Cornwall Central School District Initial Eligibility Criteria for Speech/Language Impairment Classification

Part 200 of the NYSED Regulations states that a Speech or language impairment means a communication disorder, such as stuttering, impaired articulation, a language impairment or a voice impairment, that adversely affects a student's educational performance.

A speech and language therapist has unique skills and is qualified to provide services to improve receptive/expressive language skills, articulation/speech intelligibility, fluency, and pragmatics/social language skills to establish a functional and effective communication system. It is possible that a child's language and communication needs may be met in the regular education classroom or through the regular education curriculum. Not every child who has a speech and language impairment or who has a communication need requires speech and language services. In considering the least restrictive environment (LRE) and the educational needs of the child, the Individualized Education Program (IEP) team must begin by presuming the child will be educated with his non-disabled peers in the regular education curriculum. The IEP team should also consider whether the child's language and communication providers.

To be educationally relevant, a related service must be necessary to support the student's IEP goals. The therapist should be able to identify the areas in the IEP where speech and language services are needed for the child to benefit from special education. It is important to remember that decisions regarding services must be made on a case by-case basis through the IEP process.

Eligibility by Disorder -

- 1. **Articulation** An articulation disorder is the atypical production of speech sounds characterized by substitutions, omissions, additions or distortions that may interfere with intelligibility.
 - Errors are having an impact on education (social and/or academic) AND the student scores greater than 1.5 standard deviations below the norm on standardized articulation or phonology tests

Additional considerations:

- Speech errors are non-developmental
- Intelligibility is not adequate for communication
- The clinical judgment of the speech teacher will be based on formal observations and test data, student's age, error patterns, and response to previous intervention/therapy
- 2. Language A language disorder is impaired comprehension and/or use of spoken, written and/or other symbol systems. The disorder may involve (1) the form of language (phonology, morphology, syntax), (2) the content of language (semantics), and/or (3) the function of language in communication (pragmatics) in any combination.

 Deficits are having an impact on education (social and/or academic) AND the student scores greater than 1.5 standard deviations below the norm on standardized language tests composite scores (i.e. indexes, quotients, etc.)

Additional considerations:

- A single standard score that is low indicates a relative weakness but it does not determine the overall language performance, rather composites and indexes are indicative of diagnosing a language disability
- The clinical judgment of the speech teacher will be based on formal observations and test data, student's age, cognitive ability and response to previous intervention/therapy
- Fluency A fluency disorder is an interruption in the flow of speaking characterized by atypical rate, rhythm, and repetitions in sounds, syllables, words, and phrases. This may be accompanied by excessive tension, struggle behavior, and secondary mannerisms.
 - The fluency disorder significantly affects the student's educational performance (social and/or academic) AND the student scores within a Moderate to severe range (rating score 17-23 on the Test of Childhood Stuttering)

Additional considerations:

- The student has speaking behaviors characteristic of a moderate to severe fluency disorder
- The clinical judgment of the speech teacher will be based on formal observations and test data, student's age, error patterns, and response to previous intervention/therapy
- **4. Voice** A voice disorder is characterized by the abnormal production and/or absences of vocal quality, pitch, loudness, resonance, and/or duration, which is inappropriate for an individual's age and/or sex.
 - The vocal impairment significantly affects the student's educational performance (social and/or academic) AND there is medical documentation and subsequent physician's prescription of a vocal impairment without short-term physical factors Additional Considerations:
 - The clinical judgment of the speech teacher will be based on formal observations and test data, student's age, error patterns, and response to previous intervention/therapy

<u>**Reasons for Ineligibility</u>** - A student may not be eligible for classification as a student with a speech/language impairment if:</u>

- Educational performance (academic and/or social) is not significantly impacted by the student's speech/language skills
- Speech or language performance is consistent with developmental levels
- Speech or language performance is a result of a dialectical difference or the student is learning English as a second language, unless there is documentation of a speech/language disability in the students native language as well

- They are a child with an auditory processing diagnosis, unless there is documentation of a coexisting speech/language impairment.
- They are a child with selective mutism or anxiety, unless there is documentation of a coexisting speech/language impairment.

<u>Discharge</u> - Some factors that an IEP team may consider as indicators that a child no longer needs speech and language services include:

- The student scores within 1.5 standard deviations of the average range on standardized testing.
- The identified impairment no longer has significant impact on the student's education performance (academic or social)
- The child has a functional and effective communication system
- The child has speech sound errors that do not interfere with the intelligibility of the child's speech
- The child has met all IEP objectives/goals in the area of speech and language
- Extenuating circumstances of a medical, dental, social, or other nature that would interfere with the child's ability to benefit from or make progress in speech and language skills

Options For Students Dismissed From Speech and Language - When an IEP team determines that a student does not require speech and language services, teachers and parents may become concerned that the student will no longer be able to receive access to supports for communication needs. Furthermore,

- a. If it is determined that the student continues to have a speech and language impairment, but not a need for special education, the team should specifically document the continuing communication needs of the child
- b. Identification of possible classroom modifications and accommodations the student needs in order to meaningfully access the general education curriculum should be discussed/noted
- c. The IEP should also identify any communication needs that can be met through other special education programs the child continues to receive

<u>Frequency and Type of Services</u> - Determination of individual or group sessions as well as frequency of services are based on clinical judgment with consideration of the student's attending skills, behavior, severity of test scores, complexity of communication deficits, and/or factors relating specifically to their disability.

*This document was created with reference to documents from The American Speech-Language-Hearing Association and Part 200 NYSED regulations.