

Shrewsbury Public Schools

Office of Special Education

Pupil Personnel Services

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Special Education Department Comprehensive Review of Programs and Services Report to the Shrewsbury School Committee December 2, 2015

Introduction

Shrewsbury is committed to providing a Free Appropriate Public Education by offering comprehensive programs for students with disabilities. The school system subscribes to the philosophy that all students can learn and that the purpose of special education is to minimize the impact of disability and maximize the students' ability to achieve success in the least restrictive environment with the greatest access to the general curriculum.

A usable definition for the role of special education comes from Dr. Thomas Hehir in his book, New Directions in Special Education:

“...to minimize the impact of disability and maximize the opportunities for children with disabilities to participate in general education in their natural community...with special education serving as a vehicle for access and addressing the specific needs that arise out of children's disabilities.”(p.49)

The purpose of this report is to provide a comprehensive overview of all the special education supports, services, and programs Shrewsbury Public Schools provides.

This report contains the following information:

- Special Education Law
- Eligibility and Enrollment
- Service Delivery Models PK -8
- High School Services
- Clinical and psychological services
- Related Services (Physical Therapy, Occupational Therapy, Speech and Language, Psychological, Nursing, Orientation and Mobility, assistive technology Vision, etc)
- Accomplishments and Challenges
- Summary

Authority, Scope and Purpose of Special Education laws

History:

Federal	State
<p>PL (Public Law) 105-17</p> <p>1997 amendments to the Individuals with Disabilities Education Act (IDEA)</p> <p>IDEA grew out of earlier education statutes and amendments</p> <p>1975, P.L. 94-142 FAPE</p>	<p>First major special education law was Chapter 766 of the Acts of 1972 - MGL c.71B</p> <p>Regulation 603 CMR 28.00</p>

Purpose:

Federal – IDEA 97 reauthorized in 2004	State - MGL (Mass General Law) Chapter 71B
<p>Congress noted that disability is a normal part of the human experience. Congress affirmed the need for higher expectations of student performance, preparation of students for employment and independent living, more comprehensive coordination of supports with other agencies, high quality professional development incentives for whole-school approaches, and pre-referral interventions.</p> <p>With the reauthorization of IDEA-97, the IEP process became unmistakably centered on these three key points:</p> <ol style="list-style-type: none"> 1. The involvement and progress of each child with a disability in the general curriculum including the addressing of the student’s unique needs that are tied to the disability. 2. The involvement of parents, students, special educators and general educators in meeting the individualized educational needs of students with disabilities. 3. The critical need to prepare students with disabilities for independence and employment and other post-school activities. <p>IDEA Part C – Early Intervention administered by the Department of Public Health</p>	<p>Requires that districts identify, evaluate, determine services and provide programs for school age children who – because of their disabilities – are unable to progress effectively in regular education and require special education to develop their individual education plan.</p> <p>Provide a planning process (often referred to as “Chapter 688”) for certain severely disabled young adults to determine adult service needs.</p> <p>The Massachusetts Education Reform Act of 1993 also set high standards for all students including students with disabilities. Education reform reinforces the need to assist all children to reach their full potentials and to lead lives as participants and contributors to the Commonwealth.</p>

Eligibility

Students are eligible for special education services between the ages of three through twenty-one, who have not attained a high school diploma or its equivalent, who have been determined by a Team to have a disability(ies), and as a consequence are unable to progress effectively in the general education program without specially designed instruction or are unable to access the general curriculum without a related service.

An eligible student shall have the right to receive special education and any related services that are necessary for the student to benefit from special education or that are necessary for the student to access the general curriculum.

In determining eligibility, the school district must thoroughly evaluate and provide a narrative description of the student's educational and developmental potential.

Students who are found eligible for special education must fall into one or more of the following categories:

Autism	Neurological
Communication	Multiple Disabilities
Developmental Delay (3-9 yrs)	Physical
Emotional	Sensory/Hearing
Health Impairment	Sensory/Visual
Intellectual (10 yrs. and above)	Specific Learning Disability

Process for Determining Eligibility

Child Find: Child Find is a continuous process of public awareness activities, screening and evaluation designed to locate, identify, and refer as early as possible all young children with disabilities and their families who are in need of Early Intervention Program (Part C) or Preschool Special Education (Part B/619) services of the Individuals with Disabilities Education Act (IDEA)

Pre-referral: Shrewsbury Pubic Schools endorses RTI (Response to Intervention) or; what the state refers to as MTSS Massachusetts Tiered System of Support, which ensures instructional support practices and accommodations are available for all children. Interventions and accommodations are documented.

Initial Referral: Any concerned person with knowledge of the child can refer for an evaluation. The district must send written notice to the parents within 5 days of receiving the referral. The notice must seek consent to evaluate and invite parental concerns and information.

Initial Evaluation: The evaluation must be sufficiently comprehensive to identify all the child's special education and related services needs. No single procedure may be used to determine eligibility. The evaluation must be completed within 30-days from consent of parent. It is important to note that a student is protected under IDEA during the evaluation period until there is a determination of eligibility.

Assessments are required regarding:

1. The suspected disability
2. Educational status and progress in the general curriculum
3. Results of district wide and state tests
4. How the disability impacts educational progress

Specific assessments are required for:

1. Specific Learning Disabilities
2. Braille for visual impairments
3. Consideration for limited English proficiency
4. Consideration for deaf or hearing impairments
5. Considerations for behavioral impediments
6. Young children upon turning 2.5 years of age

Team Meeting: Upon completion of the evaluation, the Team must convene within 45 days of the consent to evaluate to review and consider the evaluation. The Team must include the following: a representative that has the authority to commit resources, parents (and student when appropriate), at least one special educator, at least one regular educator, and other parties/evaluators that have knowledge of the student.

Determining eligibility: When making an eligibility determination, Teams must remember that the final question to ask is: Does the student require special education in order to make progress? Special education is defined as specially designed instruction to meet the unique needs of the student or related services that are necessary to access the general curriculum. Specially designed instruction means that there is a need to adapt the content, methodology, delivery of instruction and/or performance criteria in order for a student to make effective progress.

Related services help children with disabilities benefit from their special education by providing extra help and support in needed areas, such as speaking or moving. Within Massachusetts, related services necessary to access the general curriculum are considered special education and may be provided alone or in combination with specially designed instruction.

If the student only requires accommodations, then that student is not eligible for special education. Accommodations are adaptations to presentation or setting that can typically and easily occur in general education (such as preferential seating, wearing eyeglasses, giving extra time on tests).

When considering if the student has made effective progress, the Team must specifically look at whether the disability(ies) is causal to an inability to make progress. Such a finding is pivotal in

the eligibility determination. The law clearly states that students may not be determined eligible solely because of a need for reading or math instruction or because of limited English proficiency or social maladjustment.

Possible outcomes:

Found Eligible	Not found eligible
<p>An Individual Education Program is developed to meet the unique needs of the student that requires specialized instruction and/or related services.</p>	<ol style="list-style-type: none"> 1. The Team provides written notice and the parent’s notice of procedural safeguards is provided. 2. Accommodations are put into place as part of the District Curriculum Accommodation Plan (DCAP) 3. Potential for eligibility of a 504 (accommodation plan) if the student only requires accommodations and meets eligibility requirements. 4. If the parent is not satisfied with the evaluation outcome, they can seek an independent evaluation at their own expense or request one at the expense of the district.

Individualized Educational Program (IEP) Development

An Individualized Education Program (IEP) is a written statement of the educational program designed to meet a child’s unique individual needs. The IEP has two general purposes: to set reasonable learning goals for a student, and to state the services the student will receive as part of the educational program. The IEP is developed jointly by the school system, the parents of the child, and the student (when appropriate).

Components: The following components must be developed as part of the IEP:

1. Concerns, strengths, and vision for the student’s future
2. General curriculum areas affected by the student’s disabilities and the types of accommodations needed for the student to make effective progress
3. Present levels related to other educational needs and the types of accommodations needed for the student to make effective progress
4. Measurable annual goals
5. A service delivery grid outlining the type, personnel and duration of services
6. Non participation justification

7. Schedule modification if needed
8. Transportation services if needed
9. State and district wide assessments to be administered and the accommodations needed
10. Transition information
11. For a student 14 years old (or younger if appropriate) a Transition Planning Form
12. Placement determination

Implementation & Monitoring of the IEP

The district must provide the parent with a copy of the proposed IEP immediately following the development (within 3-5 days if a draft has not been provided at the meeting up to 10 days if the draft has been provided). As soon as the parent responds to the proposed IEP, the district must implement all approved elements without delay. All portions rejected revert to “stay put”, which means to continue with the last consented service.

The district must ensure that each teacher, related services provider, and other service provider has access to the IEP and is fully informed of his/her specific responsibilities and of the accommodations/modifications and supports that must be provided according to the IEP.

Progress reports must address the goals at least as often as typical peers receive a progress report/report card.

The district must initiate and conduct meetings annually to review the IEP and make revisions as necessary.

A reevaluation is conducted every three years to determine eligibility, unless waived.

Placement decisions are based on the student’s needs as described in the IEP. Consideration must first be given to in-district settings. A student may be removed only if the nature or severity of the disability is such that education in regular classes --- with the use of supplementary aids and services – cannot be accomplished.

Transition Planning

Beginning age 14 or sooner if determined appropriate by an individualized education program team, school age children with disabilities shall be entitled to transition services and measurable post-secondary goals, as provided under the federal Individual with Disabilities Education Act.

Transition services are defined as a "coordinated set of activities designed to be within a results-oriented process that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities."

A student is eligible to receive special education services up until their 22nd birthday if they continue to demonstrate needs that require them.

The components of a transition plan and services need to address the following:

1. A post-secondary vision, which should correspond with the vision statement on the IEP.
2. Disability related needs. The disability related needs section documents skills that require IEP goals and/or related services.
3. It outlines how the student can develop self-determination skills.
4. How the student will be prepared both academically and functionally to transition to post-school activities in order to achieve his/her post-secondary vision.

Extended Year Services

The Team's consideration of extended school day and year services must be based on (1) the unique nature of any specially designed instruction or related services needed due to the disability of the student or (2) if the student has demonstrated, or is likely to demonstrate, substantial regression due to a break in service (such as a summer vacation period). In regard to regression, all students "regress"—lose progress, forget, revert to previous behavior—to some extent between school years. It must be determined whether a student's regression would likely be substantial, and whether the student would require a greater than usual time to "recoup"—to get back to the level the student had achieved before a break in service. These decisions as with earlier IEP decisions must be made by the Team based on the needs of the individual student and regardless of the nature and severity of the disability.

Discipline and Placement

If a student receiving special education services engages in challenging behaviors that require discipline and the student does not have a behavior support plan, a functional behavior assessment must be conducted.

Procedural protections are available for students not yet eligible for special education who have engaged in dangerous/serious behaviors. An expedited evaluation is proposed and the student is considered a special education student until a determination of eligibility is made.

Short Term Removals: Schools can remove a student for up to 10 days at a time for any violation of school rules as long as there is not a pattern of removals and so long as such discipline is consistent with discipline applied to students without disabilities.

Longer Removals: A student with a disability cannot be long-term suspended or expelled from school for a behavior that was a manifestation of his or her disability. Prior to a change in placement, a manifestation determination must be conducted. Services must continue for students with disabilities who are long term suspended or expelled from school, whether or not the conduct causing the discipline is related to their disability.

Regardless of the results of the manifestation determination, the district may unilaterally place a student in an interim alternative educational setting, as determined by the Team, for up to 45 calendar days, or longer upon order of a hearing officer.

Schools may request a hearing officer to remove a child for up to 45 days if keeping the child in his or her current placement is substantially likely to result in injury to the student or others.

A parent may appeal a removal decision, or a manifestation decision, to the BSEA (Bureau of Special Education Appeals).

Chapter 688 Referral

Filing a Chapter 688 referral creates a documented need for services and supports for adults with severe disabilities. The primary goal of filing a Chapter 688 referral is to plan for needed adult services for students. In those cases where a student is determined to be eligible and services are not provided due to a lack of funding or program availability, agency personnel can advocate to increase funds in the budget planning process for the next fiscal year in order to provide the needed services.

688 Referral Process

In Massachusetts, students with severe disabilities access adult service agencies through the Chapter 688 referral process. Chapter 688 provides a two-year coordinated planning process for students whose entitlements to special education services will end when they graduate from school or turn 22 years of age.

Eligibility Students who receive services in accordance with an IEP and receive Supplementary Security Income (SSI) or Social Security Disability Insurance (SSDI) and/or are on the registry at the Massachusetts Commission for the Blind (MCB) are automatically eligible for Chapter 688. Other students who may be eligible are those students with severe disabilities who are in need of continued services and are unable to work 20 or more hours per week in competitive, non-sheltered, non-supported employment at the time they are ready to leave school. Also, students who receive services from the Department of Children and Family Services (DCF) and are on an IEP or a 504 Plan may be eligible.

Provisions pertaining to Informed Parental Involvement

1. Parents may review all educational records pertaining to their child.
2. A parent may give permission to waive a recently conducted individual assessment, or assessments of the 3-year reevaluation.
3. Parents have the right to be members of any group that makes decisions on educational placement of their child.

4. Parents have a right to a copy of the IEP “immediately” (3-5 days) if they have not been provided a draft copy.
5. Parents have 30 calendar days to review and respond to the proposed IEP.
6. Parents must be invited annually to participate in a formal IEP Team review of the student’s progress.
7. Parents may request revisions to the IEP at any time if they feel services in the IEP are not being provided.
8. All rights are transferred to the student upon his/her eighteenth birthday unless a court has appointed a legal guardian.

Problem Resolution Procedures

State and federal special education laws provide many opportunities for parents to be involved in educational planning for their child who has a disability. If parents and school districts disagree about changes relating to the identification, evaluation, or educational placement of a student with a disability, or the Free and Appropriate Public Education (FAPE) services provided to a student with a disability, the laws provide a menu of ways to resolve the disagreement.

The first step to resolving a dispute is to contact the school’s Principal or the Director of Special Education and Pupil Personnel. It is helpful if a letter is written outlining what the concerns are.

State Complaint System: Complaints can be filed with Program Quality Assurance (PQA) about any violation of state or federal education law or obtain help from PQA staff to resolve the problem informally. If there is a request for a formal investigation by PQA, it will need to be submitted in writing. The written complaint should include: a statement of concerns, attempts to resolve the concerns, the actions by the school that would most likely resolve the concerns and contact information. The issues that a complaint is being filed about, however, must have occurred no more than one year before PQA receives the complaint. A copy of the written complaint must be sent to the school district. PQA will resolve a complaint within 60 days and send a copy of the findings and decision.

Mediation: Mediation is a service provided by a neutral individual who is trained in special education law and in methods of negotiation. Mediation can be scheduled whenever the parents and schools have a disagreement about special education matters, even if a complaint was made through the PQA Problem Resolution System. The mediator helps the parent and school district talk about their disagreement and reach a settlement that both sides can accept. Discussions during mediation are confidential and nothing that is said by either party can be used later if the dispute becomes the subject of a formal hearing or court proceeding. Once an agreement is reached, it will be put in writing, both sides will sign it, and it may be enforced by a court.

Bureau of Special Education Appeals (BSEA): If the district and parent are unable to work out a disagreement, then parties are entitled to have a neutral and impartial hearing officer listen to both sides of the dispute, hear testimony, examine evidence, and make a decision. This hearing is convened by the BSEA and is called a due process hearing.

The BSEA hearing officer is trained in special education law and must not have any personal or professional connection to any party who is involved in the disagreement.

The due process hearing will consider disputes about eligibility; evaluation; IEPs; educational placement decisions, including those resulting from discipline; FAPE; provision of special education; or procedural protections of state and federal law for students with disabilities. Parties must file for a hearing within two years of the events that form the basis for the complaint.

Enrollment In District

The number of students served in special education may vary greatly over time depending upon pre-school enrollment, evaluations, walk-in services, and students who move in to the district. More detailed information regarding enrollment will be provided in a subsequent report.

Enrollment Out Of District

Students who require more intensive and specialized supports and services may be referred to an out of district approved private special education program. These students require a level of support and service that the district is unable to provide due to the intensity and severity of the disability. There is a very thorough process to refer a student to an out of district placement to ensure that all the services can be provided to the student. The district monitors the program and has full oversight of the services delivered to the student. This is the most restrictive setting and thus must be reviewed annually to determine if the level of services continue to be required for the student to make effective progress towards their goals. More detailed information regarding enrollment will be provided in a subsequent report.

Service Delivery Models PK Through 8

Shrewsbury Public Schools provides a variety of program options depending upon the severity of the child's disability, his/her individual needs and the IEP (Individual Education Program). The majority of students who receive special education services participate in the general education program for much of their school day. The special education programs are presented here according to grade level.

Preschool Programs at Parker Road: Currently, 15 Parker Road and 2 Wesleyan Terrace provide nineteen half-day sessions of integrated preschool, one full-day session of intensive preschool, and multiple half-day and full-day sessions of Educational Learning Center programming for preschool students.

Prior to turning three-years old, children with a disability or disabilities, or at-risk profiles may be referred to the school district for an initial special education evaluation to determine eligibility for special education services upon turning three-years old. Early Intervention programs are

provided through the Massachusetts Department of Public Health for children birth to three. Parents, pediatricians, and private preschool teachers can also refer preschool aged children to the Shrewsbury Public Schools for an initial special education evaluation in he/she suspects a child may have a disability. Every referral is followed up with an evaluation in the suspected area of disability. If a student is found eligible for special education services, a preschool placement is determined. The Least Restrictive Environment for most of our students is in an integrated or inclusive preschool environment, which includes students with and without disabilities. A smaller percentage of preschool children require a substantially separate setting for the majority of their school day as a result of the severity of their disability. This group of students may also attend a full-day of preschool in order to receive an educational benefit.

The District's preschool programs provide children with and without disabilities an engaging and challenging preschool experience. Children with identified disabilities are provided with an Individual Education Program developed for their unique and individual needs.

Integrated Classrooms: Preschool aged students with and without disabilities are enrolled in integrated classrooms. Children with disabilities are enrolled based on their Individual Education Program (IEP). Children without disabilities are enrolled by their parents/guardians. Early childhood special education teachers, certified to teach both children with and without disabilities, provide preschool curriculum and instruction for up to fifteen students with a ratio of seven students with disabilities to eight students without disabilities. Our curriculum is based on the Massachusetts Curriculum Frameworks, Early Childhood Program Standards, and Guidelines for Preschool Learning Experiences.

Walk-in/Itinerant Services: Students ages three to five and in need of therapies such as speech and language, occupational therapy, and physical therapy, receive walk-in services. Parents accompany their child during the one to two therapy sessions each week and are provided with consultation on how to best support their child at home.

Educational Learning Center (ELC): Students with Autism Spectrum Disorders (ASD) or similar developmental profiles may receive some or all of their services as part of the ELC program per their IEP. The ELC program is designed to provide services along a continuum from consultation and/or to highly individual and intensive curriculum and instruction. This program is led and supervised by early childhood educators with intensive certification and specialized training in working with children with Autism Spectrum Disorders (ASD) or similar developmental profiles. Instructional methodology is primarily based on, but not limited to, the principles of Applied Behavior Analysis (ABA). Principles of ABA may include the use of positive behavior interventions, systematic instruction of skills across all domains of learning to foster increasing independence in the educational learning environment, instructional plans that break down skills across all domains into manageable increments and are taught from least to most complex, error-less instruction, task analysis, analysis of targeted intermittent collection of data and adjustment of instruction based on data, and planned and naturally occurring opportunities to acquire and practice skills and concepts.

Intensive Preschool Program: This program is designed for preschool children with intensive disabilities, which affect all areas of their development including cognition, communication,

physical, social-emotional, and self-care skills. The morning portion of the program is integrated and the afternoon portion is substantially separate. An early childhood educator certified in intensive special needs leads this full-day program with related service providers to target all domains of development. Paraprofessionals, trained and supervised, by the lead early childhood teacher provide carryover and direct instruction throughout the full-day program. The multidisciplinary team utilizes the afternoon instructional period to provide intensive therapy across all domains of development.

K-Grade 4

Inclusion Support: Special education teachers or instructional aides, who support students who are included in their regular education classes, provide inclusion support. Supports can range from assistance with organizational strategies, reading, writing, and math within the context of the curriculum being delivered. The special education teacher works closely with the general education teacher to ensure the student receives the appropriate accommodations needed to make effective progress towards their educational goals.

Learning Skills: Learning Skills programs provide direct special education services, typically in language arts and/or mathematics, to students with diagnosed learning disabilities who require varying levels of skill development. All students who receive learning skills services remain included in their grade-level general education classrooms for all subjects, but require remediation of certain basic skills and pre-teaching/re-teaching of grade-level material. The time spent in the learning skills program depends on the individual student's needs. A variety of instructional techniques are utilized including structured, multi-sensory reading and math programs. There are learning skills programs in all of the elementary schools.

Intensive Learning Supports: Students requiring intensive learning supports are included in their grade-level general education class, but with a higher level of modification to the academic work than students in the learning skills program. Their educational program places a greater emphasis on the acquisition of basic reading, language and math skills. Some students require essential reading, writing, and/or math instruction that is taught exclusively by the special education teacher. These supports are individualized and vary across all the elementary programs.

Educational Learning Center (ELC): The Educational Learning Center, ELC, is designed for students diagnosed with Autism Spectrum Disorders or similar developmental profiles who require more time in a specialized classroom in order to make effective progress in school. A variety of teaching methods, guided by the principles of Applied Behavior Analysis (ABA) are utilized. Data collection and careful monitoring of progress are used to determine which instructional methodologies are best suited for each student. Students may require 20% to 60% of their educational services in the ELC. Integration into the general education setting is determined by the student's IEP. Students who require clinical support may also receive services through the ELC, but are fully included in their general education classroom. These students may have support from an ABA Technician and behavior support monitored by the ELC Coordinator. ELC program coordinators supervise the direct teaching staff and coordinate all student services.

Grade 5-8

Inclusion Support: Special education teachers or instructional aides provide inclusion support in the general education classroom to students on IEPs who are working at grade level or very close to grade level. Supports can range from assistance with organizational and/or attentional strategies; specialized instruction and/or assistance with reading, writing, and math; or self-regulation strategies, all within the context of the grade level curriculum being delivered. The special education teacher works closely with the general education teacher to ensure the student receives the appropriate accommodations needed to make effective progress towards their educational goals as well as progress within the general curriculum. Students identified for inclusion supports do not require extensive modifications to curriculum.

Co-Taught (grade 5 and 6): Students who are at risk and present a similar profile to students with Language Based Learning Disabilities are identified for this program to provide the needed level of support within their community schools. Programs with this level of support for students with these general characteristics were previously only available in out of district placements. Fifth and sixth grade Students are placed on a team with two general education teachers, one special education teacher and a paraprofessional. Co-teaching occurs in all 4 curriculum content areas: ELA, Math, Science, and Social Studies. Co-teaching provides a number of opportunities for best practice not available under our typical staffing structures:

- Provides a more truly inclusive setting while also being responsive to individual and group needs. Students with special needs will spend more time learning alongside their typical peers.
- Students' schedules are far less fragmented due to receiving a much higher proportion of their services within the classroom. This is a critical support to our students who typically need the most consistency.
- Consistent contact throughout the day increases capacity for consultation and meaningful collaboration between the service providers. Largely shared preparation periods during the school day also allows for consistent collaboration for strategic modifications and near seamless delivery of content instruction.
- Significantly increased access to small-group instruction, with more responsibility for instruction shifting from paraprofessionals to professional educators, particularly for new content.
- A unique combination of flexibility in delivery of service with increased predictability in the environment for students, as the main service provider's schedule will not be dependent on schedules of other general education classrooms; the model for most special educators in other models is to be shared between 2 teams.
- Increased ability to synthesize content instruction with special education services and techniques.
- Increased student independence in a supportive environment.
- Full access to all general education supports, including RTI interventions developed through normal data based instruction.

Essential Skills: Essential skills programs provide special education services to students with disabilities, who are up to two grade levels below same age peers academically or, who are unable to maintain the pace of the curriculum being delivered and require varying degrees of skill development in the areas of reading, math and writing. Students in this model receive instruction for ELA and/or Math in small groups by a special education teacher and also have paraprofessional support in this setting. A majority of the students participate in the general education classroom for social studies and science with Para Professional support. Students may also require related services, such as occupational therapy, speech and language services, structured reading, or social skills instruction.

Learning Skills/Academic Supports: Students are assigned learning skills classes to develop learning and compensatory strategies that will enhance the progress that they make in their general education courses. Compensatory strategies are simply ways to use your strengths to compensate for your weaknesses. For example, reading compensatory strategies are thinking strategies that empower the reader to have a reflective cognitive learning style that renders interactive and meaningful dialogue between the reader and the printed page. Learning skills classes provide an opportunity to pre-teach curriculum content, allowing students to achieve success when presented with information in the general education classroom, or to re-teach concepts covered in the general education classroom that were confusing or that require repetition to master concepts. Other areas addressed include test taking, study skills, an emphasis on self-advocacy, material management, homework-preparation (i.e. ensuring students know what assignments they have, where to find them, have a system in place, and are prepared to do their homework independently), and organizational skills. The number of learning skills classes provided weekly is determined on an individualized basis, based on a number of factors including level of student need as well as other services required by the student. Learning skills/academic support classes are available to students receiving inclusion supports, co-taught model, and Essential Skills models of service delivery.

Intensive Learning Center (ILC) Program (Grade 5): This program was developed for the incoming fifth grade students that required a highly structured program to meet their unique learning needs. Students identified for this model of service delivery have an identified disability and are more than 2 years below grade level. As such, they require and are provided an extensive level of curriculum modification. Students in the ILC program receive instruction in all 4 curriculum content areas (ELA, Math, Science, and Social Studies) in a small group, special education classroom, with planned inclusion opportunities in other areas. Specialized instruction in the ILC classroom is primarily delivered through small groups, is highly individualized, and is provided at the students' instructional level. There is a high staffing ratio within the program. Most students receive related services, including speech/language therapy, social skills instruction, and/or occupational therapy. These students may have challenging behaviors that impact learning, although that would not be the primary challenge of students in the program. In addition to core curriculum content, safety skills, self advocacy, and functional skills are provided to students.

Educational Learning Center (ELC) Program: The focus of this program is to provide an age appropriate, functional and inclusive education for students with moderate to intensive special needs, primarily those requiring a program that operates using the principles of applied behavior analysis due to disability or behavioral presentation. The program is highly individualized to meet the students' unique learning needs. The curriculum includes reading, writing, math, functional life skills, activities of daily living, social skills and pre-vocational training. Students may also require behavior support across their educational settings. Science and social studies are taught either in the ELC program or in the general education setting with modifications. Students typically have a substantially separate program, with planned inclusion opportunities on an individualized basis. The goal is to teach skills that can be applied at the greatest level of independence.

Most Students in the ELC program have regularly scheduled community outings to destinations such as Target, Stop and Shop, Wegman's and Michael's, in order to apply and generalize the skills learned in the classroom. Students are learning how to develop grocery lists, read product packaging, and determine items needed to cook or bake a given recipe or simple meal at school. They are practicing functional math, including reading and estimating prices, simple budgeting, and monetary transactions. Some students now make their own lunch and snacks from things they bought at the grocery store. Students are also learning their clothing size, shoe size, and the various layout of stores to find items on their lists. Communication is of the utmost importance during community outings, as students learn to communicate with community members to ask questions, seek information, self-advocate, and navigate community resources.

High School Supports and Services

Shrewsbury High School provides a vast array of special education supports and services. The staff works in conjunction with the general education staff, guidance counselors and administration to ensure all students are part of the culture and life of the school.

Students have a variety of educational experiences available to them when they transition to the high school. Services can include a range of inclusion support in the general education classrooms to more intensive support in an ELC/life skills classroom.

Once a student turns eighteen, a "688 referral" is submitted to the state agency that is most likely to support the student once they graduate or turn twenty-two. Between the ages of 18 and 22, an eligible student can continue their special education services. These services include transition activities that assist the student in preparing for adulthood once they leave high school.

Inclusion Support: Special education teachers or instructional aides, who support students in their general education classes, provide Inclusion support. Supports can range from assistance with organizational strategies, reading, writing, and math within the context of the curriculum being delivered. Students are assigned to supported classes, based upon their level of need and the service delivery of their Individual Education Program.

Learning Skills: Students are assigned one or two learning skills classes daily to develop learning and compensatory strategies that will enhance the progress that they make in their general education courses. Compensatory strategies are simply ways to use one's strengths to compensate for one's weaknesses. For example, reading compensatory strategies are thinking strategies that empower the reader to have a reflective cognitive learning style that renders interactive and meaningful dialogue between the reader and the printed page. Other areas addressed include test taking, study skills, and an emphasis on self-advocacy. Students are assigned a skills class, the teacher of which becomes that student's liaison. Students in Learning Skills classes also work on transition skills with their liaisons. These include, but are not limited to: resume writing, career exploration, aptitude and interest surveys, and self-advocacy skills. Students earn elective credits for their participation in a Learning Skills class. Students access Naviance, a web-based program that enables the student to develop a portfolio of their interests, aptitudes and abilities. The program provides opportunities to complete interest inventories, complete resumes, explore colleges, majors, and jobs in the community through virtual interview and tours. Students can share their progress with their parents as the program can be accessed from any computer. The student has access to their specific files throughout their high school experience. Learning Skills teachers organize and implement field studies that bring students to disability offices of local colleges, in preparation of college self disclosure. Other field studies are arranged for very small groups and support students in needed transition skills.

Educational Learning Center (ELC/Life Skills) Program: The focus of this program is to provide an age appropriate, functional and inclusive education for students with moderate to intensive special needs. The program is highly individualized to meet the students' unique learning needs. The curriculum includes reading, writing, math, functional life skills (community based, work based, and independent living skills), activities of daily living (home based living skills), social skills instruction, and pre-vocational training. Students may also require behavior support across their educational settings. Science and social studies are taught either in the ELC/life skills program or in the general education setting with modifications and support from either a special education teacher or paraprofessional. Integration into the general education setting is determined by the student's IEP. Students have opportunities to participate in general education electives and any appropriate courses with support. The goal is to teach skills that can be applied at the greatest level of independence.

Twice weekly, students are involved in a community based learning experience in which they are transported to local stores, restaurants, and businesses. Prior to any trip to the community the students prepare and plan for the trip. If they are going to the grocery store, a meal is planned, a shopping list and budget developed, and upon return to school, the students prepare the meal. Other trips are planned to purchase specific items at the pharmacy or the local department store. These trips are coordinated with parents so that the students may make meaningful purchases.

Mobile On Site Vocational Education (M.O.V.E): The M.O.V.E. program, in conjunction with a partnership with the Best Western and Marriott hotels in Marlborough, provides students with a unique vocational experience. The students in Project M.O.V.E. have been recommended through the TEAM process and attend classes at the high school for part of the day and then

attend the M.O.V.E. program for the remainder of the day. These students typically need direction in the areas of social/personal behavior, classroom achievement and/or appropriate attendance levels. M.O.V.E. is an alternative vocational training program and provides site-based training in the food trade area and in the laundry. The primary goal is to help students gain vocational skills and develop appropriate work behaviors (soft skills) to better equip them for the world of work. Students who participate in M.O.V.E. earn elective credits for their participation.

In-School Work Experience: The In-School Work Experience program provides each student enrolled the opportunity to have a hands-on work experience in various skill areas within the high school setting. The intent of this high school program is not to train the student for a specific job, but to build and master general employable skills. These skills include following directions, responsibility and time management, completing a task, troubleshooting and quality of work. These are all areas that students must master to possess a job.

P.A.C.E. (Promoting Academic Connections and Engagement): Education is a shared responsibility of students, school, home and community. Investing in the education of our students benefits the community. All students want to learn and be life-long learners. The P.A.C.E. program is approaching education as a balance of the student's intellectual, social, physical, emotional and creative qualities.

The P.A.C.E program is designed to support students at risk of either dropping out of high school or requiring a more supportive educational program. The development of the program is in response to Shrewsbury Public School's 5-year district priority of promoting the health and wellbeing of students. The development of this program creates a systematic response to students who struggle with academic, social/emotional, and/or mental health issues, but more importantly, it will assist students to graduate and become productive members of society.

The program exists for the benefit of the students enrolled in special education, as well as the SHS community at large, the students' families, and the greater Shrewsbury community.

P.A.C.E. is a unique program developed to ensure student success at Shrewsbury High School. There are 4 basic components to our program:

- To prepare students for graduation by providing engaging academic instruction that promotes intellectual excellence in order to successfully graduate.
- To provide students and parents with regular communication regarding expectations and progress on academic, social and behavioral benchmarks.
- To reinforce student success on meeting their academic, social and behavioral benchmarks.
- To provide career readiness and real life application to the learning environment.

P.A.C.E. Mission: The mission for students participating in the P.A.C.E. program is to provide an engaging and challenging curriculum in a flexible, safe and secure environment that nurtures academic, social, physical and emotional success in order to graduate and be successful transitioning to independent living and post graduation pursuits.

P.A.C.E. Vision: Students are able to benefit from and participate in their educational program when they feel safe, competent, understood, and respected by their classmates, teachers and administrators. An emphasis on teaching meaningful skills and strategies, an opportunity for staff to process and collaborate, and regularly scheduled parent and family interaction, students will have an opportunity for input and ownership of their success reaching their personal goals.

Student engagement in the P.A.C.E. program will be essential to the success of the program. The program represents the **Core Values** of Shrewsbury High School:

Life-long/Reflective Learners

Equity

Advocacy

Dedication

Empathy/Respect

Responsibility

Student Goals:

1. Students will actively participate in all program areas.
2. Students will identify their strengths and areas in need of improvement and learn strategies to effectively manage and monitor their progress towards their goals.
3. Students will be respectful, act with kindness, empathy, and compassion to all students and staff in the high school and community.
4. Students will increase their ability to apply problem-solving strategies to real life problems.
5. Students will participate in the acquisition of transitional skills and vocational experiences.
6. Students will increase independence and opportunities to access the general education program.
7. Students will engage in community service learning projects, group activities, and contribute to the positive culture and life of the high school.

Transition: The term “transition services” means a coordinated set of activities for a child with a disability that:

- Is designed to be within a results-oriented process, that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child’s movement from school to post-school activities, including post-secondary education, vocational education, integrated employment (including supported employment); continuing and adult education, adult services, independent living, or community participation;
- Is based on the individual child’s needs, taking into account the child’s strengths, preferences, and interests; and
- Includes instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and, if appropriate, acquisition of daily living skills and functional vocational evaluation.

Shrewsbury High School has developed a comprehensive approach to transition services for students in grades 9-12. An Interagency Transition Team was developed that includes many community agencies and businesses. The purpose for this team is to provide a comprehensive approach to supporting students and families understanding the breadth of options and services available post graduation. For detailed information, please visit the Transition Website, shrewsburytransition.com. In September of 2015, the Shrewsbury High School Transition Team, hosted a Transition Fair at Shrewsbury High School with agency representation from a variety of supports throughout the Worcester area. In addition, there were three presentations for parents to attend related to transition of their students.

Project Unify: A track and field team, in conjunction with the Special Olympics was established during the 2013-14 school year. Special Olympics Project UNIFY® is an education and sports based strategy powered by an engaged youth community that increases athletic and leadership opportunities for students with and without intellectual disabilities, while creating communities of acceptance for all.

In the fall of 2015, Shrewsbury High School added a Unified Basketball team to our athletic offerings. The team was comprised of fifteen students with and without disabilities who competed against Algonquin, Groton-Dunstable and Fitchburg High School. This has proven to be a tremendous addition to the opportunities at Shrewsbury High School!

Special Peer Connections – This is an after school club that was developed to connect students with disabilities and their peers to engage in meaningful activities. A special education teacher serves as the mentor and provides oversight of the program.

Clinical and Psychological Services

Shrewsbury Public Schools provides a wide range of clinical services to both students and families across the district. These services have expanded significantly over the past four years due to the increase in behavioral challenges and mental health challenges.

Shrewsbury has a history of providing excellent programs (ELC Programs – Educational Learning Centers) and services to students on the Autism Spectrum that includes behavioral support and programs designed by highly qualified teachers with extensive experience working with children on the Spectrum. There are currently programs in four elementary schools (Parker, Beal, Spring, and Floral) that support these students. Three of the five Coordinators of these programs are Board Certified Behavior Analysts and the other two Coordinators have extensive background and experience in the field. Often times these staff are providing support outside of their program to ensure students who are struggling with mental health issues receive the necessary support.

It became very clear that there were significant behavioral and emotional challenges students faced outside of the programs offered to students on the Autism Spectrum and further clinical supports were required to meet these needs. In 2008 a Clinical Coordinator was hired to provide

clinical support to the nine schools. The Clinical Coordinator is a certified special education teacher and is a Board Certified Behavior Analyst. This position has been instrumental in the decline of out of district placements for students who present with significant challenging behaviors. In 2014, a second clinical coordinator position was added to address the increased demands of students requiring clinical support.

Another area of great concern is the rise and severity of mental health issues students present. Psychiatric disabilities cannot be addressed with behavioral programming alone, but instead need a sophisticated approach to treatment. In 2010, the district contracted with a Child and Adolescent Psychiatrist to work in conjunction with the Clinical Coordinator to address these clinical challenges.

Shrewsbury has become a leader relative to providing clinical supports to students and families and more importantly partnering with community providers to expand and enhance services available to our families. Currently Shrewsbury collaborates with the following agencies and services in addition to our clinical programming and psychiatric consultation:

- Shrewsbury Youth and Family Services
- UMass Child Psychiatry Fellows
- Jewish Family Services Worcester
- Family Success Partnership
- You Inc.

Clinical Coordinator: There are currently two clinical coordinators. The Clinical Coordinator is a full time Master's level Behavior Analyst who works across the district. This role supports students in general education and special education requiring clinical services and support. The Clinical Coordinator's primary responsibility in general education is to assist the classroom teacher identify students who may be engaging in challenging behaviors that interfere with learning, conduct a Functional Behavior Assessment, develop Positive Behavior Support Plans, train staff to implement the plans, and follow-up when needed. The primary responsibility in special education is to develop procedural consistencies, develop accountability and reliability procedures, supervise home support programs, consult to district wide programs, and provide professional development. In addition, the Clinical Coordinators also provide numerous different professional development opportunities to a variety of service providers across the district.

Psychiatric Consultation: Dr. Kimberlee Kusiak is currently contracted five hours weekly to provide consultation across the district. Dr. Kusiak works with both clinical coordinators to address the referrals across the District. Dr. Kusiak provided professional development to staff in response to mental health issues as well as provides parents with support to access resources in the community. This has been an invaluable support to both staff and families across the district. In addition, Dr. Kusiak and the clinical coordinators offer a free course to parents "*Family Strategies*" that provides parents with numerous ways to identify and respond to mental health and behavioral issues.

Family Success Partnership: The Family Success Partnership, through the Assabet Valley Collaborative, is a family centered program that expands the mutual capacity of schools, state

agencies and programs, human service agencies, and community-based resources to provide a flexible, comprehensive and accessible system of services to children with mental health needs that are beyond the scope of the school, but do not meet traditional eligibility requirements for state agency support.

FSP utilizes a wraparound model to serve at-risk students and their families whose challenges prevent success and well being in school.

Shrewsbury currently contracts a full time social worker that will be able to support up to 30 families who require this level of support.

Partnership with UMass Child Psychiatry Fellowship Program: Shrewsbury has entered into a partnership with the UMass Psychiatry Department to host the Child Psychiatry Fellows. Each Fellow completes a six-month rotation across the district. They are scheduled to visit classrooms weekly for a four-hour block of time in each school building. They are mainly observing classroom behaviors of both typical children and children with disabilities.

In addition, once a month they meet with the districts consulting psychiatrist and clinical coordinator to review cases. They are able to provide feedback and recommendations to teachers when asked.

The goals set forth by the Child Residency Education Committee include:

At the end of the School Consultation rotation, the child psychiatry resident will be able to demonstrate the following knowledge, skills and attitudes of all six core competencies:

Educational Goals:

- Extrapolate the consultation process to school environments, and practice consulting to schools.
- Visit schools to enlarge one's repertoire of educational options for children and adolescents.
- Integrate research on effective schools and teaching practices.
- Examine child and adolescent development within the context of schools.
- Recognize, assess, and plan interventions for students with learning disabilities.
- Identify appropriate biopsychosocial interventions to enhance diverse students' functioning.
- Examine educational programs to promote mental health.
- Prepare for the school consultation components of the Child Psychiatry Board Exam
- Learn about community partnering and prevention program

Related Services

Related services help children with disabilities benefit in order to access their educational program. Related services can include, but are not limited to, any of the following:

- speech-language pathology and audiology services
- interpreting services
- psychological services
- physical therapy
- occupational therapy
- counseling services, including rehabilitation counseling
- orientation and mobility services
- school health services and school nurse services
- social work services in schools
- parent counseling and training
- augmentative communication

Federal Law – IDEA (Individual with Disability Education Act) specifies the requirement of a child’s related services in his or her IEP. This appears at §300.320(a)(4) and stipulates that each child’s IEP must contain:

(4) A **statement** of the special education and **related services** and supplementary aids and services, based on peer-reviewed research to the extent practicable, to be provided to the child, or on behalf of the child, and a statement of the program modifications or supports for school personnel that will be provided to enable the child—

- (i) To advance appropriately toward attaining the annual goals;
- (ii) To be involved in and make progress in the general education curriculum in accordance with paragraph (a)(1) of this section, and to participate in extracurricular and other nonacademic activities; and
- (iii) To be educated and participate with other children with disabilities and nondisabled children in the activities described in this section... [§300.320(a)(4)]

IDEA requires that a child be assessed in all areas related to his or her suspected disability. This evaluation must be sufficiently comprehensive so as to identify all of the child’s special education and related services needs, whether or not those needs are commonly linked to the disability category in which he or she has been classified.

It is the IEP team’s responsibility to review all of the evaluation information, to identify any related services the child needs, and to include them in the IEP. Goals are written for a related service just as they are for other special education services. The IEP must also specify with respect to each service:

- **when** the service will begin;
- **how often** it will be provided and for what amount of time; and
- **where** it will be provided. [§300.320(a)(7)]

All related service providers are responsible for many other duties other than direct or indirect services for students. Examples include, but are not limited to the following: Medicaid documentation, attending parent and team meetings, research of specific disabilities and best practices, data collection, collaboration and coordination with other related service providers,

regular education teachers and special education teachers, implementing behavior support plans, modification to curriculum, and developing home programs for carry over.

Related services can be delivered in three different educational environments as delineated on a student's IEP (Individual Education Program) as follows:

1. Consultation to the classroom, other providers, and parents;
2. Direct service within the regular education classroom;
3. Direct service outside of the regular education setting either individually or in a group.

The following outlines the majority of related services provide din Shrewsbury

School Health Services and School Nurse Services: IDEA defines this related service at §300.34(c)(13): (13) *School health services and school nurse services* means health services that are designed to enable a child with a disability to receive FAPE as described in the child's IEP. School nurse services are services provided by a qualified school nurse. School health services are services that may be provided by either a qualified school nurse or other qualified person.

Nurses are integral to the special education department. They typically do not deliver specific I.E.P. services unless it is delineated on the I.E.P. For example, a student may receive nursing services as part of their I.E.P. for health reasons that interfere with their access to their program in the absence of the Nurse treating the student. They provide a significant amount of support to students with special needs outside the daily routine of administering health care to the whole student body. Amongst their many duties, Nurses support the special education department by attending I.E.P. meetings, consult to our life skills programs, administer medication, provide monitoring of medically fragile students, provide support to families and outside medical professionals, provide training to bus drivers and monitors on seizure protocols and allergy action plans, and develop health care plans and asthma action plans. A more detailed report will be provided in the Fall of 2016.

Speech-Language Pathology (SLP) Services: IDEA defines this related service at §300.34(c)(15) as:(15) *Speech-language pathology services* includes—
(i) Identification of children with speech or language impairments;
(ii) Diagnosis and appraisal of specific speech or language impairments;
(iii) Referral for medical or other professional attention necessary for the habilitation of speech or language impairments;
(iv) Provision of speech and language services for the habilitation or prevention of communicative impairments; and
(v) Counseling and guidance of parents, children, and teachers regarding speech and language impairments.

Speech-language pathologists identify and treat students with the following communication disabilities that impact their ability to access the general ed curriculum:

- articulation
- fluency
- voice
- receptive and expressive language
- hearing
- cognitive aspects of communication (attention, memory, problem solving, executive functioning)
- social aspects of communication
- communication modalities - including oral, manual, augmentative and alternative communication (AAC) techniques and assistive technology.

SLP's provide speech/language intervention services in a variety of settings (in general education and special education classrooms and in therapy rooms) and collaborate and support all members of the students' Team. They work with students from Pre-K to HS individually and in small groups depending upon their specific needs.

In addition, students with communication disabilities who are not enrolled in the district public school can receive "walk-in" services if they are found eligible for services on an Individual Education Program.

The speech and language pathologists have responsibilities in the following areas:

- Play a major role on the Early Intervening Team Process
- Provide RTI services as a proactive measure for general education students having difficulty with a specific area of communication to prevent the need for more formalized special education evaluation and services.
- Complete screenings, informal and/or formal evaluations for eligibility determination and for re-evaluation. Summarize evaluations and provide recommendations in written reports presented to the Team at IEP meetings.
- Attend IEP meetings
- Write IEPs including current performance, goals, and objectives.
- Write progress reports to go home to parents each grading period.
- Regularly provide consultation to classroom teachers and assistants to discuss how to carry over communication strategies in the regular education environment so that generalization of skills can occur within the classroom.
- When the SLP provides speech/language therapy services in the classroom, the classroom teacher and/or assistant is often made a part of the therapy session so that strategies can be demonstrated.
- Strategies and methodologies are modified as needed and communicated to the TEAM for implementation.
- Specific programs that are worked on with the therapist outside of the classroom are explained and demonstrated to the classroom TEAM and any aspects of the program that can be carried over to the classroom environment are done so on a consistent basis.
- Create and modify materials so students can access and demonstrate understanding of the curriculum.
- Collect and record data to reflect student progress toward goal achievement.

- Document for reimbursable services through Medicaid.
- Consult with student-specific paraprofessionals to address generalization of IEP goals/objectives, recommends and demonstrates meaningful, functional activities to implement within the student's regular education curriculum to help with carryover of discrete trial programming skills.
- The SLP ensures that student specific paraprofessionals working with students in the ELC/ILC with discrete trial programming, understand how best to implement meaningful, functional communication activities within the regular education curriculum that carry over discrete trial programming skills to address generalization.
- Provide parent education related to the development of appropriate receptive and expressive language, articulation, and play skills, as well as recommend activities to promote growth in these areas.
- Maintain and train students and educators in the use of amplification equipment, including hearing aids and personal FM auditory trainers.
- Consult with educational audiologist/teacher of the deaf/blind re: students' audiological needs
- Implement and train students and educators to use AAC to access the curriculum and communicate in the school and vocational environments.
- Supervise, provide lessons, review data, observe and provide feedback to Speech/Language Pathology Assistant (SLPA)

Under the supervision of a Speech and Language Pathologist, the SLPA provides direct services outlined in an IEP to students. The SLPA implements speech and language interventions developed by the SLP. They may either work directly with the student or within a classroom environment. They assist with preparing the educational materials needed for the various programs as well as for the classrooms. They provide coverage for TEAM meetings and during periods when students are being evaluated.

Occupational Therapist (OT): IDEA defines this related service at §300.34(c)(6):

- (i) Means services provided by a qualified occupational therapist; and
- (ii) Includes—
 - (A) Improving, developing, or restoring functions impaired or lost through illness, injury, or deprivation;
 - (B) Improving ability to perform tasks for independent functioning if functions are impaired or lost; and
 - (C) Preventing, through early intervention, initial or further impairment or loss of function.

Occupational Therapy is a related or support service provided to students on IEP's or 504 Accommodation Plans. The goal is to ensure student access to educational curriculum and environments. In occupational therapy terms, ensuring access means helping students attain optimal occupational performance in their student roles. Students are served from the ages of 3 to 22 in the Shrewsbury Public Schools as well as home-based students. For students who receive

additional home services through their insurance programs, the OT will collaborate with the in-home providers through a consultation model. For students in the high school life skills program the OT may also visit job sites to consult on modifications and adaptations that may be required.

It is the role of the OT to evaluate a child, which involves standardized testing in the areas of fine motor skills, perceptual motor skills and sensory processing, along with clinical observations of the student in the classroom and other school environments, and consultation with the child's teacher and parent as needed. The occupational therapists provide feedback to the teacher and/or child specific aide and the parent so the work may continue beyond the OT sessions.

Under the supervision of the Occupational Therapist, a Certified COTA provides direct services outlined in an I.E.P. to students. Areas they provide direct services in include fine motor development, postural stability, sensory processing skills, attention, motor planning, visual perceptual function, writing / drawing ability, or self-care skill.

The Occupational Therapists have responsibilities in the following areas

This can be achieved through the following four approaches:

- Pull-out services (in a therapy room) which engage the student in purposeful and preparatory activities to learn a fine motor or perceptual motor skill required in the classroom.
- Inclusion services for practice and generalization of learned skills in the context in which they will be used, making the skills meaningful and occupational.
- Designing adaptations and modifications that allow a student to participate in natural educational environments and activities.
- Consulting and collaborating with the teachers and other service providers through the RTI (Response to Intervention) process to design appropriate classroom-based sensory and motor interventions so that the student can learn best in the least restrictive environment.
- Conduct assessments, which include standardized testing, clinical observations and interviews with teachers/parents.
- Provide direct and consultative OT services
- Provide adaptations and modifications to materials and environment to enable students to access the curriculum
- Supervise COTA's
- Provide in-service training to teachers, support staff and parents
- Attend team meetings
- Documentation of direct services, progress reports, writing IEPs

Here are some highlights for the '15-'16 school year. Some have already occurred, some are ongoing currently and others will occur through the year

- Ongoing... a 3 credit graduate course developed and taught by an OT to help teachers, administrators and paraprofessionals understand how children with sensory processing difficulties learn, and what classroom accommodations they can make for successful inclusion of these students. This is the 2nd time it is being run and it has received great

reviews the 1st time it was offered a year ago. (The Learning Connection: Understanding Children with Sensory Processing Disorders)

- In the spring of 2016 another 3-credit graduate course interactive course designed for regular education and special education teachers to help them gain a functional understanding of the brain. Teachers discover how the brain learns and how they can devise strategies that can reach every learner and make the teaching-learning process more effective.(Brain Matters: the Power of Teaching). This course has also proven to be very successful and has received very positive feedback from previous participants.

Additionally, occupational therapists have helped teachers integrate assistive technology as a teaching and learning tool. iPad apps are continually being explored so as to allow students with special needs to access curriculum concepts and express themselves.

Physical Therapist (PT): IDEA defines physical therapy as “services provided by a qualified physical therapist” [§300.34(c)(9)]. These services generally address a child’s posture, muscle strength, mobility, and organization of movement in educational environments. Physical therapy may be provided to prevent the onset or progression of impairment, functional limitation, disability, or changes in physical function or health resulting from injury, disease, or other causes.

The purpose of physical therapy services in the public schools is to ensure that students can safely and affectively access their school curriculum. This includes participation in activities in and out of the classroom including recess and in PE (Physical Education) or APE (Adaptive Physical Education) classes. It is also designed to ensure that students are as functionally independent as possible within the school building.

It is the role of the PT to evaluate a child for issues with gross motor development and activities that prevent or limit a student’s ability to access their educational program and to develop a plan for appropriate intervention. The physical therapist provides feedback to the teacher and/or child specific aide and the parent so the work may continue beyond the PT sessions.

The service range includes students that require physical therapy service in the following areas or disability category: genetic degenerative disease, Down Syndrome, Autism, developmental delay, hypotonia, Cerebral Palsy, orthopedic issues, and rare genetic disorders.

Psychological Services: IDEA defines this related service at §300.34(c)(10):

- (i) Administering psychological and educational tests, and other assessment procedures;
- (ii) Interpreting assessment results;
- (iii) Obtaining, integrating, and interpreting information about child behavior and conditions relating to learning;
- (iv) Consulting with other staff members in planning school programs to meet the special educational needs of children as indicated by psychological tests, interviews, direct observation, and behavioral evaluations;
- (v) Planning and managing a program of psychological services, including psychological counseling for children and parents; and
- (vi) Assisting in developing positive behavioral intervention strategies.

Counseling Services: IDEA defines this related service at [§300.34(c)(2)]

(2) *Counseling services* means services provided by qualified social workers, psychologists, guidance counselors, or other qualified personnel.

School Psychologist:

The school psychologists are responsible for assessing students who are initially referred to special education and re-evaluating students who are receiving services a minimum of every three years. They also meet with individual and small groups of students to provide counseling services. When possible, the school psychologists at the middle school levels see individual students for counseling. Since there are no adjustment counselors at the high school, the school psychologists there provide both the evaluation and counseling services for all students.

Adjustment Counselor: These professionals meet with individual and small groups of students to help them with school and home issues that may prevent the student from achieving his/her academic potential. The adjustment counselors interact regularly with teachers, parents, and administrators in an effort to help the students. They may also interact with representatives from Department of Social Services, Department of Youth Services or probation.

Assistive Technology Specialist: The Assistive Technology Specialist teaches educators, therapists, media specialists, and others how to choose and use the best tools and methods for helping learners with special needs participate in the general education curriculum. For example, print material that might present barriers to children who are legally blind or have challenges with dyslexia can be offered via a universally designed digital device that transmits text in Braille or a read-aloud format. Hands-on assistive technology training ranges from "low-tech" tape recorders and digital clocks, to computers with synthesized speech, interactive educational

Interpreting Services: IDEA defines this related service at §300.34(c)(4):

(4) *Interpreting services* includes—

(i) The following, when used with respect to children who are deaf or hard of hearing: Oral transliteration services, cued language transliteration services, sign language transliteration and interpreting services, and transcription services, such as communication access real-time translation (CART), C-Print, and TypeWell; and

(ii) Special interpreting services for children who are deaf-blind. [§300.34(c)(4)]

Audiology: IDEA defines this related service at §300.34(c)(1):

(i) Identification of children with hearing loss;

(ii) Determination of the range, nature, and degree of hearing loss, including referral for medical or other professional attention for the habilitation of hearing;

(iii) Provision of habilitative activities, such as language habilitation, auditory training, speech reading (lip-reading), hearing evaluation, and speech conservation;

(iv) Creation and administration of programs for prevention of hearing loss;

(v) Counseling and guidance of children, parents, and teachers regarding hearing loss; and

(vi) Determination of children's needs for group and individual amplification, selecting and fitting an appropriate aid, and evaluating the effectiveness of amplification. [§300.34(c)(1)]

Transportation: Transportation is included in an eligible child's IEP if the IEP team determines that such a service is needed in order for the child to benefit from his or her special education. The term has a specific meaning. IDEA defines *transportation* as:

- travel to and from school and between schools;
- travel in and around school buildings; and
- specialized equipment (such as special or adapted buses, lifts, and ramps), if required to provide special transportation for a child with a disability. [§300.34(c)(17)]

Parent Counseling and Training: IDEA defines this related service at §300.34(c)(8):

(8)(i) *Parent counseling and training* means assisting parents in understanding the special needs of their child;

(ii) Providing parents with information about child development; and

(iii) Helping parents to acquire the necessary skills that will allow them to support the implementation of their child's IEP or IFSP.

Community Support Services

Shrewsbury Youth and Family Services: Shrewsbury Public Schools has had an ongoing relationship with Shrewsbury Youth and Family Services (SYFS), a non-profit mental health agency in town for a number of years. For example, the agency has provided graduate level, mental health clinicians to Floral Street School, Paton, and Coolidge Elementary; developed and run an after school program for at risk students at the middle and elementary school level; provided parent training workshops on a variety of topics and "TheraPM," a therapeutic afterschool program for high school students recommended in lieu of a disciplinary action. In addition, SYFS worked with the SPED PAC to organize a support group for parents of children diagnosed with Autism or Asperger's Syndrome. They have also provide 2 groups at middle level a girls group and a boys group.

You Inc.: In the 2007-08 school year, Shrewsbury Public Schools entered into a partnership with YOU, Inc., a Worcester based social services agency, to provide the services of social workers at various schools. The School Committee recognized the need for this type of service but fiscal constraints prevented the district from hiring the appropriate personnel. The arrangement with YOU, Inc. provided the opportunity for students and their families to receive the support of licensed, professional social workers as well as support to the staff at the schools, which had previously dealt with these intense familial issues.

School Resource Officer: Shrewsbury Public Schools in partnership with the Shrewsbury Police Department have access to two resource officers that support the middle and high schools primarily. The resource officers are available to support students and staff in an emergency, behavioral incidents, and during crises that require additional support from the community.

Children's Behavioral Health Initiative (CBHI): CBHI is an interagency initiative of the Commonwealth's Executive Office of Health and Human Services whose mission is to strengthen, expand and integrate Massachusetts state services into a comprehensive, community-based system of care, to ensure that families and their children with significant behavioral, emotional and mental health needs obtain the services necessary for success in home, school and community. These services are available for children eligible for MASS Health benefits.

Mobile Crisis Team: The Mobile Crisis Team is a service offered through the Children's Behavioral Health Initiative. This is an emergency service for youths who are in behavioral health crisis demonstrating impairment in mood, thought, and/or behavior that substantially interferes with functioning at school, home and/or in the community, and the risk presents a risk to self or others or has escalating behaviors and is in need of clinical intervention to resolve the crisis and enable the youth to remain in the community.

Accomplishments and Challenges

Special education continues to evolve with respect to the diverse needs of students who are entering public schools. There are several key factors that create challenges when delivering quality services that address free, appropriate public education for all children. In the face of these many challenges, Shrewsbury continues to celebrate the success and achievements of all students.

District Accomplishments:

- Students' access to technology including iPads
- Teachers increased access to technology
- Interagency Transition Team at the high school
- Students' access to the community
- Response to Intervention support across all schools
- Piloted a process for assessing the needs of students to access educational supports and services
- Development of a consistent process for transitions from building to building
- Trained over 200 staff in Youth Mental Health First Aid
- Continued work with Family Success Partnership
- Supports and services to address Mental Health challenges
- Continued refinement and implementation of social skills instruction
- Homework Helpers program funded at grades 5 & 6, due to the unique factors of increased curriculum rigor and higher level thinking, paired with increased expectations for student independence, resulting in struggle for many students with disabilities and their families
- Development of ILC program at 5-6 level, to meet the needs of a population of students who were underserved by the previous models available at this level.

- Expansion of counseling and social skills provision at the middle level, due to district funding of additional part time adjustment counselors at both schools
- Increased ability of all district schools to gauge school climate related specifically to social/emotional learning via newly implemented Mental Health Check and Reflect survey and resulting analysis of student well-being.

Challenges:

- Nature of special education entitlement program - mandates that are unfunded
- No single definition of FAPE (Free, Appropriate Public Education)
- No single definition of Effective Progress in the general curriculum
- Level of disabilities requiring complex services and therapies
- Consideration for space needed to deliver services
- Limited pool of special educators and therapists in relationship to the increases of eligible students
- Continued increase in costs associated with special education and service delivery
- State system for approving out of district programs tuitions and approvals for restructuring
- Time for general education and special education to collaborate on the needs of students and service delivery
- Space to create in-district programs enabling students who are in out of district programs to return
- MCAS/PARCC and the support required for students to achieve proficiency
- Coordination with other state agencies (DCF, DDS, DMH, MRC, etc.)
- Increase in need for home services
- Drop out rate
- Psychiatric and mental health issues
- Increased need for reading services
- Complex family needs and an increase of emotional needs of students
- Lack of capacity for regular education to support mental health and behavioral needs
- Differences in models of service delivery at varying levels/buildings, resulting in confusion and/or disappointment from parents when services change between levels/buildings
- Students with unique presentation who do not fit neatly within identified service delivery models
- Lack of training for and collaboration with paraprofessional staff to support students and carry out programs designed by special education teachers
- UNPREDICTABILITY

Summary

Shrewsbury Public Schools has a history of providing quality special education services at all educational levels. In addition, Shrewsbury offers many alternative programs within the district to meet the unique needs and challenges our students face.

It is important to understand the regulatory obligations the district faces as special education services are protected by both Federal and State laws that are mandated. This is also critical to understand from a fiscal perspective. Shrewsbury is diligent in meeting its obligation for providing FAPE given the fact that the required state reimbursement (Circuit Breaker) has not been funded at the 75% level consistently. Additionally, special education professional development grants have been sparse for several years. The Federal IDEA grant remains stable, but does not increase enough to meet the increase in services or needs and only supports approximately 13% of the total special education budget.

Shrewsbury will continue to strive to provide quality special education services that maximize opportunities for students to make effective progress while minimizing the impact of students' disabilities.

Appendix

TABLE OF ABBREVIATIONS

Many common special educational phrases are abbreviated by acronyms composed of the initial letters of the phrase. For your convenience the acronyms and phrases used in this document are listed below:

BSEA: Bureau of Special Education Appeals
CFR: Code of Federal Regulations
CMR: Code of Massachusetts Regulations
ESE: Massachusetts Department of Elementary and Secondary Education
FAPE: Free Appropriate Public Education
FBA: Functional Behavioral Assessment
IAES: Interim Alternative Educational Setting
IDEA: Individuals with Disabilities Education Act
IEE: Independent Educational Evaluation
IEP: Individualized Education Program
PQA: Program Quality Assurance Services
24 <http://www.doe.mass.edu/sped/laws.html>

TABLE OF WEB SITES

The ESE publishes extensive information for parents and school districts on its internet Websites. These Websites include pertinent laws, agency policies and useful documents that explain the special education process.

Bureau of Special Education Appeals

<http://www.doe.mass.edu/bsea/decisions.html>
http://www.doe.mass.edu/bsea/forms/hearing_rules.doc
<http://www.doe.mass.edu/bsea/forms/hearing.doc>
<http://www.doe.mass.edu/bsea/mediation.html>
http://www.doe.mass.edu/bsea/forms/m_brochure.doc
<http://www.doe.mass.edu/bsea/mediation.html?section=faq>
<http://www.doe.mass.edu/bsea/process.html>

Discipline:

http://www.doe.mass.edu/sped/IDEA2004/spr_meetings/disc_chart.doc

Individuals with Disabilities Education Act:

<http://idea.ed.gov/>

The Basic Special Education Process under IDEA:

<http://www.doe.mass.edu/sped/iep/process.doc>

Individualized Education Program:

<http://www.doe.mass.edu/sped/iep>

Individual Education Program Process Guide.

<http://www.doe.mass.edu/sped/iep/proguide.pdf>

Independent Educational Evaluation:

<http://www.doe.mass.edu/sped/advisories/?section=admin>

Observation of Education Programs by Parents and Their Designees for Evaluation Purposes:

http://www.doe.mass.edu/sped/advisories/09_2.html

Parent's Notice of Procedural Safeguards:

<http://www.doe.mass.edu/sped/prb>.

PQA Problem Resolutions System compared to BSEA Due Process Complaint:

<http://www.doe.mass.edu/sped/complaintchart.doc>

Program Quality Assurance Services Problem Resolution System:

<http://www.doe.mass.edu/pqa/prs>

Special Education Laws and Regulations:

<http://www.doe.mass.edu/sped/laws.html>

Special Education Surrogate Parent:

<http://www.doe.mass.edu/sped/2002/news/1104memo.html>

Special Education Transition Planning Form:

<http://www.doe.mass.edu/sped/28MR/28m9.doc>

Student Records Regulations:

<http://www.doe.mass.edu/lawsregs/603cmr23.html>

Student Records Questions and Answers

<http://www.doe.mass.edu/lawsregs/advisory/cmr23qanda.html?section>.

Transition Planning:

<http://www.doe.mass.edu/sped/cspd/mod4.html#>