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Speech-Language Pathologists' Experiences with Accessibility and Accommodations for Students with Disabilities

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Executive Summary

Speech-language pathologists (SLPs) serve students with a speech-language impairment (SLI), including other co-existing disabilities. SLI is the second-highest disability incidence, after specific learning disability (SLD) among students with disabilities in the United States (U.S. Department of Education, 2019). Further, English learners with disabilities most often are identified as having SLD or SLI (Office of English Language Acquisition, 2021). These characteristics of students with disabilities highlight the need for language development expertise.

Federal laws require that state content assessments used for accountability are accessible to students with disabilities, including English learners with disabilities. The Individuals with Disabilities Education Act (IDEA) stipulates that the Individualized Education Program (IEP) serves as the primary mechanism for the IEP team to make accessibility and accommodations decisions for students with disabilities, including English learners with disabilities, to access the grade-level content on which they are assessed.

As a member of a student's IEP team, SLPs need to be knowledgeable about accessibility features and accommodations that can provide students meaningful access to instruction and assessments (Lazarus, Goldstone, Wheeler, et al., 2021). This need is reinforced by the American Speech-Language-Hearing Association (ASHA, n.d.) and the Joint Committee on Testing Practices (2004).

Little is known about the academic training and experiences of SLPs related to making accessibility and accommodations decisions, including their role as members of IEP teams. This study addressed these topics by conducting a survey of SLPs. Thirty-one school-based SLPs from 19 states participated in an online survey about their training and experiences with accessibility and accommodations for K-12 students with disabilities. Survey results included factors that influence how SLPs make decisions, how SLPs participate in the IEP team, and the professional development needs SLPs may have related to accessibility and accommodations.

Factors influencing decisions. SLPs indicated that making decisions about accessibility features and accommodations was a common responsibility within their practice. However, the majority of SLPs indicated they lacked sufficient knowledge and confidence to make accessibility and accommodations decisions for their students. Most SLPs reported not receiving training on accessibility features and accommodations during their SLP academic program. Instead, it was through their practice, not their educational program, that they had acquired knowledge about accessibility and accommodations. Consequently, after completing their program, SLPs were unprepared to make meaningful decisions for supports for their students to access class content and assessments.

IEP decision-making process. This study found that SLPs thought their input on accessibility and accommodations was not always valued by all members of IEP teams. They believed that other

IEP members, particularly general education teachers and sometimes parents, lacked awareness, understanding, and willingness to provide accessibility and accommodations to students. SLPs reported that decisions about accessibility and accommodations were not always jointly made at IEP meetings. Therefore, supports were not necessarily considered or offered to students in the classroom and state assessments.

Professional development needs. Almost all SLPs reported they wanted more professional development on accessibility and accommodations, particularly guidelines or support from their school administrators. However, close to half of the SLPs had not participated in professional development in recent years or had never participated in professional development. Many SLPs relied on their district, school, and state for professional development. SLPs typically turned to their special education department and test coordinators as resources for information on accessibility and accommodations decisions.

Conclusions and Recommendations

When SLPs know about accessibility and accommodations, they can confidently participate in the decision-making process, help ensure students get appropriate accessibility and accommodations, and influence making accessibility and accommodations decisions. SLPs add value to the IEP team with their training and expertise on communication systems, specifically language, which is foundational for students to access class content and assessments.

To support SLPs in making decisions about accessibility features and accommodations, school districts, assessment staff, special education departments, and IEP teams may want to consider how they can include SLPs in professional development and share information on accessibility and accommodations. Ways for local providers to consider SLPs' perspectives and encourage their participation in making decisions about accessibility and accommodations is to:

- Include SLPs in professional development on assessment accessibility features and accommodations.
- Include SLPs on the IEP team when decisions are made about accessibility features and accommodations.
- Require SLPs to review state, district, and school policies and guidelines on types of accessibility features and accommodations, and criteria for providing them during assessments.
- Ensure that district and school administrators understand the role of SLPs when decisions are made about needed accessibility features and accommodations.

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Background

The home page of the American Speech-Language-Hearing Association (asha.org) describes its role as: "Making effective communication a human right, accessible, and achievable for all." Accessibility includes the provision of various accessibility features and accommodations both for instruction and educational assessments for students with disabilities and English learners with disabilities. Accessibility (as well as accessibility supports or accessibility features) refers to supports that are available to all students for whom an adult or team of adults has indicated a need for them. Accommodations refer to supports provided only to students with disabilities and English learners for content assessments, and only to English learners with disabilities for English language proficiency assessments (see Lazarus, Goldstone, & Thurlow, 2021) for these definitions.

Speech-language pathologists (SLPs) serve students identified with a speech-language impairment (SLI), including other co-existing disabilities. SLI is the second-highest disability incidence, after specific learning disability (SLD) among students with disabilities in the United States (U.S. Department of Education, 2019). Further, English learners with disabilities most often are identified as having SLD or SLI (Office of English Language Acquisition, 2021). These characteristics of students with disabilities highlight the need for language development expertise.

As a member of a student's Individualized Education Program (IEP) team, SLPs need to be knowledgeable about accessibility features and accommodations that can provide students meaningful access to instruction and assessments (Lazarus, Goldstone, Wheeler, et al., 2021). SLPs have the language expertise to address communication access supports for students with disabilities. The responsibilities of SLPs include "...to document all accommodations and modifications made during the assessment process in any reporting" (ASHA, n.d.). In addition, ASHA's policy on fair testing practices (Joint Committee on Testing Practices, 2004) expects SLPs to:

A-8. Select tests with appropriately modified forms or administration procedures for test-takers with disabilities who need special accommodations.

B-2 Provide and document appropriate procedures for test-takers with disabilities who need special accommodations or those with diverse linguistic backgrounds. Some accommodations may be required by law or regulation.

In contrast to ASHA's policy, the high incidence of students identified with SLI, and the need to support students' access to high-stakes assessments, the research literature on accommodations is sparse in the SLP field. The few existing studies focus primarily on the use of different types of accommodations such as computer-based language assessment software (Haaf et al., 1999; Srivastava & Gray, 2012), microphone technologies (Picou et al., 2020), and audio recordings (Kim, 2016). The literature is virtually absent on SLPs' experience and their role in making ac-

cessibility and accommodations decisions for students. One study did indicate that SLPs need to advocate for accommodations for deaf/hard of hearing students in the classroom (Johnson, 2012).

The Every Student Succeeds Act (ESSA) and the Individuals with Disabilities Education Act (IDEA) require that state content assessments used for accountability (e.g., reading, math, science) are accessible to students with disabilities. Despite the participation of students with disabilities in assessments, a persistent gap exists between students without disabilities and students with disabilities in meeting academic achievement standards. IDEA stipulates that the IEP serves as the primary mechanism for the IEP team to make accessibility and accommodations decisions for students with disabilities, including English learners with disabilities, to access the grade-level content on which they are assessed. SLPs commonly participate as a member of the IEP team, yet very little is known about their experience in making accessibility and accommodations decisions for students with disabilities.

The study presented in this report aimed to address the gap between policy and practice for SLPs. We asked the following research questions:

- 1. What factors influence how SLPs make accessibility and accommodations decisions for students with disabilities, including English learners with disabilities?
- 2. How do SLPs participate in the IEP team classroom and assessment accessibility and accommodations decision-making process for students with disabilities, including English learners with disabilities?
- 3. Do SLPs have professional development needs about accessibility and accommodations?

Procedure-

The study was conducted in spring 2021. A questionnaire was developed using the University of Minnesota's Qualtrics survey software system; the questionnaire was pilot tested and implemented in March 2021 to establish the questionnaire's content validity and identify needed changes. Seven school-based SLPs from the professional network of Minnesota's ASHA chapter, the Minnesota Speech-Language-Hearing Association (MNSHA), were recruited to test the survey instrument. Feedback from the SLPs was used to make changes and produce a final questionnaire. The final survey had 41 questions in eight topic areas (practice demographics, caseload demographics, knowledge, beliefs, decisions, implementation, professional development, SLP demographics). It was estimated that participants could complete the survey in approximately 15 minutes.

A purposive sample of school-based SLPs in the United States was used for the study. ASHA's school-based SLP listserv was used to recruit SLP participants who served K-12 students with disabilities. An IRB-approved initial email invitation was sent to the listserv on March 31, 2021

(see Appendix A). It included a web link to the survey. Before starting the survey, those who accepted the invitation signed an electronic consent form (see Appendix B). Survey questions are provided in Appendix C.

In early April, the email invitation was resent to the listserv to recruit additional SLPs. All participants were asked to complete the survey by April 30, 2021.

The survey garnered responses from 31 participants. All participants were assigned a number to preserve their anonymity in the study and any future publications. The total number of active listserv participants was not available, so a response rate could not be calculated. Demographic data did support the general representativeness of the sample in terms of SLP demographics such as location, grades served, and years of experience, as well as their caseload demographics.

Results.

SLP demographics. SLPs provided information about themselves, their experiences, and practice settings (see Table 1). The years of SLPs' professional experience spanned from four years to more than 30 years. The number of SLPs with more than 20 years was comparable to the number with less than 20 years of experience. All SLPs had a master's degree, which is required for ASHA SLP certification and practice. SLP participants were from 19 different states in which slightly more than half worked in a suburban setting and the remaining in urban and rural school settings. More participants practiced in elementary schools than in middle and high schools, though overlap at multiple grade levels was common. SLPs who identified a specialty area (n = 13) was almost equal in number to those who did not. About one-fifth of SLPs were fluent in an additional language other than English (see Appendix D).

Table 1. Demographics of Responding SLPs (n=31)

SLP Characteristics	Percentage	Settings	Percentage
Years of Experience		School Location	
2-5 years	9.7	Rural	16.1
6-9 years	16.1	Suburban	54.8
10-19 years	22.6	Urban	29.0
20-29 years	32.3		
30+ years	19.4	School Level*	
Highest Degree		Elementary (K-2)	64.5
Masters	90.3	Elementary (3-6)	45.0
Doctorate	3.2	Secondary (7-12)	64.5
No Response	6.5		
Fluent in Multiple Languages -Yes	19.4	Work in Specialty Area - Yes	42.0

^{*} Respondents could indicate more than one school level.

Student caseload. The numbers of students with SLI on SLPs' caseloads ranged from less than 25 to more than 125 (but less than 150). Only one SLP indicated a caseload of more than 125. For most SLPs (n = 19) their SLI caseload varied from 25 to 50 students; next most often (n = 7) were caseloads of between 50 and 75 students with SLI.

SLPs' caseloads were not exclusive to students with only SLI. They commonly included other disability categories (see Table 2). Most respondents indicated that up to 25 percent of their caseload was students who had a specific disability label that was not SLI (e.g., autism, deaf/hard of hearing, etc.). Students with an SLD or developmental delay label generally comprised more than 75 percent but less than 100 percent of the caseload for two SLPs. Students with deafness, deaf-blindness, orthopedic impairment, traumatic brain injury, and visual impairment, including blindness, were the least likely to be on caseloads for more than half of the SLPs. The number of English learners was generally less than 25 percent of the caseload for slightly more than half of the SLPs.

Table 2. Student Disability Category Caseloads of Responding SLPs (n = 31)

Disability Category	Percentage on Caseload					
	0%	>0% - ≤25%	>25% -≤50%	>50% - ≤75%	>75% - <100%	100%
		Number	of SLPs Who	Gave Specified	l Response	
Autism	0	19	9	3	0	0
Deaf-blindness	21	10	0	0	0	0
Deafness	18	13	0	0	0	0
Developmental Delay	12	9	6	2	1	0
Emotional Disturbance	10	19	2	0	0	0
Hearing Impairment	9	21	1	0	0	0
Intellectual Disability	2	20	8	1	0	0
Multiple Disabilities	9	15	7	1	0	0
Orthopedic Impairment	18	12	1	0	0	0
Other Health Impairment	3	25	3	0	0	0
Specific Learning Disability	0	15	12	3	1	0
Traumatic Brain Injury	21	10	0	0	0	0
Visual Impairment Including Blindness	19	12	0	0	0	0

Knowledge of accessibility supports and accommodations. When asked about their understanding of accessibility and accommodations, the majority of responding SLPs (n = 22) indicated they had *some knowledge* about accessibility and accommodations (see Figure 1). Other SLPs indicated they were *very knowledgeable* (n = 6) or had *little knowledge* (n = 3) of accessibility and accommodations.

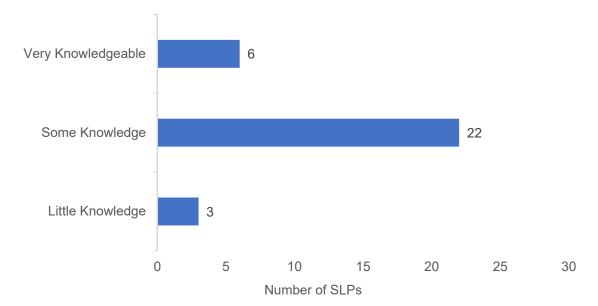


Figure 1. Self-Rated Knowledge About Accessibility and Accommodations (n = 31)

SLPs could select more than one source of their knowledge about accessibility and accommodations in response to a question about where they acquired knowledge. Almost all the responding SLPs (n = 30) indicated they had acquired knowledge from their *professional work experience* after completing their educational degree program. Fewer SLPs indicated they acquired their knowledge through their *academic degree program* (n = 10) or from *other* (n = 7) means.

Training to implement accessibility and accommodations. Responding SLPs compared their experience with accessibility and accommodations during and after their SLP academic program. Less than one-third (n = 8) of the SLPs reported *yes* they had implemented accessibility and accommodations while training in their academic degree program (see Figure 2). Slightly more than two-thirds of responding SLPs reported either *no* (n = 19) or *not sure* (n = 6) that they implemented accessibility and accommodations while training in their academic program.

Responding SLPs also reported that they were *little prepared* (n = 20) after completing their SLP academic program to implement accessibility and accommodations. Only some SLPs indicated they were *somewhat prepared* (n = 9), and even fewer indicated they were *well prepared* (n = 2).

Relevancy of accessibility and accommodations. Survey respondents were asked how relevant accessibility and accommodations were for students with disabilities. Almost all responding SLPs indicated they believed that accessibility features and accommodations for students with disabilities were *most relevant* (n = 27) (see Figure 3). None of the SLPs indicated that these supports were *not relevant*.

Figure 2. Experience of Accessibility and Accommodations During an Academic SLP Program (n = 31)

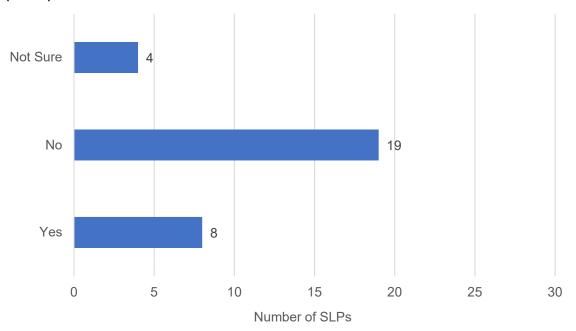
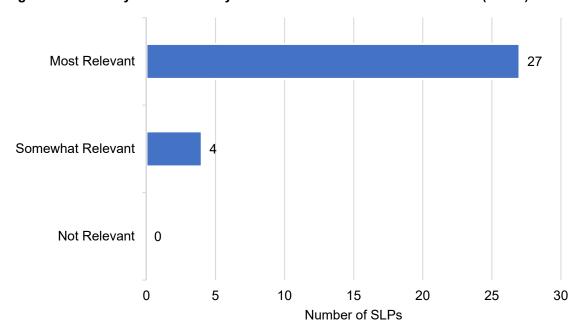


Figure 3. Relevancy of Accessibility Features for Students with Disabilities (n = 31)



Consideration of SLPs' input as a resource. All responding SLPs believed that in their practice they either always (n = 15) or sometimes (n = 16) should be viewed as a resource to consult on accessibility features and accommodations for students with disabilities (see Figure 4). None thought they should never be considered a resource.

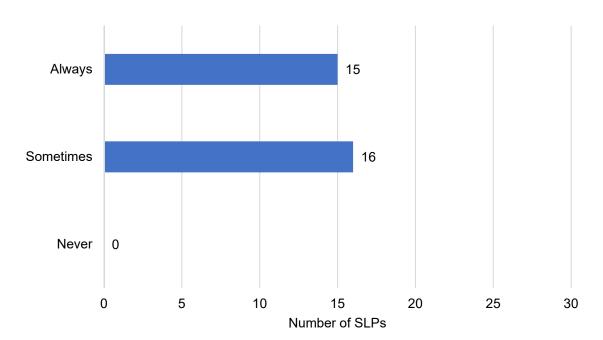


Figure 4. Consideration of SLPs as a Resource (n = 31)

In contrast to their opinions about whether they should be considered a resource, the responding SLPs reported they were asked by others to make accessibility and accommodations recommendations with varied frequency (see Figure 5). Most indicated that they were asked *about half the time* (n = 14) to make recommendations for accessibility features and accommodations. Some indicated that they were asked either *most of the time* (n = 7) or *always* (n = 1). Fewer SLPs indicated they were *rarely* (n = 8) or *never* (n = 1) asked to make recommendations.

Decision making in practice. Decisions about accessibility and accommodations were a common responsibility in SLPs' practice. Nearly all of the responding SLPs either strongly agreed (n = 15) or agreed (n = 11) that making accessibility and accommodations decisions were within the scope of their professional practice (see Figure 6). None *disagreed*. Only a few *strongly disagreed* (n = 5) that these types of decisions were not a common responsibility of SLPs.

Figure 5. Frequency of Recommendations Asked From SLPs (n = 31)

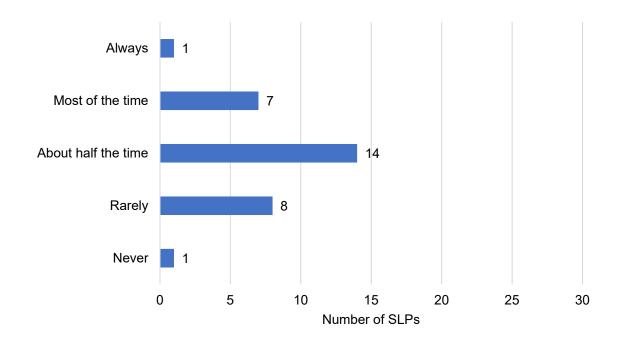
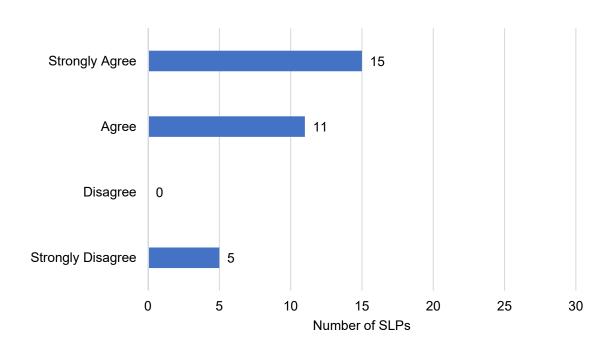


Figure 6. Extent of Accessibility Features and Accommodations Decision Making in Professional Practice (n = 31)



Only slightly more than one-third (n = 12) of responding SLPs were *very* confident in making these decisions (see Figure 7). The remaining two-thirds of SLPs had either *somewhat* (n = 14) or *little* (n = 5) confidence to make decisions for students.

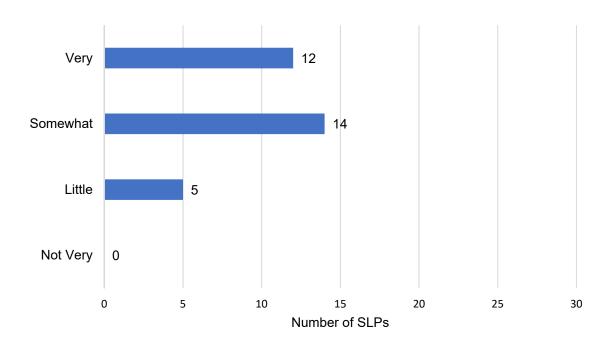


Figure 7. Extent of Confidence for Accessibility Features and Accommodations Decisions

IEP decisions. When asked about the extent to which decisions about **classroom** accessibility and accommodations were made at the IEP team meeting, nearly all responding SLPs (n = 26) indicated that the decisions were made by the IEP team (see Figure 8). Only a small number (n = 2) indicated that decisions about classroom accessibility and accommodations were *sometimes* made by the IEP team (n = 3) or rarely made by the IEP team (n = 2)

The extent to which decisions about **state assessment** accessibility and accommodations were *always* (n = 17) or *most of the time* (n = 12) made by the IEP team (see Figure 9) was similar to the frequency of these responses for classroom accessibility and accommodations decisions. Fewer responding SLPs indicated that state assessment accessibility and accommodations decisions were *sometimes* (n = 1) or *rarely* (n = 1) made by the IEP team.

Figure 8. IEP Classroom Accessibility Supports and Accommodations Decisions (n = 31)

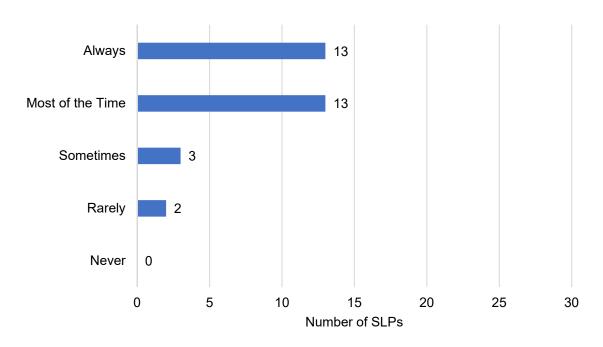
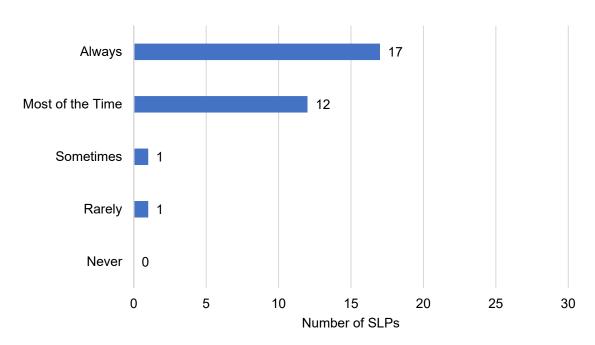


Figure 9. IEP State Assessment Accessibility and Accommodations Decisions (n = 31)



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Types of assessment accessibility and accommodations decisions. Responding SLPs indicated their accessibility and accommodations decisions varied with the kind of assessment. More SLPs reported they made decisions for all types of assessments between less than or equal to 25 percent of the time (see Table 3). SLPs indicated they made the least amount of decisions for classroom assessments compared to all the other types of assessments. Specifically, the greatest number of SLPs made zero percent decisions for the English language proficiency (n = 18) and alternate English language proficiency (n = 18) assessments. SLPs also made the greatest number of zero percent decisions for the state social, science, and math assessments compared to the state reading/English language arts, district, and diagnostic assessments.

Table 3. Accessibility and Accommodations Decisions for Different Assessments (n = 31)

	Percentage of Accessibility and Accommodation Decisions						
Assessment Type	0%	>0% - ≤25%	>25% - ≤50%	>50% - ≤75%	>75% - <100%	100%	
	Number of SLPs Who Gave Specified Response						
Diagnostic	11	10	4	1	1	1	
Classroom	2	8	8	4	5	4	
District	8	10	5	5	1	1	
State Reading/English Language Arts	9	12	4	4	2	2	
State Math	12	7	5	2	1	1	
State Science	13	11	3	2	1	1	
State Social Studies	14	12	3	1	1	0	
Alternate State Content Assessment	11	10	0	1	2	1	
State English Lan- guage Proficiency	18	10	2	1	0	0	
Alternate State English Language Proficiency	18	11	0	2	0	0	

Resources to inform decisions. Responding SLPs used varied resources to inform their decisions on accessibility and accommodations for students (Figure 10). More than two-thirds of the SLPs (n = 25) indicated the special education program/department was their primary resource. One-third of the SLPs indicated ASHA (n = 7), other (n = 6), or no (n = 1) resources were used. Approximately half of the SLPs identified their state department of education website (n = 16), school (n = 15), and test coordinator (n = 11) as resources.

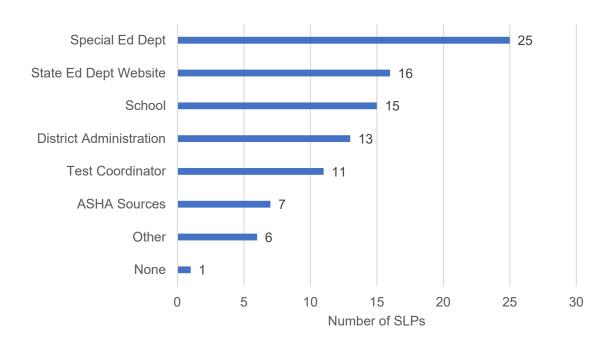


Figure 10. Resources to Inform Accessibility and Accommodations Decisions (n = 31)

Challenges in making decisions. Slightly more than half of the SLPs (n = 17) responded to an open-ended question on the challenges they have had making accessibility and accommodations decisions. Two themes emerged from their responses. One theme (n = 11) was not having the knowledge that included what current accessibility and accommodations were available, which ones were used with students in the classroom, the purpose of matching individual students' needs related to their academic goals, and state policy criteria. A second theme (n = 8) was that SLPs perceived that the IEP team did not value or approve their input, decisions were made solely by the special education staff, and some general education teachers still viewed accommodations as "suggestions" rather than required practices and that providing them was "cheating" for students.

Implementation of supports. Responding SLPs reported on factors associated with the implementation of accessibility and accommodations. One aspect of implementation was the confidence they had in implementing accessibility and accommodations. Close to only one-third of the SLPs (n = 9) were *very* confident about their implementation (see Figure 11). Two-thirds of the SLPs were either *somewhat* confident (n = 17) or had *little* confidence (n = 5).

Responding SLPs also indicated the extent to which they implemented alternative and augmentative communication (AAC) systems for students with disabilities to access academic content (see Figure 12). Most SLPs (n = 21) implemented AAC for students less than 25 percent of the time in their practice.

Figure 11. SLP Confidence in Implementing Accessibility and Accommodations (n = 31)

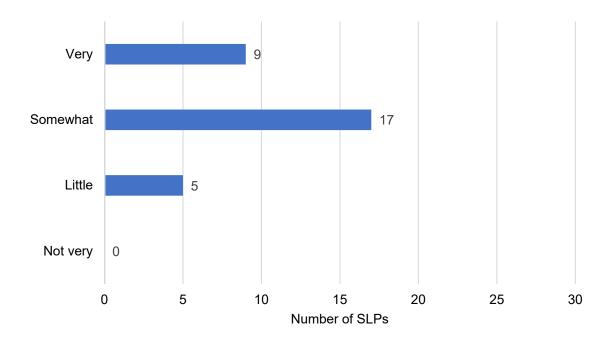
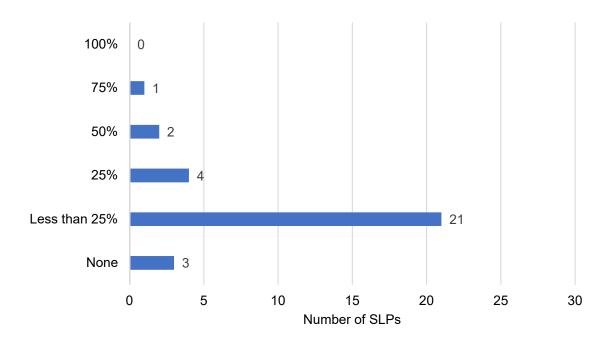


Figure 12. Extent to Which SLPs Implement Augmentative and Alternative Communication Systems for Students (n = 31)



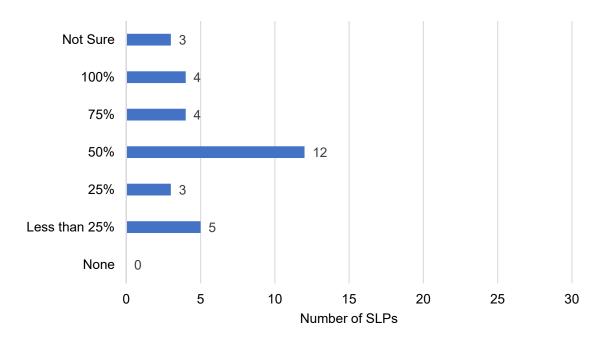
Responding SLPs also reported on the extent to which they implemented accessibility features and accommodations for students with disabilities during various activities (see Table 4). More SLPs reported they made decisions for all the activities 25 percent or less of the time (n = 21). More SLPs implemented supports 100 percent of the time for diagnostic evaluations (n = 6) and therapy (n = 8) than for the classroom (n = 2) and for assessments (n = 3).

Table 4. SLPs' Implementation of Accessibility and Accommodations for Different Activities

	Percentage of Accessibility and Accommodation Decisions					
Activity	0%	>0% - ≤25%	>25% -≤50%	>50% - ≤75%	>75% - ≤99%	100%
	Number of SLPs Who Gave Specified Response					
Diagnostic Evaluations	5	15	2	1	2	6
Therapy	0	8	5	3	7	8
Classroom	5	12	5	5	2	2
Assessments	8	11	4	2	3	3
Other	21	10	0	0	0	0

Student uses of supports. SLPs reported on aspects of student uses of supports. For instance, the largest number of SLPs (n = 12) indicated that 50 percent of their caseload students used accessibility and accommodations in assessments (see Figure 13).

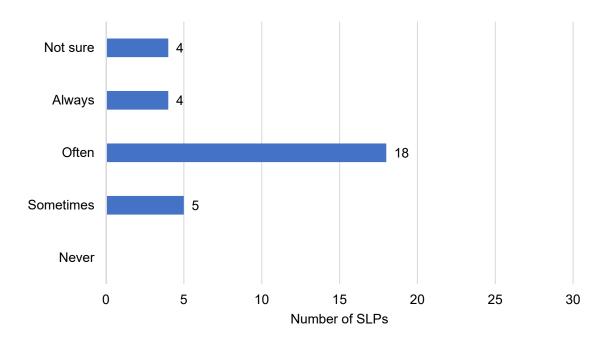
Figure 13. Percentage of Students on SLPs' Caseloads Who Use Accessibility and Accommodations in Assessments (n = 31)



When asked to compare student use of accessibility and accommodations for different purposes, more than half of the responding SLPs (n = 18) indicated that students used the same ones in the classroom and for state assessments. Fewer SLPs reported students used these supports more in the classroom (n = 7), for state assessments (n = 1), or they were *not sure* (n = 5).

Also, the greatest number of SLPs' (18) students *often* used the same accessibility and accommodations in the classroom and state assessments. Only a few SLPs' students *always* (4) used these same supports (see Figure 14).

Figure 14. Students' Use of the Same Types of Accessibility Features and Accommodations in the Classroom and for State Assessments (n = 31)



Challenges implementing. Approximately half of the responding SLPs (n = 14) responded to an open-ended question indicating that they had challenges implementing accessibility features and accommodations for students. They described the challenges as involving primarily general education teachers' and parents' lack of knowledge, understanding, and willingness to implement the supports. Other SLPs referred to the IEP team's lack of awareness to implement documented accommodations, lack of agreement on recommended accommodations and which students to test without needed supports. They also mentioned the challenge of not having their accessibility and accommodations recommendations implemented. A couple of SLPs pointed to the difficulty classroom staff have implementing AAC systems or specific accommodations such as speech-to-text.

SLPs support needs. SLPs identified specific types of supports they needed about accessibility supports and accommodations. An equal number of SLPs responded they wanted guidelines (n = 24) or professional development (n = 24) (see Figure 15). Almost half of the SLPs wanted support from their school administration (n = 14). Fewer wanted *other* (n = 3) specific supports, and only one SLP indicated *none* for support needs.

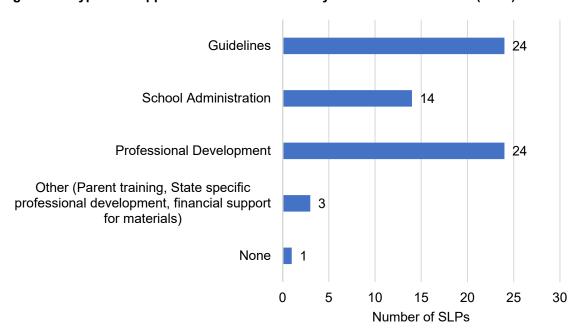


Figure 15. Types of Support Needs for Accessibility and Accommodations (n=31)

When asked about their most recent participation in professional development on accessibility and accommodations, more than half of the SLPs (n = 19) indicated that they participated in professional development, most recently from *one to two years ago* (see Figure 16). The remaining SLPs were split between *three to five years ago* (n = 5), *more than five years ago* (n = 2), and *never* (n = 5).

When asked about the professional development provider, more than two-thirds of the responding SLPs participated in professional development from the *district* (n = 12), *school* (n = 7), or *state* (n = 5) providers (see Figure 17). Approximately half of the SLPs obtained professional development from outside providers, either ASHA (n = 3) or another source (n = 11). The fewest number of SLPs (n = 3) reported no professional development.

Figure 16. Participation in Professional Development (n = 31)

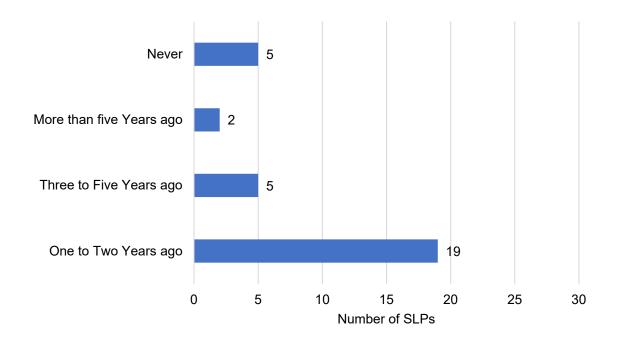
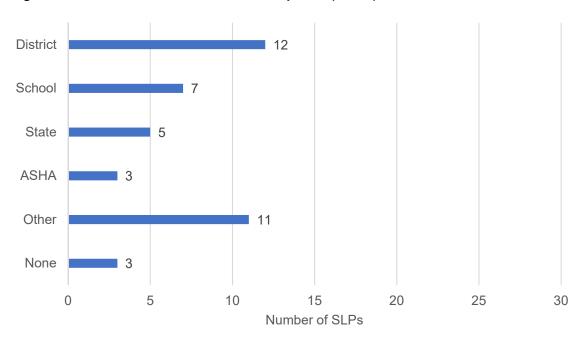


Figure 17. Providers of Professional Development (n = 31)



The majority of SLPs (n = 25) responded they would be interested in receiving professional development about accessibility and accommodation. However, only about half of the SLPs indicated they *definitely* (n = 5) or *very* likely (n = 9) would pursue professional development on accessibility features and accommodations (see Figure 18). The other half of SLPs indicated they *maybe* (n = 16) would seek professional growth. Only one SLP indicated *never* being likely to pursue professional development.

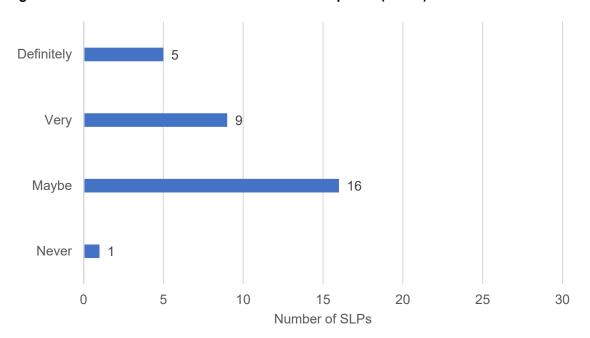


Figure 18. Likelihood to Pursue Professional Development (n = 31)

Summary |

SLPs indicated decisions and implementation for classroom and various assessment accessibility and accommodations were a common responsibility within their scope of practice. However, most SLPs reported they had not received training about accessibility and accommodations during their academic program and were unprepared to make decisions and implement these supports once they completed their program and began their practice. Instead, SLPs acquired their knowledge and experience through their professional practice. SLPs believed they should be considered a resource to provide input, and accessibility and accommodations were relevant for students. Still, the majority of SLPs reported they only had some knowledge and lacked the confidence to make decisions and implement these supports for their students. Furthermore, SLPs' decisions were uneven across the various types of assessments. For example, they made fewer state assessments decisions than class assessments decisions.

SLPs reported decision making and implementation challenges of accessibility and accommodations that primarily pointed to the IEP process. SLPs thought their input was not always

considered or valued by other IEP team members. Another perception was that mainly general education staff and some parents were not aware of, understood, or willing to provide accessibility and accommodations to students. Decisions about accessibility and accommodations were not always made at IEP meetings; therefore, students' supports were not consistently considered.

Most of the SLPs declared they were interested in professional development and wanted guidelines or support from their school administrators. Even though most SLPs indicated they were not confidently knowledgeable about accessibility and accommodations, they would not necessarily pursue additional training. Close to half of the SLPs had not participated in professional development in recent years or never. Many relied on their district, school, and state for professional development. In particular, SLPs typically turned to their special education program/department and test coordinators as resources for information on accessibility and accommodations decisions.

Implications. The lack of training about accessibility and accommodations in SLPs' academic programs leaves SLPs unprepared when they first enter the workforce to provide students with communication, specifically language, access to content instruction and assessments. In addition, SLPs serve students with SLI who commonly have other co-existing disabilities; therefore, SLPs need to understand the purpose and varied types of accessibility features and accommodations. All IEP team members do not understand and have the resources to make informed decisions. As a result, students are not receiving full consideration of possible needs for support to access both classroom content and state assessments.

Conclusions |

Federal laws require accommodations be provided for students with disabilities who need them. Given the high incidence of SLI and the fact that SLI is often present with other co-existing disabilities in students, SLPs need to be engaged in making accessibility and accommodations decisions for their students. When SLPs know about accessibility and accommodations, they can confidently participate in the decision-making process, help ensure that students get appropriate accessibility and accommodations, and influence accessibility and accommodations decision making. For example, SLPs hold expertise in understanding connecting language as foundational for students to access curriculum content and assessments. This is typically not an area of expertise for most IEP team members. Moreover, an SLP's role extends beyond language to making decisions about and the use of communication systems, such as AAC, for students who need them. A common perspective is that accommodations considerations are solely under the purview of special education staff. A broader perspective is necessary for the inclusivity of SLPs and to ensure that SLPs are viewed as equally relevant IEP team members and their perspectives and input are valued for making accessibility and accommodations decisions for students.

Recommendations. To support SLPs in making accessibility and accommodations decisions, school districts, assessment staff, special education department, and IEP teams may want to consider how they can include SLPs in professional development and share information on accessibility and accommodations. Strategies for including SLPs' perspectives and encourage their participation in making decisions about accessibility and accommodations are to:

- Include SLPs in professional development on assessment accessibility features and accommodations.
- Include SLPs on the IEP team when decisions are made about accessibility features and accommodations.
- Require SLPs to review state, district, and school policies and guidelines on types of accessibility features and accommodations, and criteria for providing them during assessments.
- Ensure that district and school administrators understand the role of SLPs when decisions are made about needed accessibility features and accommodations.

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Appendix A

Invitation to Participate in the Survey

Appendix A is the electronic email invitation to recruit school-based SLPs to participate in the study. This invitation was posted on ASHA's school-based SLPs listserv.

Subject: Invitation: K-12 SLPs wanted for online survey- SLPs' experience with accommodations research study - \$50 gift check

Hello School-based SLP Colleagues,

Please consider participating in a research study that explores K-12 school-based SLPs' experience with accessibility features and accommodations to gauge training, knowledge, practice, and resources to support students with disabilities' language and communication needs.

The National Center on Educational Outcomes (NCEO) is conducting the study. NCEO is a University of Minnesota technical assistance provider to educators and state departments of education. We want to improve equitable and inclusive ways for students to participate in assessments to make their test scores more meaningful. The study results will help develop resources, e.g., reports, to support SLPs to make the best possible classroom and assessment accessibility and accommodations decisions for K-12 students.

Participation is voluntary. You will be asked to answer questions about classroom and assessment accessibility and accommodations for K-12 students with disabilities. You will type your responses to an online survey of approximately 15 minutes.

You will remain anonymous with an assigned username. All data will be de-identified so that your identity is protected and remains confidential. We will not ask you to identify your school or give us any students' real names. You will have the opportunity to enter a randomized drawing for one of forty \$50 checks issued from the University of Minnesota for your participation in the survey.

If you have any questions, please send an email to Linda Goldstone at golds240@umn.edu.

To participate, here is the link to the survey: https://umn.qualtrics.com/jfe/form/SV 070bY9RtMFsNyN8

Regards,

Appendix B

SLP Consent Form

Appendix B is the electronic consent form SLPs completed prior to their participation in the study.

Electronic Consent Form:

Speech-Language Pathologists' Experience with Accessibility and Accommodations

We invite you to participate in an online survey research study. It is about SLPs' experience with classroom and assessment accessibility and accommodations for students with disabilities. You are invited as a possible participant because of your expertise to provide language and communication supports to students to access instructional and assessment content. We ask that you read this form and ask any questions you may have before agreeing to be in the study.

Dr. Sheryl Lazarus, the Principal Investigator, and Linda Goldstone, the Co-Principal Investigator of the National Center on Educational Outcomes (NCEO), University of Minnesota, will be conducting the study. NCEO is a research center focused on issues about the assessment of all students

Background Information:

The purpose of this study is to understand speech-language pathologists' experience with accessibility and accommodations for students with disabilities. We will use the information collected from the survey to help bring awareness to the field of speech-language pathology on providing accessibility and accommodations to students by disseminating the study results. Also, products developed from the survey will help clarify the role SLPs can have in making accessibility and accommodations decisions.

Procedures:

If you agree to be in this study, we ask you to share your experience and thoughts about classroom and assessment accessibility and accommodations for students with disabilities. You will enter your responses online to questions. Participation will occur sometime during the 2020-2021 school year. It will take approximately 15 minutes to complete the survey.

Risks and Benefits of Being in the Study:

The risk is minimal, but we cannot guarantee complete confidentiality of your responses given the format's online nature. Your responses shared during the study are anonymous and confidential in which no actual names or identifiers associated with you will be used. The survey will be administered through Qualtrics on a secure website managed by the University of Minnesota. All data collected in this study will be stored on the University's password encrypted, protected server. The research study will not directly benefit you. However, the

study results will contribute to future publications and the speech-language pathology profession to increase awareness of the role SLPs can have in providing accessibility features and accommodations to better serve their students.

Compensation:

Participants can elect to enter a randomized drawing for \$50 check disbursed by the University of Minnesota for participation in the survey. The probability of receiving a check is 1 in 100

Confidentiality:

The records of this study will be kept private. In any report we might publish, we will not include any information that will make it possible to identify you or your site. Research records will be stored securely, and only researchers will have access to the records. Study data will be encrypted according to current University policy for the protection of confidentiality.

Voluntary Nature of the Study:

Participation in this study is voluntary. Your decision to participate will not affect your current or future relations with the University of Minnesota, your state department of education, district, or school. If you decide to participate, you are free to withdraw at any time without affecting those relationships.

Contacts and Questions:

The researchers conducting this study are Principal Investigator, Dr. Sheryl Lazarus, laza0019@umn.edu and Co-Investigator Linda Goldstone, golds240@umn.edu. If you have questions later, you are encouraged to contact Linda Goldstone at the University of Minnesota: golds240@umn.edu.

This research has been reviewed and approved by an IRB within the Human Research Protections Program (HRPP). To share feedback privately with the HRPP about your research experience, call the Research Participants' Advocate Line at 612-625-1650 (Toll Free: 1-888-224-8636) or go to z.umn.edu/participants. You are encouraged to contact the HRPP if:

- Your questions, concerns, or complaints are not being answered by the research team.
- You cannot reach the research team. You want to talk to someone besides the research team. You have questions about your rights as a research participant.
- You want to get information or provide input about this research.

Statement of Consent:

I have read the above information. I was provided the opportunity to have asked questions and received answers. I consent to participate in the study.

Please provide the following information:

- First Name
- Last Name
- Email Address
- State
- Date

Do you give consent to participate in the research study as described above?

- Yes, I give consent.
- No, I do not give consent.

Please sign your initials below in the box that you agree with this statement in giving your consent.

You may download or print a copy of the consent form for your records from the consent link below:

Consent

Thank you, and please continue with the survey.

Appendix C-

Survey Questions

Appendix C contains the survey questions. The questions were organized into blocks in the online survey tool. Each block contained questions that addressed a specific topic area. The topic for the eight blocks of questions is indicted in brackets in this appendix.

[Practice Demographics]

1. In which state do you primarily provide school-based SLP services? (please select one)

[Alabama – Wyoming listed for selection]

- 2. Which of the following best describes your primary school's setting?
 - Rural
 - Suburb
 - Urban
- 3. What is the primary type of school where you work?
 - Private
 - Public
 - Other (please specify)
- 4. Which grade levels do you serve? (Check all that apply)
 - Pre-K
 - Kindergarten
 - 1 st
 - 2nd
 - 3rd
 - 4th
 - 5th
 - 6th
 - 7th
 - 8th
 - 10th
 - 11th
 - 12th

[Caseload Demographics]

- 5. What is the average number of students on your caseload?
- 6. What is the average percentage of students on your caseload identified with only speech-language impairment?

- 7. What are the average percentage of students on your caseload who are identified with any of the following:
 - Autism
 - Deaf-blindness
 - Deafness
 - Developmental delay
 - Emotional disturbance
 - Hearing impairment
 - Intellectual disability
 - Multiple Disabilities
 - Orthopedic impairment
 - Other health impairment
 - Specific learning disability
 - Traumatic brain injury
 - Visual impairment including blindness
- 8. What is the average percentage of students on your caseload who are also identified as English learners?

[Knowledge]

- 9. How would you rate your knowledge about accessibility features and accommodations?
 - Some Knowledge
 - Very knowledgeable
 - Little knowledge
 - No knowledge
- 10. How have you acquired your knowledge about accessibility features and accommodations? (Check all that apply)
 - Professional Work Experience
 - SLP academic degree program
 - None
 - Other (please specify)
- 11. Did you use accessibility features and accommodations with clients during your SLP academic degree program?
 - Yes
 - No
 - Not sure
- 12. How prepared were you after you completed your SLP academic degree program to implement accessibility features and accommodations?
 - Little Prepared
 - Somewhat Prepared
 - Well Prepared

[Beliefs]

- 13. How relevant are accessibility features and accommodations for students with disabilities?
 - Not relevant
 - Somewhat relevant
 - Most relevant
 - Not sure
- 14. To what extent should SLPs be considered a resource to consult on accessibility features and accommodations for students with disabilities?
 - Never
 - Sometimes
 - Always
- 15. To what extent have you been asked to recommend accessibility features and accommodations for students with disabilities?
 - Never
 - Rarely
 - About half the time
 - Most of the time
 - Always

[Decisions]

- 16. Making accessibility and accommodations decisions is within the scope of my professional practice as a school-based SLP:
 - Strongly Disagree
 - Disagree
 - Agree
 - Strongly Agree
- 17. How confident are you to make accessibility features and accommodations decisions for students with disabilities?
 - Not very
 - Little
 - Somewhat
 - Very
- 18. What process do you use to make accessibility and accommodations decisions for students with disabilities?
 - None
 - Self
 - IEP team
 - Other (please specify)

- 19. To what extent are accessibility features and accommodations decisions for student support in the classroom made at IEP team meetings?
 - Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
- 20. To what extent are accessibility features and accommodations decisions for student support on state assessments made at IEP team meetings?
 - Never
 - Rarely
 - Sometimes
 - Most of the time
 - Always
- 21. Have you made classroom accessibility and accommodations decisions for students with disabilities within the past two years?
 - Yes
 - No
- 22. What percentages on average have you made accessibility and accommodations decisions for students with disabilities within the past two years for any of the following assessments? (Check all that apply)
 - Classroom
 - District
 - State Reading/English language arts
 - State Math
 - State Science
 - State Social Studies
 - State English Language Proficiency
 - Diagnostic
 - Alternate state content assessment
 - Alternate state English language proficiency
- 23. Which of the following do you use as a resource to inform your accessibility features and accommodations decisions? (Please check all that apply)
 - None
 - ASHA sources (please specify)
 - State department of education website
 - District administration
 - School
 - Special education department
 - Test coordinator
 - Other (please specify)

- 24. Are there challenges for you to make accessibility features and accommodations decisions?
 - Yes
 - No

[Implementation]

- 25. How confident are you to implement accessibility features and accommodations for students' supports?
 - Not very
 - Little
 - Somewhat
 - Very
- 26. What percentages on average do you implement accessibility features and accommodations with students for any of the following activities? (Check all that apply)
 - Diagnostic evaluations
 - Therapy
 - Classroom
 - Assessments
 - Other (please specify)
- 27. What percentage on average on students on your caseload use accessibility features and accommodations in assessments?
 - None
 - Less than 25%
 - 25%
 - 50%
 - 75%
 - 100%
 - Not Sure
- 28. What percentage on average do you implement augmentative and alternative communication (AAC) supports with students on your caseload?
 - None
 - Less than 25%
 - 25%
 - 50%
 - 75%
 - 100%
- 29. How do your students' use of accessibility features and accommodations in the classroom compare to state assessments?
 - Use more in the classroom
 - Use only in the classroom
 - Use the same in both classroom and state assessments
 - Use only in the state assessments
 - Use more in the state assessments
 - Not sure

- 30. To what extent are the types of accessibility features and accommodations used by your students in the classroom the same as those used in state assessments?
 - Never
 - Sometimes
 - Often
 - Always
 - Not sure
- 31. Do you have challenges to implement accessibility features and accommodations for students with disabilities?
 - No
 - Yes

[Professional Development]

- 32. What supports do you need about accessibility features and accommodations? (Check all that apply)
 - Guidelines
 - School administration
 - Professional Development
 - Other (please specify)
 - None
- 33. When did you last participate in professional development on accessibility features and accommodations? (Check all that apply)
 - One to two years ago
 - Three to five years ago
 - More than five years ago
 - Never
- 34. Who provided professional development on accessibility features and accommodations that you received? (Please check all that apply)
 - ASHA (please specify)
 - School
 - State
 - District
 - Other (please specify)
 - None
- 35. Would professional development on accessibility features and accommodations be of interest to you?
 - Yes
 - No

- 36. How likely are you to pursue professional development on accessibility features and accommodations?
 - Never
 - Maybe
 - Very
 - Definitely

[SLP Demographics]

- 37. How many years of experience do you have as a school-based SLP?
- 38. What is the highest educational degree you have received?
 - Master
 - Doctorate
 - Other (please specify)
- 39. Do you have a specialty area?
 - Yes (please specify)
 - No
- 40. Are you fluent in languages other than English?
 - Yes (please specify)
 - No
- 41. Do you have other thought you would like to say about accessibility features and accommodations?
 - Yes (please describe)
 - No

Appendix D-

Responding SLPs' Demographics

Appendix D includes SLP demographic characteristics. It includes their states, type of setting, grade levels, years of experience, specialty area, and fluency in other languages in addition to English

Table D1. Number of SLP Respondents from 19 States (n= 31)

State	Number of Respon- dents	State	Number of Respon- dents
Arizona	1	Minnesota	1
Arkansas	1	New Jersey	3
California	2	New York	2
Connecticut	1	Ohio	2
Delaware	2	Oklahoma	1
Georgia	2	Rhode Island	1
Illinois	1	Texas	5
Iowa	1	Virginia	1
Massachusetts	2	Wisconsin	1
Michigan	1		

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Figure D1. Setting (n = 31)

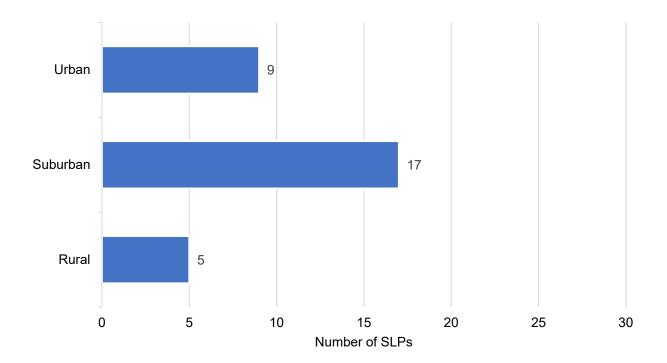
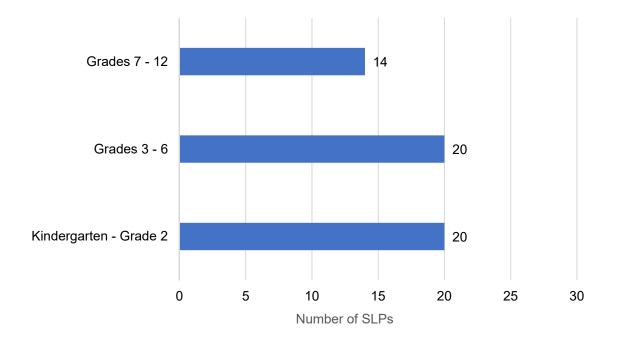
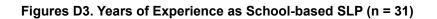


Figure D2. Grade levels (n = 31)



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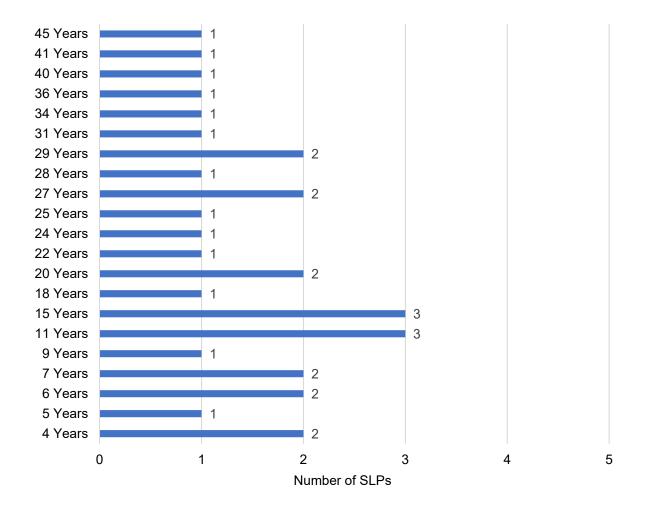
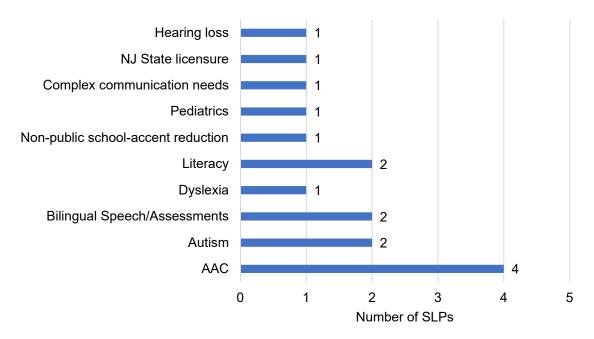
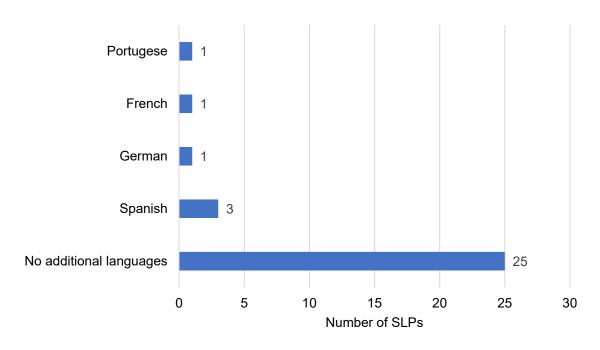


Figure D4. Specialty Areas of SLPs (n = 31)



Note: Respondents could provide multiple specialty areas.

Figure D5. Fluency in Other Languages in Addition to English (n = 31)



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