Caseload Management:
Eligibility to Dismissal
Session Norms

• Silence your cell phones.
• Please check and/or reply to emails during the scheduled breaks.
• Be an active participant.
• Do not hesitate to ask questions.
Vision

To create a world-class educational system that gives students the knowledge and skills to be successful in college and the workforce, and to flourish as parents and citizens.

Mission

To provide leadership through the development of policy and accountability systems so that all students are prepared to compete in the global community.
✓ All Students Proficient and Showing Growth in All Assessed Areas

✓ Every Student Graduates High School and is Ready for College and Career

✓ Every Child Has Access to a High-Quality Early Childhood Program

✓ Every School Has Effective Teachers and Leaders

✓ Every Community Effectively Using a World-Class Data System to Improve Student Outcomes

✓ Every School and District is Rated “C” or Higher
• Strong Readers=Strong Leaders Statewide public awareness campaign promotes literacy, particularly among PreK-3 students.

• Campaign aims to equip parents and community members with information and resources to help children become strong readers.
Strong Readers=Strong Leaders

How districts can get involved:

• Post logo and link to strongreadersMS.com on district website.
• Share PSA on website and social media.
• Like Strong Readers on Facebook and follow @StrongReadersMS on Twitter.
• Help implement mentoring program.
• Distribute bookmarks and posters.
Special Education

The Office of Special Education is a service-oriented organization that seeks to improve the education experience for children with disabilities. We strive to nurture a dedicated staff through intense professional development opportunities, field experience, and individual accountability.

In keeping with the Individuals with Disabilities Education Act and state law, we help local schools and districts provide effective educational programs to students with disabilities, ages 3-20, who need special education and related services.

To register for professional development opportunities offered by the Office of Special Education, please visit https://services.mmsec.net/MDE_Workshops.cfm. The professional development opportunities offered by the Office of Special Education can be located by selecting Special Education workshops. Once you select Special Education, a listing of all posted special education training sessions will appear for your review and consideration.

Resources for Parents

For immediate assistance, call the Parent Hotline: 1-877-544-0408. For meeting updates, helpful articles, publications, forms and other resources, click here.

Resources for Teachers

For the latest updates, articles and other information related to special education and teaching, please click here to sign up for Special Education Teachers email list.
## MDE Professional Development Calendar

### JULY 2016

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jul 13</td>
<td>8:30am</td>
<td>EL Summer Boot Camp</td>
<td>JSU-R&amp;D Center</td>
</tr>
<tr>
<td>Jul 14</td>
<td>8:30am</td>
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<td>Horn Lake High School</td>
</tr>
<tr>
<td>Jul 18</td>
<td>8:15am</td>
<td>SREB Math Ready Training</td>
<td>Horn Lake High School</td>
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<td>Ridgeland High School</td>
</tr>
<tr>
<td>Jul 21</td>
<td>9am</td>
<td>2016 State Conference for School Foodservice Administrators</td>
<td>HCC - Clyde Muse Center</td>
</tr>
<tr>
<td>Jul 22</td>
<td>8am</td>
<td>2016 State Conference for School Foodservice Administrators</td>
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</tr>
<tr>
<td>Jul 22</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics 6th-8th Grades</td>
<td>JSU-R&amp;D Center</td>
</tr>
<tr>
<td>Jul 22</td>
<td>8:30am</td>
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</tr>
<tr>
<td>Jul 22</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics K-2nd Grades</td>
<td>JSU-R&amp;D Center</td>
</tr>
<tr>
<td>Jul 26</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics 6th-8th Grades</td>
<td>USM-Trent Lott Center</td>
</tr>
<tr>
<td>Jul 26</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics 3rd-5th Grades</td>
<td>USM-Trent Lott Center</td>
</tr>
<tr>
<td>Jul 26</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics K-2nd Grades</td>
<td>USM-Trent Lott Center</td>
</tr>
<tr>
<td>Jul 27</td>
<td>3 Days</td>
<td>MS ACTE Summer Conference</td>
<td>Jackson Convention Center</td>
</tr>
<tr>
<td>Jul 29</td>
<td>8:30am</td>
<td>Implementing the Revised MS CCRS for Mathematics 6th-8th Grades</td>
<td>Oxford Conference Center</td>
</tr>
</tbody>
</table>
• Different Views
• Highlights a Snapshot of Training

<table>
<thead>
<tr>
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<tr>
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<td>8:30am</td>
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<td>USM-Trant Lott Center</td>
</tr>
<tr>
<td>Jul 28</td>
<td>8:30am</td>
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<td>USM-Trant Lott Center</td>
</tr>
<tr>
<td>Jul 29</td>
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<td>USM-Trant Lott Center</td>
</tr>
<tr>
<td>Aug 17</td>
<td>8:30am</td>
<td>21st CCLC Summer Institute</td>
<td>Brandon Municipal Complex</td>
</tr>
<tr>
<td>Aug 18</td>
<td>8:30am</td>
<td>21st CCLC Summer Institute</td>
<td>Brandon Municipal Complex</td>
</tr>
</tbody>
</table>

**JULY 2016**

SREB Literacy Ready Training:
- Mon., July 18, 9:00am – Wednesday, July 20, 10:30am
- N. R. Burger Middle School Transplantarium
- Visit the Mississippi Department of Education website for details on the Literacy Ready Training sessions.

**AUGUST 2016**

21st CCLC Summer Institute
- Brandon Municipal Complex
Click on Training for Info
The Southern Region Education Board (SREB) in conjunction with the Mississippi Department of Education will be offering a three (3) day training for those teachers that need to obtain their REA level supplemental endorsement to teach the high school SREB Math Ready or SREB Literacy Ready courses during the 2016-2017 school year.

Trainings will be offered at three locations throughout the state on July 18, 2016 – July 20, 2016 (6:30a – 4:30p) as indicated below. Teachers are asked to report by 6:30a each day and to bring a laptop or electronic device. Attendance is required all three days in order to receive the supplemental endorsement and CEUs.

Northern Region - Horn Lake High School, 3390 Church Road, Horn Lake, MS 38637

Central Region - Ridgeland High School, 560 Barksdale Road, Ridgeland, MS 39157

Southern Region - N.E. Burger Middle School, 174 W S.F. Tabern Boulevard, Hattiesburg, MS 39401

Registration is open on a first-come, first-served basis and there is no limit to the number of teachers that may attend from a particular school or district. Interested parties may register at ms.gosignup.com. Immediately under the banner you will find instructions for registering for the location of your choice. Note, there are two sets of instructions, one set of instructions are for registrants that currently have a MyPLC account and another set of instructions are for registrants that are new to MyPLC. Once you are in the system, you may do a quick search for the training by typing “SREB” in the Search field.

If you have any questions regarding the SREB Roadshow Trainings, please contact Dr. Maria Davis, Bureau Director, Office of Secondary Education, at mdavis@mdoe.ms.org.
Participants will:

• Understand the function of the Multidisciplinary Evaluation Team (MET).

• Determine how to help the IEP Team make valid eligibility decisions.

• Learn speech-language dismissal criteria and process.

• Learn how to analyze caseloads to determine workload.
Caseload – the number of students with Individualized Education Programs (IEPs) that a Speech Pathologist (215) or Speech Therapist (216) is serving directly

Workload – caseload in addition to a number of associated job demands
Contributors to High Caseloads

- Critical shortage of Speech-Language Pathologists in the school setting
- Over-identification of students with speech-language disabilities
- Misunderstanding by the Multidisciplinary Evaluation Team (MET) and the IEP Committee of service provision guidelines
- Lack of knowledge regarding the role of related service providers
The Effects of High Caseloads
<table>
<thead>
<tr>
<th>State</th>
<th>2015–2016 Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alabama</td>
<td>AL issues no min/max caseload guidance (as of 2012).</td>
</tr>
<tr>
<td>Alaska</td>
<td>AK issues no min/max caseload guidance (as of 2012).</td>
</tr>
<tr>
<td>Arizona</td>
<td>AZ issues no caseload guidance; average caseload of 50 to 75+.</td>
</tr>
<tr>
<td>Arkansas</td>
<td>AR has a caseload maximum of 45.</td>
</tr>
<tr>
<td>California</td>
<td>CA has a maximum caseload of 55, but it is difficult to enforce due to statewide shortages; a caseload/workload task force was formed to evaluate the education code and provide new language.</td>
</tr>
<tr>
<td>Colorado</td>
<td>CO issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Connecticut</td>
<td>CT issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Delaware</td>
<td>DE issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Florida</td>
<td>FL issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Georgia</td>
<td>GA has a caseload cap of 55.</td>
</tr>
<tr>
<td>Hawaii</td>
<td>As of 2012, HI issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Idaho</td>
<td>ID issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Illinois</td>
<td>IL caseloads are not to exceed 60.</td>
</tr>
<tr>
<td>Indiana</td>
<td>IN issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Iowa</td>
<td>IA does not have state guidelines for caseload. Each AEA makes its own determination. State officials are working on a document to be used statewide to assist with workload consideration. This is being developed by a state SLP workload committee.</td>
</tr>
<tr>
<td>Kansas</td>
<td>KS issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Kentucky</td>
<td>KY caseloads are not to exceed 65.</td>
</tr>
<tr>
<td>Louisiana</td>
<td>LA issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Maine</td>
<td>ME Department of Ed allows a max of 50, including direct and consultative services.</td>
</tr>
<tr>
<td>Maryland</td>
<td>In MD, caseload is determined by county.</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>MA issues no min/max caseload guidance.</td>
</tr>
<tr>
<td>Michigan</td>
<td>MI has a max caseload of 60.</td>
</tr>
<tr>
<td>Minnesota</td>
<td>MN issues no min/max caseload guidance; however, districts must have a policy in place to address caseload.</td>
</tr>
<tr>
<td>Mississippi</td>
<td>MS has a maximum caseload of 60, and a max of 48 for best practice.</td>
</tr>
</tbody>
</table>
How many children do you average on your workload (ALL required and performed activities) during the school year?

<table>
<thead>
<tr>
<th>Workload/Caseload</th>
<th>% of Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-25</td>
<td>5.77%</td>
</tr>
<tr>
<td>26-50</td>
<td>36.54%</td>
</tr>
<tr>
<td>51-75</td>
<td>50%</td>
</tr>
<tr>
<td>75+</td>
<td>7.69%</td>
</tr>
</tbody>
</table>
Rank your greatest challenges as a school-based clinician:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Challenge</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Large amounts of paperwork</td>
</tr>
<tr>
<td>2.</td>
<td>Time spent learning new paperwork</td>
</tr>
<tr>
<td>3.</td>
<td>Budge constraints/out-of-pocket expenses</td>
</tr>
<tr>
<td>4.</td>
<td>High workload/caseload size</td>
</tr>
</tbody>
</table>
Participants in one study indicated that large caseloads interfered with their professional responsibilities:

- 25% of the participants stated that they provided less than the needed amount and type of therapy for their students.
- 7% stated that they provided group therapy when individual therapy was more appropriate.
- 5% routinely canceled sessions.
- 6% altered IEP objectives to meet their busy schedules.

(Chiang & Rylance, 2000, p. 33).
A 2008 study that polled 634 full-time SLPs from 49 states set out to:

• Identify the current mean caseload size for school-based SLPs.
• Identify a threshold at which SLPs begin to report that their caseloads are unmanageable.
• Identify other variables that seem to contribute to an SLP's sense of caseload manageability.

Katz et al.: Caseload Manageability (2009)
Katz, et al, found that:

- School-based SLPs continue to endure larger caseloads than are considered reasonable (see ASHA, 1993, 2000, 2002, 2004, 2006b, 2008).

- The mean caseload size reported in this study (M = 48.8) is notably lower than the mean caseload size reported in Blood et al. (2002; M = 56.3) and in Dowden et al. (2006; M = 59), and is on par with the 2008 Schools Survey by ASHA (M = 48; ASHA, 2008).

- ASHA’s recommendation (1993) of no more than 40 students per caseload is still highly appropriate.
Effects of High Caseloads

Figure 3. Percentage of SLPs reporting caseload size as unmanageable by caseload stratum.
For SLPs with large caseloads (>47):

- **Years of experience**
  - Those with fewer years of experience were more likely to perceive their caseloads as manageable.

- **Level of collaboration**
  - SLPs felt caseloads were more unmanageable where increased collaboration was required.
For SLPs with smaller caseloads (≤47):
• Caseload numbers alone impacted the sense of manageability
Turn and Talk:

What other factors do you perceive as the biggest predictors of caseload manageability?
Effects of High Caseloads

- High caseloads
- Decreased SLP time & enthusiasm
- Decreased quality of services
- Decreased retention
Referral and Assessment Considerations
• Any infant or toddler from birth to 34 months who has been identified through Child Find activities or for whom a request for an evaluation has been received must be referred to the Mississippi State Department of Health Early Intervention Program (EIP) within seven (7) calendar days.

• No policies, procedures, or practices, including Response to Intervention, may result in delaying or denying a child access to the Child Find process.
• Requests for initial evaluation and responses to such requests are not limited by the number per year or the time of year requests are received.

Rule 74.19, § 300.301

• “… it would generally not be acceptable for the Local Education Agency (LEA) to wait several months to conduct an evaluation or to seek parental consent for an initial evaluation if the public agency suspects the child to be a child with a disability.”

Federal Regulations, Comments at § 300.301, p. 46637
The law requires that the LEA:

• Adopt a policy to ensure that students will be screened by a 215AA licensed Speech-Language Pathologist by the end of grade 1 in the areas of articulation, language, voice, and fluency.

• Notify parents if the student fails the screener.
• If a student fails the screener, the school district, at its discretion, may perform a comprehensive speech-language evaluation.

• If the parent chooses to get an outside evaluation by a qualified professional, the district must consider the evaluation for purposes of determining eligibility.

• Parents may opt out of the screening if they choose.
• Parental permission must be obtained before individual students are screened, unless the district has a policy stating otherwise.

• Children who fail a hearing screening, or cannot be conditioned, must be referred to a professional to obtain a formal hearing evaluation before assessments are administered.

• With parental permission, preschoolers who are identified through Child Find may be screened before the MET meeting to gather information.
## Definitions of Language

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language Arts</td>
<td>The study of grammar, composition, and spelling.</td>
</tr>
<tr>
<td>Foreign Language</td>
<td>Any language that is secondary to the child (not his native language).</td>
</tr>
<tr>
<td>Receptive Language</td>
<td>The understanding of words and gestures, including vocabulary, concepts, and grammatical forms.</td>
</tr>
<tr>
<td>Expressive Language</td>
<td>How one expresses wants and needs, including grammar rules, facial expressions, and gestures.</td>
</tr>
</tbody>
</table>
# Documenting Referrals

**MISSISSIPPI DEPARTMENT OF EDUCATION • OFFICE OF SPECIAL EDUCATION**

## Child Find Request

<table>
<thead>
<tr>
<th>[School District Name]</th>
<th>[Child Find Coordinator]</th>
</tr>
</thead>
<tbody>
<tr>
<td>[School District Address 1]</td>
<td>[Child Find Coordinator Phone Number]</td>
</tr>
<tr>
<td>[School District Address 2]</td>
<td>[Child Find Coordinator Email Address]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Person Making the Request and Agency Represented:</th>
<th>Relation to Child:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requester's Address:</td>
<td>Requester's Phone:</td>
</tr>
<tr>
<td>Requester's Email:</td>
<td>Date Request Received:</td>
</tr>
</tbody>
</table>

## PERSONAL DATA

<table>
<thead>
<tr>
<th>Child's Full Name:</th>
<th>Race/Ethnicity:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender:</td>
<td>DOB:</td>
</tr>
</tbody>
</table>

| Child's Physician: | Physician's Address: |

## HOME AND FAMILY INFORMATION

<table>
<thead>
<tr>
<th>Parent/Guardian 1:</th>
<th>Parent/Guardian 2:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home Address:</td>
<td>Home Address:</td>
</tr>
<tr>
<td>Home Phone:</td>
<td>Home Phone:</td>
</tr>
<tr>
<td>Employer/Occupation:</td>
<td>Employer/Occupation:</td>
</tr>
<tr>
<td>Work Phone:</td>
<td>Work Phone:</td>
</tr>
<tr>
<td>Child Lives With:</td>
<td></td>
</tr>
<tr>
<td>Directions to the Child's Home:</td>
<td></td>
</tr>
</tbody>
</table>

## LANGUAGE(S) SPOKEN IN THE HOME

<table>
<thead>
<tr>
<th>Is any language other than English spoken in the child’s home?</th>
<th>Yes</th>
<th>No (skip to next section)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent/Guardian's Language:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child’s Language:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## CHILD'S EDUCATIONAL SETTING

<table>
<thead>
<tr>
<th>Does the child attend a public/private school or preschool/childcare center?</th>
<th>Yes</th>
<th>No (skip to next question)</th>
</tr>
</thead>
<tbody>
<tr>
<td>School/Center Name:</td>
<td>School/Center Phone:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Speech/Language Disorder</td>
<td>Reading Disorder</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>--------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Oral comprehension problems</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Stuttering</td>
<td></td>
<td>X</td>
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<tr>
<td>Verbal expression problems</td>
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<td>X</td>
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<tr>
<td>Delayed speech</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Unclear articulation</td>
<td></td>
<td>X</td>
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<tr>
<td>Slow, inaccurate reading</td>
<td></td>
<td></td>
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<tr>
<td>Limited vocabulary</td>
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<td>X</td>
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<tr>
<td>Poor written expression</td>
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<td>X</td>
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<tr>
<td>Difficulty memorizing</td>
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<td>X</td>
</tr>
<tr>
<td>Word-finding problems</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Difficulty learning to rhyme</td>
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<td>X</td>
</tr>
<tr>
<td>Confusing sounds in words</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
### SLP Test Comparison

<table>
<thead>
<tr>
<th>TEST</th>
<th>LANGUAGE AREAS</th>
<th>LITERACY AREAS</th>
<th>DIALECT CONSIDERATIONS</th>
<th>RACE/ETHNICITY OF NORMING SAMPLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Evaluation of Language Fundamentals, 5th (CELF-5)</td>
<td>Semantics, Morphology, Syntax, Pragmatics</td>
<td>Supplementary Ages 8-21; Reading Comprehension; Structured Writing</td>
<td>African American English (AAE), Southern English, Spanish-Influenced English, Asian-Influenced English</td>
<td>White (56.8%), Hispanic (20%), African American (13.8%), Asian (3.6%), Other (5.9%)</td>
</tr>
<tr>
<td>Assessment of Literacy and Language (ALL)</td>
<td>Semantics, Phonology, Morphology, Syntax</td>
<td>Letter Knowledge, Rhyming, Print Awareness</td>
<td>African American English</td>
<td>Spring Sample: African American (15.3%), Hispanic (18%), White (61.3%), Other (5.3%)</td>
</tr>
<tr>
<td>Test for Examining Expressive Morphology (TEEM)</td>
<td>Morphology</td>
<td>None</td>
<td>Not Reported</td>
<td>Not Reported</td>
</tr>
<tr>
<td>Structured Photographic Expressive Language Test – Third Edition (SPELT-III)</td>
<td>Morphology</td>
<td>None</td>
<td>African American English</td>
<td>African American (16.1%), White (65.5%), Hispanic (11.2%), Other (7.2%)</td>
</tr>
<tr>
<td>Structured Photographic Expressive Language Test – Second Edition, Preschool (SPELT-P2)</td>
<td>Morphology</td>
<td>None</td>
<td>African American English</td>
<td>African American (12.5%), White (72.8%), Hispanic (8.6%), Other (6.1%)</td>
</tr>
<tr>
<td>Preschool Language Scales – Fifth Edition (PLS-5)</td>
<td>Semantics, Morphology, Syntax</td>
<td>Print Awareness; Alphabet Knowledge; Initial Sounds, Rhyming, Morphological Awareness</td>
<td>African American English, Appalachian English, Southern English, English Influenced By Chinese, English Influenced By Spanish</td>
<td>African American (11.6%), Asian (4%), Hispanic (18%), White (60.7%), Other (5.7%)</td>
</tr>
<tr>
<td>Test of Language Development – Primary: Fourth Edition (TOLD-P:4)</td>
<td>Semantics, Phonology, Morphology, Syntax</td>
<td>Syllable Segmentation</td>
<td>None</td>
<td>European American (78%), African American (15%), American Indian/Eskimo (1%), Asian/Pacific Islander (4%), Two Or More (2%), Other (&lt;1%)</td>
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<tr>
<td>Test of Language Development – Intermediate: Fourth Edition (TOLD-I:4)</td>
<td>Semantics, Syntax, Morphology</td>
<td>None</td>
<td>None</td>
<td>European American (78%), African American (14%), American Indian/Eskimo (1%), Asian/Pacific Islander (5%), Two Or More (2%), Other (&lt;1%)</td>
</tr>
</tbody>
</table>
## Definition of Current Data

<table>
<thead>
<tr>
<th>Definition of Current</th>
<th>Types of Existing Records</th>
</tr>
</thead>
<tbody>
<tr>
<td>No more than one (1) year old at the time the parent signs consent</td>
<td>• Intelligence measures</td>
</tr>
<tr>
<td></td>
<td>• Hearing screening and follow-up evaluations</td>
</tr>
<tr>
<td></td>
<td>• Vision screening and follow-up evaluations</td>
</tr>
<tr>
<td></td>
<td>• Physical examinations</td>
</tr>
<tr>
<td>No more than six (6) months old at the time the parent signs consent</td>
<td>• Teacher Narrative (Appendix EE.I)</td>
</tr>
<tr>
<td></td>
<td>• Achievement measures</td>
</tr>
<tr>
<td></td>
<td>• Social, behavioral, adaptive, and emotional measures</td>
</tr>
<tr>
<td></td>
<td>• Language/speech assessments</td>
</tr>
<tr>
<td></td>
<td>• Motor assessments</td>
</tr>
<tr>
<td></td>
<td>• Curriculum-based assessments</td>
</tr>
<tr>
<td>No more than three (3) months old at the time the parent signs consent</td>
<td>• Developmental History (Appendix EE.H)</td>
</tr>
<tr>
<td></td>
<td>• Developmental instruments</td>
</tr>
</tbody>
</table>
Child Find and Eligibility

- Fourteen calendar-days from verbal or written referral to MET meeting
- Written Notice of Invitation to Committee Meeting to parents, and child if applicable
- Committee members:
  - Parent and/or student
  - General education teacher
  - Special education teacher
  - Agency representative
  - Speech-Language Pathologist
  - Anyone else with knowledge of and interest in the child
• The MET must consider all documentation presented and decide if a comprehensive evaluation is warranted.

• Prior Written Notice (PWN) is given within seven days to document the MET decision.

• Prior to an initial evaluation, the district must obtain informed parental consent.
Children who are transitioning from Part C to Part B are entitled to an evaluation by the Local Education Agency (LEA).

The Multidisciplinary Evaluation Team (MET) should meet to initiate the evaluation process.

Once informed parental consent is obtained, the LEA has up to 60 days to evaluate and up to 30 days to write the child’s IEP, if applicable. However, the IEP must be in place by the child’s third birthday regardless of timelines.

If the IEP is written before the child’s third birthday, the implementation date is the child’s birthday.
Part C to Part B Transition

Develop Transition Plan

First Steps (Part C) notifies LEA

Transition Conference
Must occur at least 90 days before child turns 3

LEA requests files

First Steps (Part C) invites LEA and HS/CC to Transition Conference

Implement Transition Plan

60 days
LEA (Part B) evaluates child & determines eligibility

30 days
LEA (Part B) writes child’s IEP

LEA Provides a Free Appropriate Public Education (FAPE)

27 months 33 months 36 months

2016-2017
Request and Referral Process

1. Prior Written Notice of Refusal with an Explanation
2. Procedural Safeguards

1. Prior Written Notice of Referral for Evaluation
2. Informed Parental Consent
3. Procedural Safeguards

Oral or Written Request for Evaluation

14 Days

MET Meeting

7 Days
When the evaluation team is considering eligibility under the Language or Speech Impairment category, the MET evaluation report and/or eligibility determination report must include:

• Results of hearing screening;
• Results of an orofacial examination (required for articulation disorders) and, if necessary, a statement from a medical specialist noting physical problems which would interfere with speech production;
• A physician’s statement of release and recommendation(s) for services when a voice evaluation has been conducted;
(cont.)

- The number, types, and severity of disruptions, and a description of secondary characteristics in various settings (e.g. reading, monologue, conversation) when a fluency evaluation has been conducted;

- Results of standardized measure(s) of language, when a language evaluation has been conducted;
  - Note: The score(s) must be at least 1.5 standard deviations below the mean of the test in the areas of expressive language and/or receptive language, including morphology, syntax, semantics and/or pragmatics for an eligibility ruling in Language.
When an articulation evaluation has been completed for children ages 30 months or older, evidence that the child’s articulation skills are below age-appropriate peers based on normative data, including a measure of stimulability;

Documentation that the child’s communication impairment adversely affects educational performance including the child’s ability to communicate in academic, social and vocational settings; and

Documentation of the child’s speech-language skills in conversational speech.
In addition, the SLP should add the following if he/she is the sole assessor:

- Date of assessment(s);
- Name, title, and qualifications of examiner(s), informants, and/or observers;
- Testing conditions;
- Behaviors noted during testing and observations;
- Results of assessments;
- Explanations of any deviations from standardized testing procedures; and
- Justifications for use of instruments that are not age appropriate.
• Do NOT include a statement of eligibility.
• The MET will reconvene, analyze all data collected, and come to an eligibility decision as a team.
• You may make recommendations based on findings, such as classroom accommodations and/or suggestions for parents and teachers.
• There is no need for a *separate* Evaluation Summary Report as long as the information is included.
“According to test results and all data collected, Julie has an articulation disorder that causes her to have difficulty making letter/sound associations when reading and spelling. Her speech is difficult to understand, especially to unfamiliar listeners, causing her to be unable to fully participate in classroom discussions with her teachers and peers.”
Evaluation and Eligibility

- Parent Consents to Evaluation
- Evaluation Report Completed
- Eligibility Meeting

- 60 Days
- 14 Days
Eligibility Determinations
Eligibility categories under IDEA:

1. Autism (AU)
2. Deaf-Blind (DB)
3. Developmentally Delayed (DD)
4. Emotional Disability (EmD)
5. Hearing Impairment (HI)
6. Language/Speech Impairment (L/S)
7. Intellectual Disability (ID)
8. Multiple Disabilities (MD)
9. Orthopedic Impairment (OI)
10. Other Health Impairment (OHI)
11. Specific Learning Disability (SLD)
12. Traumatic Brain Injury (TBI)
13. Visually Impaired (VI)
Eligibility categories that do not require L/S-Language as a secondary eligibility are listed here. The IEP team may decide, based on all data collected, whether the student is in need of language therapy as a related service.

- AU
- HI
- DD (Communication)
- TBI
- SLD – Oral Expression
- SLD – Listening Comprehension
Under 34 C.F.R. § 300.8, a child must meet a two-prong test to be considered a child with a disability: (1) have one of the specified impairments (disabilities); and (2) because of the impairment, need special education and related services. If a child has one of the impairments, but needs only related services and does not need special education, the child is not a child with a disability (34 C.F.R. § 300.8(a)(2)(i)).
However…

34 C.F.R. § 300.8(a)(2)(ii) provides that if, consistent with 34 C.F.R. § 300.39(a)(2), the related services required by the child, are considered special education rather than a related service under State standards, the child would be considered to be a child with a disability. These related services are:

- Speech-language pathology services
- Travel training
- Vocational education
IDEA specifies that the child receives needed related services in his or her IEP. This appears at § 300.320(a)(4) and stipulates that each child’s IEP must contain:

(4) A statement of the special education and related services and supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child—

- (i) To advance appropriately toward attaining the annual goals;
• (ii) To be involved in and make progress in the general education curriculum in accordance with paragraph (a)(1) of this section, and to participate in extracurricular and other nonacademic activities; and

• (iii) To be educated and participate with other children with disabilities and nondisabled children in the activities described in this section… [§ 300.320(a)(4)]

IDEA’s definition of related services should guide how a child’s IEP team considers what related services the child needs and the detail with which the team specifies them in the IEP.
Adverse educational impact is evident when a student’s disability negatively impacts his/her:

- Involvement and advancement in the general education program (academic impact);
- Education and participation with other students without disabilities (social/behavioral impact);
- Participation in extracurricular and other non-academic activities (vocational impact);
• **Academic achievement** generally refers to a child’s performance in academic areas (e.g. reading, language arts, and math).

• **Functional performance** generally refers to skills or activities that may not be considered academic or related to a child’s academic achievement, but rather activities of daily living (i.e. toileting, eating).

• Functional performance can impact educational achievement.
Teacher Questionnaire

Nonacademic Adverse Effect of Speech Impairment on Educational Performance

Student Name: ___________________________ Grade: ____________
Teacher Name: ___________________________ Date: ______________

For Students With Articulation Errors

1. Is the student intelligible (able to be understood)? Yes No
   If yes, what percentage of the time? 25% 50% 75% 100%

2. Are the articulation errors drawing negative and undue attention to the student? Yes No

3. Does the student sound less mature because of the articulation errors? Yes No

4. Is there evidence of the student experiencing stigma in the lunchroom, at recess, or in specials (art, music, P.E.) because of the articulation errors, such as being teased, bullied, avoided or shunned by peers? Yes No

5. Does the student participate verbally in class? Yes No
   If yes, how frequently? Rarely Sometimes Often

6. Is the student embarrassed or afraid to participate in class – answering questions, taking part in discussions, interacting with peers – due to his/her articulation errors? Yes No

7. Is the student confident reading aloud in class or in small group settings? Yes No
   If not confident, does it appear to be due to the articulation errors? Yes No
Possible areas for documentation:

- PLAAFP
- Annual Goals
- Special Considerations
- Transition (if applicable)
- Least Restrictive Environment
Under the IDEA, Free Appropriate Public Education (FAPE) is defined as an educational program that is individualized to a specific child, designed to meet that child's unique needs, provides access to the general curriculum, meets the grade-level standards established by the state, and from which the child receives educational benefit.
Since the statute is silent as to what constitutes educational benefit, the standard is defined in Federal regulations and by ongoing case law. Most courts in addressing the issue have found that in order to show a FAPE is being provided, the child must make some educational progress.
• In Board of Education v. Rowley, the U. S. Supreme Court ruled that IDEA does not require states to develop IEPs that "maximize the potential of handicapped children."

• Another important ruling established by a case called Walczak v. Florida Union Free School District in 1998 asserts that children are not entitled to the best education that money can buy; they are only entitled to an appropriate education.

• Some courts have required that the progress the child receives be meaningful or more than *de minimis*. 
IDEA (Individuals with Disabilities Education Improvement Act) of 2004 gave us conceptual refinements:

• having high expectations for all children,
• ensuring access to the general education curriculum and standards in the general classroom, to the maximum extent possible,
• preparing children with disabilities to lead productive and independent adult lives, and
• providing effective transition services to promote successful post-school employment or education.
It is critical that we analyze what we are doing over time for individual children to truly measure educational benefit.

- It is not just a snapshot at the time of a single IEP meeting.
- Analyze what assessments/present levels say about needs, what goals, supports & services were agreed to in response to identified needs, was the IEP implemented, and did the student make progress or gain educational benefit.
- True analysis looks back through years or the span of time between triennials.
Measuring Educational Benefit

- Curriculum-based measures – brief, frequent assessments that measure progress toward annual goals
- Progress toward annual IEP goals for three consecutive years; did goals change over time to show progression?
- Progress monitoring data
- Therapy log
1. Is the assessment complete and does it identify the student’s needs?

2. Does the present level of performance include all of the needs identified in the assessment, including behavioral and English learner?

3. Are all of the student’s educational needs addressed by appropriate goals and objectives?

4. Do the services support the goals and objectives including English learners, where appropriate?

5. Did the student make yearly progress inclusive of grades and standardized test scores?
6. If the student did not make progress, were the goals and objectives changed in the next IEP to assist the student to make progress?

7. If the student did not make progress, were the services changed in the next IEP to assist the student to make progress?

8. Were sufficient services provided to ensure that the student would make progress?

9. For overall compliance, considering the answers to each of the above, was the IEP reasonably calculated to result in educational benefit?
• Candice, a third-grade student who receives resource support services, failed to make any progress in reading or math this year.

• Her parents paid for a daily specialized reading program for three months. She made astounding progress.

• She learned to read and her scores improved greatly. Her parents have now requested the school fund the continuation of this program for reading comprehension.

• The school district says “No.” They say they have a solid reading and math program, while not “a Cadillac,” it works.
Language-Speech Dismissal Procedure and Criteria
Language-Speech Dismissal Procedure

• Reevaluation procedures must be followed to dismiss a child from L/S, whether it is the primary disability or a related service.

• The IEP Committee may decide, based on current performance, assessment data, and IEP progress data, that formal assessment is not needed.

• The IEP Committee must accommodate a parental request for a formal evaluation.

• Reevaluation is not required for dismissal if the student is graduating or has exceeded the age limit for FAPE (20) under State law.
Students should be dismissed from L/S therapy when one of the following criteria is met:

• they no longer have a disability; and/or
• they no longer require L/S services due to their disability.
The IEP Committee determines that L/S services are no longer warranted due to:

A. The student no longer meets eligibility criteria for L/S services when:
   - He/she has mastered IEP goals/objectives.
   - L/S skills are within normal limits.
B. The student’s progress has plateaued and/or the student no longer benefits from L/S services.

- IEP shows lack of progress, and reevaluation data supports this.

- Lack of progress is due to:
  - Limited ability to self-monitor communication
  - Poor attendance
  - Lack of motivation
  - Limited potential for significant change.
C. Communication skills no longer have an adverse impact on academic, social/behavioral, or vocational performance.

D. The student no longer requires L/S services due to their disability.
   - Skills can be monitored and maintained in the student’s environment.
   - Skills are being addressed by others in the student’s environment (i.e., special education teacher, general education teacher, parent, etc.).
Language-Speech Dismissal Form

Appendix V
Language-Speech Dismissal Form

Enter District Name Here

Student’s Name: ___________________________ Date of Birth: ___________

District: ___________________ SLP: __________________

The IEP Committee convened ____________, and based on reevaluation data has determined that ________________ is no longer eligible for Special Education services for the category of Language-Speech.

Procedures used to reach this determination include (check all that apply):

☐ A review of the IEP
☐ Review of current data to determine adverse educational impact
☐ Administration of assessments/evaluations when appropriate
☐ Interviews with teachers, parents, and therapists
☐ Observations across settings
☐ If testing was warranted, the parent received WFN and gave parental consent for testing (report of testing attached)

The IEP Committee determines that Language-Speech services are no longer warranted due to (check one):

☐ The student no longer meets the eligibility criteria for language-speech services because (check all that apply):
  ☐ The student has mastered IEP goals/objectives.
  ☐ The student’s language-speech skills are within the normal range.

☐ The student’s progress has plateaued or has shown a lack of progress, and the student no longer benefits from language-speech services due to (check all that apply):
  ☐ Limited physical, mental, or emotional ability to self-monitor communication
  ☐ Poor attendance
  ☐ Lack of motivation
  ☐ Limited potential for a significant change in communication skills

☐ The student’s communication no longer has an adverse educational impact on educational, social/behavioral or vocational performance.

☐ The student no longer requires language-speech services due to their disability:
  ☐ Skills are being monitored and maintained in the student’s environment.
  ☐ Skills are being addressed by others in the student’s environment (i.e., special education teacher, general education teacher, etc.).
Increase recruitment/retention efforts.
Identify needs and intervene through the Multi-Tiered System of Support process.
Make eligibility decisions based on the two-pronged letter of the law:
  – Does the child have a disability?
  – Does the disability have educational impact?
Educate administrators on the SLP scope of practice and workload vs. caseload approach.
Dismiss students when the IEP Committee determines they are no longer receiving educational benefit from services.
Increase Retention & Recruitment Efforts

- Join MSHA to support advocacy for the profession.
  - Answering questions/addressing concerns
  - Outreach to outside agencies, such as MS Department of Education and Institutes of Higher Learning
  - Legislative measures
- Be a mentor for current graduate students.
- Mentor 216A therapists.
- Promote your profession at career fairs, etc.
Intervene Through the MTSS Process

• Participate as a member of the Teacher Support Team in a consultative, collaborative, and/or support role as an expert in language development.
• Analyze universal screening data to help pinpoint student deficits, such as phonics vs. phonological awareness vs. fluency.
• Assist teachers in prescribing targeted interventions in deficit areas.
• Co-teach speech- and language-enhancing strategies in classrooms with L/S students.
• Model for classroom teachers, assistants, and/or parents how to target mild articulation deficits.
• Differentiate between a language disorder and difference.
• Use dynamic assessment to help make decisions.
• Use the two-prongs of the law when making decisions.
• Document educational impact.
• Demonstrate educational benefit over time.
Caseload vs. Workload Approach
## Definitions

<table>
<thead>
<tr>
<th>Caseload</th>
<th>Workload</th>
</tr>
</thead>
<tbody>
<tr>
<td>In general, the term caseload typically refers to the number of students with Individualized Education Programs (IEPs) or Individualized Family Service Plans (IFSPs) school SLPs serve through direct service delivery options.</td>
<td>Workload refers to all activities required and performed by school-based SLPs. This includes paperwork, classroom lessons, meetings, professional development, as well as therapy time with students.</td>
</tr>
</tbody>
</table>
Nationally, the caseload approach is most widely used (American Speech-Language Hearing Association, 2014). When implementing this approach, educational agencies merely assign a certain number of children to an SLP for services. The administration does not factor in the time needed for other work that is spelled out in the SLP's job description. In Ohio, research shows the vast majority (88%) of SLPs are assigned children using the caseload approach (ASHA, 2008).
The second approach is called the workload approach. Not only is this approach jointly endorsed by The American Occupational Therapy Association (AOTA), American Physical Therapy Association (APTA), and ASHA (2014), the Ohio Department of Education also requires this method (Office for Exceptional Children, 2014). Under this approach, educational agencies ensure SLPs have enough time in their workweek to complete all their workload duties as well as provide appropriate services and interventions. In order to achieve a reasonable workload, educational agencies first assign SLPs their workload duties, and then with the remaining time determine who will be placed on the SLPs' caseloads.
### SLP #1
- *Caseload of 80 students on IEPs*
- *85% of caseload is made up of students having articulation difficulties.*
- *50% of caseload is made up of students having difficulty with only 1-2 sounds.*

### SLP #2
- *Caseload of 55 students on IEPs*
- *20% of caseload is made up of students having articulation difficulties.*
- *40% of caseload is made up of students having multiple disabilities and very low language abilities.*
- *Programs 3 AAC devices weekly.*
- *Co-teaches with general education teacher 3 times per week in classrooms.*
“The total workload activities required and performed by school-based Speech-Language Pathologists (SLPs) must be taken into account to set caseload standards. A workload analysis approach to setting caseload standards is necessary to ensure that students receive the services they need, instead of the services SLPs have time to offer or services based on administrative convenience.
The following principles underlie this position:

1. 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.
(Cont.)

2. 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.
3. 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.”
Group Activity

Workload Calculator
Funding

- Given the lack of funding for increased staffing in some school districts, there might be reluctance on the part of administrators to conduct a workload analysis that can potentially highlight the need for more funding and/or additional SLPs.
- Workload analyses might expose inadequate staffing issues when budgets are so restricted that districts are unlikely to be able to fund additional positions.
Resistance to change

• Administrators might not appreciate the full range of responsibilities of the SLP that might necessitate an alternative approach like workload.

• Administrators may prefer a traditional model of teacher/student ratios.

• There may be resistance to specific models of service delivery; for example, some general education staff and principals might voice concern about the 3:1 model in which the SLP has a week to "do paperwork and not see students."
Benefits of a Utilizing a Workload Approach

• School districts have reported that reasonable workloads increase retention and recruitment of SLPs.
• The ability to provide a Free Appropriate Public Education (FAPE) is strengthened within the workload framework, as it identifies and accommodates the wide range of both direct and indirect services necessary to support students with IEPs.
• A workload approach provides support for the SLP to deliver services using a wide range of dynamic service delivery options to support students and respond to their changing needs (Cirrin et al., 2010).
Benefits of a Utilizing a Workload Approach

- Workload scheduling supports collaboration and consultation efforts, which allows for extended support of speech-language and academic goals by all team members.

- Workload scheduling facilitates individualization of services, thus providing amount of services driven by the student's ever changing individual needs.

- Fewer services are cancelled due to meetings, supervision/trainings, etc.
Benefits of Utilizing a Workload Approach

• Each child added to an SLP caseload may add up to 10 meetings and 52 forms (ASHA, 2002) which results in less time for direct intervention and collaboration with teachers and families.

• It is easier for districts to recruit and retain qualified SLPs and audiologists when caseloads and associated workload responsibilities are manageable.

• Increased IDEA funding to states and local districts could be used to offset the costs associated with improved caseload/workload as could Medicaid payments for services provided by ASHA-certified SLPs and audiologists.
To help children with speech, language and hearing disorders achieve academic success, Speech-Language Pathologists and Audiologists providing services need manageable caseloads.

• High caseloads mean that children receive less service and progress more slowly.
• Reducing caseload and associated workload requirements enables SLPs to provide quality services.
Terrebonne Parish School System, Houma, Louisiana

Terrebonne Parish School District in Louisiana has a ten year history of using workload analysis to assign caseloads for SLPs. In the workload analysis, all duties assigned to each SLP are assigned a value based on the estimated average number of hours per week that is needed to complete the duties assigned. The SLPs report workload helps them to increase their involvement in RTI activities. Due to this involvement in RTI, the SLPs have a reduced number of students on IEPs, but have increased duties to general education (Tier 1) and at risk students (Tier 2). These duties are difficult to count in a caseload approach, but have been easily documented on the workload analysis in place. Even though the caseload (i.e., number of students with IEPs) has decreased they have maintained staffing level of SLPs to maintain and expand their engagement with RTI.
"In an increasingly complex world, sometimes old questions require new answers."
Resources

• MDE Procedures Manuals - http://www.mde.k12.ms.us/OSE/PP
• Documentation resources (screening, IEP, therapy logs, etc.) https://jenniferschultz.wikispaces.com/Documentation+Resources
• American Speech-Language-Hearing Association - http://www.asha.org/
• 100 Links to speech-language blogs/websites -
  http://mommyspeechtherapy.com/?page_id=44
• SLP Test Comparison -
• Educational Benefit review -
• Workload Calculator and Instructions -
  http://education.ohio.gov/Topics/Special-Education/Service-Provider-Ratio-and-Workload-Calculation
Training Resources

- Menu of Services - https://districtaccess.mde.k12.ms.us/curriculumandInstruction/Professional%20Development/FY17%20Menu%20of%20Services%20for%20Professional%20Development.pdf
- MDE regional workshops - http://nmec.msresaservicests.com/all-workshops/categories-mde
• http://www.asha.org/uploadedFiles/ASHA/Practice_Portal/Professional_Issues/Caseload_and_Workload/2015-2016-State-Caseload-Sizes-for-School-SLPs.pdf#search=%22caseload%22
• MS Speech and Hearing Association - http://www.mshausa.org/index.php
• Case Study: Terrebonne Parish School System, Houma, Louisiana; Contact: Stephen Mire, 985-851-1550, smire@tpsd.org.
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