

The impact of IDEA 04 and NCLB on speech and language related services: How do we meet the challenges

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Abstract

As most special educators endure the periodic legal changes in education and special education, related service providers face the same challenges. These challenges include Inclusion, IDEIA 04 regulations, NCLB and curricular related services. This paper presents these challenges and discusses a variety of solutions providing the most appropriate and feasible delivery methods for speech and language services for children with special needs. A brief overview of the evolution of speech and language services is presented in order to set the stage for discussing the impact of recent legal changes. IDEIA 04 and NCLB are discussed with respect to utilization of the academic and social curriculum. Various service delivery models are examined with specific implementation methods to meet curricular standards. Sample goals are presented with suggestions for incorporating related services in special education IEPs without duplication of services. The need for a transdisciplinary model for IEP implementation emphasized.

Introduction

The No Child Left Behind Act of 2001 (NCLB) and the Individuals with Disabilities Education Improvement Act of 2004 resulted in many challenges for all special educators including related service providers. Both of these laws are predicated on improving the educational performance of regular and special education students. Although they have fundamentally different purposes the laws are comprehensive and emphasize accountability, measurable outcomes and meeting specific standards. As special educators read these laws, a great deal of plausibility is evident. However, implementation of them becomes a great challenge. The laws are specifically written for essentially two audiences, regular educators (NCLB) and special educators (IDEA). Unfortunately, for the related service provider, the specific details of implementation are unclear since neither law specifically outlines the role of the related service provider. This paper addresses the evolution of the related service speech language pathology in the United States and how the Speech Language Pathologist (SLP) can improve service delivery to address the challenges as a result of NCLB and IDEA.

Evolution of the SLP

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The field of speech language pathology began at the turn of the century when a school superintendent identified a need for speech training in the schools in 1909. However at that time instructors were deemed speech correctionists and assisted only those students who demonstrated stammering. Over time, additional speech disorders such as articulation and voice were identified and treated. Children were typically provided therapy by removing children from their classroom. By 1923 legislation in the state of Wisconsin was established for speech correctionists in the public school and by 1940, eight additional states adopted the legislation. It was not until the mid 1960s when 45 states passed legislation for speech improvement programs in schools and language disorders became part of service delivery (Blosser and Neidecker, 2002). However, these programs were merely permitted. It wasn't until 1975 when the Public Law 94-142 Education Act mandated speech and language services in the schools. The law afforded children with speech and language impairments a Free and Appropriate Public Education (FAPE) in the Least Restrictive Environment (LRE). Evaluations and Individualized Education Plans (IEP) were also mandated with specific administrative regulations to monitor services. The same services were mandated for infants and toddlers in 1986 when PL 99-457 was passed. In 1990, PL 94-142 was amended and called IDEA. This law included two additional exceptionalities, autism and traumatic brain injury. The former exceptionality has significantly changed the scope of practice and caseload for the SLP. As a result, caseload size continued to increase without specific limitation written in law.

Throughout this time period the scope of practice for the SLP continued to increase, as the method of service delivery remained the same. Children continued to be removed from the classroom for speech and language services, often referred to as pull-out services. It wasn't until

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IDEA was reauthorized in 1997, introducing inclusion and consultation service delivery that major changes in related services would take place. This reauthorization gave each state the responsibility to establish educational requirements. Therefore, each state could develop their own methods of special education service delivery as long as FAPE and LRE are not violated. The concept of inclusion was thrust upon the educational community without a full understanding of its impact. Parents of special education students were thrilled however; most regular educators were not prepared for the change. Over time, methods of collaboration were effective through co-teaching and team teaching in the regular education classroom. However, most SLPs were not included in this form of teaching, primarily because regulations were not specific to related service providers. Therefore, the methods of service delivery still remained relatively unchanged as caseload numbers soared.

In referring to the Blosser and Kratcoski SLP (2002) evolution chart (see fig. 1), the role of the SLP is a reflection of the emerging issues in each decade. The chart reflects the transition from a “medical model” to an “educational model”. The SLP in the US began with a medical model in which the student was removed from the educational setting and provided therapy for speech related issues such as stuttering, articulation and voice disorders. This specialist model reflected the issue that speech was important for communicating, but did not link these skills to learning. In the 1970s the specialist model continued, but with the emphasis on language and its link to learning. The concepts of syntax, semantics and phonology were viewed as necessary components for communicating. In the 1980s these three concepts were interpreted as language content, its form and its use bringing pragmatics to the forefront. However, the expert model continued as the SLPs scope of practice continued to expand and caseloads continued to soar. In

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the 1990s SLPs were responsible for not only speech and language learning, but also their impact on living and working. The introduction of inclusion, collaboration and consultation resulted in an enormous paradigm shift, one that many SLPs were not prepared for. This required the SLP to relinquish the expert model and allow others to provide services through consultation. This shift of location of service and provider in special education continues through the 2000s in which the SLPs role is the facilitator of the service delivery to various contexts. However, the origins of the medical model continue to plague the SLP today. Many SLPs educated in the 1970s, 1980s and 1990s have difficulty making the shift. This is not surprising when the clinical model continues to be used at the university level with little emphasis on inclusion, collaboration and consultation.

As we move even further toward accountability, standards and measurable outcomes the SLP is presented with major hurdles. Caseloads are large making traditional pull-out services nearly impossible. The SLP is now faced with necessary inclusionary methods to meet the changes in law and policies. However, these changes can be very exciting for the SLP since the overall impact of language on education has been recognized and communication skills of speaking and listening are part of educational curriculum. The SLP should be part of curriculum development rather than one to adapt the curriculum to meet the needs of special education students. This leads us to Blosser's 2000's model in which SLP services shift to various providers within the framework of multiple activities in various contexts. Thus focusing on standards, quality of outcomes and evidence based practice. The SLP becomes a facilitator rather than the only individual responsible for service delivery (Blosser, 2002).

NCLB Overview

Reauthorization of the Elementary and Secondary Education Act (ESEA) known as the No Child Left Behind Act of 2001 (NCLB) resulted in significant changes for special education and related service. Prior to that time, the ESEA did not address the needs of special education students. The act now includes requirements for students with disabilities creating a stronger link between general education and special education. The issues effecting the SLP from the ten titles of NCLB include the highly qualified teachers requirement, use of accommodations for assessments, sanctions for school not making Adequate Yearly Progress (AYP) and provisions of supplemental services and assessments of English Language Learners (ELL) (ASHA, NCLB Fact Sheet, n.d.).

Highly qualified teacher provision attempts to assure the hire and retention of effective teachers who are highly qualified in their field of instruction and demonstrate this competency. For the SLP this would seem to mean a master's degree in speech language pathology, which is the entry level required by the American Speech Language Hearing Association (ASHA). However, NCLB leaves this provision up to individual state licensure and certification laws. For teachers this means a bachelor's degree, state certification and state competency assessments in subject matter. This would apply to the SLP in states, such as Pennsylvania, requiring teacher certification. Thus allowing Speech therapists practice in the schools without the minimum requirement of a master's degree. However, in states with licensure laws, such as New Jersey and Delaware, a master's degree is the mandatory degree level for a state license, thus requiring the appropriate entry level qualifications. States requiring certification only are not truly hiring "highly qualified" speech language pathologist when they have earned only a bachelor's degree.

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Accountability for student progress is not only mandatory it is an ethical responsibility. IDEA 1997 required the participation of students with disabilities in state assessments with accommodations or alternative assessments. NCLB has placed a limit on the number of students who qualify for alternative assessments. Therefore, many language impaired students receiving speech and language services are now required to take the state-wide assessments. Knowledge of the state assessments becomes essential for the school based SLP. Without this knowledge, appropriate accommodations cannot be made. The SLP must review the school district's performance in academic areas and become part of the district wide program improvement plans (Moore-Brown, 2004). Additionally, the SLP must be familiar with the state and district curriculum and utilize the curriculum for intervention.

Accountability is also measured by each state established AYP, to determine the school district's level of achievement within each subgroup. These subgroups represent racial/ethnic minorities, economically disadvantaged students, students with disabilities, students with Limited English Proficiency (LEP) and graduation rates. Judgment is based on how well the school met their annual objectives. Goals for annual progress are determined using district baseline data. Measurable annual objectives are then determined by the state. Schools failing to make AYP undergo specific sanctions and corrective action to guide toward meeting state standards such as funding for school improvement, parental rights to send their child to another school, or supplemental educational services.

IDEA 2004 Overview

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Prior to the enactment of P.L. 94-142 Education Act for All Handicapped Children in 1975, children with special needs were excluded from their peers and were not provided an appropriate education, nor were there federal provision to do so. Through the years of addendums and reauthorizations, these children have been afforded FAPE and LRE with specific regulations and provisions. As accountability standards surfaced as priority through NCLB, revisions to IDEA were warranted in order to align the two laws. Reauthorization of IDEA 04 required accountability in both academic and functional achievement based on standardized assessments and evidence-based practices. This alignment requires special educators to develop curriculum related goals and objectives addressing the student's communication disorder and its impact on the student's access to general education. These annual objectives must be measurable as defined by the state's Yearly Adequate Progress (AYP).

Conflicts between NCLB and IDEA

Although both laws appear to have similar intents there are great differences which seem to conflict. When NCLB was passed in 2001, conflicts with IDEA 1997 became evident (Moore-Brown, 2005). The reauthorization of IDEA in 2004 attempted to realign the two laws, however, many conflicts still exist. This may be due to the fundamental differences between the two laws. Philosophically, IDEA was designed to 1) assess individual progress, 2) remediate developmental appropriateness, and 3) document measurable progress. On the other hand, NCLB was designed to implement state standards, 2) assess school district progress, and 3) remediate to reach grade level proficiency. Although intended to provide group achievement regardless of English proficiency, socioeconomic status or disability It does not account for documentation of individual measurable progress (Moore-Brown, 2005).

IDEA addresses the need for individualized assessment and the establishment of goals based on the assessment outcomes. Therefore, each child's progress will be different based on individual need. NCLB insists on the inclusion of the standardized assessment scores of students with disabilities with the expectation of Adequate Yearly Progress (AYP). Fortunately, some states have provisions to assessment accommodations as allowed.

Students are identified for special education based need because they are not performing on grade level. This conflicts with the expectation for AYP. Students are identified based on the level of academic deficiency as a result of the disability (Moore-Brown, 2005). The child in special education is then offered FAPE providing the required educational benefits. However, IDEA does not require students to meet an expected performance level as mandated by NCLB. Finally, when a school does not meet AYP two consecutive year, the parent have a school choice option. However, FAPE must be maintained at the chosen school. This is not clearly defined in NCLB.

Impact of NCLB on the SLP

Since students with language impairments must be held to state and district standards it only stands to reason that the SLP should develop goals and objectives to ensure students meet these standards. The foundation of these assessments is on curriculum information, which according to IDEA 1997 should be the cornerstone of intervention. This does not suggest that the SLP should teach the assessment to the student, but rather provide intervention that will allow the students to learn the curriculum and understand test formats. Goals can be written to address test taking

experiences as well as specific skills to meet grade level standards. Achieving academic standards often requires the SLP to provide intervention addressing multiple prerequisite language skills to access the curriculum in the areas of reading, writing, listening and speaking.

If we glance back to the evolution of the SLP, many challenges present themselves. First, another paradigm shift must be made and for many SLPs. For those who are not currently utilizing the curriculum for intervention, addressing state standard outcomes becomes an enormous challenge. Therefore, the first step must be utilization of curricular materials and collaborative efforts with regular educators. Currently, many SLPs address the prerequisite skills for curricular success, but do not make the final link to the curriculum for generalization of skill. Participation in curriculum development and adaptation would also familiarize the SLP with the curriculum. Some school districts use curriculum mapping that designates what subjects are taught at each grade level at specific times throughout the school year. This allows the SLP to address timely curricular needs (Lozo, 2004). Next, the SLP should become familiar with the state content and achievement standards and be sure they align with the school district standards (Rigney, 2004). The SLP must move away from the “medical model” to an educational model by sharing information in a collaborative manner with regular educators. The SLP possesses knowledge in instructional strategies in reading, reasoning, problem solving, and communicating which puts them in a critical leadership role in designing and delivering professional development activities to improve instruction (Rigney, 2004).

Additional Influences

The American Speech Language Hearing Association is the governing body for over 123,000 speech pathologists and audiologist. More than half of these professional work in school-based settings. This professional, scientific and credentialing association promotes the highest quality services and advocates for those with communication disorders (www.asha.org/aboutus). As part of ASHA's regulatory and supportive efforts, the document *Roles and Responsibilities of the School-based SLP* was developed to specifically outline the roles of the SLP servicing school aged children. The document clearly defines each core role listed in table 1.

Table 1: Roles and responsibilities of the school-based SLP

SLPs' roles and responsibilities as outlined by ASHA	
• Prevention	• Transition services
• Identification	• Supervision
• Diagnosis	• counseling
• Assessment	• Documentation
• Data collection	• Parent/staff training
• Results interpretation	• Planning teams
• IEP/IFSP development	• Research
• Case management	• Advocacy
• Intervention	• Policy-making
• Consultation	• Accountability

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Based on ASHA's 2003 Omnibus Survey, the national average caseload size for a school-based SLP is 50 with approximately 50% of the students identified with moderate impairments. Although ASHA recommends a caseload size of no more than 45, caseload sizes are mandated by each state rather than national regulations. Only 28 states (56%) have maximum caseload guidelines while 22 states (44%) have maximums determined by the state with numbers ranging

from 40 to 80 students on a caseload (ASHA, 2002c). Many states do not even have written caseload criteria policy with only 85% of school districts with established entry and exit criteria. Without these regulations the school-based SLP is expected to, in addition to the roles and responsibilities, determine eligibility and service delivery without the guidance of federal and state regulations. As a result, caseload sizes continue to soar and service delivery remains the same. As an SLP, we may ask the following questions:

- Am I making maximum use of my discipline specific knowledge and skill?
- Am I promoting school success?
- Am I providing appropriate support for regular educators?
- Is my role defined on the basis of what SLPs should do or what others are not willing to do?
- Am I providing services in the LRE?
- Am I meeting professional standards, state standards and national standards?

Workload Versus Caseload

In order to address these critical issues, a workload position statement, technical report and guidelines were developed by an ASHA ad hoc committee. This workload analysis approach establishes speech and language caseload standard from the perspective of workload activities required for each student rather than a number to define the caseload. Thus assuring the students receive the services they need to support their educational programs and maintain compliance with IDEA and NCLB. The underlying principles for the workload approach are (ASHA, 2002a, 1):

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- “Each student added to the caseload increases the time needed not only for direct and indirect services and evaluations, but also for mandated paperwork, multidisciplinary team conferences, parent and teacher contacts, and related responsibilities”.
- “Caseloads must be of a size to allow SLPs to provide appropriate and effective intervention conduct evaluations, collaborate with teachers and parents, implement best practices in school speech-language pathology, carry out related activities, and complete necessary paperwork and compliance tasks within working hours”.
- “Education agencies must implement a workload analysis approach to setting caseload standards that allow SLPs to engage in the broad range of professional activities necessary to meet individual student needs”.

Additional influences such as professional scope of practice, certification requirements, state and local budgets, school policies and expectations and individual student factors were also taken into account. Based on these principles and factors, workload clusters were developed to group and define the specific tasks required by the SLP for each student. The work activity clusters are as follows (ASHA, 2002b, 4):

- I. Direct services to students including instruction, intervention and evaluation
- II. Indirect services to students to support the implementation of students’ education programs
- III. Indirect activities that support students in the least restrictive environment and the general education curriculum
- IV. Activities that support compliance with federal, state, and local mandates and activities that result from membership in a community of educators.

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(note: for a detailed explanation of each with examples, please see the full workload document)

Within each cluster, the SLP then lists the tasks required to “meet each student’s individual needs, the time it takes for each student-related service and activity, and the time available for these activities” (ASHA, 2002b, 8). These activities are then scheduled into the SLP’s work week/month. Once all time slots have been filled, the caseload maximum has been reached.

Establishing workload standards allows the SLP to “engage in the broad range of professional activities necessary to implement appropriate and effective service options, and tailor intervention to meet individual student needs. Without consideration of the entire workload, school-based SLPs may be placed in the position of only offering services that are administratively convenient, forming treatment groups that are too large to ensure meaningful student progress, or filling all available time slots with face-to-face intervention services. ASHA members report that these common practices leave little or no time for the use of an array of service delivery options and the myriad of other activities necessary to support students’ educational programs” (ASHA, 2002b, 9).

Service Delivery

In spite of the outside influences of NCLB, IDEA, professional organizations, caseload, and workload the bottom line remains the same; the student’s academic and functional success. A variety of service delivery options may be utilized as long as state standards and curriculum are at the core of intervention. Inclusion and collaboration are not new for the SLP, but the workload approach would more easily allow for these types of service delivery and meet the IDEA standards. The use of curricular materials would meet both IDEA and NCLB standards. In past practices, the SLP determined intervention based on skill assessments rather than curricular

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and academic success. The SLP now can still address the prerequisite skill sets for curriculum access, but they can be prioritized and placed on a continuum of skill development leading to academic achievement. The following strategies may be used by the SLP to meet the needs of IDEA and NCLB challenges.

- Utilize curricular materials for instruction. Most often, commercially marketed materials do not address curricular concepts. SLPs possess the knowledge and skills to develop lessons based on the curriculum directly addressing language development.
- Obtain grade level textbooks and curriculum maps
- Select curriculum vocabulary across subjects for instruction.
- Utilize graphic organizers for classroom content instruction. Encourage classroom teachers to use graphic organizers consistently across the curriculum.
- Address higher-level cognitive skills such as reasoning, problem solving, comparing/contrasting, cause/effect relationships. These are skills necessary for success in all subject areas
- Teach note taking and summarizing strategies using curricular materials. Many students struggle with organization and determining salient information.
- Relate services to literacy development to assist students master state and local accountability assessments
- Utilize the reading and writing standards for instruction as they are the framework for the curriculum. “The standards provide targets for instruction and student learning essential for success in all academic areas not just language arts classrooms. The language arts are unique because they are processes that students use to learn and make sense of their world. Students

do not read “reading”; they read about history, science, mathematics and other content areas as well as about topics for their interest and entertainment. Similarly, students do not write “writing”; they use written words to express their knowledge and ideas and to inform or entertain others” (PA Code, chapter 4, Appendix A, p.1).

What Can Administrators Do?

Administrators play an important role in change for the SLP. By educating the SLP with respect to the standards and curriculum, the SLP may address them in intervention. The SLP should be then included in the district-wide improvement plans for NCLB to reflect student progress. Administrators must support the SLP’s service delivery needs by adopting a workload rather than a caseload model with clearly established eligibility criteria. Finally, administrators should employ only highly qualified Speech Language Pathologists to provide appropriate speech and language services.

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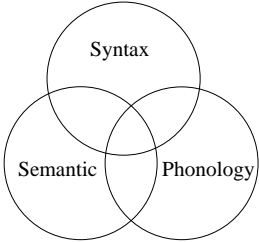
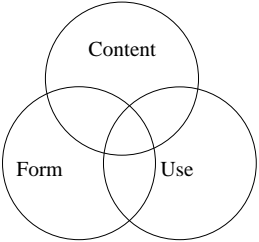
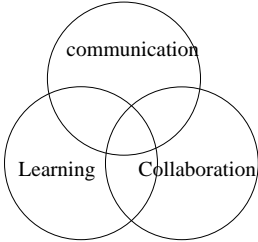
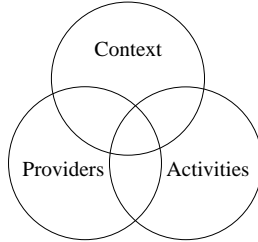
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Figure 1: Evolution of SLP Service Delivery Model

	1970s	1980s	1990s	2000s
Focus	Mechanistic view of language	Pragmatics	Functional, interactive communication	Outcomes Quality Efficacy Standards, NCLB
SLP Role	Specialist model	Expert model	Collaborative-consultative model	Facilitator of the service delivery
Emerging Issues	Language use is important	Language and learning are linked	Inclusion, transition, efficacy, accountability, outcomes	Standards, Alternative schools, technology, literacy, funding, Multiculturalism, testing, curriculum
				

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