



ASHA
American
Speech-Language-Hearing
Association

October 6, 2020

The Honorable Mark Allan Schultz
Acting Assistant Secretary
Office of Special Education and Rehabilitative Services
U.S. Department of Education
400 Maryland Ave., SW
Washington, DC 20202

Re: Agency Information Collection Activities; Submission to the Office of Management and Budget for Review and Approval; Comment Request; Report of Dispute Resolution Under Part C of the Individuals with Disabilities Education Act [Docket No. ED-2020-SCC-0094]

Dear Assistant Secretary Schultz:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the September 10, 2020, *Federal Register* notice of the extension of information collection on Dispute Resolution Under the Individuals with Disabilities Education Act (IDEA) Part C.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 211,000 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 and cochlear implants. Speech-language pathologists (SLPs) identify, assess, and treat speech and language problems, including swallowing disorders. More than half of ASHA members work in educational settings and/or early intervention (EI) systems. The services provided by ASHA members help ensure that children with disabilities develop effective cognitive-communication skills and achieve successful learning outcomes while receiving a free appropriate public education in the least restrictive environment.

EI providers and specialized instructional support personnel, which both include audiologists and SLPs, provide critical services to improve outcomes for children with disabilities receiving IDEA Part C and/or Part B services. Pediatric and educational audiologists also provide valuable services to children who have hearing-related issues by providing them ongoing evaluation and helping them access necessary technology, accommodations and interventions, as well as the general educational curriculum.

ASHA offers the following comments and recommendations on information collection of dispute resolution under the IDEA Part C program.

(1) Is this collection necessary to the proper functions of the Department?

Yes, this data collection is necessary to the proper functions of the U.S. Department of Education (ED). IDEA requires states to report the number of written and signed complaints, mediation requests, and hearing requests as well as the status of these actions initiated during the reporting year with regards to children served under Part C of IDEA.

Due to the current national public health emergency, ED must recognize that state lead agencies and EI service providers may not have the ability to provide all services in the same manner as usual when engaging in the dispute resolution process. Timelines need to be temporarily relaxed, where appropriate.

(2) Will this information be processed and used in a timely manner?

It is important to continue collecting data on dispute resolution, even during the public health emergency, in order to ensure adherence to procedural safeguards for families receiving Part C services.

(3) Is the estimate of burden accurate?

It is unclear if the estimate is accurate because there may be changes in the response burden and timelines associated with data collection due to the public health emergency. However, ASHA recommends that the collection continue because of its importance.

Comments:

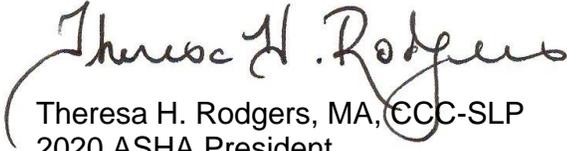
The COVID-19 pandemic has had a significant impact on state Part C policies, procedures, practices, and data systems. Some states anticipate, or are already experiencing, challenges to meeting due dates for Part C data collections. Yet, reporting requirements have not changed.

Although states may explain extenuating circumstances and follow-up actions on a case-by-case basis, with respect to data collection and dispute resolution timelines, there is no widespread assumption that the public health emergency represents an exceptional circumstance that would warrant regulatory extensions. Engaging in clear, careful documentation and additional request processes takes additional time and effort. The COVID-19 pandemic complicates these timelines.

Given the current public health emergency, when engaging in the dispute resolution process, ED must recognize that state lead agencies and EI service providers may not have the ability to provide all services in the same manner as usual. Families, service providers, and administrators need to: (1) collaborate creatively to continue to meet the needs of infants and toddlers with disabilities and their families; (2) determine and document if the reasons for the disputes result from alternate service provision concerns driven by COVID-19; and (3) recognize that avenues to resolve disputes may take more time and effort to resolve.

Thank you for your consideration of these comments on Dispute Resolution Under IDEA Part C. If you or your staff have any questions, please contact Catherine D. Clarke, ASHA's director of education policy, at cclarke@asha.org or Tim Nanof, ASHA's director of health care and education policy, at tnanof@asha.org.

Sincerely,

A handwritten signature in black ink that reads "Theresa H. Rodgers". The signature is written in a cursive style with a large, looping initial "T".

Theresa H. Rodgers, MA, CCC-SLP
2020 ASHA President