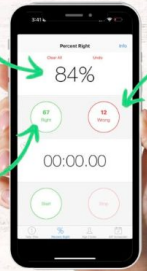


Google Sheets

App-based solutions:

Several dedicated apps like TxTools and Super Duper Data Tracker are available to streamline data collection on mobile devices, providing features like quick tallying and progress tracking.

THE FREE APP EVERY SLP ASKS US
FOR DATA COLLECTION
IN SPEECH THERAPY



gives overall percentage correct in real time

calculates correct practice trials... a great way to track a high practice session (e.g., 100 trials)

if you add the "green" and "red" scores, you can see the total number of attempts the child made (e.g., 67/79)

TxTools



Super Duper[®] Data Tracker Pro

by Jonathan Wise

Paper-based methods:

Traditional methods like data binders with dedicated data sheets can still be used for recording observations and progress, though may require manual data entry for analysis.

Name: STUDENT

Goal: By the end of the IEP, following a small-group discussion on a grade level text, STUDENT will produce complete sentences using age-appropriate syntax and grammar (e.g. third person singular, dependent/independent clauses) to retell the main events in the story in with 80% accuracy for 5 out of 5 opportunities.

1. STUDENT will be able to answer WH- questions during and following oral presentation of a story.
2. STUDENT will be able to identify the story's characters, setting, problem and solution.
3. STUDENT will be able to use story related vocabulary in complete sentences.
4. STUDENT will be able to sequence the events of a familiar story.
5. STUDENT will be able to complete a graphic organizer about a story.

Date	Goal	Results

Name: _____ Date: _____

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
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Name: _____ Date: _____

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Name: _____ Date: _____

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Name: _____ Date: _____

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Name: _____ Date: _____



Areas to Improve Services to Eligible Students

Caseload Management

- ~29,000 total students in Alachua County
- 2,666 students in Alachua County identified with speech and/or language impairments or related services

Caseload Management

- Some barriers affecting manageable caseloads
 - Over identifying students who don't meet eligibility
 - Continuing to serve students who meet dismissal criteria
 - Shortage of SLPs
 - Medical vs Educational model
 - Large caseloads
 - "Other duties as assigned"
 - Scheduling difficulties resulting in larger group size

SLP shortage

- Hire bachelor level therapists on temporary teaching certificate
- Work with contract companies to fill vacancies
- Use district SLPs with lower caseloads to cover students at other schools
- Hired contracted SLPAs with contracted SLP supervisors

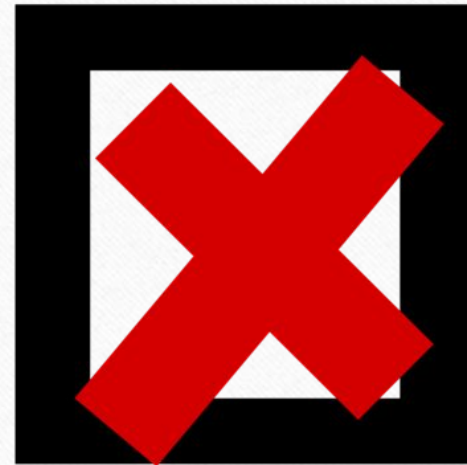
What is your district doing to compensate for the SLP shortage in your district?



SLP Employee Evaluations

- SLPs are often evaluated by the school administrator
- Administrator observes therapy sessions and uses rubric to rate the SLP
- Administrators are often not familiar with how SLPs differ from teachers
- This is the perfect opportunity to educate school administrators about what we do and how we do it.

Who evaluates SLPs in your district?



Questions? Comments?

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References

- Individuals with Disabilities Education Act, 20 U.S.C. § 1400 (2004).
- FLDOE Technical Assistance Paper, DPS: 2010-179 Date: December 1, 2010, Exceptional Student Education Eligibility for Students with Language Impairments