

My name is Sharon Strauss, and I'm a former PTA president and Cluster co-coordinator. I have now withdrawn 2 children from MCPS secondary schools because my children's learning and emotional problems were deteriorating, and it appeared special education services would be inadequate to meet their needs. I was also the guardian of a Latina Kennedy HS graduate who is now an MCPS parent, and I observed firsthand how she greatly benefited from outreach services provided through a partnership that offered her through school-based counseling and support. So I encourage you to enhance your support of similar community partnerships, and to bring them all under one umbrella for school planning and accountability, like the Comer model.

First, I thank you for finally increasing the budget for school psychologists and special education. It's a good beginning. Students with learning problems and mental health needs must have early intervention, and to be successful, MCPS must improve the capacity of staff to recognize and support students with LDs and EDs in their home-school. Training is needed, especially for Positive Behavioral Intervention Supports, and so I applaud your leadership in budgeting support for this evidence-based approach, along with Response to Intervention and the Collaborative Action Process.

Second, I encourage you invest your communication budget to provide better awareness and information for special education. The award-winning MCPS website isn't very helpful, but with one of the two PITC specialists no longer on board, the information is more vital than ever. Today, Parents looking for information about SPED Services, especially for kids with EDs, enter a black hole with their attempts to learn how the decision-making process works or what's available. Home schools assure parents that they will learn what's available when they go to a Central office meeting. But parents are whisked through the CIEP process without any real knowledge of their options unless they are incredibly diligent and have access to a cadre of advocates, lawyers and practitioners. Parents trying to manage this process while caring for a child in crisis have an especially difficult time. Especially if they lack education, English skills, or the kind of knowledge and connections I've gained as a PTA volunteer and professional educator.

Imagine a scenario with your IB or magnet child where you are told by school administrators: "We have a good program for you. You can't know how many students ever received a degree, and you can't know how many dropped out, and you won't know the courses you might take until you enroll. We can't tell you whether your child will learn more than she or he did at the previous school. And she can't talk to other students and you can't talk to other parents to learn whether a child like yours might like it. There are no tours, no pictures, no presentations until the day you enroll, which may be just days before school actually begins.

We won't add up the hours of extra help your child formerly received and compare it with what we're proposing. No, we know this is a good place, even though many students in this program have reading levels well below your child., And although your child doesn't know anyone, there are almost 2,000 students here, so although we're much larger than your child's old school, it will feel like home. And don't worry because your daughter is just one of a few girls in this program. Because it's a great school."

Would anyone here be willing to send their child to such a school? Yet that was my experience with my high school student after the CIEP made the case for an ED Cluster program as the least restrictive environment. My comments are not a reflection of the level of dedication of the special ed teachers, paraeducators and administrators or students service professionals. They are amazing. I am questioning the current service delivery model, which seems arbitrary in its placement decisions to some parents and simply insufficient to others. Many of us feel our children must fail repeatedly and in many contexts before the services they need are in place. And then people wonder why the problems are so difficult or why the student seems to have given up.

I call on the Board members to take personal responsibility to exercise your oversight authority, especially in regard to the over-representation of minorities with EDs. Take bold steps to assure information is publicly available to parents and to staff. If MCPS developed services that could compete on a market level for all students-- then the dilemma of over-represented students with EDs would be resolved. If parents and kids with ED programs could "choose" from a variety of attractive and effective approaches (like magnet schools) then more affluent families w/ED kids wouldn't leave the system in droves, and MCPS' legal fees would be diminished.

Instead of eliminating alternative programs and the Secondary Learning Centers, develop more programs that reflect the research that MCPS shared at its own Safe and Drug Free School meeting this year-- schools with over 700 students lead to students who are disengaged. As enrollment numbers level off, consider creating school communities that engage our more fragile students, either in schools within schools, or in closed MCPS facilities. But make these programs innovative, creative and safe, and integrate extracurricular programming within the day to enhance school connectedness and to support life, wellness and career goals.

Audit schools to measure compliance with MCPS policies related to students with Emotional Disabilities. Don't make parents guess. Share data, or you won't be able to fix a thing. I'm including a FOIA request and recommendations regarding ways to improve ED services to help you get started. My B-CC PTA cluster colleagues had previously scheduled another meeting this evening, but they, along with former cluster leaders, have expressed interest in learning more about services for ED students and continuing their advocacy for special education.

**A-B-C's Recommendations to MCPS
For Students with or "At-Risk" of Emotional Disabilities**

A. Service delivery in the home school

1. Develop a system to improve the documentation of intervention efforts, quantifying services and "case management" delivered by the school, family, community organizations and health or mental health care providers
2. Create a continuum of services within the home school, piloting enhanced, school-based support for identified students, with additional case management, especially for students transitioning to middle or high school
3. Pilot high-quality *alternative* placements, within the home school and in smaller facilities, to serve students who require different learning environments
4. Document efforts to better serve ED students and those "at risk" through the School Improvement Plan
5. Train administrators, teachers and MCPS staff to make schools more "emotionally friendly;" measure progress by revising the school climate survey to provide better feedback
6. Train staff and parents re: co-morbidity, common overlaps in mental health disorders w/ADD, LDs and substance abuse, and about the need to refer students at risk for suicide (including extreme risk-taking behavior) to the Crisis Center
7. Enhance crisis support and educational effectiveness of Home & Hospital Teaching and collaborate with Potomac Ridge and other psychiatric facilities

B. Improve access to the public info re: ED services and outcomes

1. Share criteria for ED designation up front in public docs and on the web, describing levels of intervention from "what every teacher and staff member can do" to the range of accommodations which may be appropriate, to the ED Cluster and Bridge programs, to the nonpublic day and residential programs MCPS refers students (and, MCPS must determine how its alternative placements fit in)
2. Provide non-subjective measures to determine criteria to access these various services

3. Make info public (preserving confidentiality) regarding status of ED students, per program and by level of inclusion, including: success rates (or failure rates) of interventions, by public and non-public placements, by disability, by race, including test score info
4. For ED Cluster programs, provide info re: curriculum, including ability to differentiate instruction in supported classes, how the day works, what services are available, how many hours kids typically receive services, the role of the consulting psychologist, social worker and behavior specialist and ED Cluster staff-- and the range of service hours they provide per student
5. Disseminate MCPS and community resources to help parents negotiate complex systems, linking them with advocates and services, such as: the Montgomery County Collaboration Council for Children, Youth and Families, The Conflict Resolution Center, The Montgomery County Federation of Families for Children's Mental Health, Montgomery County DHHS, MCPS Parent Information and Training Center, MCCPTA, Maryland Coalition for Inclusive Education, Maryland Disability Law Center, The Mental Health Association, youth service agencies, and hospitals providing psychiatric care for children and adolescents

C. Examine IEP/CIEP process

1. Provide agendas with timelines, in advance, and identifying members roles and reports to be reviewed
2. Hand out summary of student's history and intervention for team members to review, and clarify if needed, rather than having people recount various versions
3. Develop protocols to assure the involvement of the ED Office in reviewing the students file prior to the CIEP and in attending both school-based ED evaluation meetings and Central Office ED placement meetings
4. Publicly post schedule of meetings and conference rooms to conserve time
5. Record sessions by audiotape and have a process to access copies, for a fee, unless there is demonstrated financial need
6. Routinely offer parents copies of school records

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7. Describe levels of intervention available BEFORE the meetings
8. Provide video webcasts to help parents to become informed about various placement options (protecting privacy of students)
9. Provide unbiased measures to determine criteria to access various services/placements and document pros and cons of options, including how "least restrictive environment" is likely to impact a particular student
10. "Count" services provided by the current school (describe in depth previous intervention and collaboration) and by the family (private tutoring, therapeutic services etc...), and opinions of mental health providers
11. Weigh medication issues in terms of the need for psychiatric support in placement
12. Weigh likely impact of proposed peer group for particular students
13. Weigh co-morbid conditions
14. Agree to re-convene meetings if more time is required
15. If a decision isn't unanimous, fast-track parent to regularly scheduled meetings regarding "how to" pursue various options, or provide this info by webcast videos
16. If decision isn't unanimous, consider providing a designated amount of time to reconsider student progress on IEP goals
18. Reflect on effectiveness of bringing in "temporary" MCPS staff to lead CIEP meetings, and evaluate them
19. Measure customer feedback regarding the IEP/CIEP process

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October 11, 2007

Mr. Jerry H. Weast
Superintendent of School
850 Hungerford Drive
Rockville, Maryland 20850

Dear Mr. Weast:

This is a request under the Maryland Public Information Act, State Government Article §§10-611 to 628. I am making this request to inspect all records in your custody and control pertaining to the following: Any studies, statistics, reports, or other records that treat in any fashion MCPS actions, practices, procedures and outcomes concerning the designation of students with emotional disabilities, including:

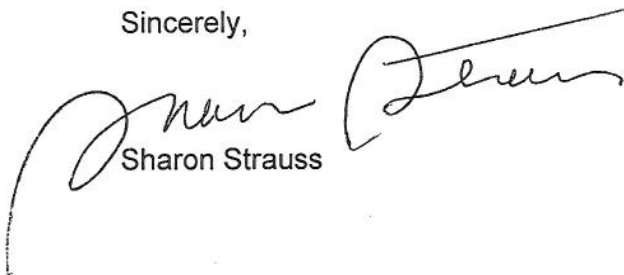
1. aggregated records of students' educational achievement with the ED programs by MCPS middle and high school- such as enrollment in honors, AP and IB courses, MSA, HSA, PSAT and SAT, high school diploma achievement and graduation, and college enrollment;
2. aggregated records of students' experience with the ED programs by MCPS middle and high school: % of students returning to a partially mainstreamed and "regular" educational environment, % of students leaving and returning to a more restrictive or therapeutic environment, % of students leaving and returning to MCPS alternative programs, % of students leaving MCPS for private placements paid for by parents, % of students leaving MCPS for home-schooling;
3. aggregated records of students enrolled in the ED programs by MCPS middle and high school, including student suspension (in and out of school) and expulsion information;
4. aggregated records of students enrolled in the ED programs by MCPS middle and high school, showing % who are academically ineligible from extracurricular activities due to GPA, and % of ED students who cannot participate because activities are inaccessible due to lack of transportation, lack of additional supports or accommodations;
5. aggregated records demonstrating characteristics of students' enrolled in the ED programs by MCPS middle and high school, including demographic information regarding students by race and ethnicity, sex, grades level, family poverty (FARMS), and specific disability;
6. aggregated records of related services received by students in the ED programs by MCPS middle and high school, including psychological services delivered by MCPS;
7. aggregated records of placement determinations made by the Central Individual Educational Placement Teams for the last five years, documenting types of program and services provided; and

8. any legal agreements, directives or guidance from MCPS prohibiting its staff (or staff of the private educational programs with whom it contracts) from presenting testimony that could have the effect of limiting special educational services

If all or any part of this request is denied, I request that I be provided with a written statement of the grounds for the denial. If you determine that some portions of the requested records are exempt from disclosure, please provide me with the portions that can be disclosed.

I also anticipate that I will want copies of some or all of the records sought. Therefore, please advise me as to the cost, if any, for obtaining a copy of the records and the total cost, if any, for all the records described above. If you have adopted a fee schedule for obtaining copies of records and other rules or regulations implementing the Act, please send me a copy. I look forward to receiving disclosable records promptly and, in any event, to a decision about all of the requested records within 30 days. Thank you for your cooperation. If you have any questions regarding this request, please telephone me at 240-654-2858.

Sincerely,



Sharon Strauss