



Visalia Unified School District

Special Education Review

December 29, 2009

Joel D. Montero
Chief Executive Officer



December 29, 2009

Dr. Stan A. Carrizosa, Superintendent
5000 West Cypress Avenue
Visalia Unified School District
Visalia, CA 93277-8300

Dear Dr. Carrizosa:

In September 2009, the Fiscal Crisis and Management Assistance Team (FCMAT) entered into an agreement for a special education study with the Visalia Unified School District. The request specified that FCMAT would perform the following:

1. An examination of the district's philosophy, programs and procedures in special education to determine whether they are consistently aligned with the district's mission and core beliefs.
2. Feedback regarding the extent to which a Response to Intervention (RtI) model is being implemented.
3. An analysis of staffing ratios/class sizes in relation to other districts across the state and legal mandates. This will include but not limited to a review of occupational therapist staffing and review of services provided.
4. An evaluation of the effectiveness of the special education programs and services.
5. Evaluation of district procedures for determining the need for instructional aides, the provision of training for staff and recommendations for improvement, if needed.
6. Verify that appropriate procedures and criteria are in place to confirm when students become eligible for exiting from special education services, specifically in areas of speech and language.
7. Should Visalia be a single district SELPA?
8. Should Visalia transfer county operated SH programs to the district?
9. There has been an increase in the number of special education students through early identification. How should the district address this issue?

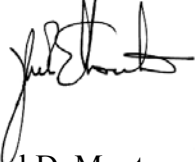
FCMAT

Joel D. Montero, Chief Executive Officer

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The attached final report contains the study team's findings with regard to the above areas of review. We appreciate the opportunity to serve you, and we extend our thanks to all the staff of the Visalia Unified School District.

Sincerely,

A handwritten signature in black ink, appearing to read "Joel D. Montero", with a stylized flourish at the end.

Joel D. Montero
Chief Executive Officer

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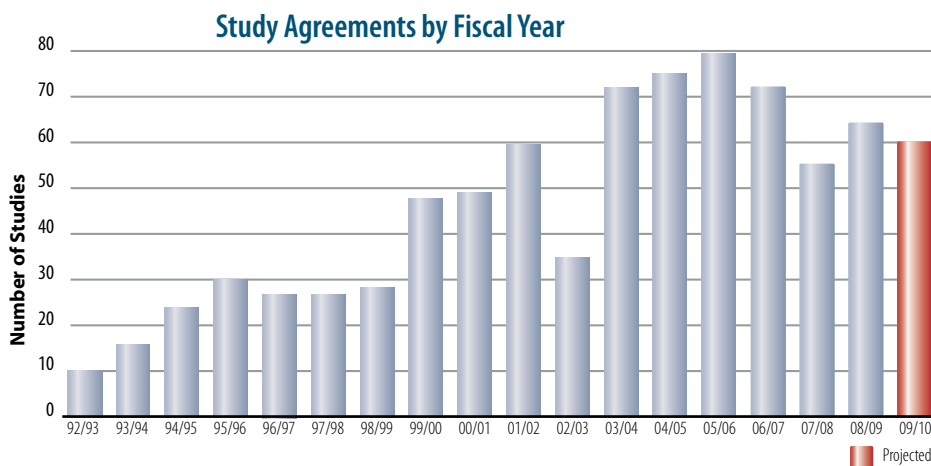
Foreword - FCMAT Background

The Fiscal Crisis and Management Assistance Team (FCMAT) was created by legislation in accordance with Assembly Bill 1200 in 1992 as a service to assist local educational agencies (LEAs) in complying with fiscal accountability standards.

AB 1200 was established from a need to ensure that LEAs throughout California were adequately prepared to meet and sustain their financial obligations. AB 1200 is also a statewide plan for county offices of education and school districts to work together on a local level to improve fiscal procedures and accountability standards. The legislation expanded the role of the county office in monitoring school districts under certain fiscal constraints to ensure these districts could meet their financial commitments on a multiyear basis. AB 2756 provides specific responsibilities to FCMAT with regard to districts that have received emergency state loans. These include comprehensive assessments in five major operational areas and periodic reports that identify the district's progress on the improvement plans.

In January 2006, SB 430 (charter schools) and AB 1366 (community colleges) became law and expanded FCMAT's services to those types of LEAs.

Since 1992, FCMAT has been engaged to perform nearly 750 reviews for local educational agencies, including school districts, county offices of education, charter schools and community colleges. Services range from fiscal crisis intervention to management review and assistance. FCMAT also provides professional development training. The Kern County Superintendent of Schools is the administrative agent for FCMAT. The agency is guided under the leadership of Joel D. Montero, Chief Executive Officer, with funding derived through appropriations in the state budget and a modest fee schedule for charges to requesting agencies.



Total Number of Studies..... 743

Total Number of Districts in CA.....1,050

Management Assistance..... 705 (94.886%)
 Fiscal Crisis/Emergency 38 (5.114%)

Note: Some districts had multiple studies.
 Eight (8) districts have received emergency loans from the state.
 (Rev. 12/8/09)

Introduction

The Visalia Unified School District is located in the central San Joaquin Valley, in Tulare County. The district serves more than 32,000 students from pre-K to adult school, and covers a geographical area of 214 square miles. School sites consist of 24 elementary schools, a newcomer language center, four middle schools, four comprehensive high schools, a continuation high school, an adult school, and a school that serves orthopedically handicapped students. There are also three charter school options authorized by the district. The total district work force consists of more than 2,500 certificated and classified staff.

In April 2009, the district requested the Fiscal Crisis and Management Assistance Team (FCMAT) to conduct a special education review. The scope of the study agreement dated May 1, 2009 is to conduct a review of the district's special education program and services and report findings and recommendations in the following areas:

1. An examination of the district's philosophy, programs and procedures in special education to determine whether they are consistently aligned with the district's mission and core beliefs.
2. Feedback regarding the extent to which a Response to Intervention (RtI) model is being implemented.
3. An analysis of staffing ratios/class sizes in relation to other districts across the state and legal mandates. This will include but not be limited to a review of occupational therapist staffing and review of services provided.
4. An evaluation of the effectiveness of the special education programs and services.
5. Evaluation of district procedures for determining the need for instructional aides, the provision of training for staff and recommendations for improvement, if needed.
6. Verify that appropriate procedures and criteria are in place to confirm when students become eligible for exiting from special education services, specifically in areas of speech and language.
7. Should Visalia be a single district SELPA?
8. Should Visalia transfer county operated SH programs to the district?
9. There has been an increase in the number of special education students through early identification. How should the district address this issue?

Study Team

The FCMAT study team was composed of the following members:

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*As a member of the review team, this individual served as a consultant for FCMAT and did not represent her employer.

Study Guidelines

FCMAT consultants visited the district in September 28-30 and October 1-2, 2009 to conduct interviews, collect data and review documentation. This report is the result of those activities. Findings and recommendations are presented in the following sections:

- Executive Summary
- Program Review
- Response to Intervention
- Instructional Aide Staffing
- Staffing Ratios
- Speech and Language Services
- Pre-Enrollment Identification
- Program Efficiency and Effectiveness
- Staff Development
- Due Process
- Single-District SELPA
- Possible Program Transfer

Executive Summary

The Visalia Unified School District has a consistent focus on standards-based academic achievement across all grade levels. FCMAT identified inconsistencies in the special education philosophy and departmental practices that do not align with the district's focus in this regard. The program structure does not facilitate access to the core curriculum for special education students. The district should review the special education program design and implement an academic model that provides equal access and ensures that special education students make progress in the general education curriculum.

Some of the district's special education programs do not consistently align with its Mission and Core Beliefs. FCMAT found procedural inconsistencies, a lack of effective communication systems between the special education department, the district and parents, and inefficient data management that have led to inefficient use of time, funding and personnel.

The Response to Intervention (RtI) model is not being systematically implemented due to insufficient districtwide knowledge of the model. The district lacks a system to collect and analyze data to measure student outcomes and response to intervention. As a result, the student study team process is operating and making recommendations without full knowledge of students' academic needs. The district should create a master plan for professional development training and implementation of an RtI model.

While most of the special education staffing and caseloads operate at optimal levels, the district is overstaffed for adapted physical education. A reduction of 2 full-time equivalent (FTE) positions would yield an annual savings of \$193,094 based on current salary and benefit data. The district does not use entrance and exit criteria for speech and language services. The percentage of district students who receive special education services is 9%, lower than the statewide average (K-12) of 10.5%.

A review of individualized education programs (IEPs) indicated that the programs are not always designed to meet the child's unique needs and maximize the educational benefit. The district must ensure that students have access to the grade level standards that are incorporated into the core curriculum. In addition, procedures and instructional strategies should be in place to address the necessary changes in program or service that must occur when students do not make adequate progress on IEP goals.

Numerous opportunities for staff development in instruction, methodology and behavior management are available through the Tulare SELPA at no cost to the district. California's current fiscal issues create a dilemma for districts that need to train staff but don't have the resources to release teachers to attend. As a result, the attendance of Visalia staff has been very limited.

State criteria indicate that Visalia USD would be eligible to seek single-district SELPA status. However, the district should first determine the cost and resources required to build the SELPA infrastructure required to make this transition. FCMAT's analysis indicates that the district is not well-positioned for such an undertaking because of its limited experience with very severely disabled and medically fragile students. The district should proceed cautiously to ensure that it is capable of providing special education programs that offer the same types and levels of services specified in IEPs, and with the same or better outcomes than those currently provided by the Tulare County Office of Education programs. Visalia USD also should contact other districts that have elected to operate as a single-district SELPA and conduct site visits to fully ascertain the cost and program structures needed for implementation.

The Visalia USD is ready to proactively focus on increasing the efficiency and effectiveness of its services to students with disabilities. Through a strong collaborative effort, the special education department will align these services with the district's Mission and Core Beliefs, which will lead to enhanced academic benefits of the children and families it serves.

Findings and Recommendations

Program Review

Mission and Core Beliefs

Although the special education department strives to “uphold high ethical standards” and “functions on a values foundation” in delivering services to students, the department does not consistently align with the district’s Mission and Core Beliefs (see Appendix A).

A lack of systematic special education department operations has led to a failure to promote “collaborative efforts and maximize time, funding, and human resources.” FCMAT found procedural inconsistencies, ineffective communication systems between the special education department, the district and parents, and poor data management that has resulted in an inefficient use of time, money and human resources. These findings and recommendations will be detailed in the sections that follow.

Staff and administration interviewed by FCMAT expressed significant concerns regarding programmatic issues. The special education department does not successfully achieve the first goal of the Mission and Core Beliefs, which states, “Highly skilled and effective teaching ... are the essential factors in a successful classroom learning experience.”

The Individuals with Disabilities Education Act (IDEA) requires services on the student’s IEP to be calculated to allow the child “to advance appropriately toward attaining annual goals and become involved in and make progress in the general education curriculum ...” IDEA requires school districts to provide disabled students with appropriate accommodations for instruction, assessments, and testing, and states that these accommodations must be consistent with those used during the student’s regular instruction. The special education program philosophy and practice do not align with the district’s mission in this regard. Staff indicate that students with disabilities do not have equal access to the core curriculum. The fundamental program structure is very traditional, with many students spending most of the day in special day class settings. The use of the core curriculum and instructional strategies in these classes is inconsistent, and its administrative support varies from site to site.

Special education teachers report that they have limited training in curriculum and differentiated instruction. Recently, the district’s curriculum department has been proactive in collaborating with the special education department and including special education staff in the core curriculum professional development opportunities. The district should review the special education program design and make adjustments to facilitate equal access to the core curriculum and ensure that special education students make progress in the general education curriculum. Many districts have had good success with learning center models of instruction rather than self-contained special day classes to ensure the necessary access to and instruction in the standardized curriculum.

Los Angeles Unified School District has developed a learning center model based on diagnostic assessments, monitoring systems, standards-based instruction in the core curriculum, interventions and assessed progress. A copy of the Effective Indicators for Learning Centers from their model is included as Appendix B for the district's review and consideration.

Efforts are already under way in the district to re-evaluate the role and responsibilities of the special education staff. The role of the resource specialist has changed, with reform efforts aimed at the core curriculum. In response to new approaches to delivering special education services, the district is in the process of aligning the job descriptions to credential requirements for the special education teacher-mild to moderate. Teachers are confused about the change in the job description and will need a better understanding of the rationale for these changes. The revised job description will facilitate the district's ability to design more appropriate and efficient models of service delivery.

Recommendations

The district should:

1. Develop a strategic plan for the special education instructional programs that aligns with the district's standards-based focus on the core curriculum and academic instruction.
2. Evaluate the option of learning centers as a way to increase access to the core curriculum.
3. Continue plans to re-evaluate the roles of special education staff and realign job descriptions with credential requirements where necessary.
4. Ensure that all special education teachers have access to the core curriculum at their site.
5. Provide training in core curriculum and differentiated instruction to special education teachers.
6. Continue the collaborative effort already established by the curriculum department to include special education in the discussion and planning for professional development around appropriate academic instruction.
7. Ensure that special education teachers, program specialists and service providers have the opportunity to work collaboratively on the effort to realign programs and services with general education.

Response to Intervention

The enactment of No Child Left Behind (NCLB) in 2001 triggered a major shift in education nationally, in which student achievement and accountability moved to the forefront of decisions made by public school administrators and teachers. In 2004, the reauthorization of the Individuals with Disabilities Education Act (IDEA 2004) followed suit by supporting models that include response to scientific, research-based interventions. The law states that these methods may be used as an alternative to the discrepancy model in identifying students as learning disabled. IDEA 2004 also shifted research-based interventions from special education to general education, stressing that this method would now be available to all students. The law left it up to each individual state to develop its own guidelines and regulations.

Response to Instruction and Intervention (RtI²) is a systematic, tiered, data-driven approach to instruction that benefits every student. It provides districts with the means to make educational decisions and measure academic growth. California has expanded on RtI² to communicate the full spectrum of instruction, from general core to supplemental or intensive, to meet students' academic and behavioral needs. On November 14, 2008, the state Superintendent of Public Instruction issued the Core Components of Response to Intervention as guidance to California schools, available at <http://www.cde.ca.gov/sp/se/sr/documents/sldeligibiltyrti2.pdf>.

The district lacks the necessary state-approved supplemental intervention programs that are a major component of RtI² and are part of the tiered model. The district lacks universal screening programs to properly identify students. These programs are used to screen students at least three times per year in early literacy skills, including phonological awareness, alphabetic understanding, fluency, vocabulary, and comprehension. Universal screening is essential to assess academic and behavioral performance and evaluate the effectiveness of instruction.

Although a select group of school site administrators are implementing some components, the districtwide knowledge of the RtI² model is very inconsistent. The sites do not have all of the materials, resources, and training needed to run a fully functioning program in accordance with the model that has been adopted by the CDE.

General education should always be the first intervention and should take the lead role in implementing RtI². To ensure success, the district must join in a collaborative effort by all staff members, general and special education, to address students' academic and behavioral needs.

The district's student study team (SST) process is fragmented and inconsistent. There are no districtwide guidelines for the use of SSTs. Effective SSTs serve to accomplish the following:

- Identify and assist students.
- Help teachers solve problems with students using the collective expertise of other appropriate professionals.
- Help parents when they have concerns.
- Help students who request additional support.
- Improve communication between staff members and between the school and the home.
- Increase staff commitment to students and to the educational program.
- Help facilitate referrals to the general education programs at a school site.
- Coordinate the services a student receives.
- Attempt to document all reasonable interventions before referring a student for assessment for possible special education eligibility.
- Document the use of scientifically-based interventions and use of peer reviewed research.
- Explain the RtI² model if used and review progress under this model.

Identification and eligibility of students for special education is on the rise, which could be partly because of the lack of a scientifically research-based intervention model like RtI². Students are being assessed for special education prior to the implementation of research-based interventions.

Recommendations

The district should:

1. Develop a master plan for a training module and the implementation of RtI².
2. Ensure that students receive high-quality standards-based instruction.
3. Ensure that all staff members can access scientifically research-based instruction and interventions.
4. Ensure that it has appropriate state approved supplemental intervention programs for tiers II and III.
5. Review universal screening models and determine which will be most appropriate for district adoption. Dynamic Indicators of Basic Early Literacy Skills (DIBELS) is free through the University of Oregon. Aimsweb is another available option.
6. Determine what progress monitoring system is most appropriate to meet student and district needs.
7. Create or purchase a system to collect and monitor student performance data.

8. Ensure that all staff members obtain extensive training in assessments, data analysis, programs, and research-based instructional practices and strategies.
9. Ensure that parents are active and participate in all stages of the process. This will assist with positive outcomes for students.
10. Consider whether RtI² should be used as part of determining eligibility for a specific learning disability.
11. Develop and implement a districtwide SST process that includes using RtI² prior to assessing for special education as necessary. The San Joaquin County Office of Education has an excellent SST handbook available to view on its Web site.

Instructional Aide Staffing

Throughout California the number of districts utilizing instructional aides, one-on-one and special circumstance instructional aides has increased dramatically over the past few years. This has impacted special education budgets and contributions from the unrestricted general fund, especially in situations where the services aren't warranted or monitored and create a sense of dependence. One strategy for a district to determine if these services are appropriate is to implement guidelines, policies and procedures and strictly monitor these services to prevent them from being granted unnecessarily.

Visalia USD employs 145 instructional aides that will cost the district \$3,462,885 this fiscal year based on the fiscal information provided. Of the 145 instructional aides, 36 are one-on-one aides.

The district has no policies and procedures for assigning, supporting, reducing, or dismissing aide services. Lack of policies and procedures increases the potential for adversarial IEPs. The special education department does not evaluate the ongoing need for instructional aides assigned to the classrooms or to specific students, even when a student moves or is absent for long periods of time. When an IEP team determines that additional support is warranted, the team does not include a fading or exit plan for these services.

Having guidelines in place can assist the district when it is challenged by parents and advocates who want such services. Extensive training must follow the development and implementation of guidelines. Administrators, general and special education staff should attend mandatory training on the usage of the guidelines. Guidelines will assist staff with the following decisions:

1. Determining the need for one-on-one instructional aides
2. Alternatives to one-on-one instructional aides
3. Determining if existing resources are being maximized
4. Evaluating continuing need for such services
5. Determining when it is appropriate to add hours to an existing aide's contract

Many districts use the term special circumstance instructional aides (SCIA) instead of one-on-one aides to indicate that an assignment is temporary in nature and should be faded after a predetermined time period. Fading is an important aspect of these services and is crucial to encouraging student independence.

The special education department does not identify a specific staff member responsible for reviewing aide usage and analyzing student needs. Policies and procedures should

clearly define the role of the special education director, special education staff, and school site administrators. Once policies and procedures are in place, a review of all instructional aide placements should be conducted, with the goal of utilizing these resources more effectively.

The special education department provides no training or routine guidance for the instructional aides. No master plan exists for training the instructional and one-on-one aides. There is high turnover with instructional aides and several vacancies that have remained unfilled for extended periods of time. This can lead to major compliance and litigation consequences. The special education director and program specialists must determine each instructional and one-on-one aide's level of performance and what level of training is needed. Coverage issues can make it very difficult to release aides from the classroom, so online courses may be a viable option.

The special education department has no database that aligns with the human resources department to track the placement and movement of instructional aides. It is done manually, which impedes efficiency and funding. Staff reported that the department does not have the ability to move instructional aides to follow the needs of the students because of bargaining unit contract provisions. Staffing patterns for the aides are inconsistent, with no formula used for placing aides. Use of a formula that includes student needs, caseloads and grade levels would help resolve this issue.

Recommendations

The district should:

1. Develop guidelines for the use of special circumstance instructional aides (SCIA) rather than one-on-one aides, along with general instructional aide guidelines (see Appendix C).
2. Develop policies and procedures to assist with assigning, supporting, reducing, and dismissing aide services.
3. Evaluate the continuing need for instructional and one-on-one aides. Whenever possible, consider the use of 3.5-hour aides to reduce costs. Identify specific staff members to be responsible for analyzing instructional aide usage and student needs. Clearly define the roles of the special education director, special education staff, and school site administrators in this regard.
4. Consult with legal counsel to negotiate a change in the collective bargaining agreement so that the district can effectively manage its aide staffing ratios.
5. Develop a fading plan at IEP meetings.

6. Develop a master plan to address the districtwide aide training needs. Provide extensive training and routine guidance to the instructional aides, some of which can be done through online courses (see Appendix C).
7. Conduct a needs assessment with the special education staff to determine why there is a high rate of turnover among instructional aides, and implement a system to reduce the amount of time it takes to fill vacant position. When an instructional aide gives notice, have them complete a survey explaining why they are resigning from the position.
8. Create a database that aligns with the human resources department system to track placement and movement of aides.
9. Initiate discussions with the bargaining unit regarding contract provisions that would allow instructional aides to be assigned based on students' needs, even if it equates to frequent movement.
10. Ensure that staffing patterns are consistent. Use an instructional aide database containing specific information within the table for tracking purposes (see Appendix C).
11. Ensure that the placement of aides is a good fit for the student and staff, and that school principals are included in the entire process.

Staffing Ratios

The district provided FCMAT with the requested data regarding caseloads; however, there was conflicting data between the manual staffing analysis and the data provided by the Special Education Information System (SEIS). Since the SEIS system should hold the most valid data on caseloads, that information was used to analyze the district's special education caseloads.

Caseloads are maximized at the RSP and SDC/RSP levels and for most designated instruction providers (DIS). Caseloads for adapted physical education (APE) average 26, which is significantly below statewide practice as defined by School Services, Inc. Typical caseloads are 60 students or more. The district should consider operating at an average of 55. This would allow the district to eliminate 2 FTE positions at an annual savings of \$193,094.

The district could not provide accurate information on the occupational therapy caseloads of the nonpublic agency provider. This is because all district staffing is tracked manually (usually from memory) and is not tracked for nonpublic agency providers. A review of the contract indicates that the NPA agency providing occupational therapy uses a certified occupational therapist and certified occupational therapy assistants (COTAs). It is not clear how many students are being served or whether the district is charged at the fully certified occupational therapist rate for all services, or at an adjusted rate for the use of COTAs. The district should review the contract for the nonpublic agency provider and determine the caseloads and overall staffing costs for these services. To the extent possible, the district should consider hiring district staff for occupational therapy rather than using nonpublic agency services.

Recommendations

The district should:

1. Eliminate two adapted physical education positions and operate with caseloads at a minimum of 55 for an annual savings of \$193,094.
2. Define the data to be used to analyze staffing and caseloads for occupational therapy.
3. Define the data to be used to analyze staffing and caseloads monthly.
4. Review the services provided by nonpublic agency staff, including the occupational therapist and COTA usage, and how the district is charged for services.
5. Consider hiring occupational therapists to reduce the costs incurred from the use of nonpublic agencies.

Speech and Language Services

The special education department does not use exit criteria guidelines to determine continued eligibility for special education services. Visalia Unified (K-12) is lower than the statewide average enrollment for students receiving special education services at 9%. Establishing exit criteria would be a cost saving measure for the district and should be implemented as soon as possible.

For example, staff members reported that for various reasons, instances occur when a student no longer qualifies for speech therapy services but the services are not discontinued. Exit or dismissal criteria should be used to determine continued eligibility. This type of criteria is used for fading or dismissing a student from services when the disability no longer exists or no longer adversely affects the student's educational performance. A student can be identified as having a disability but not receive special education services because there is no adverse effect on the student's progress in the core curriculum. The IEP team may determine that the needs of the student can be met by the general education teacher or another placement. Some SELPAs and school districts in California use a dismissal criteria checklist to assist with this process. The Sutter County and Fresno County offices of education both have examples of exit/dismissal criteria guidelines and criteria checklists.

The pupil count for speech services in Visalia USD is high compared to that of the county office-operated program. The December 2008 pupil count indicates that 637 students were being served by the speech therapists. Staff and parents should be informed that although special education services are deemed necessary, the IEP team may determine that the services are not needed indefinitely. Discussions of this type should take place at every IEP meeting.

Using December 2008 data from the California Special Education Management Information System (CASEMIS), FCMAT found that 25% of the students identified for special education (ages 0-22) in Visalia are eligible under speech and language, while the Tulare SELPA average is 18%. District students are overidentified for speech and language compared to the SELPA average. Education Code 56363.2 outlines the requirements for a SELPA-wide average caseload of 55. A district that overidentifies for speech and language will exceed the caseload cap per SELPA criteria.

Staff members reported that the use of severity scales has helped with elevated numbers. These scales help to identify and measure students' functioning in terms of articulation and expressive language. Staff stated that they feel they must continue to provide special education services even when students no longer qualify. The district operates under a clinical model for speech and language services rather than an educationally based instructional model. Medical models follow different standards than the model used in schools. The district should follow education-based models for speech and language services, as recommended by Education Code Section 56363.3.

The speech and language therapists participate in very few staff development opportunities. Staff development would allow them to stay current in this ever-evolving field. Exit criteria guidelines should be one focus area for trainings. Staff development can help avoid unnecessary litigation. The speech therapists meet as a team, but they run their own meetings and take turns planning the agendas instead of receiving guidance from the special education director. They do not have a copy of the SELPA Handbook and have no access to data that should drive decisions regarding student placement and exit strategies.

The speech and language therapists believe they are exceeding the caseload caps established under 5 CCR 3051.1 for speech and language services. FCMAT found that some therapists have more than a 55-student caseload; however, the district does not exceed the SELPA-wide average caseload of 55 addressed in EC 56363.3. (“The average speech and language specialists in the special education local plan area shall not exceed 55 unless the local plan specifies a higher average caseload and the reasons for a greater average caseload.”)

The special education department does not use entering and exiting criteria for student placement. Over time, this leads to elevated student numbers. The severity scale should be strictly followed to measure students’ progress and whether they can be exited from services. Caseload leveling does not occur in some instances. Leveling uses a chart to assign each student receiving speech and language services with a factor of 1, 2, or 3, depending on the level of services received, type of disability and grade level. The factors are totaled to determine caseload sizes. Each speech and language pathologist is then assigned a proportionate share of the total services provided, and a leveling effect occurs based on the students’ needs. Special circumstances and disabilities that may not match any disability type, such as traumatic brain injury, should be considered in using this type of calculation.

The program specialists are not given an opportunity to meet to analyze the number of students receiving speech and language services, and plan for how to begin exiting students who no longer need services. Districts must review the entering criteria along with the exiting criteria and should use specific guidelines to ensure the front end is handled appropriately. Speech and language pathologists do not have access to data related to important decisions.

The special education department does not have language, speech and hearing program guidelines for the speech and language therapists to use for the following:

- diagnostic evaluations
- the student study team process
- entry and exit considerations for articulation, fluency, language and voice
- a developmental table for consonant sounds
- a phonological processes guideline
- general exit and dismissal criteria
- an informal degree of severity chart
- a fluency severity rating scale

The district does not have a speech assessment team to administer assessments. At this time, the speech therapist assigned to each school site completes his/her own assessments. Some districts designate one or two pathologists to administer all the assessments, which can provide greater consistency when guidelines for entrance and exit are established. For example, the San Diego USD has had success creating more efficient speech services using a new model for service delivery for students with articulation disorders.

Implementing scientifically researched-based interventions, such as RtI², prior to assessing for speech therapy services would help with the overall district percentages of students receiving these services. RtI² can be used successfully as a screening tool for students in preschool, kindergarten and first grade. However, with an RtI² model it should be understood that over time, as the percentages begin to drop, staffing requirements should not be solely tied to caseload numbers. A percentage of the speech and language therapists' time would be devoted to interventions under an RtI² model.

Recommendations

The district should:

1. Develop exit/dismissal criteria guidelines for all special education services. Ensure implementation of the exit/dismissal criteria guidelines and examine entrance criteria (see Appendix D).
2. Dismiss or fade special education services when a student no longer qualifies, using an exit/dismissal criteria checklist.
3. Continue to use the severity scales that the pathologists were trained in.
4. Consider forming a speech and language assessment team to establish eligibility, complete triennial evaluations and assist with exit recommendations.
5. Address the staff perception regarding the inability to exit or dismiss students from IEPs.
6. Ensure that the educational model, not the medical model, is implemented.
7. Ensure that the pathologists have opportunities to participate in staff development, especially regarding exit/dismissal criteria.
8. Provide special education leadership to the speech and language therapist staff meetings, and generate the agenda with input from the staff.
9. Ensure that all staff have access to the SELPA Handbook, which provides important information to guide all staff.
10. Address the concern regarding caseload sizes. Explain Education Code 56363.3 pertaining to this issue.
11. Ensure that caseload leveling occurs.

12. Give the speech therapists the opportunity to analyze data, particularly exit/dismissal criteria.
13. Develop and implement language, speech and hearing program guidelines (see Appendix D).
14. Consider an RtI model for speech and language such as that used in the San Diego USD (see Appendix D).

Pre-Enrollment Identification

Visalia USD's infant students are served by the Tulare County Office of Education, which contracts with Central Valley Regional Center (CVRC) to provide infant services to districts.

Contracting with regional centers has some excellent benefits for county offices and districts. It allows the local education agency to establish the initial relationship with parents, rather than an outside agency. This helps to eliminate parent confusion when it is time for the student to transition to public school at age 3. In public education, transitioning is interpreted to mean when a student transfers from preschool to kindergarten, elementary to middle school and middle school to high school. The interpretation becomes muddled when an outside agency services the child as an infant and then the student transfers to public education. "Transition" to the parent usually means more of the same service they have been receiving from the private agency, when in reality, private agencies usually use medical models that can be different from public education models. This difference can sometimes mean that public schools get off to a negative start with parents in trying to explain the difference in systems. By contracting, county offices and districts have the opportunity to build positive relationships and provide quality services at the onset of a child's disability.

The number of students found eligible for speech services during their infant and toddler years has increased because of an increase in the number of students served in the Bright Star infant program. This program is part of the services offered by the CRVC. Students transition from this program into the district at age 3. This means districts and agencies must plan accordingly to serve students at a younger age.

The number of preschool assessments continues to increase in the district; some of this is due to an increased number of students transitioning from infant programs and autism assessments. This increase has had a huge impact on preschool programs. Preschool staff reported that nearly all students receive a full comprehensive assessment to rule out all disabilities. Education Code 56320 states that "students must be assessed in all areas related to suspected disabilities." Assessing only the suspected disabilities would relieve some of the preschool staff workload.

Special Education Preschool Enrollment History

Source	Year	Number of Students
SEIS	10/1/09	197
CASEMIS	12/1/08	119
CASEMIS	12/1/07	89
CASEMIS	12/1/06	118
CASEMIS	12/1/05	76
CASEMIS	12/1/04	61

The data for this chart was taken from CASEMIS, submitted by the Tulare SELPA to the California Department of Education

The special education department does not continually monitor identification data and trends. The department has not written or implemented districtwide identification and eligibility guidelines/policies.

The verbal policies and procedures implemented when students transition from the infant programs to Head Start and state preschools need to be revisited, as the staff report some confusion and inconsistencies. The district's preschool program does not use a system to assist with the referral and identification, collaborative, mainstreaming and inclusion processes.

It is imperative that staff can access the data they need. A system is only as good as the staff inputting the information, and the common theme stated by staff throughout the district is that the data is not accurate in the current system. This creates major frustrations for the staff who are trying to use data to drive appropriate decisions.

Preschool programs in California do not have a base funding source such as revenue limit apportionment. Districts and SELPAs rely strictly on federal funding through a preschool local entitlement and the preschool federal grant. Thus, preschool programs are often severely underfunded in California, and attempts to increase this funding have not yet been successful. Districts must carefully monitor assessment procedures and establish eligibility guidelines for preschool to ensure that they are not overidentifying students for special education at the preschool level.

Recommendations

The district should:

1. Limit assessments to all areas of suspected disabilities.
2. Continually monitor identification data and trends.
3. Develop and implement identification and eligibility guidelines.
4. Develop and implement policies and procedures for students who transition from infant programs to preschool.
5. Develop and implement a system for referral and identification, collaboration, mainstreaming and inclusion processes.
6. Ensure that staff have access to the data they need.
7. Ensure that staff members inputting data are trained to do it accurately and efficiently.

Program Efficiency and Effectiveness

The IDEA statutes include the requirement that schools provide a free appropriate public education (FAPE) (20 U.S.C. Section 1401 (9)) to each student with a disability. FAPE is defined as an educational program that is individualized to a specific child, designed to meet the child's unique needs, and from which the child receives educational benefit.

The California Department of Education has provided a process within the Special Education Self-Review to determine whether students in the district are receiving educational benefit and their IEPs are reasonably calculated to provide educational benefit. FCMAT completed this analysis to help the district determine the effectiveness of its program in this area.

The education benefit analysis consists of a review of randomly selected IEPs from special education students in the district. There are three review steps for each file:

- Charting the contents of each IEP for three successive school years
- Analyzing relationships between needs, present performance, goals, services and outcomes for each year
- Comparing each year to the other to determine if the student's program was reasonably calculated to result in educational benefit

FCMAT's analysis found that special education students did not make adequate yearly progress on standards-based goals. When a lack of progress was evident, no changes were made to the goals and objectives of the IEP or service to assist the student. This results in a finding that the IEPs are not reasonably calculated to result in educational benefit. The district must ensure that students have access to the grade level standards that are incorporated into the core curriculum. In addition, procedures must exist to address the changes in program or service that must occur when students do not make adequate progress on IEP goals.

Exit Rates

Staff interviewed by FCMAT perceive that once students are placed in special education, they do not exit to general education. There is no data analysis mechanism in the special education department to help determine the accuracy of this perception.

FCMAT reviewed some of the data available to the district for this analysis that can be utilized now and for future comparisons. One measurement indicator is the percentage of students who received special education during the year, were reassessed and found no longer eligible for special education. The most current CDE posted data available for this analysis is from 2006-07. More current data may be available to the district from the focused monitoring and technical assistance consultant in the Visalia area. The information in the table below uses comparative data from comparable districts (by size) on the percent of special education students exiting in 2006-07.

School District	Graduation Rate for Special Education Students	% of Special Education Students Reassessed and Found No Longer Eligible
Fresno Unified	18.1%	5.0%
Santa Ana Unified	40.2%	7.2%
San Bernardino Unified	57.9%	4.7%
Visalia Unified	25.3%	6.8%

This data was taken from the Special Education Annual Report for 2006-07 available on the CDE Web site under Specialized Programs

Based on the data provided for the 2006-07 school year, the district is well within the average exit rate of 6.2% for comparable districts and below the average graduation rate of 35.3%.

The district should continue to examine available detailed data on its exit rates found in CASEMIS. Although this data is not available on Dataquest at this time, the SELPA can provide data on all its member districts. This will provide the district with further comparative data and trends on exit rates. This should be done in June of each year.

Below is a sample of exit numbers for Visalia students available each year from the Tulare SELPA CASEMIS report.

School Year	Code 70	Code 71	Code 72	Code 74	Code 81
June 2007	158	22	2	10	1
June 2008	155	10	2	11	1
June 2009	177	123	11	26	-

Code 70 = Returned to general education: no longer eligible for special education or successful completion of IEP

Code 71 = Graduated from high school with a diploma

Code 72 = Graduated from high school with certificate of completion

Code 74 = Dropped out, includes unsuccessful attempts to contact

Code 81 = Received high school proficiency certificate through general education development (GED) test

This data was taken from the *CASEMIS Reporting Cycle for 2006-07, 2007-08, and 2008-09* in the Tulare SELPA

This data is also available in a format that will assist the district in analyzing the exits of students in the district by disability. This should be analyzed and reported to cabinet and staff each year.

Below is a sample of exits by disability in Visalia available each year from the Tulare SELPA.

School Year	Disability	Code 70	Code 76
2006-07	Speech and Language	130	36
2007-08	Speech and Language	120	49
2008-09	Speech and Language	134	42

Code: 70 = Returned to general education as no longer eligible for special education or successful completion of IEP

Code 76 = Moved and known to be continuing

This data was taken from the CASEMIS report submitted by the Tulare SELPA for 2006-07, 07-08, and 08-09

The data above suggests that students are exiting from speech and language services. However, the district would need to compare these exit numbers with other districts in the SELPA to determine if students exit at a comparable rate.

Statewide Testing

The 1997 amendments to the IDEA required children with disabilities to participate in state and district wide assessments of student progress. In California, the Standardized Testing and Reporting (STAR) uses the following assessments and includes special education students: The California Standards Test (CST) is the general education assessment in which most special education students participate. The California Modified Assessment (CMA) is a modified assessment used for some students with IEPs. The California Alternate Performance Assessment (CAPA) is an alternate assessment for students with significant cognitive disabilities.

FCMAT reviewed the STAR data for two program areas in the special education subgroup. A detailed analysis of this data was prepared by the Visalia USD assessment staff (see Appendix E).

The district provided comparisons of matched special education students in 2007-08 and 2008-09 in both resource specialist program (RSP) and special day class (SDC) settings. The two areas assessed were English Language Arts and math.

The overall academic performance of students receiving RSP and SDC services has declined from 2007-08 to 2008-09. In the RSP, 81% of students in English Language Arts maintained skills or improved their performance level in 2007-08. However, in 2008-09 only 76% maintained skills or improved their performance level. In math, 78% of the RSP students in 2007-08 maintained or improved their performance level. However, in 2008-09, 73% maintained or improved their performance level.

In the SDC program in 2007-08, 84% of the students maintained English Language Arts skills or moved up in performance level. However, in 2008-09 only 75% maintained English Language Arts skills. In math, 85% of the students maintained math skills or

increased their performance level in 2007-08. However, in 2008-09 only 78% had maintained or improved their performance level.

The data show a decline in performance for both RSP and SDC groups from 2007-08 to 2008-09. The special education department should work closely with the assessment staff to determine the meaning of these test results in relation to the actual performance of students, and make program adjustments (See Appendix E for a more detailed analysis of STAR testing data).

Communication

Clarification is needed regarding the roles and responsibilities of the director versus those of the program specialist. The department frequently sends conflicting communications or directives to the school sites. Departmental duties also are not clearly defined for the clerical staff. FCMAT encountered some resistance and confusion regarding duties and responsibilities when information was requested from the clerical staff. The team was referred to other clerical staff members, the program specialists or the director.

The Director of Special Education has the primary decision-making authority for special education in the district. The director sends all e-mail containing information to be disseminated to all staff members. This process has created a backlog that impedes timely communications. Program specialists do not have the authority to make decisions at the site level on programs, placements and procedures, although they are viewed by principals and staff as highly competent and a great support at the school sites. The district should allow program specialists to make program decisions at the site level to expedite services to students and increase effective communication. The district should define the chain of command and authority levels of each employee in the special education department. The program has grown substantially over a number of years. It is essential for the district to develop appropriate organizational systems to support a special education program of this size.

A number of concerns were addressed with FCMAT by school site and district staff regarding a lack of responsiveness by the special education department. Phone calls and e-mails are not returned in a timely manner. The department has no procedure or policy regarding response time to e-mails or phone calls.

The district's Web site should include a section for special education that contains the procedural handbook for all staff. Other information for staff should include the manual for the SEIS computer system, SELPA policies, the district's procedural handbook, and links to the California Department of Education.

Information for parents should include documents that discuss the parent role in the IEP meeting, parental rights and responsibilities, Community Advisory Committee information, and SELPA parent training opportunities. The parent information should be translated whenever possible.

Other categories could include answers to frequently asked questions, and advisories and monthly reports from the Director of Special Education, including staff and student recognition.

Procedural Consistency

The special education department has no written policies and procedures for staff. In the absence of written procedures, unwritten procedures become policy. School site and district staff reported to FCMAT that unwritten policies include:

1. Full assessments required for all students referred to special education, even when the school site team does not believe that a full assessment is necessary.
2. No student with emotional disturbance (ED) can be expelled.
3. All speech articulation students must have a full assessment that includes all areas of speech and language before being dismissed.
4. No resource pull-out classes can be scheduled for the middle schools.
5. Sites may, or may not, use “team decision” to place students who do not qualify.
6. Special educators are not to participate in Response to Intervention (RtI).

FCMAT’s research found no citations in federal or state law to support policy items 1-6.

The district should develop a procedural manual for special education that outlines the roles and responsibilities of the district and site administrators, teachers and designated instruction providers. The manual should address the policies and procedures for referral, assessment, IEPs, placements, annual and triennial reviews, etc. The special education department has a manual for the procedures required in SEIS for IEP development. This could be incorporated into a procedural manual that would be available to all staff (including principals) online. Updates should be added when there have been changes in the law, and all staff should be directed to the changes in the online manual. Periodic advisories should be sent to all staff when issues arise that require supplemental explanation. Formal training should be provided on procedures when systemic compliance or due process issues arise.

Data Management

The department manages data manually, and systems that are available are not being utilized. Reports are not disseminated or discussed with all special education staff. CASEMIS can generate reports on identification and exit rates, trends in disability areas, high incidence areas and data by grade, disability and ethnicity. SEIS can regularly generate all types of reports on caseloads, frequency and duration of services, IEP due dates, annual and triennial due dates. Other system reports can be customized based on administrative information and data needs.

Special education data such as the number of English language learners, students on interdistrict transfers, students receiving nonpublic agency services or mediated settlements is not easily available. When FCMAT requested this information, the director had to develop it manually. The staff either does not know how to export this information from CASEMIS or SEIS, or the information is not available electronically. Manually compiled data is often inaccurate or is simply not collected, which leads to decisions being made subjectively rather than driven by data. The process of manual data gathering is time consuming and inefficient.

The following sample task list for data management will help the special education department to use data consistently to manage departmental functions. Reports can also be customized in SEIS.

Suggested Data Usage		
Task	When	Who
Review CASEMIS data from June SELPA report on exit rates, compare disability areas by districts, county/state	August; include as an agenda item for back to school meeting with staff	Director of Special Education
Review CASEMIS data for identification rates and disability trends by age/grade	December 1 Pupil Count	Director of Special Education to all staff in job-alike meetings or by e-mail
Analyze caseloads for all service providers and teachers using the SEIS database; develop chart by schools and provide data to principals	Monthly	Director of Special Education with program specialists
Analyze frequency and duration of services using the SEIS database	Quarterly	Director of Special Education with program specialists
Analyze identification rates for all disabilities by age, grade and ethnicity	December and June	Director of Special Education to discuss with staff and psychologists
Numbers of 1-1 aides added	Monthly	Director of Special Education
Monitor of aide utilization	Quarterly	Director of Special Education with program specialists

Suggested Data Usage

Task	When	Who
Review transition process for coming school year and make recommendations for instructional aide support for students moving to another level	May	Director with program specialists
Gather data on projections for staffing and support for the next school year. Submit budget requests for confirmed staffing needs to cabinet. Provide rationale for increases using data	Align with the budget development process; data should be gathered in January/February	Director of Special Education and staff
Review annual API and AYP assessment results for students with disabilities	August	Director of Special Education

Time Management

The program specialists perform tasks on the SEIS IEP system at various school sites throughout the day. These staff must frequently search out available computers on the school site to make IEP changes. Program specialists take numerous pages of IEP notes, and later type them into the system. This is not an efficient use of their time. They also receive between 60 and 75 emails per day, but only have access to e-mail in the departmental office. Since the majority of their day is spent out in the field, a laptop with e-mail access would allow the program specialists to type their notes directly into SEIS and to respond to staff concerns much more quickly.

The California Alternate Performance Assessment (CAPA) is given to students with significant disabilities whose disabilities prevent them from taking either the California Standards Test with accommodations or the California Modified Assessment with accommodations. In most districts teachers are trained to administer the CAPA to their students, which is a standard practice outlined in CAPA examiner guidelines. In Visalia USD, the program specialists administer the CAPA. In 2008-09, three program specialists administered 20 ELA, 20 math and six science CAPA assessments. Two program specialists spent 8 to 10 days in test administration. Travel time also is a factor. This utilization of program specialists is inefficient and exceeds the testing requirements for a certificated and trained examiner. The district should consider using other qualified test administrators for the CAPA, such as retired teachers, to allow program specialists to focus on curriculum and program support to school sites.

The district has several specific activities that take place when general education students transition from elementary to middle school and from middle school to high school.

This is not true for special education students. District and school site staff reported that principals and special education teachers may not know who is on the special education caseload until after school starts. This may be occurring because the school site information does not clearly designate the special education students. There is no formal transition process for these students.

The district has no system to ensure that receiving principals or staff are invited to IEP meetings when a student moves from one site to another through the IEP process. A new SDC student may arrive at a school with little time for the staff to prepare. There is no system to ensure that the staff involved in a difficult IEP are adequately prepared prior to the meeting. Frequently, the staff and administrators attend difficult IEPs for new students without knowledge of the issue or what is expected of them at the meeting. The following task list for the transition of students from level to level will help the district to streamline the dissemination of essential information to school sites and assist in a smoother transition. This is provided as a sample and should be adjusted to meet the needs of the district.

Suggested Task List for Transitioning Special Education Students from Level to Level

Transition Task	When	Who
Identify students that will transition to the next level in the fall: Pre-K to K, elementary to middle, middle to high school, high school to exit, high school to age 22	January	Director of Special Education and staff
Identify home school or potential school of service for SDC students	January	Program specialists
Establish tentative caseloads for school sites based on transition data. Share and discuss the projected data with school principals and staff	February - March	Director of Special Education and staff
Analyze the need for student support with 1-1 aides currently designated in the IEP. Will they be needed at the next level?	February - March	Program specialists
Meet with human resources for direction on any reduction in force or necessary transfers of staff	February	Director of Special Education
Determine certificated and classified staffing needs for the coming school year. Discuss with Education Services and principals	March	Director of Special Education

Suggested Task List for Transitioning Special Education Students from Level to Level

Transition Task	When	Who
Communicate with parents about the transition; notify transportation of school changes for students	April	Program specialists
Set up IEP meetings to facilitate transition with both sending and receiving staff in attendance.	April - May	Case managers at school sites
For students transitioning to a different school site, plan visits to the school site and an evening orientation meeting for parents	May-June	Case managers and program specialists as needed

Recommendations

The district should:

1. Ensure that procedures exist to guide to staff on how and when to adjust a student's IEP to guarantee educational benefit. Provide training and support for staff in the procedures for educational benefit. Train principals regarding the need for educational benefit in the IEP process and for access to the core curriculum.
2. Use data available through CASEMIS to analyze the graduation rate and special education exit rate. Provide analysis of exit and graduation rates annually to the cabinet and staff, and use the data to make program adjustments if needed.
3. Ensure that the special education department works closely with the assessment staff to review and analyze the STAR testing results for special education as a subgroup in both English Language Arts and math. Review the results with special education staff as appropriate by program, and determine the shifts in program instruction that will be necessary to increase student achievement.
4. Establish a 24-hour response time for phone calls and e-mails that provides at least a contact that the message was received and an approximate response time for answers or resolution. Require all special education program staff to adhere to this response time.
5. Clearly define the roles and responsibilities of the special education director, program specialists, and clerical staff. Delineate the chain of command and decision-making process for all staff involved. Review with the entire special education staff.
6. Through the Director of Special Education, provide guidance to the support staff to ensure that requests for information are handled courteously and efficiently.

Build accountability into the system through the use of a satisfaction survey from school sites and other departments.

7. Use the SELPA policies as a guide to develop district policies and procedures in all compliance areas of special education, from referral to exit, including related services and additional supports and expulsion. Compile all special education policies and procedures into a special education procedural manual.
8. Develop an ongoing systematic method of updating the procedural manual; e.g., periodic written updates from the director outlining procedural changes stemming from new federal or state law.
9. Develop a Web page for special education that includes the procedural handbook for all staff, and updates for both staff and parents.
10. Develop a schedule to generate reports and disseminate information regarding CASEMIS data, district individual test data, and subgroup data to special education staff.
11. Request training from the SELPA administration on the CASEMIS report and incorporate its use into the department's data gathering process. Training should be provided to the director and program specialists.
12. Request training from the SELPA or SEIS provider on the reports available in the system and advice on other reports that can be generated by the director to increase accuracy and efficiency in program administration. Use this data to determine staffing needs and the need for related service providers.
13. Use the data to determine growth, and the under or overidentification of students receiving speech, identified as EL students, etc.
14. Provide monthly special education data reports to cabinet, school sites and staff.
15. Explore options such as the use of retired teachers to administer the CAPA tests.
16. Consider purchasing laptops for the program specialists for IEP input and data collection.
17. Develop a standardized process for transitioning special education students from one level to the next, e.g., elementary to middle and middle to high school.
18. Develop a system to transition SDC students to the next grade at the end of the year so that staffing projections account for caseloads.
19. Ensure that all special education students are clearly identified in the district's student information system so that site and district office administrators can easily generate class lists.
20. Develop a method to ensure that student information is shared between elementary to middle school to high schools when students are moving up as well as between schools when a student is moved through the IEP process from one school to another.

Staff Development

The Tulare SELPA offers numerous opportunities for staff development at no cost to the district in instruction, methodology, and behavior management. These trainings are essential elements of effective special education programs, but historically, the district has had a low attendance rate. The current fiscal issues in California create a dilemma for districts that don't have the resources to release teachers to attend these essential training sessions.

No systematic method exists to inform the special educators of staff development opportunities available through the SELPA. Since the SELPA's activities are online, it is the responsibility of the individual special educator to find out about workshops and request permission from their school site to attend. The special education department does not track who attends trainings, nor are staff who attend trainings responsible for sharing the information from the training.

The table below shows the staff development opportunities for 2008-09 and the number of Visalia staff that attended.

SELPA-Offered Staff Development for 2008-09

Date	Autism	Behavior	Instruction	Other
July 24				Train the Trainers - 1
Aug. 7				Train the Trainers - 0
Aug. 12			Back to Basics -0	
Aug. 20				RtI - 1
Aug. 28				New Teacher-0
Sept. 10				New Teacher-0
Sept. 11		CPI-1		
Sept 18			Anita Archer-0	
Sept 22				New Teacher-0
Oct. 8/9	CPI - 0			
Oct. 13	Diagnostic Observation – 0			
Nov. 4	Part 2 – ADOS - 0			
Nov. 13/14		CPI-3		
Dec. ¾		BICM-6		
Jan.15/16	CPI for autism-0			
Jan. 21		CPI-9		
Jan. 27		BICM-0		
Jan. 28				Post Secondary Transition-2
March 6			RtI-0	

SELPA-Offered Staff Development for 2008-09

March 12/13		CPI-0		
March 25	Basic Language (ABLLS)-3			
April 9	CPI-0			
April 17		CPI-0		
May 5	Receiving teachers-0			
May 7	Receiving teachers-0			

The table below lists the trainings offered by the district's special education department in 2008-09. The emphasis was on new teacher training in the use of the SEIS computerized IEP system. No curriculum trainings were offered.

Many districts use job-alike meetings for open discussion, and training on instruction, methodology, and compliance issues. Typically, speech language specialists, resource specialists, SDC teachers, psychologists and designated instruction services (DIS) teachers meet monthly in job-alike groups. In 2008-09, the district held only one job-alike meeting for resource specialists and speech language specialists, and no job-alike meetings were held for SDC teachers. It was reported by school site staff to FCMAT that the staff has requested such meetings, with well-planned agendas and opportunities to discuss problematic cases and effective strategies.

Instructional aides are not included in any training; on minimum days designated for staff development they work their scheduled hours on site. Better coordination of the instructional aide schedules – along with trainings for teachers on how to best utilize their instructional aides to achieve common districtwide goals – would maximize support services to students.

Principals indicated they would like to have more training in special education procedures, how to handle difficult IEP meetings, and strategies for serving as administrative designees at IEP meetings.

District-Level Training 2008-09

Date	Training	RSP Meeting	Speech Meeting
Aug. 4	New Teacher – 16		
Aug. 5	New Teacher -16		
Aug. 6	New IEP – Session A - 23		
Aug. 6	New IEP – Session B - 9		
Aug. 7	New IEP – Session C - 30		
Aug. 7	New IEP – Session D - 11		
Aug. 7	New Teacher - 17		

District-Level Training 2008-09

Sept. 12			18
Oct. 17		RS/APE and HI - 26	
Dec. 12		28	
Feb. 26	IEP Transition Plan - 17		
March 6		22	

Recommendations

The district should:

1. Create opportunities for teachers and staff to meet in job-alike groups for training, problem solving, and opportunities for feedback to the district
2. Train site administrators and all special educators in special education policy and procedures, and in how to handle difficult IEP meetings.
3. Provide training for administrators to serve as administrative designees for special education IEP and empower them to make IEP decisions.
4. Provide training for administrators in high-incidence areas such as autism.
5. Develop a method to track which staff attend SELPA trainings and conferences. Have those attending share information learned with all appropriate staff.
6. Provide regularly scheduled training and support for instructional aides.

Due Process

The district's legal fees and the need for attorney consultation services have increased significantly over the past three fiscal years. The table below outlines the increased costs for attorney fees from 2006 to 2008. These numbers represent only the fees paid to the district's attorneys, and do not represent settlement fees paid to parents and the parents' attorney fees. The Director of Special Education is authorized to spend district resources for legal representation.

Attorney Fees for Special Education

School Year	Attorney Fees
2006-07	\$83,000
2007-08	\$139,019
2008-09	\$158,681

The usage of attorneys in special education is not monitored. No system exists to track costs for parents' attorney fees that result from mediated agreements. In addition, there is no mechanism for monitoring the costs of settlements or reimbursements to parents, or the provision of new services that result from settlements in due process cases. Finally, there are no internal procedures for follow-up staff trainings on issues that resulted in a due process settlement. Special education is a highly litigious area, and it is important for staff to learn from mistakes to reduce the amount of money spent on litigation.

Recommendations

The district should:

1. Develop a tracking system under the supervision of the Director of Special Education that documents each due process case, the issues that brought it forward, the school site, settlement costs, district's attorney fees, and district-paid parent attorney fees.
2. Review the tracking system at least monthly with the Assistant Superintendent of Education Services.
3. Develop internal control over expenditures for attorney fees. This could include a requirement for authorization by the Superintendent or Superintendent's designee.
4. Require follow-up staff training to review the issues that led to litigation.

Single-District SELPA

Review of the state criteria indicates that Visalia USD would be eligible to seek single-district SELPA status. However, that decision should be delayed until the district's special education programs are restructured, and only then could selected programs operated by the Tulare County Office of Education transition to the district. These types of decisions should be made after a complete cost and resource analysis is completed and the district has properly trained staff. The district is not well-positioned for such an undertaking because of its limited experience with very severely disabled and medically fragile students, who have been receiving services from the Tulare COE.

The state criteria for single-district SELPA status in non-metropolitan areas are:

- 15,000 or more pupils
- A comprehensive special education program (contracting may be allowed, with justification, for low-incidence programs)

Based on these criteria, Visalia USD would be of sufficient size to become a single-district SELPA in a non-metropolitan area. Tulare County SELPA has 91,470.18 units of reported ADA. Tulare County comprises 4,823 square miles, with a population density of 18.97 reported ADA per square mile. Visalia USD reported 26,650.03 units of ADA, well above the minimum size of 15,000 units of ADA, and has a population density of 119.86 within its 214 square miles. (More information on SELPA formation can be found in Appendix F.)

A SELPA's main purpose is to develop and implement a comprehensive plan to cost-effectively serve all disabled students who live within its boundaries. The district is not well-positioned for such an undertaking because of its limited experience with very severely disabled and medically fragile students, who have been receiving services from the Tulare COE.

SELPAs require a sophisticated infrastructure that provides:

- A common management information system
- An active Community Advisory Committee
- A systematic and ongoing analysis and implementation of statutory and regulatory changes, judicial decisions, and Office of Administrative Hearings findings

Such an infrastructure requires considerable technological, fiscal, and human resources. The district should determine the costs to build the required infrastructure.

To provide an alternative to school districts contemplating single-district SELPA status, the Tulare County SELPA adopted a policy that encourages school districts to serve their own residents without forming a SELPA. SELPA Policy #2505 states:

“Independently Funded Special Education Programs provides that a school district with reported ADA greater than 10,000 is eligible to operate programs for pupils with severe disabilities under an independent funding model. It also provides that districts electing this option will receive funding based on the net state apportionment, the state cost of living adjustment, and adjustments for growth or decline in enrollment. They would also continue to receive full funding from the IDEA Part B local assistance entitlement and would receive a proportionate share of the property tax revenue based on the district’s reported ADA. Funding would be based on the prior year’s reported ADA as certified at P-2 of the prior year.”

This policy clearly provides fiscal incentive for a school district to operate as if it were a single-district SELPA, yet retain its membership status in the Tulare County SELPA. If the district opted to operate pursuant to this policy, it could accrue additional revenue estimated at more than \$6 million (see Appendix G for fiscal detail):

- Its ADA would increase as a result of 233 units of ADA that would accrue to the Visalia USD that are currently reported by the Tulare COE. This results in increased revenue from all sources that are distributed based on ADA.
- It would increase its ADA apportionment by the \$1.2 million currently going to the Tulare COE.
- It would receive more than \$1 million from the county’s property taxes, essentially for staying in the SELPA.
- Given the number of group home beds in the district, its share of the out-of-home funds might well increase. The shares have been based on relative reported ADA, not where the beds actually are. If the actual bed counts of the facilities other than foster homes and foster family agencies were used to allocate these funds to the district of location, Visalia USD would see a significant increase in this funding.

This estimate is based on FCMAT’s understanding of the components of the funding mechanism as verified by county office personnel. It does not include funding from other sources such as Medi-Cal billing, MAA, Forest Reserve, and specific federal and/or state grants. It also does not include funding from the American Recovery and Reinvestment Act (ARRA).

The district should work with the SELPA to revise Policy #2505 so that incremental movement toward independent funding status could begin. This could be accomplished by using the financially independent funding rates and multiplying them by a prorated

ADA count based on the percentage of a district's resident students with disabilities being served by the district. As this percentage increases, a proportionate share of the district's reported ADA is used to generate revenue. Currently, Tulare COE provides direct services for 255 of Visalia's students with disabilities. Of that population, it is estimated that 165 students could be considered for transfer to programs operated by the district (see Appendix H). If 165 students were returned to Visalia USD over the next three years and Policy #2505 were revised to provide for this transition, the district's revenue base would gradually increase but some funding would remain with the Tulare COE for the students it serves.

	Year 1	Year 2	Year 3	Total
Total ADA	26,650	26,800	26,925	Transferred
Total Resident Students w/Disabilities	2,560	2,584	2,616	
Total students in TCOE Programs	255	173	90	165
Percent of Students in TCOE Programs	9.96%	6.70%	3.44%	
ADA Percent Adjustment	90.04%	93.30%	96.56%	
Resulting ADA for determining funding allocations of state aid, federal local assistance, and county property taxes	23,995	25,006	25,999	

The district should also work with the SELPA to flow out-of-home funds to districts in which the group home beds are located. Since addresses and locations of foster family homes and foster family agency facilities are unknown, it would probably be appropriate for the funds that they generate to continue being distributed by ADA.

The district should focus on improving the infrastructure, support, and effectiveness of its special education programs over the next year or two. Those activities will consume a great deal of staff attention and time. Subsequently, a transfer plan should be developed outlining timelines, costs, personnel required, facilities and equipment needed, necessary training, and the identification of programs and students involved.

Possible Program Transfer

The district and county office have partnered to provide special education services to district-identified students with severe disabilities in Tulare COE programs for many years. While the partnership has generally been quite successful, it has had some operational difficulties.

Once a student is referred to and accepted by the Tulare COE, contact between the staff members of the two agencies appears to be very limited. Several Visalia USD staff reported that they are often unaware of the contents of county office students' IEPs, do not attend the IEP meetings, and, in many cases, do not know who the students are or what services and instruction they receive.

District staff reported that the referral process to the Tulare COE programs can be lengthy and rigorous. Acceptance of a student into a Tulare COE program appears to be totally up to Tulare COE staff. District staff do not know or understand the criteria used to determine acceptance.

When the Tulare COE staff determines that a student is not appropriately placed in its program, the student is returned to the district through the IEP process. District staff members believe they have no alternative to accepting a student back from a Tulare COE program.

Many of the students with severe disabilities served by the Tulare COE integrate with the students on the regular education campus where the program is located. However, this is inconsistent and is most often prompted by the individual principal and Tulare COE teacher(s).

While the district does not receive billbacks from the Tulare COE for the services provided to its students, it is concerned that an excessive amount of state aid may be used to support programs that are not entirely efficient. Since all of the funding from state aid and federal assistance used for the operation of these programs goes to the Tulare COE before allocation to the districts, it precludes any excess funding from being available for the districts to help them pay the excess costs of special education that they experience. The district and COE should meet annually to discuss this concept and potential funding models that would benefit the district if any excess funds exist.

Given these concerns and the district's size, the district has requested FCMAT to analyze the possible fiscal effects of providing some of these services to its students rather than continuing to have the Tulare COE provide them. The Tulare COE and the SELPA both recognize these considerations and have expressed an intent to cooperate with the district in discussing and planning for a possible transfer of programs in the future.

As noted above, Tulare COE provides special education services to 233 of Visalia's school-age students with disabilities. Of these, 205 have severe disabilities. Removing the eight students with low-incidence disabilities and the students who are in adult age transition programs, FCMAT estimates that 147 students with severe disabilities could be considered for transfer to Visalia USD. Of these, 32 have autism and 115 have mental retardation or serious developmental disability. It may be that not all of these students would be good candidates for program transfer at this time. However, for this report, the total of 147 students will be used. The district will need to develop a program to support the needs of the students before transferring them from county to district programs.

FCMAT also found 25 students with non-severe disabilities being primarily served by Tulare COE: nine with other health impairments; and 16 with specific learning disabilities. These students, too, could reasonably be considered potential candidates for having their services provided by the district rather than the Tulare COE.

The Tulare COE operates 21 classes in Visalia. These classes are primarily for Visalia students, although some students are from other districts. In addition, there are Tulare COE related service providers for students in Visalia programs that are not counted in the 21 classes. The district would need to determine if these providers would stay with the Tulare COE or would be part of the transfer request. In addition, an undetermined number of students from other districts are enrolled in some of the COE programs that serve students with severe disabilities on Visalia USD school sites. Consideration would need to be given to whether Visalia would also serve those students or if they would need to be transported elsewhere to continue receiving services from Tulare COE.

It must be kept in mind that Tulare COE serves students with more severe and pervasive needs, requiring more labor-intensive services. The district should analyze the potential cost of delivering those services to determine if they can deliver the same quality of service in a more cost-efficient model.

FCMAT analyzed the comparative budgets, the unduplicated counts of pupils with disabilities submitted to the state, and other reports from Tulare COE, Visalia USD, and the Tulare County SELPA for 2008-09 and 2009-10. FCMAT found a considerable difference in the costs per student between programs provided by the district and programs provided by the Tulare COE. While this difference could lead one to believe that the COE program is not as efficient as possible, it actually reflects these students' needs, which require more labor-intensive services and a greater variety of related services. In many cases, students are receiving three or more services, which may include speech, physical therapy, occupational therapy, adaptive physical education, behavior management, health and nursing, and specialized health care services. They also have a higher need for one-on-one assistance from instructional aide personnel.

FCMAT analyzed the comparative budgets, the unduplicated counts of pupils with disabilities submitted to the state, and other reports from Tulare COE, Visalia USD, and the Tulare County SELPA for 2008-09 and 2009-10.

In 2008-09, Visalia USD served 399 students with disabilities, ages 5 through 21, at a total cost of \$1,213,904, or \$3,042 per pupil. These figures only represent the expenditures for special education services. Most of these students were primarily in the general education classroom. Tulare COE served another 233 Visalia USD students with severe disabilities ages 5 through 21 years in its special classes.

In 2008-09, Tulare COE spent \$15,497,849 for services for 847 students with severe disabilities, almost all of whom were in special classes. In addition, \$2,770,193 was expended for this population under unspecified support services. These expenditures total \$18,268,042, or \$21,567.94 per pupil. The expenditure per student just for the provision of the special day class services is \$14,691. This is the figure that Visalia USD must take into consideration when evaluating its ability to provide the programs more cost-effectively than Tulare COE. The remaining \$7,400 per student is expenditures for the related and support services required by these students.

Since the students' needs will continue if and when Visalia USD begins providing services to them, the district likely would see an exponential increase in its per-pupil cost. Thus, the district would need to ensure that adequate resources accompanied the program transfer. In these volatile financial times, the fiscal risks suggest that the district should be very cautious in proceeding with programming transfers. If the funding followed the student, \$3,170,487 would accompany the 147 students from Tulare COE to Visalia USD.

The district does not currently have a sufficient number of appropriately qualified staff to address the needs of these students. In addition to qualified teachers of students with such severe disabilities as autism, mental retardation, and emotional disturbance, related service staff is a necessity. The district's speech therapy staff could not absorb the level of service required by this population without additional personnel. Other related service personnel such as physical and occupational therapists, adaptive physical education therapists, nursing and specialized services personnel would need to be on staff for this population. While the COE staff would have some transfer rights, the COE teachers have a higher salary schedule than the district, which could be a deterrent to that means of acquiring necessary staff. In some of the related service areas, COE staff would experience reduced caseloads, and perhaps the service could continue to be provided by those staff. Otherwise, it is very difficult to recruit qualified staff on the open market unless the salary schedule is highly competitive.

If the district pursues this program transfer, it should ensure that a high level of transparency exists for all concerned: the parents of district students in Tulare COE programs, the SELPA, the county office and its staff, and the district staff.

The administrative staff in the special education department consists of one director and four program specialists. Based on a reported 23,382.23 ADA and an unduplicated count of students with IEPs of 2,569, the staffing ratio for program specialists is 1:6,346 ADA and 1:640 students with an IEP. If the district transfers programs it should consider hiring one additional full-time program specialist. That individual would need to have expertise in the nature and needs of students with moderate to severe disabilities, including autism, emotional disturbance and behavior management, developmental delays, and medical fragility. In addition, the program specialist would need to be knowledgeable in curriculum and program planning for these students.

The responsibilities of this employee would include but not be limited to: planning for program transition, organizing and/or providing training for district staff, conducting transfer IEP meetings for all students, monitoring and implementing programs for the students transferred, assisting with CAPA testing, assisting with classroom behavioral issues, and serving as liaison for any Tulare COE services.

Visalia USD staff has limited direct experience with students who have severe disabilities. In addition to qualified staff, the district will need to increase the capacity of its general education teaching staff to work with these more challenging students. The better prepared all parties are, the more successful the program transfers will be.

Because this would be a substantial transfer of programs, it is not recommended that the district engage in the transfer of programs at this time. It would be academically and fiscally prudent to develop a long-term plan for transferring program operations for students with severe disabilities from Tulare COE to the district. The plan should focus on ensuring that the district is capable of providing special education programs that continue to offer the same types and levels of services specified in IEPs, and with the same or better outcomes than those currently found in Tulare COE programs. The earliest that any program should be transferred is in the 2012-13 school year if the district is adequately prepared at that time. The transfer process should then continue over the next two or three years. However, the 25 students with non-severe disabilities could be transferred as early as 2011-12.

EC 56207(a) delineates the requirements for a district to transfer educational programs and services already in operation. The Tulare County/District SELPA Policy #3205 adopted May 10, 2006 and revised March 28, 2006 describes the local plan requirements for a program transfer. The SELPA plan differs in timeline and approvals from the state regulations and, as such, has two methods of transfer: regular track and fast track.

A regular track transfer requires the receiving local education agency (LEA) to submit a letter requesting program transfer to the sending LEA and SELPA by February 15. Also by February 15, the receiving LEA must submit a plan to the SELPA addressing all of the requirements of EC 56207(a). The request is reviewed by the Directors of Special Education Committee at the March meeting, with a recommendation made to the

Superintendents' Governance Committee no later than the April meeting. If approved by the Governance Committee, the planning process will take place during the following fiscal year for the change to take place in the second fiscal year.

The fast track transfer requires the receiving district to submit a letter to the proposed sending district and SELPA prior to October 1. In addition, the receiving district submits a plan to the SELPA prior to October 1 addressing all the requirements of EC 56207(a). The request is reviewed at the Directors of Special Education Committee at the October meeting. A recommendation is made to the Superintendents Governance Committee for the November meeting. The receiving district must complete their planning process by June 30. Any modifications to the district's original request must be made in writing to the SELPA by December 1 or the district will have to proceed with the original request.

SELPA Policy #3205 delineates what must be submitted by either February 15 or October 1. The plan must include:

1. Pupil needs
2. The availability of the full continuum of services to affected pupils
3. The functional continuation of the current IEP of all affected pupils
4. The provision of services in the least restrictive environment from which affected pupils can benefit
5. The maintenance of all appropriate support services
6. The assurance that there will be compliance with all federal and state laws and regulations and special education local plan area policies
7. The means through which parents and staff were represented in the planning process

In addition, Policy #3205 stipulates that the receiving LEA agrees to maintain the standard of program delivery provided by the sending LEA unless it receives approval to change the nature of the program. The receiving LEA agrees to operate the program for at least three years unless otherwise agreed upon by the Superintendents' Governance Committee.

The agreement must be signed by the sending LEA, receiving LEA, SELPA administrator, and the county superintendent of schools.

As discussed earlier in this section, if the district wants to begin discussions at the SELPA level to revise SELPA Plan #3205 to align with state regulations, the transfer timeline and requirements would significantly change. The other items in #3205, such as facilities, materials and required signatures may also be altered. If the district does not begin those discussions, or if the decision of the SELPA Governance Council is to not change the policy, then the timelines and requirements would need to be met to transfer any programs.

Recommendations

The district should:

1. Work with the SELPA to revise Policy 2505 so that it will serve as a means through which well-planned and adequately financed programs can be transferred from COE operation to district operation.
2. Explore the costs associated with building the required infrastructure to become a single-district SELPA.
3. Build capacity with the district to initiate the transfer of programs for severely handicapped students to the district.
4. Explore options for Medi-Cal billing and MAA.
5. Work with the SELPA to flow out of home funds to districts in which the group home beds are located.
6. Determine whether to proceed with requesting any program transfers.
7. Develop a long-term, systematic plan for transferring programs operation from the COE to the district when deemed appropriate.
8. Establish and utilize means through which those affected by the transfers, especially parents and teachers, can participate in the planning and implementation process.
9. Determine if it will go forward with a request that the SELPA policy #3205 be aligned with state regulations.
10. Determine whether or not the district can fiscally and logistically provide appropriate programs for these students.
11. Develop and implement an appropriate supervision and support system with sufficient, knowledgeable supervisory staff and program specialists.
12. Develop and adopt necessary policies and operational regulations/procedures for educating these students prior to initiating the transfer process.
13. Determine if it will request a transfer of all classes at once or systematically and gradually.

If the decision is to go forward with requesting any program transfers, then the district should:

1. Hire an additional program specialist whose primary responsibility will be to ensure that the transfer process is completed as outlined and to provide the necessary support to the transferred classes and site staff after the transfer is completed.
2. Begin discussion with parents and staff regarding the possible transfer of programs:

- a. Develop a listserv to keep parents informed
 - b. Schedule meetings with parents to keep them informed of the transfer process and address their concerns. The first meeting should take place before the district submits the letter of request to the Tulare COE and SELPA to prevent any perception that the district is proceeding without parent knowledge.
3. Working with the Tulare COE and the SELPA, determine which Visalia students are attending classes that are requested for transfer and the specific staff (teachers and aides) assigned to each program.
4. For each of these students, develop a matrix that includes the student's IEP goals, the amount of time for each student's related services, the setting in which each service is provided, any additional para-educator time and if transportation is required.
5. Determine which students are not Visalia USD students and decide whether the district will form a regionalized program, which could require an MOU with the sending district, or whether the students will transfer to another Tulare COE program. In either case, include the parents of those students in the parent meetings and the listserv.
 - a. Finalize which facilities will be included in the transfer and negotiate with Tulare COE, if appropriate, for the district to purchase or lease the facility from the COE, or move the class to comparable district facilities.
6. Review the cost of transporting the identified students to determine if the district should contract with Tulare COE to provide transportation or use the district's buses.
7. Complete an audit all materials and equipment in each class:
 - a. Determine if the materials and equipment are such that the district would want them to remain with the class.
 - b. Develop an agreement with Tulare COE to maintain the materials and equipment, as appropriate.
8. Review the SELPA staffing policy and state regulations for both credentialed and classified staff. In either case, the district will need to determine:
 - a. If staff will retain their seniority date and classification.
 - b. If employees will receive credited year-for-year placement on the salary schedule and/or will be subject to Y rating.
 - c. If the position will be offered to the person currently assigned to the program, provided they are appropriately credentialed for certificated staff.
 - d. If that person does not apply for the position, whether the district will follow normal hiring procedures.

- e. When the district will begin providing health benefits to transferred employees at the district rate.
- 9. Meet with staff and affected Tulare COE employees and representatives to keep them informed of the progress of the transfer, and include them in the planning.
 - a. Schedule regular meetings with Tulare COE employees and representatives to keep them informed of the progress of the transfer, and include them in the planning.
 - b. Meet as often as needed but no less than every other month.
- 10. Determine the actual cost for each program based on all staffing information including psychologists and nurses, facilities, materials, equipment, maintenance, etc.
- 11. Begin training district personnel at the sites of the transferred classes six months before the transfer.
 - a. Train administrators and site staff in disability awareness.
 - b. Train administrators in any areas of additional responsibility regarding transferred programs.
 - c. Include Tulare COE staff in these trainings as appropriate
- 12. Hold IEP meetings 30-45 days prior to transfer for each student that will be transferred to prevent any misunderstandings regarding the continuation of the student's IEP.

Appendices

Appendix A

- Mission and Core Beliefs

Appendix B

- Effective Indicators for Learning Centers

Appendix C

- Sample Guidelines for Special Circumstance Aides
- Instructional Aide Guidelines
- Online Training Courses
- Instructional Aide Database

Appendix D

- Entrance and Exit Criteria
- Language, Speech and Hearing Guidelines
- San Diego USD Service Delivery Model for Speech and Language

Appendix E

- STAR Data for 2007-08 and 2008-09

Appendix F

- SELPA Formation Checklist

Appendix G

- Funding Advantage

Appendix H

- COE Served and Transferees

Appendix A

Mission and Core Beliefs

Visalia School District's Mission Statement, "We hold high expectations and standards for the academic and social development of all students and the performance of adults," is not consistently aligned with the programs and procedures in special education. The district's goals further specify its philosophy. They are:

- All students can learn and succeed
- Family support and involvement greatly enhance the success of their child(ren) in school
- Highly skilled and effective teaching, along with positive personal attitudes and relationships, are the essential factors in a successful classroom learning experience.
- The entire community and all of its organizations and agencies play a vital role in the success of students in school. The schools, parents, and community must effectively share in the responsibility of education and provide a social environment which enhances each student's ability to achieve a high level of academic success and physical and emotional well-being. It is essential to combine efforts and maximize time, money, and human resources.
- All aspects of our district and school site operations will strive to uphold the highest ethical standards and function on a values foundation of hard work, excellence in effort, perseverance, trustworthiness, caring, responsibility, respect, fairness, and citizenship.
- Our district recognizes and appreciates the cultural and human diversity of our students, staff, and families. This diversity offers educational opportunities enhancing respect and success for all.

Appendix B

**Los Angeles Unified School District
Division of Special Education**

Learning Center

Description	A shared classroom or classrooms space where varied levels of intervention and support are provided by a diverse group of educators.
Purpose	<p>The purpose of the learning center is to :</p> <ul style="list-style-type: none"> ▪ Provide instructional support to students with disabilities. ▪ Provide layers of intervention to students with disabilities and students at risk. ▪ Provide a central location for instructional and supplemental resources to support student learning. ▪ Provide a coordinated system for the provision of support services.
Instructional Support	<p>Drop in center for immediate intervention. Example: students flow in and out to take tests, receive immediate intervention tied to the classroom, check in with a home base, etc.</p> <p>Specific instruction in educational strategies. Example: students are pretaught a learning strategy that will be used in content instruction, notetaking, organizational skills, etc. this could take place during advisory or homeroom.</p> <p>Social skill instruction. Example: Elective class: <i>Developing Reading Skills Across the Curriculum</i> Example; students participate in this class for an elective. They are taught targeted strategies for learning from content material. These may include the REWARDS program, designed to teach a strategy for decoding multi-syllabic words, <i>Makes Sense Strategies</i>, a program designed to support students learning of content material or Skills for School Success.</p>
Students served	<p>Students participating general education classes</p> <p>Any eligibilities</p> <p>Students served through both RS and SDP</p>
Staff	<p>General and special education teachers</p> <p>Coaches, and cadre leaders</p> <p>Paraprofessionals, special and general education</p> <p>DOTs personnel</p> <p>Counselors</p> <p>DIS providers</p>
Structure	<p>Aligned with small learning community structure</p> <p>Consolidates resources, puts all materials in one or two central places</p> <p>Provides range of services connected to content curriculum, development of accommodations, fluids supports, intensive supports</p>
Curriculum	<p>REWARDS</p> <p>Algebra Ready</p> <p>Skills for School Success</p> <p>Strategies Intervention Models</p> <p>Content Enhancement Strategies</p>

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Los Angeles Unified School District
Division of Special Education

School:
Date:

Learning Center Effectiveness Indicators

Identify all items observed.

Assessment			
Indicators	YES	NO	In place
1. Diagnostic assessments are in place to identify specific areas of weakness.			
2. Ongoing progress monitoring system is in place and used at least weekly.			
Curriculum			
1. Core curriculum is the foundation of instruction.			
2. Supplemental materials provided with the core curriculum are being used.			
3. Evidence-based intervention materials are used.			

Instruction-Standards-based (60 – 70 % of instructional time)			
Indicators	YES	NO	Comments
1. Learning strategies and/or advanced graphic organizers are explicitly taught through use of critical teaching behaviors, describe, model and practice.			If possible, Identify the strategy.
2. Preteaching or reteaching of content instruction is evident.			
3. Scaffolding of instruction and instructional tools is evident.			
4. Students are actively engaged in the lesson.			
5. Cooperative learning structure is used.			<input type="checkbox"/> Cooperative learning <input type="checkbox"/> Peer assisted learning <input type="checkbox"/> Small group structure <input type="checkbox"/> Other
Instruction –Intervention (15 - 20% of instructional time)			
1. Intervention is intentional (performance level) and targeted (short, to the point)			
2. Direct instruction in foundational skills is evident.			<input type="checkbox"/> Reading <input type="checkbox"/> Writing <input type="checkbox"/> Math
Paraprofessionals			
1. Paraprofessionals support individual or small groups of students.			

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Appendix C

Process for Requesting Special Circumstance Instructional Aides

Guidelines and Forms

Revised 9/1/09

Guidelines for Requesting Special Circumstance Instructional Assistance

Rationale: Special circumstance instructional assistance (SCIA) may be indicated in situations where additional staff support is needed in the classroom or en route to and from school due to 1) pervasive and aggressive student behaviors directed towards self or others, or 2) intensive student needs.

Factors for review and consideration:

The goal for any special needs student is to encourage, promote, and maximize independence. If not carefully monitored, special circumstance instructional assistance can easily and unintentionally foster dependence. A student's total educational program must be carefully evaluated to determine where support is indicated. Natural support and existing staff support should be used whenever possible to promote the least restrictive environment.

Special factors for students residing in the _____:

1. All requests for SCIA shall be submitted to the Director of Special Education. SCIA should not be indicated in individual student IEP's as a service. However, in certain circumstances the need for additional support may need to be indicated in a student's IEP. In those instances, the need shall be indicated in the present levels or meeting notes as "100% supervision."
2. For services requiring additional personnel support as a result of student-related behavioral issues, a positive behavioral support plan or Behavior Intervention Plan should be developed and should include provisions describing how and when the support will be utilized to implement the plan and when the plan will be reviewed and modified, including the fading of SCI Assistance.
3. Observational assessments and team staffings will be conducted on a quarterly basis to evaluate the continued need for SCIA.

Budget coding for additional paraeducator support (classroom and/or transportation):

0100-56400-0-5750-3142-220004-XXXX-XXX
0100-65000-0-5750-1110-210004-XXXX-XXX

The appropriate code must be entered on all status forms and payroll timesheets.
The Special Education Department Accountant shall receive a copy of all SCIA requests and shall be notified routinely of all excess costs.

Process for requesting SCI Assistance:

1. Complete the Request for Special Circumstance Instructional Assistance (for Classroom Support and/or Transportation Support).
2. Complete the Observational Evaluation for SCI Assistance (For Individual Student Support only).

3. Complete the Student Needs for Additional Support Rubric (For Classroom Support , Individual Student Support and Transportation Support).
4. Complete the Class Weighting Worksheet (For Classroom Support only).
5. Attach supporting documentation if pertinent (IEP, Behavior Plan, etc.).
6. Submit all paperwork to the Director of Special Education.
7. Upon approval, complete the Request for Long-term Substitute for classroom support and/or an employee status form for transportation support (regular employee ride along).
8. All forms will be disseminated to the Special Education Accountant, Human Resources Department, Program Specialist and Special Education Director.
9. The Special Education Director will assist the site during each quarter to review the need for on-going SCIA classroom and/or transportation support.

Request for Special Circumstance Instructional Aide**Student-Related: Classroom Support or Individual Student**

Please complete all required information and return to the Special Education Department, Director of Special Education. Notification of approval will be provided to the Program Manager, Special Education Accountant, Finance Department, and Human Resources Department.

Program _____ *Teacher* _____

Program Specialist _____ **Date** _____

Complete 1 or 2:

1. Classroom Support _____ Class Location _____

2. Individual Student Support _____ Name _____

District of Residence _____ **DOB** _____

All requests for Special Circumstance Instructional Assistance are reviewed quarterly. Please attach required forms and supporting documentation (Refer to SCIA Guidelines).

Requested Start Date _____ *Anticipated Ending date* _____

Department Approval:

Program Specialist _____ Date _____

Special Education Director/Administrator _____ Date _____

Comments:

SCIA Assignment Codes:

0100-56400-0-5750-3142-220004-XXXX-XXX

0100-65000-0-5750-1110-210004-XXXX-XXX

Enter budget code:

FUND	RESOURCE	YEAR	GOAL	FUNCTION	OBJECT	DEPT.	MANAGER

SCIA: rev. 9/10/09

Request for Special Circumstance Instructional Aide
Student-Related/Transportation Support

Please complete all required information and return to the Special Education Department, Director of Special Education. Notification of approval will be provided to the Program Manager, Special Education Accountant, Finance Department, and Human Resources Department.

Program
Teacher

Program Specialist
Date

Student
DOB

District of Residence
Classroom

Requested Start Date
Anticipated Ending date

Transportation Provider (check one):
District of Residence
First Student

Rationale for ride-along support: (Attach additional information/documentation)

Department Approval:

Program Specialist
Date

Special Education Director
Date

Comments:

SCIA Assignment Codes:
0100-56400-0-5750-3142-220004-XXXX-XXX
0100-65000-0-5750-1110-210004-XXXX-XXX

Enter budget code:

FUND	RESOURCE	YEAR	GOAL	FUNCTION	OBJECT	DEPT.	MANAGER

SCIA: rev. 9/1/09

Student Needs for Additional Support Rubric

Student Name: _____ DOB: _____ Disability: _____ Date Reviewed: _____

Teacher: _____ Current Program: _____

Select the number that best describes the student in each rubric category that is appropriate.

	Health/Personal Care/Rating	Behavior/Rating	Instruction/Rating	Inclusion/Mainstreaming/Rating
0	General good health. No specialized health care procedure, medications taken, or time for health care. Independently maintains all "age appropriate" personal care.	Follows adult directions without frequent prompts or close supervision. Handles change and redirection. Usually gets along with peers and adults. Seeks out friends.	Participates fully in whole class instruction. Stays on task during typical instruction activity. Follows direction with few to no additional prompts.	Participate in some core curriculum within general education class and requires few modifications. Can find classroom. Usually socializes well with peers.
1	Mild or occasional health concerns. Allergies or other chronic health conditions. No specialized health care procedure. Medications administration takes less than 10 minutes time. Needs reminders to complete "age appropriate" personal care activities.	Follows adult direction but occasionally requires additional encouragement and prompts. Occasional difficulty with peers or adults. Does not always seek out friends but plays if invited.	Participates in groups at instructional level but may require additional prompts, cues or reinforcement. Requires reminders to stay on task, follow directions and to remain engaged in learning.	Participates with modification and accommodation. Needs occasional reminders of room and schedule. Requires some additional support to finish work & be responsible. Needs some social cueing to interact with peers appropriately.
2	Chronic health issues, generic specialized health care procedure. Takes medication. Health care intervention for 10-15 min daily (diet, blood sugar, medication). Requires reminders and additional prompts or limited hands on assistance for washing hands, using bathroom, wiping mouth, shoes, buttons, zippers, etc. Occasional toileting accidents.	Has problems following directions and behaving appropriately. Can be managed adequately with a classroom behavior management plan, but unable to experience much success without behavior support plan implementation.	Cannot always participate in whole class instruction. Requires smaller groups and frequent verbal prompts, cues or reinforcement. On task about 50% of the time with support. Requires more verbal prompts to follow directions.	Participates with visual supervision and occasional verbal prompts. Requires visual shadowing to get to class. Needs modifications & accommodations to benefit from class activities. Regular socialization may require adult facilitation.
3 *	Very specialized health care procedure and medication. Limited mobility. Physical limitations requiring assistance (stander, walker, gait trainer or wheelchair). Special food prep or feeding. Health related interventions 15-45 min. daily. Frequent physical prompts and direction assistance for personal care. Food prep required regularly. Requires toilet schedule, training, direct help diapering.	Serious behavior problems almost daily. Defiant and/or prone to physical aggression. Requires a Behavior Intervention Plan (BIP) and behavior goals and objectives on the IEP. Requires close visual supervision to implement BIP. Medication for ADD/ADHD or other behaviors.	Difficult to participate in a large group. Requires low student staff ratio, close adult proximity and prompts including physical assistance to stay on task. Primarily complies only with 1:1 directions & monitoring. Cognitive abilities & skills likely require modifications not typical for class as a whole. Needs Discrete Trial, ABA, Structured Teaching, PECS. Requires signing over 80% of time.	Participation may require additional staff for direct instructional and behavioral support. Requires direct supervision going to & from class. Always requires modifications & accommodations for class work. Requires adult to facilitate social interaction with peers.
4 *	Specialized health care procedure requiring care by specially trained employee (G tube, tracheotomy, catheterization). Takes medication, requires positioning or bracing multiple times daily. Health related interventions 45 min. daily. Direct assistance with most personal care. Requires two-person lift. Direct 1:1 assistance 45 or more minutes daily.	Serious behavior problems with potential for injury to self and others, runs-away, aggressive on a daily basis. Functional Analysis of Behavior or Hughes Bill has been completed and the student has a well-developed BIP, which must be implemented to allow the student to safely attend school. Staff has been trained in the management of assaultive behaviors.	Cannot participate in a group without constant 1:1 support. Requires constant verbal and physical prompting to stay on task and follow directions. Regularly requires specific 1:1 instructional strategies to benefit from the IEP. Cognitive abilities and skills require significant accommodation and modification not typical for the class group.	Always requires 1:1 staff in close proximity for direct instruction, safety, mobility or behavior monitoring. Requires 1:1 assistance to go to and from class 80% of the time. Requires adult to facilitate social interaction with peers and remain in close proximity at all times.

*Attach a copy of documentation indicating frequency and duration over a period of time to determine further consideration of special circumstance instructional assistance. If mostly ratings of 3's & 4's, in two or more areas, continue with needs assessment process.

Observational Evaluation for SCI Assistance

Student: _____ School: _____

Teacher: _____ Date: _____

Observer's Name/Title: _____ Setting: _____

Section 1: Please complete the following review of the visual and physical structure of the classroom, curriculum design, data collection and planning.**Posted classroom schedule** _____ *Yes* _____ *No*

If yes, complete section below:

1. The following elements are included in the classroom schedule:

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Times | <input type="checkbox"/> Locations |
| <input type="checkbox"/> Students | <input type="checkbox"/> Activities |
| <input type="checkbox"/> Staff names | |

2. The schedule is ☐ Daily ☐ Weekly ☐ Other _____**Individual student schedule** _____ *Yes* _____ *No*

If yes, complete section below:

1. Student uses the following format for individualized schedule:

- | | |
|-------------------------------------|-------------------------------|
| <input type="checkbox"/> Object | <input type="checkbox"/> Icon |
| <input type="checkbox"/> Photograph | <input type="checkbox"/> Word |
| <input type="checkbox"/> Picture | |

2. Room is arranged with structure to correlate with tasks on schedule:

- | | |
|---|--|
| <input type="checkbox"/> Area for one-to-one work | <input type="checkbox"/> Area for independent work |
| <input type="checkbox"/> Area for group work | <input type="checkbox"/> Area for leisure |
| <input type="checkbox"/> Not applicable | |

3. Student ability to follow the schedule:

- | | |
|---|--|
| <input type="checkbox"/> Independent | <input type="checkbox"/> With direct verbal prompt |
| <input type="checkbox"/> Non-verbal with gestural prompt | <input type="checkbox"/> With physical prompt |
| <input type="checkbox"/> With indirect verbal prompt | |
| <input type="checkbox"/> Consistent <input type="checkbox"/> Inconsistent | |

4. Student use of the schedule:

- | | |
|---|---|
| <input type="checkbox"/> Student carries schedule | <input type="checkbox"/> Student uses transition cards |
| <input type="checkbox"/> Student goes to schedule board | <input type="checkbox"/> Teacher carries and shows the schedule |
| <input type="checkbox"/> Consistent <input type="checkbox"/> Inconsistent | |

Attach sample classroom schedule and individual student schedule*Curriculum and instructional planning**

1. Check the curricular domains included in the student's program:

- | | |
|--|--|
| <input type="checkbox"/> Communication | <input type="checkbox"/> Academics |
| <input type="checkbox"/> Self care | <input type="checkbox"/> Motor skills/mobility |

- ☐ Domestic
☐ Social/behavioral
☐ Pre-vocational/vocational

- ☐ Recreation/leisure
☐ Other: _____

2. Describe curricular accommodations and/or modifications currently being used:
3. List equipment or devices used /available that may relate to the need for assistance (may be low incidence equipment or assistive technology device):
4. Are materials and activities age appropriate? _____ Yes _____ No
5. Are materials and activities instructionally appropriate? _____ Yes _____ No

Current data systems and collection of data

Has data been collected on student performance? _____ Yes _____ No

If yes, complete section below:

1. Current data on each objective includes:

- ☐ Date
☐ Task

- ☐ Level of independence (prompting needed)

2. Data is collected:

- ☐ Daily
☐ Weekly

- ☐ Biweekly
☐ Monthly

3. Data is summarized in the following manner:

- ☐ Graphed
☐ Written narrative

- ☐ Other _____

****Attach sample***

Behavior and safety

1. Describe the behavior management system in the classroom, including positive reinforcers and consequences. Is the system appropriate for the student or does it need modification?

2. Are specific positive behavior supports utilized for the student? ☐ Yes ☐ No
Describe:

3. Is there appropriate safety equipment in place? ☐ Yes ☐ No

4. Are appropriate safety and medical procedures being used? ☐ Yes ☐ No

5. Does it appear appropriate training has been provided? ☐ Yes ☐ No

Comments:

6. Describe the student's interactions with peers:

7. Describe the student's interaction with non-classroom staff in a less structured environment:

8. What activities does the student choose during breaks?

9. What problems are evident?

Planning team meetings

1. Are team meetings held? (formal or informal meetings to problem solve) ____ Yes ____ No

If yes, complete section below:

- | | |
|--|-----------------------------------|
| <input type="checkbox"/> Daily | <input type="checkbox"/> Biweekly |
| <input type="checkbox"/> Weekly | <input type="checkbox"/> Monthly |
| <input type="checkbox"/> Need to be schedule | |

Meetings include the following participants:

Current utilization of assistance

How is existing assistance utilized?

- | | |
|--|---|
| <input type="checkbox"/> Behavior management | <input type="checkbox"/> Medical assistance |
| <input type="checkbox"/> Curriculum adaptation and preparation | <input type="checkbox"/> Supervision |
| <input type="checkbox"/> Instruction - individual | |
| <input type="checkbox"/> Instruction - group | <input type="checkbox"/> |

Other _____

Team Summary/Action Plan

1. Can current conditions be modified to meet the student's goals and objectives and/or personal care needs? If so, how?

2. What other types of assistance are needed? Why?

3. Are there any other issues that need to be addressed?

4. Recommendations:

Techniques to Promote Independence and Fading of Support

1. Watch before assisting. Can the student ask for help from teacher or peer?
2. Can the student problem solve independently?
3. Give the student extra time to process and respond before assisting.
4. Provide consistent classroom schedule (posted, visual, at desk if needed, reinforcement periods included). Teach the student how to use it.
5. Start with the least intrusive prompts to get the student to respond:
 - A. Gestural, hand or facial signals
 - B. Timer
 - C. Verbal
 - D. Light physical
 - E. Hand over hand
6. Prompt, then back away to allow independent time.
7. Use strengths and weaknesses, likes and dislikes to motivate student participation and interest.
8. Model; guide (watch and assist); check (leave and check back).
9. Teach independence skills (raising hand, asking for help, modeling other students).
10. Praise for independent attempts.
11. Direct the student to answer to the teacher.
12. Prompt the student to listen to the teacher's instructions. Repeat only when necessary.
13. Encourage age appropriate work habits. See what other students are doing.
14. Be aware of proximity. Sit with the student only when necessary.
15. Encourage peer assistance and partnering. Teach peers how to help, not enable.
16. Utilize self-monitoring checklists for student.
17. Color code materials to assist with organization.
18. Use transition objects to help the student anticipate/complete transition (i.e., head phones for listening center).
19. Break big tasks into steps.
20. Use backward chaining (i.e., leave the last portion of a cutting task for the student, then gradually lengthen the task).
21. Assist in encouraging a means for independent communication (i.e., PECS).
22. Provide positive feedback (be specific to the situation).
23. Ask facilitative questions ("What comes next?" "What are other students doing?" "What does the schedule say?" "What did the teacher say?").
24. Give choices.

Instructional Aide Guidelines

I. GUIDING PRINCIPLES

A. Rationale

SELPA is committed to providing a full continuum of placement options for students with identified disabilities who are receiving special education services. The Individuals with Disabilities Education Act (IDEA2004) and California laws and regulations describe a continuum of alternative placements such as instruction in general education classes, special classes, special schools, home instruction and instruction in hospitals and institutions. Both federal and state laws contain provisions to ensure that children with disabilities are educated to the maximum extent possible with children who are not disabled and that children are removed from the general education environment only when the nature of the disability is such that education in the general education classroom cannot be satisfactorily achieved with the use of related services.

B. Related Services

California's related services as defined in Education Code and Title V regulations are referred to as Designated Instruction and Services or DIS. IDEA2004 defines Related Services as signifying the utilization of aids, services, and other supports that are provided in general education classes or other education-related settings to enable children with disabilities to be educated with non-disabled children to the maximum extent appropriate. This applies to any general education program or special education program in which the student may participate.

C. Special Needs Assistant/Support

By law, services to students with special needs must be delivered in the least restrictive environment (LRE). When an IEP Team is considering a special needs assistant for a student, all aspects of the student's program must be considered with the intent of maximizing the student's independence. It must be acknowledged that the teacher, rather than the assistant, is responsible for the design and implementation of the student's program. The IEP team must consider the student's personal independence when discussing the necessity for a special needs assistant. The foremost educational goal for any special needs student is to encourage, promote, and maximize independence. Without proper consideration of the role of a special needs assistant, the presence of such support may unintentionally foster dependence. The team must carefully evaluate a student's total educational program to determine where support is indicated. Natural support, existing staff support, and/or other classroom modifications/supports (e.g. assistive technology, behavior plan) should be used whenever possible to promote the least restrictive environment (LRE).

D. Other considerations

- The IEP Team needs to base the decision for a special needs assistant as a related service on appropriate documentation and assessment. A special needs assistant is considered only in instances where the student is not able to

benefit from a Free and Appropriate Public Education without such support. Specifically the program modifications or supports for school personnel (special needs assistant) are necessary to assist the student to:

- ◆ Advance appropriately toward the annual goals
 - ◆ Be involved in and progress in the general curriculum
 - ◆ Participate in extracurricular and other nonacademic activities; and,
 - ◆ Be educated and participate with other disabled and non-disabled students.
- If a special needs assistant is necessary for curricular purposes, the IEP Team must consider if the current goals and objectives are appropriate and if the proposed placement is truly the least restrictive environment for the child.
 - If a special needs assistant is necessary for behavioral concerns, the IEP Team must have charted behaviors and implemented an appropriate behavior plan before they consider a special needs assistant.
 - The school nurse should be a part of the IEP Team discussion whenever assistance is needed due to a medical need.

II. PROCEDURES/ADMINISTRATIVE GUIDELINES

A. Complete an Evaluation

Members of the school education team need to complete the Evaluation to determine the Appropriateness for a Special Needs Aide form to evaluate the need for additional classroom support.

B. Schedule IEP Meeting

If, after completing the form, it is determined that a special needs assistant (for the classroom or for a specific student) is needed, an IEP meeting should be scheduled and should include an appropriate district of residence administrator/designee.

C. The IEP needs to include the following:

1. A statement that the special needs assistant is necessary for the child to benefit from his/her educational program with a specific statement of how the related service will assist the child. Specify the conditions and circumstances under which the special needs assistant appears appropriate for the student.
2. An objective manner (criteria) for evaluating whether the addition of personnel assists the child in benefiting from his/her educational program.
3. A statement of the frequency and location of the related service(s).
4. A statement of the duration of the services. A short-term special needs assistant could be used for an evaluation period or transition period not to exceed eight weeks.
5. A statement of the role of the special needs assistant as well as the role of the teacher and any other professionals responsible for the student's education.

6. A systematic written plan to address how the additional personnel support will be monitored and to address the criteria for fading that support as the student gains independence.
7. The schedule for review of the student's program which leads to the fading of the assistant. It is recommended that the team meet at least every six months except for cases of extreme medical need.
8. Goals/objectives that address the skills needed by the child in order for the special needs assistant to be faded.
9. A behavior plan for a student requiring a special needs assistant for behavior. The behavior plan needs to include a description of how and when support, including personnel, will be utilized to implement the plan and when the plan will be reviewed and modified.
10. If the student has instructional needs requiring additional personnel, a written plan must be developed by the general and/or special education teacher(s) based on appropriate assessment information. The plan must specify how the additional personnel will be utilized to support the teacher in implementing the student's goals and objectives. Additionally, the plan must indicate what attempts will be made to transition to other available classroom resources and supports. (timeline, criteria, and specific resources and supports)

Evaluation to Determine the Appropriateness for a Special Needs Aide

Date:			
Student:			Grade: <input type="text"/>
Teacher:		Title:	
School Site:			Room Number: <input type="text"/>
Instructional Setting:			

When completing the form, please use the back pages of the form as necessary to give complete information.

A. Curriculum and Instructional Planning

1. Check the curricular domains included in the student's IEP:

____ Communication

____ Academic/Pre-academic

☐ Self-Care
 ☐ Behavior
☐ Pre-vocational, Vocational
 ☐ Motor skills/Mobility
☐ Other (specify: _____)

2. Is the student currently making progress towards the IEP goals?

☐ Yes (all)
 ☐ Yes (some)
 ☐ No

3. If limited or no progress is being made, what factors are responsible for this?

4. Describe all interventions attempted including the duration of the intervention and the success or lack of success for each intervention.

5. List equipment or devices used that may relate to the need for assistance.

6. Describe reinforcers and reinforcement schedule used.

7. List materials and activities being used as part of the student's instructional program.

8. Does the student have behaviors that negatively impact the learning environment for other students? (Please include all documentation of attempts to reduce the behavior including a behavior plan.)

B. Classroom Environment

1. Attach a diagram of the arrangement of the furniture and instructional areas that provide the physical structure of the classroom. Does the physical environment of the classroom present barriers to the student's participation in the curriculum? If yes, how?

1. Describe the classroom schedule and visual supports provided for the student.

2. Describe the classroom management system.

Are the visual structures in place enough to meet the student's needs? If no, what else is needed? Is the current classroom management system working for the student? If no, what else is needed?

3. Are distractions occurring in the classroom that interfere with student learning? If yes, what are they?

C. Determining Student Access to the Curriculum

1. What part(s) of the curriculum is accessible to the student given the natural or available supports?
2. What part(s) of the curriculum is not accessible given the natural or available supports?

What factors prevent the student's participation in this aspect of the curriculum?

D. Determining Available Supports

1. What supports (personnel, environmental, structural, instructional) are available for the student in the natural environment?
2. Describe other school personnel that might be available to support the student's needs? (classroom teacher, special education teacher, special education paraprofessional, other school instructional aides, peer support, etc.)
3. Describe other modifications or supports that might be considered for the student that have not been tried. (change of classroom environment, classroom management plan, individual behavior plan, assistive technology)
4. Please check any intervention below that might be helpful to try before consideration of a **special needs aide**.
 - a. ____ Training for instructional staff (specify what type)
 - b. ____ In class coaching
 - c. ____ Consultation in the classroom
 - d. ____ Behavior observation/support
 - e. ____ Other (please specify)
5. If a **special needs aide** is being contemplated, does the assistant need to be assigned to one student or could the assistant be assigned to the entire class?
6. Specify exactly what times during the day the student could participate without the support of the **special needs aide**.

Time of Day	Activity

If a **special needs aide** is contemplated for this student, what part(s) of the day would the student require support? What type of support would be given?

Time of Day	Activity	Anticipated Support

E. Determining the Need for Assistance

_____ The student is able to access the curriculum in the least restrictive environment with supports currently available in the school environment.

_____ The student is not able to access the curriculum in the least restrictive environment using natural and/or available supports for the following reason(s):

_____ Intensive medical need (attach documentation)

_____ Serious behavior (attach documentation of attempted interventions and current behavior plan)

_____ Low Incidence needs (scribe, sign language translator, notetaker, etc.)

_____ Basic life function assistance

_____ Other (curricular, mobility, etc.)

Specify: _____

ADVANTAGES

- ✓ Uses Adobe Connect
- ✓ Assessment questions for review at the end of each module ,
- ✓ Reports available for participant completion-tracking mechanism
- ✓ Ability for Time frame to close curriculum
- ✓ LACOE is using as a condition of hire
- ✓ CSEA local chapter approval
- ✓ Notes page includes all audio
- ✓ Visual and audio modalities
- ✓ Password protected

INDEX OF COURSES

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Course 2 Division Expectation

Course 3 Say What-Acronyms

Course 4 Student Populations

- Module 1 Division of Special Education Facts
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- Module 3 Division of Alternative Education Facts

Course 5 Division of Special Education

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Course 8 Facilitating student learning

- Module 1 Facilitating student learning
- Module 2 Academic (Diploma Bound) Students
- Module 3 Instructional strategies for academic
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Working in a Team

So you want to be a Para Educator-Introduction
Top 10 Things Working Together: Teacher-Para

Educator Teams

Academic Para Duties
Academic Readiness Duties

Communication

Communication Skills
Communication Barriers
Reading Nonverbal Communication Cues
Creating a Foundation for effective communication
Dealing With Others

Dealing with Behavioral Challenges

Classic Behavior Techniques that Backfire
Guidelines for handling challenging behaviors
Positive Reinforcement systems
Behavioral Prevention Strategies
Communicative Functions of Behavior
Behavior Intervention CAUTIONS

Ethics in the Workplace

10 Tips to keep Ethical encompass
Basic Ethical issues
Areas of Ethical consideration
Confidentiality

Child Abuse: An Educator's Responsibilities

What is child abuse?
Physical Abuse
Physical Neglect
Sexual Abuse Part I
Sexual Abuse Part II
Emotional Maltreatment
What is not child abuse
FAQ

LACOE Paraeducator Training Curriculum

For Purchasing information please contact:

Tana Donaghy, Donaghy_Tana@laoe.edu, 562=803-8209

Appendix D

Special Education Procedural Handbook Exit Criteria
Created by Sutter County SELPA

Entrance and Exit Criteria

An IEP Team may determine that a student no longer requires special education services when the student can function within the instructional range of the general education classroom, not necessarily at grade level, without specially designed instruction or supplemental aids and services. The student shall be assessed before determining that he or she no longer qualifies as a student with a disability. In all cases, the team must carefully review to ensure that a free appropriate public education (FAPE) has been provided and that one or more of the following exists:

1. The student has met goals and objectives and the team feels that he or she no longer requires special education support or services to be successful in general education.
2. The conditions that qualified the student for initial eligibility have been ameliorated to the extent that he or she can function adequately in a general school program with or without accommodations or medications.
3. When the IEP Team has determined the student's needs will be better met in an alternative education program or a general education program with no special education support and the parents agree.
4. When a student completes a prescribed course of study and has met proficiency standards as required by California Ed. Code and the LEA governing board to obtain a high school diploma or reaches the age of 22 years during the school year.
5. Parent Revocation of special education services.

Questions and Answers Regarding Dismissal Procedures

1. How should dismissal decisions be made?

These following key concepts should be employed when the IEP Team is discussing and making decisions regarding dismissal:

- The setting of an appropriate long range treatment goal becomes the basis for decision-making with regard to dismissal.
- The goal of provision of special education services is to provide the student the ability to benefit from the educational process academically, socially and vocationally.

2. What are the basic criteria for dismissal?

- There is documentation of satisfactory achievement in the general curriculum without support and/or
- The disability no longer interferes with the student's ability to participate in the educational program (pre-academic, academic or vocational).

3. What kind of written documentation is needed for dismissal?

- Data supporting the rationale for dismissal must be recorded in a written format

- The criteria used to establish eligibility for dismissal must be specified and identified in the IEP.
- 4. What kind of data may be used to document the rationale for dismissal?**
- Analysis of work samples
 - Progress graphs or charts
 - Anecdotal records with dates, conditions, etc.
 - Formal test results may be used with caution
 - Outcomes on STAR, CAHSEE, etc.
- 5. Should the same tests be used for documenting dismissal conditions as were used to establish eligibility?**
- In most cases, the instruments which were used to diagnose a disorder are not appropriate measures of progress to determine the appropriateness of dismissal from special education. While these may have been good samples of behavior for the purpose of identifying problems, they do not measure the broad spectrum of goals that were targeted in intervention and, therefore, present too narrow a perspective for dismissal decision-making. Although an assessment using standardized scores may have been used to establish eligibility, re-administration of it for re-evaluation will give no information as to the generalization of skills in order to access the general education curriculum, which is the long range treatment goal. An analysis of samples would be a more appropriate method of documenting current levels of performance in order to discuss the need for dismissal.
- 6. Who may recommend dismissal of a special education student from services?**
- No one person may dismiss a student from a program. The IEP Team makes the decision.
- 7. Should a special education student be exited when they have demonstrated mastery of goals in the direct therapy or teaching setting?**
- No. The generalization stage is critical to the learning process. Exiting from special education services is not an appropriate action for students who are in a generalization phase, unless the student has achieved maximum expected improvement criteria. A change of service model might be considered.

Special Education Exit Criteria:

There are several factors of the IEP Team to consider when determining the appropriateness of exiting students from Special Education who were previously eligible with one of the 13 Disability Categories.

The student's disability no longer negatively affects their educational performance in the general or special education classroom setting.

The student no longer meets the criteria as having a disability under which he/she was previously identified **and** no longer requires special education services in order to benefit from their educational program and/or services.

The student's educational needs are best reinforced and monitored in a general education classroom.

The student uses compensatory strategies appropriately and effectively.

He/she graduated from high school with a diploma.

The student is performing at a pre-determined mastery level as documented by the successful completion of the IEP goals/objectives which were written to reflect the most recent California Standards.

Exit Criteria for Language Disorder

The IEP Team shall determine the exit from special education when the impairment no longer exists or may still exist but no longer adversely affects the student's educational performance.

There are several factors for the IEP Team to consider when making decisions regarding exiting a student from special education.

The student no longer meets the qualification criteria for a speech and language disorder under which he/she is receiving language therapy as a primary special education service OR the student no longer requires language therapy as a related/DIS service in order to benefit from his/her special education program.

The student's language disorder no longer interferes with the student's educational performance, including social, emotional, academic, and/or vocational functioning.

The student is performing at a pre-determined mastery level as documented by successful completion of IEP benchmarks. These benchmarks are to be written to reflect the most recent California Language Arts (listening and speaking) Performance Standards.

The student has attained long term goals specified on the IEP.

The student's needs may be better served by an alternative program and/or service. Specify: _____

He/she graduates from high school or reaches the age of 22 years (or the end of the fiscal year in which he/she turns 22 years of age).

The student demonstrates receptive and expressive language skills within the range expected for his/her developmental level.

The student uses augmentative communication aids appropriately, effectively, and independently.

The student uses compensatory communication skills appropriately, effectively, and independently.

Comments:

The student's communication skills are best reinforced and monitored in a classroom setting. The student's natural language occurs within the general education setting.

Exit Criteria for Fluency Disorder

The IEP Team shall determine the exit from special education when the impairment no longer exists or may still exist but no longer adversely affects the student's educational performance. There are several factors for the IEP Team to consider when making decisions regarding exiting a student from special education.

The student no longer meets the qualification criteria for a speech and language disorder under which he/she is receiving fluency therapy as a primary special education service OR the student no longer requires fluency therapy as a related/DIS service in order to benefit from his/her special education program.

The student's fluency disorder no longer interferes with the student's education performance, including social, emotional, academic, and/or vocational functioning.

The student has attained long term goals specified on the IEP.

The student's needs may be better served by an alternative program and/or service. Specify: _____

He/she graduates from high school or reaches the age of 22 years (or the end of the fiscal year in which he/she turns 22 years of age).

Other associated and/or handicapping conditions, for example, neurological impairments such as ADHD, cluttering, Asperger's Syndrome, or Tourette Syndrome prevent the student from benefiting from further therapy.

The student consistently demonstrates behaviors that are not conducive to therapy such as a lack of cooperation, motivation, or chronic absenteeism. In

these circumstances the IEP Team should reconsider the initial eligibility decision since these behaviors may reflect social maladjustment, environmental, cultural, or economic factors rather than an actual disability. The IEP Team may also explore alternative services or strategies to remedy interfering behaviors or conditions.

Results of a self inventory indicate that the student, teacher, and/or parent perceive the student to be a normal speaker.

Comments:

Exit Criteria for Articulation Disorder

The IEP Team shall determine the exit from special education when the impairment no longer exists or may still exist but no longer adversely affects the student's educational performance. There are several factors for the IEP Team to consider when making decisions regarding exiting a student from special education.

Articulation Exit Criteria

The IEP Team may determine a student ineligible for articulation therapy when the IEP Team determines based on data that any one or more of the following conditions exist:

The student no longer meets the articulation criteria for a speech and language disorder under which he/she is receiving articulation therapy as a primary special education service OR the student no longer requires articulation therapy as a related/DIS service in order to benefit from his/her special education program.

The student's articulation delay/disorder no longer interferes with the student's educational performance, including social, emotional, academic, and/or vocational functioning.

Articulation skills are commensurate with developmental level.

The student's articulation skills are best reinforced and monitored in a classroom setting.

The student's needs may be better served by an alternative program and/or service. Specify: _____

He/she graduates from high school or reaches the age of 22 years (or the end of the fiscal year in which he/she turns 22 years of age).

Other associated and/or disabling conditions prevent the student from benefiting from further therapy. Examples are dental abnormalities, velopharyngeal insufficiency, social/emotional factors or inadequate physiological support of speech. Associated and/or disabling condition(s): _____

The student consistently demonstrates behaviors that are not conducive to therapy (e.g. lack of cooperation, motivation, or chronic absenteeism). In these circumstances the IEP Team should consider the initial eligibility decision since these behaviors may reflect social maladjustment, environmental, cultural, or economic factors rather than an actual disability. The IEP Team shall also explore alternative services or strategies to remedy interfering behaviors or conditions prior to reinstating speech services if indicated.

Comments:

Exit Criteria for Voice Disorder

The IEP Team shall determine the exit from special education when the impairment no longer exists or may still exist but no longer adversely affects the student's educational performance. There are several factors for the IEP Team to consider when making decisions regarding exiting a student from special education.

It is strongly recommended that a follow-up laryngeal exam be performed prior to dismissal from therapy, as appropriate.

Voice Exit Criteria

The student may no longer require voice therapy when the IEP Team determines that any one or more of the following general conditions exist:

The student no longer meets the qualification criteria for a speech and language disorder under which he/she is receiving voice therapy as a primary special education service OR the student no longer requires voice therapy as a related/DIS service in order to benefit from his/her special education program.

The student's voice disorder no longer interferes with the student's educational performance, including social, emotional, academic, and/or vocational functioning.

Results of voice assessment should be integrated with medical information when considering exit from therapy. This is to be reflected in the report.

The student has attained long term goals specific on the IEP.

He/she graduates from high school or reaches the age of 22 years (or the end of the fiscal year in which he/she turns 22 years of age).

Other associated and/or disabling conditions prevent the student from benefiting from further therapy. Examples are dental abnormalities, velopharyngeal insufficiency, social/emotional factors or inadequate physiological support of speech. Associated and/or disabling condition(s): _____

Persistent inappropriate vocal behaviors prevent the student from benefiting from therapy. Describe inappropriate behaviors: _____

The student uses compensatory strategies appropriately and effectively.

The student consistently demonstrates behaviors that are not conducive to therapy (e.g. lack of cooperation, motivation, or chronic absenteeism). In these circumstances the IEP Team should consider the initial eligibility decision since these behaviors may reflect social maladjustment, environmental, cultural, or economic factors rather than an actual disability. The IEP Team shall also explore alternative services or strategies to remedy interfering behaviors or conditions prior to reinstating speech services if indicated.

Comments

Language, Speech and Hearing Guidelines

INTRODUCTION

These Language, Speech, and Hearing (LSH) Program Guidelines are part of a continuing process to utilize appropriate caseload selection and dismissal criteria among those districts served by _____ Speech-Language Pathologists. These guidelines are recommended in order to provide appropriate, consistent, fiscally responsible, and quality LSH program services to the students of _____.

These LSH Program Guidelines are based on American Speech-Language Hearing Association (ASHA) recommendations, California Speech-Language Hearing Association (CSHA) recommendations and the federal and state mandates for special education according to IDEA 2004. The format and much of the content were adopted from Riverside County SELPA's Language, Speech and Hearing (LSH) program guidelines, ASHA's Guidelines for the Roles and Responsibilities of the School-Based Speech-Language Pathologist (1999), CSHA position papers on Caseloads, and California Department of Education Program Guidelines (1989).

The following excerpts from the Guiding Principles outlined in the "Guidelines for the Roles and Responsibilities of the School-Based Speech-Language Pathologist" (ASHA, 1999, pg. 2) are the basis of _____ guidelines:

- Language is the foundation for learning within all academic subjects.
- Educational success leads to productive citizens.
- School-based Speech-language pathologists' goals are to remediate, ameliorate, or alleviate student communication problems within the educational environment.
- A student-centered focus drives team decision-making.
- Comprehensive assessment and thorough evaluation provide information for appropriate eligibility, intervention and dismissal decisions.
- Intervention focuses on the student's abilities, rather than disabilities.
- Intervention plans are consistent with current research and practice.

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STUDENT STUDY TEAM (SST) PROCESS

General Information

Any student for whom there is a concern regarding progress in general education should be referred to a Student Study Team (SST), or facsimile thereof. Under California Education Code 56303 and under the “No Child Left Behind” Education Act, all regular education supports and services must be exhausted prior to a referral for special education services. It is with the above in mind that the SST process has been established.

Student Study Teams (SSTs) are school based, problem-solving groups whose mission is to assist teachers, administrators, school staff, and parents with intervention strategies for dealing with the academic and social-emotional behavioral needs of regular education students. Through the SST process, the team can recommend classroom supports, accommodations and modifications which, when successfully implemented, will support a struggling child and possibly prevent the requirement for special education intervention. The school speech and language pathologist may act as a consultant when SST perceives a child needs specific recommendations regarding language and/or speech needs. SSTs can be used for grades K-12. They have also been used successfully at the preschool level to facilitate the development of emergent skills prior to the referral for Special Education assessment.

Specific to the area of speech and language, the SST can suggest interventions to support a child in the classroom. The team should consider the Content Standards the child is struggling with as targets for intervention. The speech and language pathologist can then provide strategies to support language development and/or correct phoneme production through this process based on the information shared at the SST meeting. Such suggestions could include support of a specific language concept or a demonstration or suggestion on how to accurately model correct production of an errant phoneme through the use of the core curriculum text available within each regular and special education classroom.

At a follow-up meeting, the SST will present positive outcomes and/or challenges noted by the classroom teacher based on the recommendations made. The SST will review the results of any additional supports and progress noted. All information regarding health, family history, district and State assessment results, and linguistic levels for non-English speaking child will be gathered to support success in the regular education environment. If necessary, the results of interventions used may become part of the information to support special education assessment. **The Speech and Language Pathologist may choose to move forward with a special education assessment at any time during the SST process depending on the nature of the student’s challenge.**

GENERAL CONSIDERATIONS FOR DIAGNOSTIC EVALUATIONS

In IDEA '04/Part B regulations, we find the definitions of the disability categories which qualify for services under the law. Speech and language impairment is listed as one of the categories included in IDEA. Definitions are as follows:

Section 300.7 Child with a disability

(a) General. “(1) As used in this part, the term ‘child with a disability’ means a child evaluated in accordance with §§ 300.530-300.536 as having mental retardation, a hearing impairment including deafness, a speech or language impairment, a visual impairment including blindness, emotional disturbance, an orthopedic impairment, autism, traumatic brain injury, other health impairment, a specific learning disability, deaf-blindness, or multiple disabilities, and who, by reason thereof, needs special education and related services.”

When it is determined that a child manifests with one or more of the disabilities listed above, the assessment team must assess to determine whether or not the disability rises to the level of qualifying for Special Education services.

There are a number of factors to consider beyond the standardized assessment information when determining Speech and Language services. Factors such as positive attitude, motivation, and environmental supports may diminish the impact of communication impairment. Therefore, even though the child may manifest challenges when given standardized test, if the functional communicative measures (i.e. language samples, narrative analysis, curriculum-based assessment, state performance assessment, observations, etc.) do not support adverse educational impact, the child may not be eligible for speech language services and/or related services. In such a case, the communication development and educational performance could be monitored by non-special education interventions within the school (e.g., SST review, Learning Centers).

Conversely, if the child performs well on the standardized tests but presents poor functional communication skills, the child may be found eligible. This decision could be based on the child’s inability to use those skills deemed “appropriate” on the standardized test outside the test environment. This being said, eligibility in this case must be supported by authentic data collected over several environments (i.e., classroom, play situations). This discussion supports the caution by ASHA on using the discrepancy between language and intellectual ability as the sole criteria for a child to qualify for Speech and Language services. This is supported by the California Education Code found on the following page.

Education Code 56333

56333. “A pupil shall be assessed as having a language or speech disorder which makes him or her eligible for special **education** and related services when he or she demonstrates difficulty understanding or using spoken language **to such an extent that it adversely affects his or her educational performance and cannot be corrected without special education and related services**. In order to be eligible for special **education** and related services, difficulty in understanding or using spoken language shall be assessed by a language, speech, and hearing specialist who determines that such difficulty results from any of the following disorders:

- (a) Articulation disorders, such that the pupil's production of speech significantly interferes with communication and attracts adverse attention.
- (b) Abnormal voice, characterized by persistent, defective voice quality, pitch, or loudness.
An appropriate medical examination shall be conducted, where appropriate.
- (c) Fluency difficulties which result in an abnormal flow of verbal expression to such a degree that these difficulties adversely affect communication between the pupil and the listener.
- (d) Inappropriate or inadequate acquisition, comprehension, or expression of spoken language such that the pupil's language performance level is found to be significantly below the language performance level of his or her peers.
- (e) Hearing loss which results in a language or speech disorder and significantly affects educational performance.”

ARTICULATION: ENTRY AND EXIT CONSIDERATIONS

A. Definition

According to 5CCR 3030: ARTICULATION DISORDER

(A) The pupil displays reduced intelligibility or an inability to use the speech mechanism which significantly interferes with communication and attracts adverse attention. Significant interference in communication occurs when the pupil's production of single or multiple speech sounds on a development scale of articulation competency is below that expected for his or her chronological age or developmental level, and which adversely affects educational performance.

(B) A pupil does not meet the criteria for an articulation disorder if the sole assessed disability is an abnormal swallowing pattern.

B. Evaluation Procedures

A referred student must be evaluated to determine if his/her production of speech significantly interferes with his/her communication and/or attracts adverse attention, and adversely affects educational performance.

1. No single score or product shall be used as the sole criterion for eligibility.
2. It is recommended that:
 - a) One formal test instrument and a minimum of one informal/formal probe or sampling procedure be used to consider eligibility.
3. These procedures shall document and describe the type, consistency and stimulability of the speech errors.
4. Complete an oral-peripheral evaluation and document/describe ability, rate and control.

C. Enrollment Criteria

A student may be considered for articulation therapy when he/she:

1. Has articulation skills which are at least one year delayed (see page 8).
2. Has multiple sound errors which are characterized by consistent substitutions, omission, distortions, and/or additions when judged by position in word.
3. Demonstrates phonological rules or processes which are not commensurate with chronological age.
4. Demonstrates reduced intelligibility with sound, syllable, or vowel reduction or distortion; especially with speech rate increases.
5. Produces sounds not in the English language and these sounds are not attributable to a second language knowledge or use (e.g., a lateralized "s" sound could be included in this category).
6. Has an organic or physical anomaly which interferes with the acquisition of normal speech (e.g., hearing impairment, cleft palate, cerebral palsy).
7. Is embarrassed or disturbed by his/her speech at any age (as judged by the speech-language clinician and one referral agent, i.e., teacher, parent, peer, etc.).
8. Disrupts and/or interferes with educational academic progress.
9. The SLP may determine the age range of mastery for speech sounds, whether to compare the student's skills with his/her chronological age or developmental level, and what degree of delay constitutes an articulation disorder.

D. Additional Considerations

There are additional factors to be considered in deciding whether to enroll a child in articulation therapy. Consider:

1. Level of intelligibility
2. Level of maturation
3. Stimulability
4. Organic or physical disabilities (e.g., dysarthria, apraxia, developmental anomalies, hearing impairment, cerebral palsy, cleft palate, etc.)
5. Full resources of the regular education program have been considered and, when appropriate, utilized.
6. Test instrument/procedures used:
 - a) Are not racially, culturally or sexually discriminatory;
 - b) Are provided and administered in the pupil's primary language/mode of communication;
 - c) Validated for purpose used;
 - d) Given by trained personnel in conformance with instructions provided;
 - e) Are tailored to assess specific areas and not a single intelligence quotient.
7. Status and effects of a cultural and/or linguistically diversified history and social-environmental influence, if any, on speech production.

E. Articulation Dismissal Criteria *(A full evaluation, which covers all areas of suspected disability in the area of speech or language must be completed. There must be an IEP held following an assessment to dismiss a student from Special Education.)*

A student will be considered for dismissal from articulation therapy when any of the following apply:

1. Articulation skills are commensurate with chronological age or cognitive level.
2. Correct production of the target behavior is reached with the speech sample reflecting criteria as designated on the IEP.
3. The student's disability no longer negatively affects his/her educational performance in the regular education or special education program.
4. **For additional considerations, refer to the General Dismissal Criteria, on page 14.**

Phonological Processes: The use of phonological processes to simplify the adult form along with the incorrect use of individual phonemes will affect a child's intelligibility. How understandable a child is seems to be directly related to the development of articulation and phonological skills. Speech intelligibility will vary from child to child according to his or her articulation and phonological development. Stoel-Gammon and Dunn (1985) developed guidelines regarding the productive use and suppression of phonological processes (see page 8).

DEVELOPMENTAL TABLE FOR CONSONANT SOUNDS (GUIDELINE)

<u>Age in Years</u>	<u>Consonant Sounds</u>
3	p, b, m, w, h, n
4	t, d, k, g, y, f
5	inconsistent use of s, z, sh, ch, j, z
6	v, sh, zh, l, th (voiced) ng
7	s, z, r, th (voiceless), ch, j, wh, and blends dz

Reference: Goldman Fristoe, Test of Articulation, 2003.

PHONOLOGICAL PROCESSES GUIDELINE

Processes Suppressed by 3 Years

unstressed-syllable deletion
final consonant deletion
diminutization
velar fronting
consonant assimilation
reduplication
prevocalic voicing

Processes Persisting After 3 Years

cluster reduction
epenthesis
gliding
vocalization
stopping
depalatalization
final devoicing

Reference for Speech Intelligibility Expectations

<u>Age</u>	<u>Intelligibility Level</u>
19-24 months	25-50%
2-3 years	50-75%
4-5 years	75-90%
5+ years	90-100% (a few articulation errors may persist)

FLUENCY: ENTRY AND EXIT CONSIDERATIONS

A. Definition

FLUENCY DISORDERS – A pupil has a fluency disorder when the flow of verbal expression including rate and rhythm **adversely affects communication between the pupil and listener.**

When assessing for eligibility in the area of fluency, one needs to consider the complexity of the problem including motor behaviors, avoidance of words and/or speaking situation and/or words substitutions. In addition, cognitive, affective, linguistic, motor and social components of stuttering must be considered when looking at eligibility and the resulting educational impact.

B. Eligibility Criteria

A student may be recommended for fluency therapy when a formal assessment indicates either or both of the following is present:

1. The individual displays an average of 10% frequency of dysfluent incidences, or the dysfluencies draw undue attention to the speaker.
2. Adverse educational impact must be documented through such methods as observation in the classroom setting, report on classroom participation and its impact on the child in academic and nonacademic/extracurricular environments.

*It is recommended that speech samples are obtained from more than one session and from more than one setting.

D. Additional Considerations

1. When developing a case history, the clinician may want to obtain information regarding:
 - a. Teacher report/interview
 - b. Student's self report/interview
 - c. Parent report/interview
 - d. Development of student's dysfluencies over time
 - e. Any previous history of therapy
 - f. Changes in dysfluent behavior based on the audience, context and/or setting (Remember there is a certain degree of normal non-fluent behavior in young children. If this is the case, parent/teacher education and periodic monitoring may be the more appropriate strategy).
2. Note the adverse effect on the student's educational performance in the following areas:
 - a. Oral reading
 - b. Oral participation
 - c. Reaction of self, parents, teachers and peers
 - d. Social emotional adjustment

E. Fluency Dismissal Criteria/Considerations

1. Child meets fluency goal as designated by the IEP and/or the student perceives himself to be a "normal" speaker.

2. Associated conditions (i.e., neurological impairments) limit/nullify benefits of therapy.
3. Refer to General Dismissal Criteria, see page 14.

LANGUAGE: ENTRY AND EXIT CONSIDERATIONS

A. Definition:

A LANGUAGE DISORDER is the impaired comprehension and/or use of spoken, written, and/or other symbol systems. The disorder may involve:

The **form** of language –

Phonology is the sound system of a language and the rules that govern the sound combinations

Morphology is the system that governs the structure of words and the construction of word forms

Syntax is the system governing the order and combination of words to form sentences and the relationships among the elements within a sentence;

The **content** of language (semantics) –

Semantics is the system that governs meanings of words and sentences;

The **function** of language in communication (pragmatics) in any combination –

Pragmatics is the system that combines the above language components in functionally and socially appropriate communication.

B. Evaluation Procedures

1. A child must be evaluated using two or more standardized tests in one or more of the following areas of language development: Morphology, Syntax, Semantics, or Pragmatics. A language sample of 50 or more utterances is strongly recommended in addition to standardized tests used.
2. When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified on the assessment plan (i.e., language sample).
3. When evaluating for a language disorder, the following factors should be **considered**:
 - a. Cognitive level of functioning
 - b. Potential for change (based on data)
 - c. Level of maturation
 - d. Previous history in speech/language therapy
 - e. Learned cultural and language differences
 - f. Pragmatic language skills
4. The IEP team will consider all test results as well as observations and school success when eligibility is difficult to confirm.

C. Enrollment Criteria

A student is considered to have an expressive or receptive language disorder when:

1. The pupil scores at least 1.5 standard deviations below the mean, or below the 7th percentile, for his/her chronological age or developmental level on:
 - a. 2 or more standardized tests OR
 - b. 1 or more standardized tests and demonstrates inappropriate or inadequate usage of expressive or receptive language as measured by a spontaneous or elicited language sample of a minimum of fifty utterances. When standardized tests are considered to be invalid for the specific pupil, the expected language performance level shall be determined by alternative means as specified on the assessment plan.

2. The language disorder disrupts and/or interferes with educational/academic progress.

****Deficits identified by tests should be supported by other assessment methods and observational reports from teachers, parents and/or other personnel familiar with the individual's educational performance and social interaction.***

D. Factors to Consider

Consider the following when deciding to recommend a student for continuance of or dismissal from language therapy:

1. If the student has made significant progress, consider reassessment for continued eligibility.
2. If the student has made good progress, evaluate/discuss whether direct therapy intervention is still deemed appropriate or whether a collaborative and/or consultative model may be sufficient to provide support necessary to continue progress on goals.

F. Language Dismissal Criteria

A student will be considered for dismissal from language therapy when, **upon completion of an evaluation**, any of the following apply:

1. The student demonstrates receptive and expressive language skills less than 1 standard deviation, or its equivalent, below the mean.
2. **Given current medical, neurological, physical, cognitive, emotional and/or developmental factors, the student demonstrates receptive and expressive language skills within the expected language performance range as supported by formal and/or informal assessments.**
3. The student is performing at a pre-determined level as designated by the IEP. This would be supported by current assessment and no other concern areas are identified.
4. The student uses his/her augmentative communication aid(s) appropriately and effectively as supported by formal and/or informal assessments.
5. The student uses compensatory communication skills appropriately and effectively as supported by formal and/or informal assessments.
6. There is lack of progress in language skills within two (2) years time as evidenced by formal test results, therapy logs observations, and/or other documentation. In this case, there must be clear evidence that all efforts have been made to modify goals and objectives and that all supports have been consistently in place and accessed by the student.
7. The student's communication skills are best reinforced in the classroom setting. This decision is supported by #1 and #2.

NOTE: *In all cases, there must be an IEP held following an assessment to dismiss a child from Special Education.*

VOICE: ENTRY AND EXIT CONSIDERATIONS

A. Definition

A VOICE disorder is defined as the absence or abnormal production of vocal quality, pitch, loudness, resonance, and/or duration.

Description of Terms for Voice

- a. Resonance – modification of energy/air as it passes through the three (3) cranial cavities: oral, nasal, pharyngeal.
- b. Intensity – refers to loudness, volume, or projection.
- c. Range – the distance between the child's lowest sustainable pitch to the highest sustainable pitch.
- d. Air supply – having the ability to take a normal tidal inspiration followed by speech, overlaid on an adequately controlled expiration.
- e. Rate – the number of words per minute spoken with a rate of 140-180 being regarded as satisfactory (average).
- f. Pitch – optimum pitch is $\frac{1}{4}$ of the way from the bottom of the total pitch range; habitual pitch is the fundamental frequency most often used in everyday voice.

B. Evaluation Procedures

Each student must be evaluated using the following procedures:

1. A case history which includes relevant medical data and duration of voice challenge.
2. Medical clearance for therapy, which may include a formal evaluation to assess:
 - a. Pitch
 - b. Resonance
 - c. Range
 - d. Intensity
 - e. Nasality
 - f. Rate
 - g. Air supply
3. Assessment of the student's perception of his/her voice, the parent's perception of the voice, and the concern of others.
4. Classroom observation.

C. Enrollment Criteria

A student will be recommended for voice therapy when:

1. The formal evaluation reveals voice deviations in pitch, resonance, nasality, intensity, range, or rate, **and**
2. A physician refers the child for intervention.

D. Degree of Severity Chart

If the total score is four (4) or more points on the degree of severity chart (see page 15). admission to voice therapy may be indicated upon medical clearance.

E. Severity Rating Scale

1. Normal

Optimum pitch: **Male** – 1/3 from bottom of total range

Female – 1/3 from bottom of total range plus two to three notes

Intensity: 70db

2. **Mild:** Inconsistent or slight deviation. Voice disorder is not noted by casual listener. Student may be aware of problem.
3. **Moderate:** Voice disorder is consistent and noted by casual listener.
4. **Severe:** There is a significant deviation in the voice. Voice disorder is noted by the casual listener. Parents are usually aware of problem.

F. Additional Considerations

1. Students who are being treated at a hospital or clinic (repaired cleft palate or velopharyngeal insufficiencies) should be considered for therapy only after consultation with the facility, the child's teacher, the parent, the physician, and the student.
2. No student should be enrolled in voice therapy over a period of years. The voice will either improve within a few months of therapy, or some procedure in addition to, or instead of, therapy is indicated.
3. Voice differences may be handled on a consultative basis and should be checked periodically. A voice difference is distinguishable variance in pitch, loudness, and quality, such as:
 - a. Episodic pitch changes
 - b. Acute laryngitis (i.e., screaming at sporting event, viral infection)
4. Students with allergies may be selected for direct therapy, but also may be considered for consultative services.

G. Exit Criteria for Voice

The student will be considered for dismissal from voice therapy when any of the following apply:

1. The speech-language clinician's professional judgment and evaluation indicates that the student's voice is within normal limits as related to age and gender.
2. No improvement is demonstrated within a six (6) to twelve (12) month period of therapy. (NOTE: Voice therapy is a short-term intervention strategy). If no improvement is seen within three (3) months, the parent/guardian should be contacted and a recommendation for further medical consultation should be discussed.
3. Other associated physical conditions (specifically, velopharyngeal insufficiency, sensory deficits, and/or inadequate physiologic support for speech) prevent the student from benefiting from further therapy.
4. Consistent use of inappropriate behaviors prevent the child from benefiting from further therapy.
5. Withdrawal is requested by the parent/guardian. An IEP team meeting should be called and the parent request documented along with the team recommendations on the IEP or amendment.

NOTE: *There must be an IEP team meeting held following assessment/doctor's notification to dismiss a child from Special Education.*

GENERAL EXIT AND DISMISSAL CRITERIA

The IEP team shall determine the dismissal from Special Education based on the following criteria:

The IEP team has determined that a Free Appropriate Public Education (FAPE) provided in the Least Restrictive Environment (LRE) has been provided **and**

1. When, upon reassessment, it is determined that a student who has met the goals and objectives on the IEP no longer requires related services to benefit from the educational setting, **or**
2. The conditions that qualified the child for services have been addressed or remediated to the extent that the child can function adequately in an alternative education program or in the regular school program with or without accommodations or modifications for maximum educational benefit, **or**
3. The IEP team feels that the child is not benefiting from Special Education services after a continuum of appropriate alternatives have been implemented according to documentation/data, **or**
4. In the case of DIS services, the written documentation backed by data indicates little or no progress over a two year period or skills have plateaued according to assessment/documentation/data, **or**

NOTE: This caveat is rarely the case for students whose cognitive abilities fall with in the “normal” range. If you choose to exit a student based on this criteria, be sure that your documentation, including data, provides the requisite information to support this decision.

5. When the IEP team determines, based on the present levels of performance and current assessment, that the child no longer requires Speech and Language services in order to obtain educational benefit in the areas of academics, behaviors, and/or socialization, **or**
6. When the pupil aged 18 or over who retains his/her own educational rights requests, in writing, removal from the program, **or**
7. When a child shows unwillingness to participate in a Special Education program and the IEP team determines the unwillingness is not due to the disabling condition **or**
8. When the conservator of a child over 18 years of age refuses, in writing, to allow the continuance of special education services, districts are advised to consult with legal counsel should such refusal occur. Legal counsel may recommend that we file Due Process for denial of FAPE.

Degree of Severity Chart for VOICE
(Informal)

	0	1	2	0,1, 2
Perception of severity	Normal-slight variation not perceived by parent or teacher	SLP perceives deviation	Multiple referrals, and/or clinician determines voice interferes with communication	
Resonance	Normal	Assimilation nasality or upper respiratory infection-related acute denasality	Chronically nasal or denasal	
Pitch	Normal	Speaks above/below optimum pitch	Speaks noticeably above/below optimum	
Range	Normal	Little variation from habitual pitch	Monotone of disordered inflection patterns	
Vocal cord approximation (degree of abduction and adduction)	Normal	Open or closed; resulting in an apparent hoarseness, hoarseness, or breathiness	Spastic or whispered; chronic hoarseness and pitch breaks	
Intensity	Normal	Too loud or too soft		
Air supply	Appears adequate	Observable reverse breathing; speaking on residual air	Inadequate air supply resulting from a physical disability	
Rate	Normal	Slower or faster than satisfactory		

TOTAL SCORE: _____

If the total score is 4 or more points, therapy may be indicated.

*Reproduced from previous Speech and Language Guidelines, 1995. No publisher noted, use as informal tool

FLUENCY - SEVERITY RATING SCALE

CRITERIA	NORMAL	MILD	MODERATE	SEVERE
Fluency	Fluency Predominant	Stuttering may be episodic	Stuttering consistent	Stuttering consistent
Frequency of Nonfluencies	9 or less/100 words	3-10/100 words	3-15/100 words	10-20/100 words
Types of Nonfluencies	*Whole words phrase and some part word repetitions	*Primarily part word repetitions prolongations appearing	Part word repetitions, prolongations, postural blocks	Tension in all blocks
# of Repetitions per Word	1 – 3	*1 – 5	1 – 8	1 – 10
Duration of Nonfluencies	1 second or less	Average 1 second	Average 2 seconds	1 – 20 seconds
Phonation	*Easy effortless repetitions	Easy effortless repetitions and prolongations	*Abrupt initiation of phonation	Abrupt initiation of phonation
Substitution of Schwa Vowel	Absent	*Observable	Present on irregular basis	Present in repetitive blocks
Struggle Behavior	Absent	Absent	Observable	*Consistent with release devices used
Use of Starters and Postponements	Absent	Absent	Beginning to occur	*May be frequently employed
Word avoidances, Circumlocution s	Absent	Absent	Beginning to occur	*Frequently employed
Situational Avoidances	Absent	Absent	Noticeably concerned	*Frequent occurrences
Listener Reaction	No concern	Aware but unconcerned		*Noticeably uncomfortable

*Predominant features

Reference: Based on charts published/provided by the Stuttering Foundation of America, (www.stutteringhelp.org)

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Efficient Articulation Services: One Group at a Time



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Five years ago, children with mild articulation needs inundated the caseloads of San Diego Unified School District (SDUSD) speech-language pathologists (SLPs). A 2004 survey revealed that students lingered on caseloads for years at a time, from 50 – 100 hours per student. This phenomenon affected at least 821 students throughout the district. They missed valuable classroom instruction and failed to generalize target sounds in everyday conversation. Reportedly, SLPs were frustrated with the lack of progress while serving several groups at a time for 30 minutes per week. For the sake of students and SLPs, something needed to be done to transform these outdated practices into efficient, evidence-based treatment. Our Lead SLP, Claudia Dunaway, consulted the research literature regarding how many hours are required to remediate sound productions. Two references (ASHA NOMS, n.d. & Jacoby, Lee, Kummer, Levin, Creaghead, 2002) suggested that it takes 17 – 20 hours to remediate single sounds. Moreover, both advocated intensive treatment to facilitate generalization. Therefore, Dunaway created our general education service, the Speech Improvement Class, a short-term, intensive intervention that is offered at least twice a week for 30 minutes (Dunaway, 2004). This is the fifth year of such services.

SDUSD implemented these and other practices based on current literature to create more efficient services. This article will describe the process behind this paradigm shift, including the streamlined forms and procedures that enable SLPs to focus most of their time and effort on intervention rather than paperwork. Readers will also learn about the district's Articulation Resource Center, a support for SLPs in best treatment practices. In addition, this article will offer details about two treatment methodologies applied in tandem for maximum change. Lastly, information will be shared about the district policy requiring home practice for Speech Improvement Class students. These components have allowed us to provide more efficient articulation services, one group at a time.

Streamlined Procedures and Guidelines

The Speech Improvement Class is a Response to Intervention (RtI) Tier II support. Prior to implementation, we consulted the work of Staskowski and Rivera (2005), who detailed the critical components of successful RtI programs. They identified the first component as well-defined procedures. As a result, we created

streamlined forms and procedures for each stage of the process, including checklists, flow maps and simple forms for teachers and families to complete (most forms can be accessed at <http://slpath.com>). For instance, the teacher questionnaire (*Describing Speech Misarticulations*) provides information about whether or not a child meets the criteria for an articulation IEP. Moreover, such forms allow SLPs to document their decisions and interventions at each stage in the process. Efficiency in no way supersedes accountability or process. Guidelines are provided to support students and SLPs, including the ideal time to intervene. For most students, the recommendation is to treat mild articulation needs around age seven. This is based on the metric of the speech normalization boundary of age 8;5 (Shriberg, Gruber & Kwiatkowski, 1994). These researchers theorized that it is more difficult to remediate sounds after this age. Consequently, we advocate teaching sounds around age seven to these students because they have had adequate time to develop and this 1 – 1 ½ years prior to the boundary provides us with a window of opportunity to intervene. It should be mentioned that there are two exceptions to waiting until age seven. According to Smit (1993a and 1993b), cluster reduction after the age of 5;6 and lateral lisps are considered to be atypical patterns that warrant attention as soon as they are identified.

Staskowski and Rivera identified the second component as prioritizing time for SLPs. In SDUSD, the recommendation is that full-time SLPs have no more than five Speech Improvement students at any given time. The reason for this is two-fold. First, provision of general education services to these students is not meant to add significantly to SLP caseloads. We served these students in the past, but in an inefficient manner. Second, we want to ensure service to one group at a time intensively rather than many children intermittently (who would then linger on caseloads for years). Other Speech Improvement candidates are assigned to a waitlist and included once an open spot becomes available. This has resulted in a win-win situation for SLPs and students.

Staskowski and Rivera's third component stipulated the need for buy-in from administration and the community prior to implementation. Consequently, a proposal was presented to the special education director, who in turn shared it with the district superintendent. Both endorsed the program for its emphasis on process, evidence-based treatment and expedient return of students to classroom instruction. Similarly, a parent community group embraced the provision of such services. Prior to launching this model we garnered the full approval of SLPs, administration and the community. We have communicated clearly with all groups during this process, leading to more efficient use of time.

The Articulation Resource Center

The Speech Improvement Class model represented a significant paradigm shift in practice for our SLPs. Accordingly, Dunaway created the Articulation Resource Center to support SLPs as they learned new procedures and adopted best practices in phonological and articulation treatment. I serve in this capacity two days per week during which I consult and collaborate with my SDUSD colleagues in person and via e-mail regarding challenging cases and treatment approaches. The ARC distributes treatment and homework materials to our 250 SLPs. My responsibilities also extend to ongoing professional development. Each year, I offer courses in best practices for the Speech Improvement Class and /r/ sound treatment to ensure that all new employees and those wanting a refresher course are trained in the procedures and methodology.

Two Treatment Methodologies: Complexity and Motor Learning Theories

Our training has focused on two treatment methodologies, including the complexity approach. Proponents of this theoretical perspective advocate teaching nonstimulable, phonetically-complex sounds to create maximum and efficient change in a child's sound production (Gierut, 2007). According to Weston & Bain (2003), more research has been conducted on the complexity approach than almost all other approaches combined (normative, bottom-up/discrete skill, language-based and broad-based). A similar observation was recently reported at ASHA (Baker & McLeod, 2008). This approach allows us to identify *what to teach*, including ideal target sounds and words. In SDUSD, we apply the principles of language laws, complex clusters and high-frequency words for the sake of efficiency. Language laws constitute universal, implicational relationships that apply across all languages. Moreover, they allow clinicians to identify ideal target sounds. One language law stipulates that voiced obstruents (stops, fricatives and affricates) imply the presence or co-occurrence of voiceless obstruents (McReynolds & Jetzke, 1986). This indicates that voiced obstruents are more complex than voiceless obstruents. If a child has difficulty with a cognate pair (e.g., /s/ and /z/), this law suggests that teaching the voiced obstruent will create a predicted change among voiceless obstruents. Obviously, it will be more efficient to teach only one sound (e.g., /z/) to see change in a cognate pair (e.g., /s/ and /z/). Other frequently-applied language laws target complex clusters. In particular, Gierut and Champion (2001) identified that three-element clusters imply the presence or co-occurrence of two-element clusters (a similar law (Gallagher & Shriner, 1975) stipulates that clusters imply singletons). If a child presents with errors for singletons and clusters, three-element clusters (e.g., /str/, /spl/) will create the most change in a child's system. It should be noted, however, that Gierut and Champion cautioned against teaching three-element clusters if children have limited phonetic inventories. They suggested that the child's phonetic inventory should

include the second and third consonant in a cluster (e.g., /t/ and /r/ from /str/) for it to be a viable target. Otherwise, clinicians could teach complex two-element clusters, such as fricative + liquid clusters (e.g., /fl/, /θr/, /sl/, /fr/, /ʃr/) (Elbert, Dinnsen & Powell, 1984). In addition to language laws and complex clusters, SDUSD clinicians also target specific kinds of words to create more change in less time. The work of Morrisette & Gierut (2002), Morrisette (1999) and Storkel & Morrisette (2002) identified two lexical properties that interact with phonology. First, treating high-frequency words created more change in a child's system than low-frequency words. Second, these studies identified the target of word density, or the number of words that differ from a target word by one sound through substitution, addition or deletion. For example, the word “sound” has ten neighbors that differ by one sound, such as “found,” “send” and “sounds.” These studies categorized words with ten or fewer neighbors as low density and those with eleven or higher as high density. Different treatment effects were observed for each category. Low density tended to impact the treated sound(s) while high density impacted untreated sounds or contexts. For many students with mild articulation needs, only one or two sounds are in error. Therefore, Storkel (personal communication, November 30, 2007) recommended that treatment focus primarily on low density words for these children because we are hoping to see change for the treated sounds. (A different recommendation is given for children with phonological disorders.) In all, these complexity principles have led to more efficient generalization for our students.

Our professional development has also targeted another treatment methodology, motor learning theory, which focuses on *how to teach* sounds. This approach is characterized by three distinct phases, randomization of targets, delayed feedback and mass practice. Skelton (2004) summarized the three critical phases of motor learning, including pre-practice, practice and generalization. In particular, professional development has focused on the first phase, pre-practice, when the child is learning to physically produce the sound in isolation and syllables until 80% accuracy. Many of our SLPs have reported that they did not receive graduate training on how to teach target sounds, especially to children who are nonstimulable (which most Speech Improvement Class students are). Consequently, we have collected resources from practicing clinicians (also on <http://slpath.com>) and have distributed excellent texts (Bleile, 2004; Secord, 2007) to our SLPs. SLPs must have as many ‘tricks in their bags’ as possible because what works for one student might not work for the next. By solidly establishing these sounds in isolation and syllables, this smoothes the way for full and efficient acquisition of sounds later at higher levels, including conversation. The second phase consists of mixed practice (randomization) of syllables, words, phrases, sentences

and conversation in a given session. Random practice has been shown to lead to greater retention than incrementally advancing from syllables to words to phrases, etc. (Skelton, 2004). Of course, this requires greater self-monitoring from students. This aligns with the tenets of constructivist theory that children should be active and engaged during their speech therapy process (Ertmer & Ertmer, 1998). The third phase targets generalization at the conversational level in various communicative contexts. This phase is necessary for some students, but many achieve generalization (at least 80% accuracy in conversation) from the first two phases alone. Three other principles have further strengthened our treatment efficacy. As mentioned earlier, randomization is applied during the practice phase to mix up levels of practice. We also randomize other aspects of practice, including actions, emotional context and intonation/ rate. The so-called “specificity of learning” principle advocated by Skelton (2004) and other motor learning proponents stipulates that the “most closely related movement/activity creates the most improvement in overall skill.” In addition, we foster self-monitoring by providing delayed feedback about the specific process of producing the target sound (Strand & Kent, 2005). Immediate feedback interrupts the child’s feedback loop and often results in lack of self-evaluation from the child. Conversely, delayed feedback allows the child to assemble and retrieve motor plans (Yorkston, Beukelman, Strand & Bell, 1999) and engage in self-evaluation. Lastly, we encourage massed practice because sound production is a motor skill that requires significant trials for full acquisition. One way to accomplish this is through the creation of speech centers (Taps, 2005). For instance, four centers could include the following: one child at the board practicing words while drawing, one child at the table practicing sentences while putting a puzzle together, one child lying on the floor while practicing telling stories and one child typing on the computer while practicing phrases. This encourages independent sound practice in a variety of contexts. In a given session, this practice creates the opportunity for many sound production trials at a variety of levels.

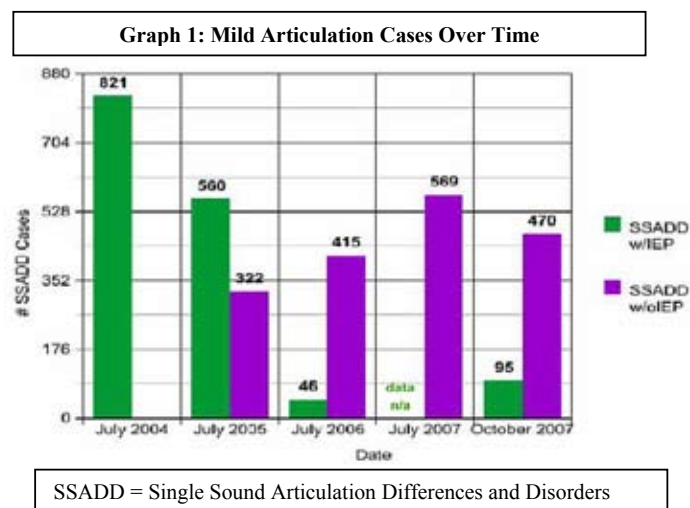
Fostering Generalization: Required Home Practice and Family/Teacher Cues

The results of the ASHA National Outcome Measurement System should come as no surprise to SLPs (ASHA, n.d.). They found that children who practice sound production at home were significantly more likely to generalize sounds than children who did not. Consequently, SDUSD requires home practice for all Speech Improvement students. Because this is a general education class, we require students to complete daily homework (around five minutes of practice per day). We emphasize the importance of home practice by adhering to a policy. If a child does not return one homework assignment, SLPs make a courtesy call home to say that the next homework

needs to be returned or he/she will move to the next child on the waitlist. In most cases, this encourages the families to adhere to the policy and the child practices at home, a critical component for generalization. Of course, we do not want to penalize those students whose families are not able to support homework completion for whatever reason. In those cases, students practice with a peer in class for five minutes a day, something comparable to what would have been completed at home (Hazel, 1990). In addition to homework, SLPs have trained teachers and families on one facilitative strategy, conversational recasts (Camarata, 1993). If a child misarticulates a word, the adult gives an immediate model by recasting what the child said. For example, if a child says “I want the wed one,” the adult says “Oh here’s the red one. What are you going to make?” This immediate model (not a correction) also facilitates generalization. Our goal is to provide meaningful practice and support in as many contexts as possible.

Success of Treating One Group at a Time

Prior to the Speech Improvement Class model, students received 50-100 hours of treatment for mild articulation patterns. Data from the past four years demonstrate significant changes. 71 students were randomly selected throughout SDUSD in 2005-2006 to determine the number of hours necessary to remediate sounds. 76% finished the class in 17 hours or fewer while the remaining 24% (students with more resistant patterns) required 25-30 hours. Graph 1 further demonstrates the increased efficiency of our treatment.



At the outset in July 2004, 821 students received IEP services for mild articulation needs. Three years later (in October 2007), only 95 students received IEP services for mild articulation while 470 received treatment in the

Speech Improvement Class. There has been a significant decrease in the number of students enrolled and the amount of time necessary to remediate sounds, resulting in students returning more quickly to classroom instruction.

Every district could apply the principles that increased our efficiency, including streamlined procedures, a support akin to the Articulation Resource Center, evidence-based treatment and required home practice. We have received many requests for information and professional development and colleagues have shared that the model has been successfully implemented in districts large and small throughout the country. In implementing these practices, SLPs utilize their unique expertise to significantly impact the lives of students, one articulation group at a time.

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Appendix E

Visalia Unified School District Subgroup API's

Base Year	Sub group	Base API	Growth API	Growth Rate
2005	Students with Disabilities	468	484	16
2006	Students with Disabilities	484	488	4
2007	Students with Disabilities	508	541	33
2008	Students with Disabilities	564	538	-26
2005	English Learners	584	615	31
2006	English Learners	617	624	7
2007	English Learners	624	652	28
2008	English Learners	654	657	3
2005	Socioeconomically Disadvantaged	624	649	25
2006	Socioeconomically Disadvantaged	652	661	9
2007	Socioeconomically Disadvantaged	661	687	26
2008	Socioeconomically Disadvantaged	691	697	6

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Visalia Unified School District - RSP

Page 1

Comparisons of Matched Students in 2007 STAR and 2008 STAR**Math**

2007

2008 Level: *						
	Far Below Basic	Below Basic	Basic	Proficient	Advanced	Total 2008
Far Below Basic	75	120	18	6		219
	34%	55%	8%	3%		
Below Basic	70	209	59	23	6	367
	19%	57%	16%	6%	2%	
Basic	12	58	58	15		143
	8%	41%	41%	10%		
Proficient	12	20	20	3		55
	22%	36%	36%	5%		
Advanced	1	2	7			10
	10%	20%	70%			
TOTAL 2009	158	399	155	66	16	

Math**Growth Index***

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.1423	794	1	0	24	150	369	197	41	12	0

* CST and CMA Grades 3-5

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Visalia Unified School District - SDC

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Comparisons of Matched Students in 2007 STAR and 2008 STAR**Math**

	2008 Level: *					Total 2008
	Far Below Basic	Below Basic	Basic	Proficient	Advanced	
2007	Far Below Basic	115	92	18	2	227
		51%	41%	8%	1%	
	Below Basic	45	42	17	6	113
		40%	37%	15%	5%	
	Basic	3	5	4	2	14
		21%	36%	29%	14%	
	Proficient	1	1	1		3
		33%	33%	33%		
	Advanced					0
	TOTAL 2009	163	140	40	11	3

Math**Growth Index***

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.3221	357	0	0	4	51	162	111	24	5	0

* CST and CMA Grades 3-5

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Comparisons of Matched Students in 2008 STAR and 2009 STAR**Math**

		2009 Level: *					Total 2008
		Far Below Basic	Below Basic	Basic	Proficient	Advanced	
* 2008	Far Below Basic	58 41%	65 45%	15 10%	5 3%		143
	Below Basic	78 24%	162 49%	73 22%	13 4%	2 1%	328
	Basic	15 12%	43 33%	50 39%	20 16%	1 1%	129
	Proficient	4 7%	14 25%	19 33%	15 26%	5 9%	57
	Advanced		1 6%	1 6%	5 29%	10 59%	17
	TOTAL 2009	155	285	158	58	18	

Math**Growth Index***

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.0326	674	0	5	30	145	295	163	29	7	0

* CST and CMA Grades 3-5

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Visalia Unified School District - SDC

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Comparisons of Matched Students in 2008 STAR and 2009 STAR

Math

2008

*

2009 Level: *						Total 2008
	Far Below Basic	Below Basic	Basic	Proficient	Advanced	
Far Below Basic	64	59	6	1		130
	49%	45%	5%	1%		
Below Basic	37	45	14	6		102
	36%	44%	14%	6%		
Basic	5	10	12	4		31
	16%	32%	39%	13%		
Proficient		5	2	5		12
		42%	17%	42%		
Advanced		1	1		1	3
		33%	33%		33%	
TOTAL 2009	106	120	35	16	1	

Math

Growth Index*

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.1079	278	0	1	11	49	127	77	12	1	0

* CST and CMA Grades 3-5

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Visalia Unified School District - RSP

Page 1

Comparisons of Matched Students in 2007 STAR and 2008 STAR

English Language Arts

2007	2008 Level: *					Total 2008
	Far Below Basic	Below Basic	Basic	Proficient	Advanced	
Far Below Basic	150	115	45	27	6	343
	44%	34%	13%	8%	2%	
Below Basic	88	137	65	24	16	330
	27%	42%	20%	7%	5%	
Basic	21	36	89	6	1	153
	14%	24%	58%	4%	1%	
Proficient	2	4	10	11	6	33
	6%	12%	30%	33%	18%	
Advanced			3	3	4	10
			30%	30%	40%	
TOTAL 2009	261	292	212	71	33	

English Language Arts

Growth Index*

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.3291	869	0	2	28	137	391	192	70	43	6

* CST and CMA Grades 3-5

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Visalia Unified School District - SDC

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Comparisons of Matched Students in 2007 STAR and 2008 STAR**English Language Arts**

2007

		2008 Level: *				Total 2008
		Far Below Basic	Below Basic	Basic	Proficient	Advanced
Far Below Basic	166	101	18	7	1	293
	57%	34%	6%	2%	0%	
Below Basic	56	31	11	6	1	105
	53%	30%	10%	6%	1%	
Basic	4	10	14	3		31
	13%	32%	45%	10%		
Proficient				1		1
				100%		
Advanced						0
TOTAL 2009		226	142	43	17	2

English Language Arts**Growth Index***

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.2721	430	0	0	4	66	212	115	24	8	1

* CST and CMA Grades 3-5

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Visalia Unified School District - RSP

Page 1

Comparisons of Matched Students in 2008 STAR and 2009 STAR**English Language Arts**

		2009 Level: *					Total 2008
		Far Below Basic	Below Basic	Basic	Proficient	Advanced	
* 2008	Far Below Basic	88 44%	66 33%	29 15%	12 6%	3 2%	198
	Below Basic	54 25%	89 41%	41 19%	22 10%	10 5%	216
	Basic	15 9%	53 31%	80 47%	22 13%	1 1%	171
	Proficient	1 2%	10 19%	13 25%	19 36%	10 19%	53
	Advanced		2 9%	4 18%	5 23%	11 50%	22
	TOTAL 2009	158	220	167	80	35	

English Language Arts**Growth Index***

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.1955	660	0	3	29	125	287	139	52	22	3

* CST and CMA Grades 3-5

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Visalia Unified School District - SDC

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Comparisons of Matched Students in 2008 STAR and 2009 STAR

English Language Arts

2008

2009 Level: *

	Far Below Basic	Below Basic	Basic	Proficient	Advanced	Total 2008
Far Below Basic	92	40	9	4	3	148
	62%	27%	6%	3%	2%	
Below Basic	47	33	16	1	1	98
	48%	34%	16%	1%	1%	
Basic	4	13	11	5	1	34
	12%	38%	32%	15%	3%	
Proficient	2	2	1	3	2	10
	20%	20%	10%	30%	20%	
Advanced	1		1	2		4
	25%		25%	50%		
TOTAL 2009	146	88	38	15	7	

English Language Arts

Growth Index*

Growth Index	# Of Students	Moved Down				Stayed	Moved Up			
		4	3	2	1		1	2	3	4
0.0850	294	1	2	7	63	139	63	11	5	3

* CST and CMA Grades 3-5

Appendix F

CHECKLIST FOR NEW SELPA FORMATION

Developed by the California Department of Education

SELPA to notify CDE, in writing, of the intent to form a new SELPA one-year prior to the formation of the new SELPA (E.D. 56195.3(b)).

The proposed new SELPA submits to the County Office a proposed special education local plan.

The affected SELPA submits to the County Office a revision to its existing special education local plan.

The County Office (EC 56140) evaluates both the proposed special education local plan and the revision to the existing SELPA plan to determine if:

The proposed new SELPA meets the size and scope requirements established by the State Board of Education (November 1983).

The remaining SELPA Configuration meets the size and scope standards.

Whether or not there is a potential for significant adverse effects on individuals with exceptional needs as a result of a change in the current plan.

Whether or not there is a potential for significant adverse fiscal and programmatic effects on one or more LEAs as a result of a change in the current plan.

Have the proposed and the affected SELPAs established a Responsible Local Agency?

When the above steps have been completed and approved by the county office, the county office shall submit the proposed and revised special education local plan(s) for all affected SELPA(s) with comments and recommendations to the CDE. (EC 56140)

(Data for this checklist is in the form of Yes/No responses)

The next critical piece of information needed for creating a new SELPA or the reorganization of an existing SELPA is to determine whether the proposed SELPA meets the size and scope requirements approved by the California State Board of Education, November 1983. These requirements, or standards, are to be used by the county superintendent and the planning districts to determine if they are of sufficient size and scope to qualify as a Special Education Local Plan Area (SELPA) in accordance with EC 56195.1.

Additionally, in accordance with EC 56195.3, the proposed SELPA shall cooperate with the Office of the County Superintendent of Schools and other school districts in the geographic area to ensure that the SELPA is compatible with other SELPAs in the county and that all students with a disability residing in the county has equal access to the programs and services he/she needs. For the last 27 years there have been 3 operating SELPAs in the County of Sacramento: San Juan Unified, Sacramento City Unified, and the Sacramento County SELPA. These three SELPAs were the original three that came in under the Master Plan for Special Education. Elk Grove Unified School District became a single district SELPA in the early to mid-1980's with the SCOE continuing to serve their students with severe disabilities.

Appendix G

			Independently Funded Revenue	Current Revenue	Difference
1	Base	\$ 39,261,108.98			
1	Supp to Base	\$ 180,312.23			
	Combined	\$ 39,441,421.21			
	ADA	91,480.17			
	Base per ADA	\$ 431.15			
	Visalia ADA	25,650.03			
	ADA Transferred	223.00			
4	Adjusted ADA	25,873.03			
	Base to Visalia	\$ 11,155,085.02	\$ 11,155,085		
2	Growth in 08-09	302			
	Rate	\$ 465.4404			
	Growth Entit	\$ 140,563	\$ 140,563		
	Combined Base/Growth		\$ 11,295,648	\$ 7,416,034	\$ 3,879,614
	Property Tax	\$ 3,600,000.00			
	ADA	91,480.17			
	Prop Tx per ADA	\$ 39.35			
	Visalia ADA	25,650.03			
4	ADA Transferred	223.00			
	Adjusted ADA	25,873.03			
	Property Tax to Visalia	\$ 1,018,175.94	\$ 1,018,175.94		\$ 1,018,176
	Federal share per ADA	150.69			
	Visalia ADA	25,650.03			
	ADA Transferred	223.00			
4	Adjusted ADA	25,873.03			
	Federal Loc Asst	\$ 3,898,807	\$ 3,898,807	\$ 3,865,203	\$ 33,604
3	Group Home Fund	\$ 902,104			
	Interm Care Facil	\$ 10,924			
	Comm Care Facil	\$ 26,073			
		\$ 939,101	\$ 939,101	\$ 626,419	\$ 312,682
	Ment Hlth Rate	\$ 5.27			
	Visalia ADA	25,650.03			
4	ADA Transferred	223.00			
	Adjusted ADA	25,873.03			
	Ment Hlth PreRef	\$ 136,351	\$ 136,351	\$ 135,268	\$ 1,083
5	Additional Rev Lim Apport	\$ 1,202,292	\$ 1,202,292		\$ 1,202,292
			\$ 18,490,375	\$ 12,042,924	\$ 6,447,451

- 1 The 08-09 Base and Supplement to Base were used for this calculation
- 2 08-09 Growth was used for this calculation
- 3 Foster Family Homes and Foster Family Agencies are left for
general distribution since their locations are unknown.
- 4 This is the ADA reported for students now served by Visalia
- 5 Tulare COE provided the number of \$2,202,292. But state reports show only \$1,202,292

Appendix H

District Pupils Currently Served by Tulare COE Programs

District of Residence	Total	Aut	D	D/B	ED	EMD	HH	MR	M/Disab	OI	OHI	S/D	SU	TBI	VI
Total Served by TCOE	1149	112	9	1	12	2	28	730	7	18	33	112	55	11	19
Visalia Unified Residents	255	43	3		1	2	2	168	1	4	10	16	2	2	1
% of Total	22.19%	63.24%	33.33%	0.00%	8.33%	100.00%	7.14%	200.00%	14.29%	22.22%	30.30%	19.51%	3.64%	18.18%	5.26%
Extract preschool count	-22	-2	-1			-2		-14		-1	-1			-1	
School Aged Visalia Students	233	41	2	0	1	0	2	154	1	3	9	16	2	1	1
Not Viable at this time	61	9	2		1		2	39	1	3			2	1	1
Possible Candidates for Transfer	172	32						115			9	16			
Est. Number of Classes		4-5						9-13			1	1-2			

Students with Low Incidence Disabilities and Students aged 17 and above were not considered viable candidates at this time
The number of classes for each category will vary based on the nature and needs of the pupils