



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

February 8, 2018

The Honorable Johnny Collett
Assistant Secretary
Office of Special Education and Rehabilitative Services
U.S. Department of Education
400 Maryland Ave., SW
Washington, DC 20202-7100

Dear Assistant Secretary Collett:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the U.S. Department of Education's (ED's) *Questions and Answers (Q&A) on U. S. Supreme Court Case Decision Endrew F. v. Douglas County School District Re-1*.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 191,500 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Audiologists, specialize in preventing and assessing hearing and balance disorders as well as providing audiologic treatment, including hearing aids. Speech-language pathologists (SLPs) identify, assess, and treat speech and language problems, including swallowing disorders.

Audiologists and SLPs who work in schools are integral members of the education team. They provide important and valuable services that help students access the general curriculum, and are instrumental in designing learning systems for students. ASHA's members support students, families, and staff from early education through graduation in the context of both general and special education; therefore, ED's Q&A resource impacts ASHA's members and those they serve.

ASHA appreciates that ED issued a Q&A resource to provide clarification on the scope of free appropriate public education (FAPE) requirements under the Individuals with Disabilities Education Act (IDEA). In particular, ASHA supports and commends ED for including the following tenets in the Q&A:

- State education agencies (SEAs) should review their policies, procedures, and practices to provide guidance and support to local education agencies (LEAs) and individualized education program (IEP) teams to ensure that IEP goals are ambitious and that children with disabilities have access to FAPE so that they have the opportunity to meet challenging state academic objectives.
- There is no one-size-fits-all approach to educating children with disabilities, and IEP decisions must be made on an individual basis, providing "specially designed" instruction to meet each child's unique needs. A continuum of alternative placements must be

available to meet the needs of children with disabilities for special education and related services.

- The role of all IEP team members should be strengthened to ensure that all team members fully participate in the IEP team decision-making process, including parents and school personnel, and that determinations about services should be made by the IEP team including audiologists, SLPs, and other specialized instructional support personnel (SISP).
- All providers should be involved in the decision-making process regarding behavioral needs. This is consistent with previous guidance.¹
- The IEP team consists of qualified providers who collaborate on the development and implementation of the IEP, which is designed to ensure that every child has the chance to meet challenging objectives.
- The IEP team revisits and revises the IEP as needed to ensure progress.
- IEP team member collaboration is important and is at the heart of interprofessional education (IPE) and interprofessional practice (IPP) that ASHA promotes.²
- The document encourages the collaborative efforts of IEP teams and promotes the use of challenging academic content and achievement standards to hold all children with disabilities to high standards.

For your consideration, we also submit the following specific recommendation/comments on questions 4, 10, and 12 in the Q&A.

Question 4. How is FAPE defined in IDEA?

Recommendation

In question 4, remove the phrase “**including IDEA Part B requirements**” in 4(2) because it gives the impression that state standards come before federal IDEA requirements, which is not the case. Amend the question as indicated below:

Clarification of IDEA’s FAPE Requirement

4. How is FAPE defined in IDEA?

Under IDEA, FAPE is a statutory term.³ It is defined to include special education and related services that

- (1) are provided at public expense, under public supervision and direction, and without charge;
- (2) meet the standards of the State educational agency (SEA), ~~including IDEA Part B requirements~~;
- (3) include an appropriate preschool, elementary school, or secondary school education in the State involved; and
- (4) are provided in conformity with an IEP that meets the requirements of 34 CFR §§300.320 through 300.324.

Further, each child with a disability **must meet IDEA Part B requirements and** is entitled to receive FAPE in the least restrictive environment (LRE).⁴

Rationale

States must adhere to IDEA, a federal law, and develop standards and protocols to implement the law as written. The federal IDEA requirements must be adhered to first, followed by the state requirements, and as written it appears that state requirements take precedent. This recommended change keeps the section on FAPE consistent with what is in the statute and emphasizes the importance of meeting IDEA Part B requirements.

Question 10. What does “reasonably calculated” mean?

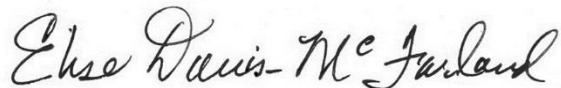
Question 12. How can an IEP Team ensure that every child has the chance to meet challenging objectives?

Comments

The responses to question 10. What does “reasonably calculated” mean? and question 12. How can an IEP Team ensure that every child has the chance to meet challenging objectives?, indicate that a child’s previous rate of progress or academic growth should be considered when determining whether an IEP is “reasonably calculated”, as well as whether the IEP includes goals that give a child a “chance to meet challenging objectives.” Given the importance of rate of growth in ensuring FAPE relative to the Supreme Court’s final decision in *Endrew F.*, it is important that state-level guidance about methods for monitoring academic growth or progress is disseminated to all instructional staff, including specialized instructional support personnel such as educational audiologists and speech-language pathologists.

Thank you for the opportunity to provide comments and recommendations on ED’s *Q&A on U. S. Supreme Court Case Decision Endrew F. v. Douglas County School District Re-1*. If you or your staff have questions, please contact Catherine D. Clarke, ASHA’s director of education policy, at cclarke@asha.org.

Sincerely,



Elise Davis-McFarland, PhD, CCC-SLP
2018 ASHA President

¹ American Speech-Language-Hearing Association. (July 15, 2015). ED Issues Guidance to Ensure Access to Speech-Language Pathology Services for Children with Autism. Retrieved from <http://www.asha.org/News/2015/ED-Issues-Guidance-to-Ensure-Access-to-Speech-Language-Pathology-Services-for-Children-with-Autism/>.

² American Speech-Language-Hearing Association. (n.d.). Interprofessional Education/Interprofessional Practice (IPE/IPP). Retrieved from <http://www.asha.org/content.aspx?id=8589942441>.

³ 20 U.S.C. 1401(9) and 34 CFR §300.17.

⁴ 20 U.S.C. 1412(a)(5) and 34 CFR §§300.114-300.117