

RIVERSIDE UNIFIED SCHOOL DISTRICT

SPECIAL EDUCATION REVIEW RECOMMENDATIONS



**TOTAL SCHOOL SOLUTIONS
4751 MANGELS BOULEVARD
FAIRFIELD, CA 94534**

January 2017

PHASE ONE: Financial Audit RECOMMENDATIONS

Based on the financial audit of state and federal revenue and expenditures for special education programs conducted for Fiscal Years 2011-12 through 2016-17, the following preliminary recommendations are provided for the District's consideration in order to maximize existing revenue and/or reduce the contribution from the general fund to special education, where appropriate.

- Business and special education personnel need to continue to work together to monitor special education expenditures as well as the impact on the General Fund.
 - ✓ Study line items across object codes 1xxx's through 3xxx's in certificated salaries, classified salaries, and employee benefits, which reveal a notable percent increase and/or decrease to determine any specific areas that could result in contributing to increased excess costs.
 - ✓ Continue to analyze the Special Education Maintenance of Effort (SEMOE) reports to identify those expenditures that could be functions of general education (e.g., portion of school psychologist and behaviorist salaries related to initial assessment, counseling or crisis intervention for general education students).
- During the review cycle of the Local Control and Accountability Plan (LCAP), consider specific language to address the needs of students with disabilities, as well as to help offset the deficit due to the elimination of revenue limit dollars transfers.
- The significant Ending Fund Balance in Mental Health Services funding warrants further analysis to include developing a master plan that facilitates expenditures for identified priorities, while maintaining adequate funds for any discrepancies identified in the audit process. When developing a plan in providing educationally related school-based mental health services, RUSD needs to ensure that all pupils receiving services under the 500 Category service codes are included as part of the allocation of Assembly Bill (AB) 114 dollars.
- The Medi-Cal Collaborative needs to work closely with Business Services in developing a Local Educational Agency (LEA) plan that facilitates expenditures for identified priorities, while maintaining adequate funds for any discrepancies identified in the audit process.
- Although the Nonpublic School (NPS) costs of Starting Gate Educational Services decreased across the fiscal years studied, further analysis is warranted to determine if the District is providing any other items or support that is not typical when contracting with a NPS.
- Further analyze if any of the increases and/or fluctuations from one year to the next in "Classified Salaries" could be the result of the number of one-on-one instructional aide time.

PHASE TWO: Comparative Data and Analysis RECOMMENDATIONS

- When RUSD assumes all financial, programmatic, and accountability responsibilities for pupils residing in other school districts, it should report these pupils as both District of Residence (DOR) and District of Service (DOS). This would allow RUSD to receive additional funding tied to special education pupil count (e.g., low incidence funding based on specific eligibility). Note: DOR pupil count is used for accountability at the District level for identified State Performance Plan Indicators (SPPI).
- As RUSD did not meet some of its SPPI for least restrictive environment (LRE) for preschool and K-12, revisit the process used by IEP teams when reporting the percent of time in general education settings.
- Review the 500 Code service categories related to Mental Health services provided to pupils with emotional disturbance and other pupils requiring educationally based Mental Health services. The development of a Mental Health Master Plan is addressed in Phase Three: Program Delivery Analysis.
- As RUSD has built capacity of qualified employees who can provide Mental Health services, the District may want to consider providing these related services to its NPS pupils and/or ensuring that the 500 Code categories provided by NPSs are included on the IEPs. If RUSD provides those services instead of the NPS, then RUSD may want to consider negotiating a lower NPS daily rate that includes the bundling of services.
- Review the 800 Code services related to career/college awareness, job readiness, and transition services for December 2014 and 2015, as some were provided in 2014 but not in 2015 (or vice versa), or services increased or decreased significantly.
- As an Orthopedic Impairment (OI) primary or secondary disability generates low incidence funding (while Multiple Disabilities [MD] does not generate funds), it is important to share this information with the IEP team.
- Research why the “Other/Ungraded” pupil count increased from 52 in 2011 to 130 in 2015. Assign all pupils to a specific grade level in the next reporting cycle.

PHASE THREE: Program Delivery and Analysis RECOMMENDATIONS

STAFFING LEVELS AND PATTERNS

Instructional Assistants

- Based on the experience of the TSS Consultants, when oversight of instructional assistants is assigned to one person, the main focus becomes to reduce aide costs. When this oversight becomes an adjunct responsibility for managers, there appears to be limited concentration on overall cost savings and the various managers may not understand or be aware of the full picture of shortages and/or excess of aide hours at each school site. Also re-deployment opportunities of aides or hours may not be readily available to someone who does not have all the district-wide information. It is recommended that the District assign the oversight of paraprofessionals to a single staff member, specifically a full-time classified employee (e.g., secretarial or administrative assistant) who is supervised by a special education manager. This would allow for the decision maker to be aware of availability and opportunities district-wide for more efficient staffing and possible cost savings.
- Upon suggestion of the TSS Consultant, the District has ordered the *Special Circumstance Independence Assessment (SCIA)* recently revised by a consortium of districts from the North Inland SELPA. The SCIA manual provides guidelines for incorporating Special Circumstance support into the student's IEP and Behavior Intervention Plan, if needed. This manual could supplement the District's recently adopted a formal process and protocol.

Occupational Therapists

- Continue to pursue hiring 1.00 full-time Occupational Therapist Registered (OTR) as a District employee.
- A cost analysis of District-employed as compared to OTR contracted personnel is warranted. The RUSD would generate LEA Medi-Cal reimbursement for District-employed OTRs.

Itinerant Teachers For Visually Impairment Program

- Consider reaching out to other local educational agencies (e.g., Orange County Department of Education – Special Education Services, Assistive Technology Department) for customized advanced training on the newest computer systems or software, and testing strategies for the blind via web-based applications.

Nursing Services at the Preschool Level

- Conduct a time study of the nursing staff assigned to the Sunshine Preschool Program and satellite sites to determine the full time equivalency needed for additional allocation of nurse's time and/or hours.

- Determine the LEA Medi-Cal reimbursement available for hearing and vision screenings that could offset the cost of additional nursing hours required to ensure that hearing and vision screenings are conducted.

Program Specialists

- Based on comparative information, it is recommended that the District add 2.00 full time equivalent (FTE) program specialists.
- The roles and responsibilities of program specialists should be analyzed at the end of the school year, to ascertain how the program specialist services could focus more on those services outlined in California Education Code § 56368(b).

SPECIAL EDUCATION PROGRAM DELIVERY SYSTEMS

Service Delivery – Least Restrictive Environment

- Not meeting state-imposed measurements for least restrictive environment (LRE) could trigger significant disproportionality. It is recommended to formally assess school practices across the District. A user-friendly tool, *Assessment of School Practices Related to Inclusive Education, A Needs Assessment and Planning Tool*, is available on-line by Stetson and Associates, Inc. 2015.
- Based on this self-assessment, a draft scope and sequence for inclusive practices could be developed by an interested group of administrators and teachers. The scope could include, but not limited to: (1) defining a structure for inclusive planning; (2) reviewing, revising, and/or developing related policies and procedures; (3) identifying funding sources for inclusive implementation; (4) compile and analyze data, review placement patterns, and monitor IEP related to the percentage of special education pupils receiving services in general education settings; (4) establish a multi-year professional development plan to provide ongoing support based on the identified needs of the *Planning Tool*.

Psychological Services

- Change the practice on how school psychologists report counseling and guidance, psychological services, and/or behavior intervention on the student's IEP so that these services are coded as a 500 category related to be Educationally Related Mental Health Services (ERMHS).
- Address the practice referenced above as a priority with school psychologists in order to better reflect the amount of services a student is actually receiving.
- Coordinate the implementation of Positive Behavior System of Support through the Student Assistance Program with the Special Education Psychological Services.

Adapted Physical Education Services

- Validate if pupils have adapted physical education (APE) goals outlined in their IEPs when they receive “specially designed” services in a separate class conducted by the APE teacher.
- The District may want to adopt an APE referral process. Prior to referring students for initial evaluation, modifications and interventions would occur and documented by the general education physical education and/or special education teacher. If after a reasonable amount of time (approximately six weeks) modifications have not been successful with interventions documented, the referral for an initial evaluation for APE services could be enacted.

Occupational And Physical Therapy

- At the beginning of school year, implement district training for general and special education staff as to the qualifications for occupational therapy services. At these trainings, review interventions and provide resources/handouts for general and special education staff for use prior to making referrals for testing. This might include sensory integration and executive functioning in the classroom.
- Revisit the *Guidelines for Occupational Therapy and Physical Therapy in California Public Schools*, California Department of Education (Second Edition 2012), which includes the role of educational services. Including this information in the assessments will communicate and delineate the role of school-based therapy to parents. Also including standardized testing results in initial and triennial assessments will allow for greater data to support a therapist’s recommendation to decrease or exit services.
- School-based goals for occupational and physical therapy services are required on the IEP. Consider reviewing the IEPs of students receiving therapy services from a nonpublic agency (NPA) to ascertain if the goals are school-based.

Language And Speech Services

- Parents are asked to complete the form, “Permission to Enroll in the Speech Intervention Program (SIP),” to consent for their children to participate in this program. Consider adding to this form a beginning and ending date as well as add the word “monitoring” to the phrase “progress updates.”
- Analyze the language development curriculum in all SDC and preschool programs, to ensure that as many language needs that do not require specific therapy can be addressed in those classrooms. Service delivery for different needs of students varies (e.g., preschoolers with autism have different needs than teenagers with intellectual disabilities). Explore curriculum supports provided to pupils with language needs to ensure that language development is supported in the general and special education classrooms.

- An area of warranted analysis would involve reviewing the most efficient and cost effective way of providing language and speech development and remediation. The more pupils identified for services, the greater number of speech pathologists required. At a state-mandated average caseload per pathologist of an average of 55 for K-12 pupils and 40 for preschool, the cost of this related service is clearly fixed to the District's pay scale for fulltime employees and/or contracted rates. Possibly look at each school site and compare the number of identified students requiring speech and language remediation and determine if some sites are higher than others and discuss possible reasons for these anomalies.
- The latest Third Edition 2016 of the "Communication Severity Scales" (CSS) focuses on the RtI/MTSS education model for early intervention and considers a student's total school experience and other educational needs. The CSS includes *Speech and Language Service Guidelines*, which can be used for IEP teams when determining frequency and duration of language and speech services, as well as dismissal criteria.
- Potential area of review could include developing a system to track and monitor data related to how and when EL students are being identified for special education services.

Preschool Program

- Consider visiting other model school districts to continue to build skills and best practices in providing services to preschool students in the least restrictive environments. The TSS Consultant can provide the names of those districts up request.

Nursing Services at the Preschool Level

- Develop a process in that hearing and vision screenings are conducted for all pupils of preschool age who are being evaluated for special education eligibility. Possibly conduct a job analysis and/or time study to determine the need for additional health services staffing to ensure that these screenings are conducted.
- Provide professional development for teachers regarding health literacy and health issues related to the population they are serving.

MULTI-TIERED SYSTEM OF SUPPORTS

Student Success Team

- Although an excellent Student Success Team-Multi-Tiered System of Supports (SST-MTSS) intervention process is in place, it appears that this process is not implemented consistently across all school sites based on input from the Stakeholder meetings. At leadership meetings, principals could share best practices that they have implemented regarding the SST-MTSS intervention process.
- Identify those school sites not utilizing the SST-MTSS intervention process consistently and provide additional support to assist in the implementation process.

STAKEHOLDER INPUT

District Personnel Input At Stakeholder Meetings

- District personnel, who participated in the visitation meetings with the TSS Consultants, provided very thoughtful and constructive ideas for improvement. Special Education Department administrators should further discuss the summary points included under the section, *Changes or Additions to Improve Special Education Programs and Services*, in the full report. Many of the suggestions provided at the Stakeholder Input sessions were addressed in other sections of the full report.

PARENT INPUT

- The majority of the responses from the *Special Education Parent Survey* were positive. A few parents noted individual concerns on their surveys. At the Parent Input session and during follow-up phone calls made by the TSS Consultant, individual parent and student challenges were raised. These concerns and challenges will be provided confidentially to Special Education District administrators to address. Parent input will be considered when developing the Special Education Strategic Action Plan. Also, under the Professional Development recommendations, additional training is suggested to assist parents in a sensitive and effective manner.

INFORMAL DISPUTE RESOLUTION

- Although the Informal Dispute Resolution (IDR) process is included as part of the “Notice of Procedural Safeguards and Parents’ Rights” as posted on the RUSD website, it may be helpful to highlight the IDR process as a separate tab under “Special Education.”
- Consider expanding the IDR process to include several phases. The first phase would involve trained District administrators facilitating the IDR, which is currently available in RUSD. If outstanding issues continue, then a neutral specialist, such as a retired judge, would conduct a resolution meeting. The specialist would not be a “contract employee” and would act as a neutral third party in a secure environment as possible that facilitates the informal resolution of educational disputes. The two phases would need to be clearly outlined, with the expanded phase to be free of charge for parents. Samples of these procedures will be made available to the District under separate cover.

OTHER COMPONENTS

Several areas were identified that support and/or supplement the study this special education review. These would involve professional development, logistics, and or organizational components.

Professional Development

The District is commended for its extensive professional development made available to educators and parents. Additional and/or enhanced areas of support are listed below for consideration.

- How to support families with children with disabilities to navigate through the complicated field of special education, starting with the identification for eligibility through the provision of special education services.
- What does a principal or administrative designee need to know about special education law and how to address school issues that may not be part of the IEP process? A helpful publication is: *A Principal's Guide to Special Education*, Third Edition, written by David F. Bateman and C. Fred Bateman, published by Council for Exceptional Children. Some of the focus areas to be considered are listed below.
 - How to fully integrate special education students into the school culture with the same school protocols, policies, and procedures as the entire student body.
 - How to distinguish between school-related issues or concerns that could be addressed outside of the IEP process.
- Provide the following professional development for all principals and their administrative designees: (Note: some of these staff members may have already participated in this training.)
 - Dispute resolution and collaborative IEP strategies;
 - Understanding of special education law training; and,
 - Collaborative IEP process provided by legal firms.

Special Education Handbook

- The Special Education Department is in the process of finalizing a Psychological Services Procedural Handbook that includes a clear mission statement and goals tied to the guiding LCAP principles, SELPA responsibilities, referral process, forms, and special education eligibility. As this handbook addresses a broader scope, it could be expanded to fill the identified need for a Special Education Handbook.

Organizational Chart

- It would be helpful to have a one-page organizational chart for the Special Education/SELPA Department.