

HB 4067
House Committee on Early Childhood and Family Supports
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As the representative of Early Intervention/Early Childhood Special Education (EI/ECSE) on the Board of the Oregon Speech Language and Hearing Association (OSHA), I write to express my support for HB 4067, with the caveats outlined in OSHA's position statement.

Extending the validity of the non-categorical eligibility category of Developmental Delay (DD) would greatly improve outcomes for the children I serve daily. I am a Speech Language Pathologist and member of Portland Public Schools' Kindergarten Transition Team. As such, I am tasked with ensuring that Special Education services provided for pre-K aged children with identified disabilities continue seamlessly, appropriately and effectively as students transition into Kindergarten. While most educational eligibility categories under which preschool-aged children may qualify for specialized supports are also valid for school-aged children, the non-categorical disability identification of DD expires when a child enters Kindergarten here in Oregon. Determining if and how a child identified for ECSE services under DD, who continues to demonstrate a need for specialized instruction, may access special education services in Kindergarten makes up a significant portion of my work.

Roughly 90 students in the PPS district entered this current academic year with an ECSE eligibility of Developmental Delay. Under current law, these children must be reevaluated prior to Kindergarten and made to fit one of nine established school-age disability categories. While some children's learning style and constellation of needs may have become indicative of an existing disability category since their initial ECSE evaluation, many children continue to defy categorization. As a result, many children whose delays include - but are not restricted to - deficits in communication receive services under Communication Disorder (CD), with SLPs as service coordinators, for lack of a better option. This results in inappropriate identification of disabilities ("CD+") and high caseloads for specialists who may not be best equipped to serve them.

Children whose demonstrated delays do not include communication are oftentimes more difficult to qualify for services beyond preschool. Since many of these students struggle with self-regulation and social skills, behavior and sustained focus only the categorical eligibilities of Other Health Impairment, for which a medical diagnosis with educational impact must be documented, and Emotional Disturbance, which still carries a stigma, can be considered. The problem with this is twofold:

1. Pediatricians may feel pressured to diagnose a child prematurely when withholding a diagnosis may result in their patient not receiving the supports he or she needs and has been receiving in preschool; and
2. No diagnosis applies, and a child who was identified under DD based on significant delays in one or more areas of development must enter Kindergarten without specialized support.

Extending the validity of the non-categorical disability category of Developmental Delay would safeguard against these unwanted outcomes. Incoming Kindergarteners enter school from vastly disparate educational backgrounds. While some children have been taken care of in their homes, others have attended daycare settings, and still others were enrolled in early childhood programs ranging from a few hours twice a week to full-time, with varying curricula. Some children have not had any peer or pre-academic exposure to speak of - hence there is no baseline. Allowing a child to receive services under DD until age 9 or until their current three-year eligibility cycle expires (this is a change from the current version of HB 4067), whichever comes before, would allow school teams to keep supporting these children with identified needs while they get to know them in a more even educational setting, with more even demands placed upon them over time. It would allow these young students time to adjust and rise to expectations and it would allow educators to better determine their rate and style of learning over time. Not forcing categorical eligibilities on preschoolers would allow medical providers to consider medical diagnoses without the added pressure of an artificially imposed Kindergarten timeline. Finally, expanding DD until age 9 would allow school teams to determine whether a child's academic progress is hampered by a specific learning disability, which is a categorical eligibility not available to Early Childhood providers.

In summary, allowing DD to continue until age 9 aligns with the laws and practices of most states in the country for obvious reasons: it allows young children to continue receiving the educational supports they need as they make this significant transition into the school setting, without prematurely subjecting them to medical diagnoses and forcing them into educational categories that may not fit.