New York State Education Department Guidelines for Telepractice in Speech-Language Pathology in Schools

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Telepractice is a remote service delivery model that utilizes telecommunications technology (i.e., video with audio) as the medium for the provision of speech and language therapy services. School districts have responsibility to ensure that a free appropriate public education (FAPE) is provided for all eligible students with disabilities. The use of telepractice in the speech-language profession can be a means for schools to meet the related services needs of students with disabilities when traditional in-person speech and language service delivery methods are not feasible (e.g., in areas of the state with personnel shortages of speech and language therapists).

Use of telepractice speech and language services does not negate a district's obligation to maintain the appropriate and necessary staff needed to deliver the required services in students' individualized education programs (IEPs). Specifically, the use of telepractice cannot replace a school district's teachers of speech and language disabilities. Rather it should be used as a tool to assist districts to provide a student with speech and language related services that may not otherwise be provided. For guidance on when a school district may contract with a non-profit entity to provide related services, please review the New York State Education Department's (NYSED) guidance and Question and Answer document on contracts for instruction. These documents can be found at http://www.p12.nysed.gov/resources/contractsforinstruction/home.html.

Telepractice speech and language services may be an appropriate method of service delivery for some students based on their individual needs. To ensure the appropriate recommendations are made for students with disabilities and that speech and language services provided through telepractice are as effective as services provided in-person, NYSED has established the following guidelines relating to the use of speech-language telepractice:

- School districts should consider telepractice for students with disabilities only when traditional in-person speech and language service delivery methods are not feasible.

- Telepractice services must be designed to meet a student's individual needs, and the quality, nature and scope of the speech and language services being delivered via telepractice must adhere to the same standards that would apply to those services delivered in-person.

- Telepractice services for students with disabilities with an IEP recommendation for speech and language services must be delivered by an individual who is appropriately certified or licensed to practice in New York State (NYS)[1].

- Telepractitioners must adhere to the same laws, rules and regulations governing speech-language pathology practice in NYS, uphold the same standards of care and competencies, and all the practice and ethical considerations when engaging in telepractice as they do when providing in-person speech and language services.

- Telepractitioners must have the knowledge and skills to competently deliver speech and language services via technology by virtue of education, training and experience.

- The Committee on Special Education (CSE) must consider the unique needs of a student and determine on a case-by-case basis if telepractice will be used as a method of service delivery in providing a free appropriate public education to the student. When determining a student's candidacy for telepractice services, the CSE should consider the following (Adapted from American Speech and Hearing Association Telepractice Professional Issues):
  - Age;
  - Physical/sensory characteristics;
  - Cognitive, behavioral, and/or motivational characteristics, including the willingness of student and parent to receive services via telepractice; and
  - Communication characteristics of the student.

- The CSE must determine on an individual basis if a student requires in-person, speech and language services in addition to telepractice services.

- If recommended by the CSE, the IEP must identify the frequency, duration and location of speech and language services; specify "telepractice" as the service delivery method; and indicate whether services will be provided individually or in a group and if student is to receive in-person services in addition to telepractice services.

- When telepractice services are being considered for a particular student, the CSE must provide information on this service delivery model to parents. The

[1] For more information see: http://www.op.nysed.gov/prof/slpa/speechlic.htm

CSE should review this information for discussion with parents at the student's CSE meeting.

- School districts must ensure that procedures exist to involve the telepractitioner in the student's educational programming outside of telepractice sessions with the student. The district must:
  - Provide the telepractitioner with the opportunity to participate in CSE meetings;
  - Notify the telepractitioner of progress reporting requirements and ensure that the student's progress in telepractice is documented in accordance with district policy; and
  - Facilitate collaboration with students' classroom teachers, other special education providers, teachers and parents to ensure FAPE.

- Districts must ensure that the provider of speech and language services is in full compliance with confidentiality and privacy requirements, particularly in the use of web-based telepractice systems, consistent with Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Family Educational Rights and Privacy Act of 1974 (FERPA) (e.g., the video conference system, including encryption technology, must provide for the appropriate security and providers must protect the privacy of student records and information).

- Telepractice services for students with disabilities should be limited to synchronous[2] speech and language services (conducted using interactive audio and video connection in real time with student(s)).

- Telepractice may only be used for the provision of direct speech and language services. Initial evaluations and reevaluations may not be conducted via telepractice with students in NYS schools.

- Telepractice in schools must include a video component.

- Districts must ensure the use of appropriate equipment (hardware, software and peripheral items) and connectivity that is able to address the unique needs of each student. Audio and video quality should be sufficient to deliver speech and language services that are equivalent to those provided in-person.

- A school staff member must accompany and supervise students during speech and language telepractice sessions. Staff accompanying and supervising students should be appropriately trained to provide assistance needed for telepractice sessions (operating and trouble-shooting equipment, setting up therapy materials, behavior management, etc.).

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[2] Asynchronous services involve the capturing and forwarding of images and data for interpretation by a professional (e.g., transmission of voice clips, testing results, or outcomes of independent student practice).

- Room location, design, lighting, and other environmental factors must be optimized to ensure the quality of video and audio data transmission and minimize as much as possible, ambient noise and visual distractions. Districts should consider environmental factors such as safety, privacy, lighting, seating and equipment when determining whether telepractice should be used in the provision of speech and language services.

- The effectiveness of speech and language services delivered via telepractice should be regularly evaluated (e.g., satisfaction surveys, monitoring the student's progress on IEP goals and objectives).

For guidance from Office of Professions, see http://www.op.nysed.gov/prof/slpa/speechguidetelepractice.htm.

For guidance from the American Speech-Language-Hearing Association, see http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589934956&section=Key_Issues.