April 28, 2021

The Honorable Miguel Cardona  
Secretary  
U.S. Department of Education  
400 Maryland Ave., SW  
Washington, DC 20202

Dear Secretary Cardona:

On behalf of the American Speech-Language-Hearing Association, I write to you regarding the U.S. Department of Education’s (ED) guidance, promotion of best practices, and technical assistance to support the reopening and continuing operation of schools and early childhood education providers pursuant to Executive Order 14000.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 218,000 members and affiliates who are audiologists; speech-language pathologists (SLPs); speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

More than half of ASHA members work in educational settings. The services provided by ASHA members help ensure that all children, particularly children with disabilities, develop effective cognitive-communication skills and achieve successful learning outcomes while receiving a free appropriate public education (FAPE) in the least restrictive environment.

ASHA’s members, along with other specialized instructional support personnel (SISP), have adapted to the Coronavirus Disease 2019 (COVID-19) pandemic and continued providing related services to the students they serve through the delivery of both in-person and virtual services. ASHA members have continued to collaborate with other SISP to ensure that students receive the services to which they are legally entitled under the Individuals with Disabilities Education Act.

ASHA appreciates ED’s recognizing the role of SLPs and other SISP in both its “COVID-19 Handbook, Volume 1: Strategies for Safely Reopening Elementary and Secondary Schools” and “COVID-19 Handbook, Volume 2: Roadmap to Reopening Safely and Meeting All Students’ Needs”. ASHA offers the following comments for ED’s consideration for inclusion in future guidance on safely reopening schools, specifically regarding creating safe and healthy learning environments and addressing lost instructional time.

I. Creating Safe and Healthy Learning Environments
   b. Meeting the social, emotional, and mental health needs of students

II. Addressing Lost Instructional Time
    b. Supporting equitable access and effective use of technology

Educational audiologists and school-based SLPs play key roles in supporting effective communication for students and families. This includes supporting students and parents in creating safe and healthy learning environments by identifying the ‘social, emotional, and mental health needs of students’, as well as addressing lost instructional time by ‘supporting equitable access and effective use of technology’. Ensuring access and effective use of technology is
critical to meeting the social, emotional, and mental health needs of all students, particularly those with communication disorders. Audiologists and SLPs can help identify student and family communication needs and facilitate access to appropriate technology to help meet and convey those needs with members of the school community. The following section highlights an example of how a school-based SLP partnered with other SISP to ensure student access to the technology they needed to facilitate learning while meeting their social-emotional needs:

**New York Middle School SISP**

At our middle school program, we have a class period called 3S that stands for School Skills, Self-Management, and Social Skills. It’s run 3x/week and facilitated by [an occupational therapist], an SLP, and a school psychologist. This program was in place pre-pandemic, but during the pandemic we used the time to help the students transition to remote learning for optimal educational participation. Things tend to evolve naturally based on student need, but we were able to help the students transition to [use] Chromebooks and google suite tools, use online communication tools appropriately, help students refine their routines (getting prepared for school, homework, sleep, hygiene), COVID safety habits, and all sorts of other things!

I. Creating Safe and Healthy Learning Environments

   c. Providing all students with access to a safe and inclusive learning environment.

Despite disruptions to in-person learning, many educational audiologists and school-based SLPs have maintained their existing relationships with students and their families. This has included providing teletherapy services to students participating in virtual learning, as well as in-person services in school, home, and other settings. Schools should utilize these relationships to locate absent students and ensure appropriate recovery services.

III. Supporting Educator and Staff Stability and Well Being

   a. Stabilizing a diverse and qualified educator workforce

To support the growth and retention of a diverse and qualified education workforce, ASHA encourages ED to continue and broaden the focus of the Office of Special Education Programs’ “Attract, Prepare, Retain” initiative to further diversify the related service provider workforce. ASHA recommends that ED encourage programs that help grow a diverse health care workforce given the health care education requirements of SISP, such as educational audiologists and school-based SLPs. ASHA supports increasing diversity among audiologists, SLPs, and other allied health professions that serve as SISP, and recommends collaboration between ED and the Health Resources and Services Administration within the U.S. Department of Health and Human Services on a program to increase diversity of audiology, speech-language pathology, and other allied health professions, many of whom serve in schools. The program could be modeled after the Title VIII Nursing Workforce Diversity program, which has successfully increased the percentage of racial and ethnic minorities pursuing careers in nursing. Doing so will help ensure a well-prepared and culturally competent workforce to meet the long-term needs of students who have been disproportionately impacted by COVID-19 pandemic disruptions.
III. Supporting Educator and Staff Stability and Well Being
   b. Supporting Educator and Staff Well Being

ASHA also strongly supports the recommendation in Volume 2 that “school districts should provide necessary personal protective equipment (PPE)”. Educational audiologists and school-based SLPs provide a wide range of services to both special and general education students throughout the school community. The ability of students and clinicians to see mouth and facial expressions in close proximity is important when providing audiology and speech-language pathology services. Audiolists and SLPs work with different students throughout the school week and may travel to multiple schools to provide necessary in-person services. This exposes them to a significant number of students and other school personnel and increases their risk for exposure to COVID-19. School districts should ensure that they account for the increased risk of exposure and ensure sufficient PPE for clinical providers such as audiologists and SLPs.

In addition, since ED is continuing to solicit input for the Safer Schools and Campuses Best Practices Clearinghouse, ASHA offers the following example of collaboration between SLPs and other SISP in school settings.

**New Hampshire University Professor**

School districts were challenged with providing hybrid (in-person and online at the same time) services. New Hampshire University (NHU) SLP graduate students were struggling to get the hours they needed to graduate. NHU reached out to some of the rural school districts and asked if they’d like to partner and have the students provide remote services through teletherapy. NHU provided services through summer [extended school year] for several school districts in the area. When summer ended, Goffstown School District asked us if we’d like to continue to provide services to their remote learners. At that time, they did not have the resources to provide both in-person and remote services because they only had one SLP (which is often the case in these rural schools).

Our university supervisors supervise the services. We meet once per week with the school district to keep a connection with the SLP, teachers, and administrators. Our graduate students complete the paperwork ([Individualized Education Programs], progress reports) and attend IEP meetings for the students they are seeing. The response from the community in Goffstown has been very positive. As children start to return to in-person learning, parents are requesting that services continue to be provided by the university! The graduate students are reporting that they are acquiring a lot of knowledge and skills about working in the schools and that this experience feels more “authentic” than working for another semester in the university clinic. It allows them to have an opportunity to collaborate with so many other professionals, including regular education teachers, special education teachers, [occupational therapists], and administrators. From a supervision perspective, there is a lot more opportunity for the students to problem solve situations that usually wouldn’t arise in the university clinic setting!

ASHA will continue to support the collaborative work of audiologists and SLPs with other SISP to return to in-person instruction safely. A number of resources for educational audiologists and
school-based SLPs are available on ASHA’s Coronavirus/COVID-19 Updates webpage at https://www.asha.org/About/Coronavirus-Updates/. This also includes School Speech-Language Services During COVID-19: State Perspectives (https://www.asha.org/slp/schools/school-speech-language-services-during-covid-19-state-perspectives/), which provides examples of how audiologists and SLPs continued to provide services throughout the COVID-19 pandemic. These resources and best practices can serve as models for school-based service providers to follow when providing services both remotely and in person.

ASHA maintains that state and local education agencies must have the flexibility to develop plans that prioritize safety while delivering the highest quality education possible during the current and upcoming school year. We look forward to continuing to work with ED to elevate best practices that allow schools to reopen for in-person education while maintaining the safety of students, educational professionals, and families.

If you or your staff have any questions, please contact Eric Masten, ASHA’s director of federal affairs, education, at emasten@asha.org.

Sincerely,

A. Lynn Williams, PhD, CCC-SLP
ASHA 2021 President