February 6, 2018

The Honorable Travis Fitzwater
201 West Capitol Avenue
Room 410-A
Jefferson City, MO 65101

RE: HB 1798

Dear Representative Fitzwater:

On behalf of the American Speech-Language-Hearing Association, I write to express opposition to HB 1798, which would increase the requirements for early intervention providers and school districts to ensure that deaf or hard of hearing (D/HH) children have assessment and education plans that emphasize use of American Sign Language (ASL).

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. Over 3,900 of our members reside in Missouri.

Commonly known as LEAD-K (Language Equality & Acquisition for Deaf Kids) legislation, HB 1798 would establish an advisory committee consisting of teachers of the deaf, administrators of programs for children who are D/HH, parents of D/HH children, members of the community who are D/HH, and speech-language pathologists (SLPs). HB 1798 tasks the committee with monitoring language development milestones of children who are D/HH and requires annual assessments for each child who is D/HH up to age nine. ASHA believes that this bill, supported by a LEAD-K effort through the National Association for the Deaf, would establish a new precedent of placing hearing disabilities ahead of others identified in the Individuals with Disabilities Education Act (IDEA) by adding disability specific mandates and requiring additional resources for D/HH students only.

LEAD-K

The LEAD-K campaign promotes legislative efforts to ensure that children who are D/HH have early access to ASL. Campaign proponents believe that many children who are D/HH are not kindergarten ready because they do not have the foundation of a visual language. While ASL may be the most appropriate choice for some children, ASHA does not believe that this should be the only communication option that is made available to families as there are many options available, including cued speech, spoken language, augmentative and alternative communication, or a combination of multiple modalities.
Advisory Committee Responsibility
HB 1798 proposes that the advisory committee track the development of language milestones of D/HH children, monitor the use of language assessments for D/HH children, identify professionals qualified to assess D/HH children, and require specific procedures for communicating results and progress made by each D/HH child. The requirements in the bill are already required under IDEA, and must be included in the Individualized Family Service Plan (IFSP) or the Individualized Education Program (IEP) planning process. ASHA is concerned that HB 1798 would undermine the statutory authority of the IFSP/IEP team, which must include professionals knowledgeable about the assessment and services needed for children with disabilities including those children who are D/HH and their parents.

Role of the Family in Determining the Mode(s) of Communication for their Child
ASHA recognizes that families are the primary decision makers for choosing the desired mode of communication for a child who is D/HH. Furthermore, ASHA believes that families require information about all available communication options in order to make informed decisions.

IDEA

Importance of a Comprehensive Assessment
IDEA requires early intervention programs and schools to administer a comprehensive assessment to students who are suspected of having a disability. The assessment team must include qualified providers who are trained to assess the full range of the suspected disability, including communication disorders. Evaluators must administer appropriate assessments and recommend interventions and supports based on the child’s needs and their family’s priorities.

Annual Assessments for Children who are D/HH
Under IDEA, the IFSP/IEP team of professionals is tasked with continually evaluating whether the child’s individual goals are being met and if he or she is making adequate progress. ASHA is concerned that requiring an annual assessment for children who are D/HH by professionals identified by the advisory committee is a costly and onerous expense that is already required under IDEA.

Speech-Language Pathologists are Highly Qualified Communication Professionals
Speech-language pathologists (SLPs) are trained professionals who assess and treat communication disorders. SLPs complete a comprehensive education program that meets rigorous standards of practice based on objective methodology, including a master’s or doctoral degree in communication sciences and disorders; a minimum of 400 clock hours of clinical experience supervised by SLPs holding the ASHA Certificate of Clinical Competence (CCC); a passing score on a national examination administered and validated by the Educational Testing Service; and completion of a supervised Clinical Fellowship to meet the requirements of the CCC, the recognized standard in the field. SLPs are regulated in all 50 states and the District of Columbia and must complete 30 hours of professional development activities every 3 years.
Role of the Individualized Family Service Plan (IFSP) or Individualized Education Program (IEP) Team

An IFSP or IEP team consists of qualified providers and parents who meet to develop an individualized program to address the student’s needs. Families who are dissatisfied with their child’s goals or progress on their IFSP/IEP already have the right, under IDEA, to request additional assessments or changes to the IFSP/IEP.

ASHA opposes efforts like HB 1798 that would establish a new precedent of placing hearing disabilities ahead of others identified in IDEA by adding disability specific mandates and requiring additional resources for D/HH students only. ASHA recommends enforcing mandates included in IDEA that utilize talented professionals, including SLPs, who work with students who are D/HH every day, rather than creating costly and redundant systems that violate the tenets of IDEA.

Thank you for your consideration. If you or your staff have any questions, please contact Janet Deppe, ASHA’s director of state affairs, at jdeppe@asha.org.

Sincerely,

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