A survey of selected southern New Jersey school districts to determine effects on special education of policy changes proposed in August 1996

Heidi Roman Chausse
Rowan University
A survey of selected southern New Jersey school districts to determine effects on special education of policy changes proposed in August 1996

by

Heidi Roman Chausse

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Approved by

Professor

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Abstract

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Twenty-three of thirty districts surveyed respond to questions addressing the implications of proposed amendments to NJAC 6:28, presented by Dr. Klagholz in August 1996. Statistical data was obtained regarding district size and special education populations. Responses investigated areas of Child Study Team, classification, programs, P2R, curriculum and assessment, case management and outside agency licensure. The results were tabulated and significant findings were evident.

The most provocative findings show uncertainty on the part of the districts as to the effects of these proposed changes on special education. The respondents indicate concerns that these changes will lead to increased litigation and a reduction in services to special education students. The data obtained indicates inconsistencies in defining and classifying learning disabled students using both severe discrepancy models and functional guidelines across school districts. Inclusionary practices may or may not increase but districts consistently report that they do not have the space necessary to develop additional programs in district. If proposed changes are adopted, direction by the State Department of Education will be necessary to provide a smooth transition and the continuance of quality programs for special education students.
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Chapter I
The Problem

Background:

In 1974, the Federal government passed legislation requiring all states to establish special education programs. Public Law 94-142 (PL 94-142), the Education for all Handicapped Children Act (EHCA). EHCA became effective in 1975. In 1990, Congress passed some amendments to EHCA and changed the title to reflect changes in wording preference, handicapped was replaced with disability. The act became the Individuals with Disabilities Act (IDEA). IDEA, like EHCA, protects the rights of all children with disabilities by providing them with a free appropriate education in the least restrictive environment. It also defines which students are eligible for such services and provides broad guidelines for determining eligibility. Each state, in turn, has written laws and regulations of their own to ensure proper adherence to the federal law. No state may violate the equal protection and due process requirements of IDEA. Some states have regulations which are in excess of what is mandated in PL 94-142, but all must meet the specified minimum requirements.

In New Jersey, the administrative code for special education, is Title Six, Chapter 28 (NJAC 6:28). NJAC 6:28 sets forth the guidelines in determining eligibility for special education services through the use of a multi-disciplinary team. It sets timelines for completion of evaluations, decision making and implementation of programs. Parent notification and consent guidelines are prescribed.
In August of 1996, Dr. Leo Klagholz, Commissioner of Education in New Jersey, issued a policy paper which addresses proposed changes in the wording and requirements of NJAC 6:28. These changes were brought about as a result of an Executive Order issued on November 2, 1994 by NJ Governor Christine Whitman. This order was to find and examine regulations in excess of federal laws which generate unnecessary cost without producing desired results (Klagholz, 1996). Dr. Klagholz (1996) states these changes will bring about

"innovative, individualized, and cost-effective solutions to educational issues." (p.3)

He hopes these changes will promote challenging programs based on high standards instead of process oriented ones.

Research Question:

To accomplish the general purposes of this study, the data obtained is used to answer the following research questions. The overall general question of this study is as follows:

What impact will these changes have on special education?

In order to answer this general question, each of the following specific questions will be answered.

1. How will proposed changes effect the make up of the child study team and requirements of mandated evaluations?

2. How will proposed changes effect the classification of students considered eligible for special education?
3. How will proposed changes effect the programs available within school
districts and within the community to service special needs students?

4. Which concepts from the plan to revise special education (P2R) will be
maintained and implemented statewide?

5. What expectations and standards will be set forth for students in special
education in relationship to curriculum and standardized testing situations?

(Klagholz, 1996)

**Importance of the Study:**

Why is it important to address these changes if they are considered to be in excess
of the law? It is important to investigate the outcome of these proposed changes prior to
their implementation. The elimination of some aspects, although in excess, may have
educational implications in implementation and provision of services. By questioning
professionals who have direct contact with these students, perhaps we can find and avoid
any negative educational effects.

Funding issues for special service districts and special education in general are also
a concern. The New Jersey Supreme Court has ordered school funding changes to be
implemented by the end of this year. (Southwick, 1996). These changes encompass
general education as well as special education. The ability of some districts to service
special needs students may be affected. Districts with limited space or resources may be
forced to provide programs that do not meet student’s needs in an appropriate placement.
Others believe that it will force inclusionary tendencies and promote programs within
home districts. Will these proposed changes create programs which promote learning?
The timeliness of this survey is critical. Since the NJ Supreme Court has ruled against the state in funding suits, changes must be made to make education more equitable. Educational dollars must come from somewhere. Reduction in special education funds, would allow dissemination of funds to other districts within the state to equalize educational opportunity.

Definition of Terms and Issues:

- **Child Study Team (CST):** Is comprised of a school psychologist, social worker and learning consultant. Currently, NJAC 6.28 requires all members of CST to evaluate potential special education students to determine eligibility. These evaluations are in addition to a medical evaluation by a physician to explore physical aspects of a disability. Other evaluations may be required due to educational concerns or classification guidelines. This change will reduce required evaluations to two, eliminating the medical evaluation and requiring “at least” one member of the CST to complete an evaluation.

- **Classification:** Currently students who are eligible for special education are classified with a specific disability (mentally retarded, multiply handicapped, auditorily handicapped, learning disabled, etc.). Most classifications are straightforward in their definitions. Learning disabled students are more difficult to classify due to a lack of consistency in definitions from district to district. NJAC 6.28 divides learning disabilities into perceptually impaired and neurologically impaired. Both definitions mean “impairment in the ability to process information due to physiological, organizational, or integrational"
dysfunction which is not the result of any other educationally disabling condition or environmental, cultural, or economic disadvantage" (NJAC 6:28-3.5 (d)8). In addition, neurologically impaired students must have an evaluation by a physician with neurodevelopmental training. Perceptually impaired means a specific learning disability characterized by a severe discrepancy between pupil's current level of performance and his intellectual ability. These discrepancies must occur in the areas of reading (basic and comprehension), oral expression, listening comprehension, mathematics (computation or reasoning) or written expression.

- **Programs:** There are, currently, class size standards for 16 self-contained programs in NJAC 6:28 (Klagholz, 1996). The federal regulations, make no requirements in this area. In a effort to reduce district hardships in providing programs for a multitude of disabilities and levels, these requirements will be removed. This change will allow for fewer restrictions on space and resources when developing programs locally. Dr. Klagholz (1996) states that the "integrity of basic class types will be maintained". He also states that standards for maximum size and pupil-teacher ratio will be maintained. Class types will be renamed according to services they provide. Funding will increase financial assistance to districts who choose to offer programs within the regular educational program.

- **Plan to Revise Special Education (P2R):** The P2R initiative will be eliminated from NJAC 6:28. It is no longer necessary to have two sets of
guidelines. Certain aspects of P2R will remain in effect and be implemented into the new regulations. This change will provide a uniform code for all districts. The issues of eligibility, classification, and placement are all factors involved with P2R. In eligibility, P2R requires two evaluations by members of the Child Study Team instead of three. It did not reduce the number to one.

P2R, eliminates classification to three categories: eligible for full-time special education, eligible for part-time special education, eligible for related services. Programs under P2R are based on need and described according to the type skills provided in that placement (NJAC 6:28-11).

- **Curriculum standards/assessment**: Some students who are classified as eligible for special education are exempt from taking standardized tests. They do not take the tests administered to their peers for determination of graduation. They do not necessarily follow the same curriculum. This change promotes that to the fullest extent possible all students follow district curriculum. Also, students will take standardized district and state assessments. Currently, students should only be exempt if they are not able to take these tests due to modifications in programming and curriculum.

The issues and questions presented here will be the focus of this project. Ultimately, what impact will these changes have on our special needs students? How much money will be saved at the state and local levels? How will the quality of evaluations and programs be improved, reduced, or maintained? How will the successfollness of these changes be determined? Hopefully, the administrators of the
current special education programs will provide valuable insight into the changes and the effects on these services.
Chapter II
Review of Literature

What is special education and why is its implementation so controversial and difficult? Special education is education for all children with disabilities. In 1975, PL 94-142 (EHCA) and subsequently IDEA was enacted to insure that all children with disabilities receive a free appropriate public education in the least restrictive environment. It provides for a multi-disciplinary team evaluation for classification purposes and due process to ensure that these regulations are being adhered to. Why is it so controversial? Some of the controversies include difficulty in finding a definition of learning disabilities, increased number of students classified, how best to service these classified students and cost of these services.

To understand these areas of concern it is important to have some knowledge of the history of special education. In New Jersey, educational programs for handicapped children have always exceeded those required by the federal government. The September 1996 edition of the NJEA Review provides a brief history of special education in New Jersey. It states that in 1911, the first programs for handicapped children were developed by mandating services for those children currently being excluded. These programs added funding for educational services for the blind. This was the first statewide mandate for special education. Other legislation since then has continued to keep New Jersey in the forefront of special education. The “Beadleston Act” in 1954, provided new guidelines for special education, replacing those developed in 1911. This legislation increased
services for the mentally retarded and/or physically handicapped children. In 1959, further legislation was passed to include multi-disciplinary teams consisting of a school psychologist, school social worker, learning disability consultant and consulting school psychiatrist (Klagholz, 1996). It expanded the classification system from students with cognitive, physical, visual and hearing impairments to include those students suffering from emotional disturbances and social maladjustment. In 1966, additional legislation sponsored by Senator Beadleston provided many of the items which were later mandated by PL 94-142 in 1975 (DeBlicu, 1996).

In 1994, New Jersey Governor Christine Todd Whitman, issued an executive order to review and evaluate all administrative codes which are in excess of federal regulations and not producing "desired results" (Klagholz, 1996). The results of this executive order prompted suggestions made by Dr. Klagholz in his policy paper issued in August 1996. This policy paper has been submitted to the State Board Of Education. These proposed changes to NJAC 6:28, cover five major components of the special education guidelines:

- evaluations and the multi-disciplinary team
- classification
- programs
- P2R (Plan to Revise Special Education)
- curriculum standards and assessment.

"Minor" possible changes have been suggested. These changes involve the qualifications and responsibilities of case managers, composition of the team and other changes affecting time issues, consent, types of instruction and provision of services in outside agencies.
Special education, as well as regular education, is a costly endeavor. Mandated class size and teacher-student ratios were established to allow students the optimum opportunities to learn. Most students in special education learn best in an intense, structured, and individualized environment (Terman, et al., 1996). Fifty-one percent, of students in special education are classified learning disabled (LD) (Terman, et al., 1996). This category lacks a specific operational definition for determining eligibility. Other classifications include mental retardation, orthopedically impaired, auditorily and visually impaired, emotionally disabled, and autistic. These areas of disability are more easily recognized due to the measurable and observable characteristics of their definitions. The incidence of these other disabilities has stayed relatively constant while the incidence of learning disabilities continues to increase. A learning disability is characterized by an inability to process information due to some physiological, organizational or presumed processing dysfunction not due to another disabling condition or environmental factors such as cultural or economic disadvantages (NJAC 6:28-3.5 (c)8). These dysfunctions can be observed in the quality of the student's reading ability, comprehension of word meaning, math reasoning and computation ability, written expression, oral expression and listening comprehension. There is no known reason that this processing problem occurs (Lyon, 1996). A student can exhibit difficulty in one or many areas. Since learning disabilities are difficult to define, they are difficult to evaluate. The standard measure is the use of a significant discrepancy. New Jersey requires that a discrepancy be found between the student's ability to perform and the actual performance. The discrepancy is measured by using a standard ability test (IQ) and an achievement test. What constitutes a
significant discrepancy has not been defined. Schools choose their own, ranging from one to two standard deviations. Not all students classified learning disabled manifest a significant discrepancy; nevertheless, they are still unable to perform successfully in the classroom. This failure to achieve may result in classification on a functional basis. One of the major motivators for revising the special education rules and regulations, seems to be the increasing number of students classified as LD. In 1979, three percent of the special education student population was classified as learning disabled. In 1992, A statistics released by United States Department of Education showed the LD classification rate to be at five and one half percent (Lyon, 1996).

How do we identify, refer and classify these students? All schools in New Jersey are encouraged to provide support to students in the regular classroom who may be experiencing difficulty (NJEA, 1991). Pupil Assistance Committees (PAC) are a way to meet this requirement. PAC is a team which works together in problem solving, identification of problems, and implementation and review of program modifications for regular education students. It assists regular education teachers in working with students who have academic and/or behavioral difficulties in the classroom. By utilizing PAC, the teacher is able to get help more quickly than the typical referral, evaluation, classification process in special education. Zigmond (1993) found that teachers refer students when they need help with that student. Teachers tolerance levels vary from student to student. PAC is a regular education component. Its members shall consist of the building principal, a regular education teacher, and a member of the child study team, a guidance counselor, substance abuse coordinator or nurse, plus the referring teacher (NJAC 6:26-2.2 (a)3).
Other members should be added as necessary. In 1991, the Department of Education recommended that a special education teacher be included as a member of the team (NJEA, 1991). This model of a multi-disciplinary approach as well as other factors involved in its use follow NJAC 6:28 guidelines (Kelber 1994). PAC requires notification of parents of referral and encourages parental input in the decision making process. It provides a means of conflict resolution which parallels with the mediation and due process of the special education code (Kelber, 1994). Multi-disciplinary teams in PL 94-142, are made up of the child’s regular education teacher, and at least one professional qualified to conduct individual diagnostic exams to children. According to the Office of Education, when a student does not have a regular education teacher, any teacher may fill in (1978).

Due to difficulties in defining learning disabilities, it is necessary to involve more professionals in the process. In New Jersey, NJAC 6:28 currently requires an evaluation by a school psychologist, school social worker, and learning disability consultant when completing an initial evaluation. A physical exam is also required to rule out disabilities associated with hearing, visual, or other physical impairments (NJAC 6:28-3.4(d)(e) 1-4). If the PAC process is not successful or the team or parents decide referral is necessary, the student is then evaluated to determine eligibility for special education services (NJEA, 1991). The trial of P2R (Plan to Revise Special Education) in New Jersey, showed a reduction in inappropriate referrals and classification of students experiencing learning difficulties (Salgado, 1992). Pennsylvania’s equivalence to PAC, Instructional Support Team (IST), has shown good results in the reduction of inappropriate referrals to special education (Sack, 1996).
After defining learning disabilities and analyzing its rising number, it is time to investigate the best ways to service these children. The newest approach is through inclusion. Inclusion is the provision of instruction in the regular classroom. Curriculums and strategies are modified to satisfy the student's needs. Significant changes are required by the regular education teacher to meet the needs of the individual student (Terman, et al., 1996). Programming is not consistent with mainstreaming. In mainstreaming, the student is expected to perform at grade level. The student who is included may be placed there to benefit from appropriate social role models while instructional levels fall significantly below the grade expectations (Giangreco, Dennis, Cloninger, Edelman, & Schattman, 1993).

With inclusion, in-class support is often provided by a special education teacher. This support is utilized through a team approach to teaching. A transdisciplinary approach similar to that used in PAC provides the best support and implementation of services. In the transdisciplinary model all team members work cooperatively to diagnose problems and develop strategies. Release of traditional roles is necessary to allow open communication, shared resources and knowledge (Maher, 1989). To provide this environment in the regular classroom requires planning time. This is a necessary and important part of inclusion. Planning or collaboration are critical to the successful inclusion of special education children (Reisberg & Wolf, 1989). Reisberg and Wolf (1989) reviewed and discussed consultation models in the provision of services to disabled children. One model by Idol-Maestas suggests that 20-40 percent of a teacher's day be spent in consultation-related activities. These activities include discussing problems,
presentation of ideas for use, coordination of programs, inservices, observations, assessments, and demonstration of instructional techniques. Implementing a program like this one is difficult due to the cost of release time and additional staff. Another factor involved in successful inclusion practice is teacher qualifications. Many regular teachers have a negative reaction to mainstreaming and perceive their own skills to be deficient in providing appropriate modification and strategies (Gallagher, 1985). In a study conducted by Lyon, Vaassen and Toomey (1989), teachers inability to instruct diverse groups of students is directly related to the instruction received in undergraduate and graduate programs. Teachers reported that their instruction did not provide effective instruction in content and knowledge of pedagogical principles. Supervision during practical experiences was inconsistent. Once teachers enter their own classrooms they generally operate in isolation. In research completed by Morrison, Leiber and Morrison (1986) teachers again reported that they are not seen as full partners in the education of special needs students by other professionals or by themselves. These findings do not support an educational environment naturally conducive to inclusionary practices. It is critical that if these changes occur and districts respond by utilizing more inclusionary practices, collaboration, planning and multi-disciplinary evaluations are required. Johnson (1994), an advocate for inclusion programs, says that to have an effective program the district must set district, student and staff outcomes. The district must provide training. He says that inclusion should be part of the continuum of services. Inclusion will not necessarily reduce the costs of services (Terman, et al., 1996) and in some cases will cost even more
(Vaughn and Schumm, 1995). It will place students in a less restrictive environment, but will it provide an appropriate education?

Other placement options required by NJAC 6:28-4.1, include the use of resource centers, self-contained programs within the school, and out-of-district placements. Out-of-district placements tend to be most restrictive. They are primarily used for the more severely impaired in mental, physical and emotional disabilities. Whatever the current trend, placement of students must be made on an individual basis, in accordance with the Individual Education Plan (IEP). Each decision for every student must be made on an individual basis.

Once a definition and placement options have been determined it becomes necessary to fund the programs. In New Jersey, school funding has been actively debated for 25 years (Long, 1996) when the courts first ruled that funding based on property taxes were unconstitutional. In 1990, during NJ Governor James Florio’s administration, the Supreme Court of New Jersey ruled that the educational funding formula was not equitable (Kagan, 1996). As a result, his administration developed and implemented the Quality Education Act. In 1994, the Supreme Court again ruled against the state, noting that progress had been made but, that inequalities still existed between the rich and poor districts. Now NJ Governor Whitman, has until December 31, 1996 to rectify the situation. The legislature is still debating the formula to be used and cannot seem to leave the politics behind. To make education more equitable the rich districts must sacrifice their strengths in education to help the poor to move upward. Governor Whitman is proposing a cap on spending which exceeds core curriculum standards set by the State
Board of Education. She has proposed that taxpayers vote on additional funding of programs which go above and beyond these standards. Special educational services will receive more money according to an article in the *Today's Sunbeam* dated November 19, 1996. A later article (December 2, 1996) discusses the reduction of direct funding to Special Service School Districts. Several years ago, NJ encouraged the development of Special Service School Districts to provide programs for lower incidence and more severe disabilities. These programs are costly to develop and maintain. Special service districts are funded by the state and by county freeholders. They receive additional funds from tuition paid by districts who utilize their services. Some of these programs are offered within a normal school environment, at a lower cost than private out-of-district placements. With the proposed funding changes, the Special Service Districts will lose their money (Southwick, 1996). *Today's Sunbeam* (December 2, 1996) reports more than half of Special Service money will be eliminated. Another portion of the Comprehensive Plan for Educational Improvement and Funding will redirect money to home districts. This will eliminate all state funding to Special Service Districts. Parents are concerned about returning their children to district programs that were not effective before (Davis, 1996). Although programs will still be available, parents, administrators and some members of the assembly are concerned about the quality of these programs and their cost when money is no longer be available to maintain programs and staff from year to year. Salem County Freeholder John Halstead, agrees parents have valid concerns. He wonders how many districts will utilize the Special Service Districts when keeping them means an additional $4,600 per student per year. Many districts may decide to begin new programs
or include students in the regular classroom. Some parents and advocacy groups accept
the proposal and are encouraged to think that more students will be placed in their home
districts, even if segregated into self-contained classrooms (Southwick, 1996). For some
students the challenges of the regular educational environment will make them thrive. For
others, further isolation and failure may result in dropping out before completion (Terman,
et al., 1996).

One of the criticisms of special education funding is that it inherently encourages
exclusionary tendencies. Districts who place students in private out-of-district placements
receive more funds. For students who are severely disabled and have medical as well as
educational concerns, placement may be more costly than a district could afford without
compensation. However, these students are the exception not the rule. New Jersey
currently uses a pupil weights funding formula which bases its allocation of funds on
placement and classification. (Parrish and Chambers, 1996) Regular educational funding
comes from two sources, the local district and the state. Considine and Salerno (1994)
explain the "local district share" as the district per student funding. It varies from district
to district but currently averages $3,600. The state aid portion is also a per student share
which varies on a district's ability to pay but averages $2,800. In addition, special
education funds are sent from the state to the district according to classification placement
factors. A factor is the "average excess cost" and varies according to the severity of
disability and restrictiveness of placement. Currently, there is no factor associated with
placing students in the regular class with supports and services. It is more fiscally
beneficial for districts to use out-of-the-mainstream programs. Residential placements and
extended school year placements are the responsibility of the local taxpayers. Related services, speech, physical and occupational therapies can be difficult to obtain and expensive to provide (Considine & Salerno, 1994).

Some states have implemented or are considering the implementation of census-based funding. With census-based funding, districts receive an amount per student, whether classified or not to use for special educational services. This will allow districts the opportunity to provide programs for students having difficulty without having to evaluate and classify. It raises concerns about appropriateness of services or underidentification of needs, especially where related services are involved (Parrish and Chambers, 1996). This funding mechanism supports the Regular Education Initiative (REI) and inclusion by allowing special education funds to be used in support of regular education. Federal funds are currently distributed on a per pupil basis. Federal funds are available for classification up to 12 percent of the student population. Districts would continue to evaluate children when necessary to receive those funds. Procedural safeguards (due process hearings) would still be in effect so districts would have to identify students eligible for services and make program determinations on an individual basis (Parrish and Chambers, 1996).

Non-categorical funding allows flexibility and reduces accountability. According to Terman, Larner, Stevenson and Behrman (1996) accountability at the federal level is due process. State level accountability requires fiscal management. Neither level requires outcome based accountability. In the new funding program proposed by Governor Whitman, emphasis is placed on programs rather than funding (Martello, 1996). Recent
standardized test results of eighth grade students Early Warning Test (EWT)), show that although poorer districts have received additional funds for the last three years, their tests scores have risen only slightly. The Philadelphia Inquirer (December 5, 1996) reports that 41 percent of the poorest district students passed the EWT, up from 40.8 percent last year. It is important as educators to provide quality education. Core knowledge can be measured through the use of standardized and performance based tests. Special education students are frequently exempt from districtwide tests due to delays in reading ability.

Approximately 80 percent of learning disabled students have reading and/ or language delays. Other formal and informal measures can be used to indicate the effectiveness of programs. Special education and regular education should strive for measurable academic and social growth for all students.

Controversy has been involved in special education since its beginning. As increased number of students become eligible for services, the financial strain on educational funding will continue to dictate the need for changes and revisions. Increasing numbers of students in the classroom are requiring assistance due to non-classifiable disabilities, such as attention deficit disorder with and without hyperactivity. Funding and program changes to support these students, is as crucial as maintaining a system which supports and aids special needs students. Support for special education students should continue to address eligibility issues and definitions, programs and placements, and advocacy of their rights to a free appropriate education in the least restrictive environment determined at an individual level.
Chapter II
Methodology and Procedures

In identifying and addressing the issues raised by Dr. Klagholz’s policy paper (August, 1996) and possible amendments to NJAC 6.28, various questions arose. Issues of concern came in the areas of evaluations, the classification process and in programming (Southwick, 1996; DeBlieu, 1996). With these issues in mind, a questionnaire was designed to gather input from professionals who are involved in these aspects of special education.

Population:

The population to be questioned are the directors of Child Study Teams in New Jersey. The southern region was chosen to aid in distribution and follow-up attempts. Directors were chosen from districts who have a record of maintaining a stable child study team. A stable team consists of members who have been intact for a minimum of three years. This distinction was made by Dr. Stanley Urban, Director of the Assessment and Learning Center at Rowan College of New Jersey. Thirty districts were chosen in the counties of Atlantic, Camden, Cape May, Cumberland, Gloucester, and Salem.

Instrumentation:

The survey consists of seven sections (Appendix I). The first section consists of questions designed to describe the population of the responding districts with regard to population size, classification percentages, and the socio-economic background of the community. Sections two through six address the issues involved in the five major amendments proposed by Dr. Klagholz. These sections begin with a brief overview of the
proposed policy changes and are followed by questions designed to gather information based on those descriptions.

Section two discusses Child Study Team (CST) make-up and responsibilities. There are nine questions that address team member responsibilities, multi-disciplinary teams, and use of medical evaluations in the classification process. This section asks the following questions:

1. If evaluations are required by only one CST member, who will it be?
2. Who will be responsible for the other evaluation(s) necessary to make a multi-disciplinary team?
3. Will the reduction in number of evaluations, allow more contact time with students by the CST?
4. NJAC 6:28 states that CST members will be employed by the local school district. Will districts continue to maintain a full team to complete evaluations and provide other services?
5. Will CST members be eliminated from the team due to lack of need?
6. If yes, who will most likely be eliminated?
7. Will the reduction of team evaluations promote the development of intermediate unit CST to assist in evaluations and classifications? Will it promote regionalization of CST units?
8. Will medical evaluations still be completed to rule out medical disabilities which may have a negative educational impact?
9. How will medical determinations be made?
Section Three addresses issues involved in the classification process. These issues include definition standards for severe discrepancy, classification on a functional basis and other aspects of the learning disabled population. There are eight questions in this section.

1. What percentage of your special education population is currently classified as perceptually or neurologically impaired (learning disabled)?

2. What impact has the severe discrepancy model had on classification?

3. What is your current definition of severe discrepancy?

4. What effect, if any, would a change in classification categories have on the number of students eligible for special education?

5. Is this change an effort to reduce the number of classifications to within the 10% cap presented earlier by the Department of Education?

6. Do you currently classify children according to functional guidelines if a severe discrepancy is not found?

7. What percentage of learning disabled students are classified on a functional basis?

8. Do children get classified as eligible for special education services, when pressure is exerted from teachers, administrators and/or parents?

Section four explores changes in programming if categorical programs are replaced by descriptive programs. This section also asks if additional support will be available to regular and special educators if the responsibilities of team members are changed. This section contains ten questions.

1. Will these changes allow more flexible programming, better able to meet student’s needs?
2. Will these changes allow for a “dumping ground” effect in placement of children?

3. Is there currently a special services district meeting the needs of your county (district)?

4. Will reduced funding to special service districts force your district to implement new special education programs to meet student needs?

5. Is there enough space within your district to implement the needed programs currently being contracted for?

6. Will your district have to pay additional moneys to provide out of district placement for students currently in special service districts?

7. Will this change in programs increase inclusionary practices?

8. Will teachers be provided ample collaboration time and training in implementing inclusionary practices in your schools?

9. How will these changes effect your ability to provide related services?

10. Which services are most difficult to provide?

Section five explores P2R or the Plan to Revise Special Education. There are two questions here requiring short or narrative answers.

1. What other areas of P2R are worth keeping?

2. What areas would you like changed or removed?

Section six addresses curriculum and assessment standards for students classified as eligible for special educational services. There are six questions about current curriculum guidelines and practices in standardized testing.

1. Does your district exempt special education students from standardized testing as standard procedure?
2. Are students exempt from district wide testing to protect districts overall performance on standardized testing?

3. Does the administration support the exemption of special education students from district testing?

4. What percentage of special education students in your district are exempt from district wide standardized testing?

5. Do your self-contained programs follow district curriculum guidelines?

6. Which programs have modified curriculums?

Section seven consists of four questions addressing several of the minor changes proposed in August. These questions relate to case management, pre-referral issues and receiving programs.

1. What effect will the case manager change have on evaluation, classification and programming issues?

2. Will it be more difficult to find receiving programs with the change in approved clinics and agencies?

3. Will reduced numbers in evaluation, classification meetings allow more time to provide support services to teachers in PAC stage of referral?

4. Will reduced numbers in evaluation, classification meetings allow more time to observe students in the classroom and allow for in-class support for special and regular education teachers?

Collection of Data:

This survey was developed to be quick and easy to complete while still providing important information. Most questions require only a mark or number to indicate the
director's opinion. Of the 40 questions asked, only 4 required a short narrative or sentence response. The survey was sent with a self-addressed stamped return envelope. A short note included with the survey asked for all surveys to be returned, even if the director chose not to answer it. This strategy was used to ensure a good response or the ability to send incomplete surveys elsewhere. Unanswered surveys will be followed with phone calls to directors as a reminder. This will allow for a significant statistical response or allow weaknesses in the survey's content or presentation to be addressed and discovered.

The returned surveys will be tallied and percentages given to the significance or insignificance of the questions asked (Appendix II). Each section will then be analyzed as to the effect the proposed change will have on special educational services. Responses will be sent to the State Board Of Education. These questions will be compared to determine consistency of results across the socio-economic scale, size of districts and percentages of population in special education.

This survey is meant to get professional input into proposed changes to the NJAC 6:28. Other input is necessary for the State Board Of Education to make an educated decision regarding New Jersey's educational programming.
Chapter IV
Analysis and Interpretation of Data

A survey was sent to thirty districts in southern New Jersey addressing implications of possible changes to the special education code. These changes relate to issues in child study team responsibilities and makeup, classification, programs, Plan to Revise (P2R), curriculum standards and assessment, and case management and placement concerns. These proposed changes were presented by Dr. Klagholz in an August 1996 policy statement and may have impact on future revisions of NJAC 6:28 (Special Education Rules and Regulations).

Of the 30 surveys sent to local child study team directors and supervisors, 23 were returned yielding a 76.7% return rate. Local school districts in New Jersey were divided by this researcher into three groups according to size: Group A are districts that report student populations under 1000, Group B are districts with student populations of 1000 to 2000, and Group C has populations of over 2000 students. These divisions are made to allow for comparisons of the effect of the proposed changes based on district size.

Group A consists of nine districts. The student population size ranges from 400 to 954 with a mean of 666. Special education numbers range from 38 to 120 with a mean of 77.8 students indicating a 11.7% classification rate. All districts in this group reported student population and special education numbers.

Group B consists of seven districts. The student population size ranges from 1174 to 2000 with a mean of 1688. Special education numbers range from 84 to 328 with a mean of 227.2 indicating a 7.4% classification rate. One district in this group did not report student population and special education numbers.

Group C consists of seven districts. The student population size ranges from 2005 to 9600+ with a mean of 4944.3. Special education numbers range from 315 to 1600+ with a mean of 799.6 indicating a 6.2% classification rate. All districts in this group reported student population and special education numbers.
Overview of the Results

The survey consists of six sections. Each section represents one area addressed in the proposed amendments. Section one discusses the implications of possible changes to the make up and responsibilities of the Child Study Team. Section two discusses current trends and possible changes to the classification process. Section three examines possible changes in program development and implementation. Section four examines strengths and weaknesses in the P2R program. Section five addresses current trends and possible changes in curriculum and assessment. Section six explores “minor” changes proposed in the areas of case management and outside agency licensure. Each section is divided into results and discussion. Results of each question are given in actual numbers and percentages. Percentage of response is based on the 23 returned surveys unless otherwise indicated. In addition, all comments made by the directors are stated. Each comment was given once unless indicated. An overall summary of results is given following results and discussion of all individual sections.

Section One: Results

Child Study Team

Section one consists of nine questions that address team member responsibilities, multi-disciplinary teams, and use of medical evaluations in the classification process.

Results were consistent for all three district groups, except where noted.

1. If evaluations are required by only one CST member, who will it be? Eight (35%) report that the Psychologist will complete evaluations. Eleven (48%) report that the
Learning Consultant will complete evaluations. While 5 (22%) districts report team members will be chosen on a case by case basis. One (4%) district gave a non-applicable response. Zero (0%) report that the Social Worker will complete evaluations.

2. **Who will be responsible for the other evaluation(s) necessary to make a multidisciplinary team?** Twenty (87%) districts report that other evaluations will still be completed by members of the child study team. Additional professionals who will be involved in the evaluative process include the speech and language therapist/pathologist (n=2), nurse (n=1), teacher (n=1), occupational therapist (n=1), and physical therapist (n=1). One (4%) district indicated that additional team members will be chosen on a case by case basis.

3. **Will the reduction in number of evaluations, allow more contact time with students by the CST?** Five (22%) state that a reduction in evaluations will have a significant effect on contact time. Fourteen (61%) state that there will be somewhat of an effect on contact time and four (17%) indicate that there will be no significant change in contact time. Group A had zero responses in the significant change category.

4. **NJAC 6:28 states that CST members will be employed by the local school district.**

   Will districts continue to maintain a full team to complete evaluations and provide other services? Eleven (48%) districts report that the districts will continue to maintain a full team to complete evaluations and provide services. Eight (35%) of the districts were not sure while three (13%) report that the teams will not be maintained. Comment(s):
• One member of group A said that the district will privatize
• Decisions will be based on administrative decisions.

5. **Will CST members be eliminated from the team due to lack of need?** One (4%) district said that members will be eliminated, 16 (70%) said that members will stay the same and five (22%) were not sure. Comment(s):
- Reductions may not be due to lack of need.
- Administrative decisions.
- Possible if no additional work is picked up, new school is being built in district.

6. **If yes, who will most likely be eliminated?** Of the nine professionals answering this question, one (11%) indicated that the Psychologist would go to part time. Seven (78%) eliminated the social worker while an one (11%) director reduced the social worker's role to part time.

7. **Will the reduction of team evaluations promote the development of intermediate unit CST to assist in evaluations and classifications? Will it promote regionalization of CST units?** Of the nineteen directors that answered this question, two (11%) members in group A state that yes, consolidation and regionalization may occur. Six (32%) districts report that they will not regionalize while 11 (58%) are not sure of the response of their districts to these proposed changes. Comment(s):
- Perhaps we will share with smaller districts
- Belong to consortium already.

8. **Will medical evaluations still be completed to rule out medical disabilities which may have a negative educational impact?** Six (26%) districts state that medical
evaluations will still be completed. Two (9%) state that no medical evaluations will
not be completed while 17 (74%) state that evaluations would be made on an as
needed basis. One “no” response indicated that if a condition presented itself an
evaluation would be done, this could be used to change no to one (4%) and as deemed
necessary to 18 (78%).

9. How will medical determinations be made? Multiple responses were given to indicate
all methods of evaluation a district might use depending on the need of the student.

Thirteen districts report the use of record review, 14 will continue use of the medical
history and 11 will utilize the school nurse. Districts may use one or all of these
methods based on the individual case.

Discussion

The directors and supervisors of the child study team answered nine questions
related to the composition of the team and their requirements if proposed changes become
reality. One of the proposed changes is to reduce the number of evaluations required for
an initial classification. The director’s responses indicate that the child study team will still
be a critical component of the evaluation and service mode of special education.
Psychologists and learning consultants will be primary team members with social workers
being utilized on an as needed basis. Most directors report that teams will be maintained
but that smaller districts might be required to consolidate and regionalize their services.
Most districts (83%) believe that this reduction in evaluations will allow teams to have
more contact time with students. This time could be utilized in pre-referral stages of
evaluation and classification. Medical evaluations will still be utilized by most districts as
a standard procedure with a variety of sources used.
Section Two: Results
Classification

Section Two consists of eight questions that address issues involved in the classification process. These issues include definition standards for severe discrepancy, classification on a functional basis and other aspects of the learning disabled population. The responses showed consistent results for all three district groups, except where noted.

1. What percentage of your special education population is currently classified as perceptually or neurologically impaired (learning disabled)? Group A’s learning disabled (LD) population ranges from nine to 85% with a mean of 57.3 with nine of the nine districts reporting. Group B’s LD population ranges from zero to 90% with a mean of 56.7% with six of the seven districts reporting. One district is a Plan to Revise (P2R) district which uses no classification labels. Group C’s LD population ranges from 60-85% with a mean of 70.6% with seven of seven districts reporting. The overall range of LD student’s is zero to 90% with a mean of 61.4%.

2. What impact has the severe discrepancy model had on classification? Five (22%) of the responses indicated that the severe discrepancy model has a significant impact on classification. Thirteen (56%) report that the severe discrepancy model has somewhat of an impact on classification. Five (22%) report that the model does not significantly impact classification. Comment(s):
   - Group A directors include that increased adaptations being made in the regular education classroom impacts classification.
   - the severe discrepancy model allows less students to receive services.
3. What is your current definition of severe discrepancy? Two (8%) of the districts surveyed use a discrepancy of two standard deviations (SD). Nine (39%) use a discrepancy of one and a half SD. Four (17%) use a discrepancy of one SD. Another four (17%) has not defined a severe discrepancy and makes determinations on an individual basis. Two (8%) uses a WIAT/WISC comparison, while one (4%) uses a correlation formula of less than 55 between intellectual quotient (IQ) and achievement. One (4%) gave no response.

4. What effect, if any, would a change in classification categories have on the number of students eligible for special education? Twelve (52%) of the districts report that the effect will be none, slight or small. Comment(s):

- Lack of neurologically impaired will cut two percent of students who are not LD or traumatic brain injury.
- Categories have no effect, discrepancies determine eligibility.
- Continue discrepancy.
- Fewer students will be eligible for special education classes (n=2).
- Slow learners will get help under 504 or regular education.

5. Is this change an effort to reduce the number of classifications to within the 10% cap presented earlier by the Department of Education? Eleven (47%) of the districts believe this is an effort to reduce classifications to fit the 10% cap presented by the Board of Education. Three (13%) believe that these changes are not related to the move to reduce numbers and eight (34%) are not sure whether the changes are related to the ten percent cap.
6. *Do you currently classify children according to functional guidelines if a severe discrepancy is not found?* Functional classification occurs in 18 (78%) of the reporting districts while 3 (13%) report that they do not classify students on a functional basis. One (4%) supervisor reported that he did not know whether functional classification occurred or not. Comment(s):

- Functional classification does not hold up in court.

7. *What percentage of learning disabled students are classified on a functional basis?*

Group A range is zero to ten with a mean of 9.9. Eight of nine districts responded.

Group B range is five to 40 with a mean of 16.3. Four of seven districts responded.

Group C range is zero to 30 with a mean of 13. Five of seven districts responded.

Group range is zero to 40 with a mean of 12.2.

8. *Do children get classified as eligible for special education services, when pressure is exerted from teachers, administrators and/or parents?* Five (21%) report that the answer to this question is yes, 16 (70%) report that the answer is no, while 2 (1%) are not sure whether this occurs. Comment(s):

- Sometimes they don’t get classified for the same reasons.

- Some may get referred but not classified.

**Discussion**

Over 60% of the population of special education students in the reporting districts are classified as learning disabled. These numbers support the research and the importance of correctly defining and classifying these students. The results show the inconsistencies in the classification process. Each district has defined a severe discrepancy...
on an individual basis, ranging from one standard deviation to two, as well as, utilizing testing company’s standards for making a determination. Students who do not meet the district’s definition of severe discrepancy can still be found eligible for services through functional guidelines. 78% of the districts report functional classification exists. 12.2% of the LD population is being classified on a functional basis.

Half of the districts (52%) believe that the elimination of classification categories will have little or no effect on services. Some state that services will be still be received in the regular classroom through teacher and instructional modifications.

When asked if these changes were related to a proposed ten percent cap, 47% of the districts answered yes, while an additional 34% were not sure. When reviewing the statistical data given in the introduction. Only the Group A districts have an average special education population of over 10% of their total population.

Section Three: Results
Programs

Ten questions explore the changes in programming if categorical programs are replaced by descriptive programs. These questions also ask if additional support will be available to regular and special educators if the responsibilities of team members are changed. The responses showed consistent results for all three district groups, except where noted. Twenty-three responses are given unless indicated.

1. Will these changes allow more flexible programming, better able to meet student’s needs? Nine (39%) expect programming to become more flexible and better able to meet student’s needs. Four (17%) do not expect better and/or more flexible
programming and 10 (43%) are not sure what effect these changes will have on program flexibility and programming. Comment(s):
  
  - More flexible but not better able to meet student needs.

2. Will these changes allow for a “dumping ground” effect in placement of children?

Five (22%) report that the these changes will allow a “dumping ground” effect. Ten (43%) report that they will not allow “dumping” to occur. Eight (35%) are not sure of the effect these changes will have on the placement of children. Comment(s):
  
  - Board of education will be less willing to support new programs/staff when current programs are not at their maximum size.

3. Is there currently a special services district meeting the needs of your county (district)?

Seventeen (74%) report that they current have a special service district meeting their needs. Six (26%) report that they do not have or do not utilize a special service district in their county. Comment(s):

- One no response reports that they utilize the services of a special service district in a neighboring county.

4. Will reduced funding to special service districts force your district to implement new special education programs to meet student needs?

Ten (43%) will implement new programs if special service funding is decreased. Ten (43%) will not implement new programs. Three (13%) are not sure whether new programs will be implemented or not.

5. Is there enough space within your district to implement the needed programs currently being contracted for?

Four (17%) have enough room in their districts to
implement new programs. 18 (78%) do not have enough space in their districts to implement new programs. One is not sure whether there is enough space for additional programs.

6. **Will your district have to pay additional moneys to provide out of district placement for students currently in special service districts?** Nine (39%) will have to pay additional moneys to provide out of district placements. Eight (35%) will not pay more. Six (26%) are not sure whether they will pay more. Comment(s):
   - Tuition will more than double.

7. **Will this change in programs increase inclusionary practices?** Seven (30%) report inclusionary practices will increase. Ten (43%) report they will not increase inclusionary practices. Six (26%) are not sure whether inclusionary practices will increase or not. Comment(s):
   - Two groups report limited out of district placement
   - Definition of inclusionary practices: district provides all programming.

8. **Will teachers be provided ample collaboration time and training in implementing inclusionary practices in your schools?** Ten (43%) report that teachers will be given ample time and training in implementing inclusionary practices. Four (17%) report teachers will not have ample time. Nine (39%) are not sure whether teachers will have ample time. Comment(s):
   - It depends on the administration.
   - Probably not.
   - Yes, enough by the administration’s perception.
9. **How will these changes effect your ability to provide related services?** Zero (0%) report a significant impact on related services. Eleven (48%) report these changes will have somewhat of an impact on related services. Twelve (52%) report no significant impact.

10. **Which services are most difficult to provide?** A total of 31 responses yielded the following percentages. The following is the order of related services according to difficulty in providing. They are placed in order from most to least difficult: Physical Therapy (45%), Occupational Therapy (35%), Counseling (26%), Speech and Language Services (6%).

**Discussion**

Dr. Klagholz reported in his paper of August 1996, that these proposed changes would allow flexibility in programs and services. Some directors expect flexibility to improve. They do not all agree that programs will be better able to meet student needs. 74% of the districts currently utilize a Special Services District in a sending receiving relationship. 43% of the districts believe that services will be implemented within district but 78% of the districts do not have additional space available to house these programs. More inclusionary practices could be used to bring students back into district. Only 30% state that inclusionary practices will increase, while an additional 26% are not sure. 43% of the districts state that teachers will have ample planning time and training.

These proposed changes are not expected to effect the implementation of related services.
Section Four: Results

P2R

Two questions explore the Plan to Revise Special Education (P2R).

1. *What other areas of P2R are worth keeping?*
   - school resource center
   - classification names would be valuable
   - PAC
   - eligibility determination (full time, part time, speech)
   - functional criteria
   - change in classification categories
   - 6.28-11.12: Full time class types (definitions and criteria of class types)

2. *What areas would you like changed or removed?*
   - "eligible for special education services" would be my preference for classification with no programmatic distinction between full time and part time.
   - Adequate collaborative planning time for special education and regular education should be mandated by regulations.
   - Five year re-evaluation option.
   - Remove concept of Socially Maladjusted as special education category and tighten up definition of Emotionally Disturbed.
   - Mandatory mediation in due process.
   - Limit voting on local budget "in the box".
   - Speech class size.
Discussion

P2R is a pilot program implemented to develop and test alternative wording and programs to NJAC 6:28. One area which is currently utilized is PAC (see Chapter 2). No other areas of P2R are consistently named to be retained or deleted. One director expressed a concern over the allocation of collaboration time and possible mandates from the state to assure successful inclusionary practices. Research shows collaboration to be a critical component of successful inclusion (Vaughn & Schumm, 1995). Additionally, the Programs section of this survey reveals that only 43% of the districts expect collaboration time to be adequate.

Other items addressed in the survey results for P2R show both agreement and disagreement with the removal of classification categories. There is also, mixed responses to the determination of placement and placement options.

Section Five: Results
Curriculum and Assessment

Six questions address issues related to curriculum and assessment standards for students classified as eligible for special educational services. The responses showed consistent results for all three district groups, except where noted. Twenty-three responses are given unless indicated.

1. Does your district exempt special education students from standardized testing as standard procedure? Seven (30%) report that their districts exempt special education students from standardized testing as standard practice. Sixteen (70%) do not exempt as standard practice. Comment(s):
2. *Are students exempt from district wide testing to protect districts overall performance on standardized testing?* Eight (40%) exempt to protect district’s performance on tests. Twelve (60%) do not exempt to protect district’s performance. Comment(s):
   - Scores pulled, but students take the test.
   - Exempt to protect students from undue stress of testing.
   - They have been exempt in the past.

3. *Does the administration support the exemption of special education students from district testing?* Eighteen (78%) report that the administration supports exemptions. Five (22%) report that the administration does not support exemptions. Comment(s):
   - Support the pulling of scores
   - Yes and no (2).
   - Support exemptions from time limits
   - “??????”

4. *What percentage of special education students in your district are exempt from district wide standardized testing?* Group A range is one to 100 with a mean of 45.6 with eight of the nine districts reporting statistics. Group B range is one to 75 with a mean of 31.8 with five of the seven districts reporting statistics. Group C range is two
to 60 with a mean of 22.3 with three of the seven districts reporting statistics. Group range is one to 100 with a mean of 36.9. Comment(s).

- Severely disabled, not testable students are exempt.
- 80% are exempt from time constraints (1).
- Most take test unofficially, scores not included in district scoring.

5. **Do your self-contained programs follow district curriculum guidelines?** Thirteen (62%) follow district curriculum guidelines. Eight (38%) do not follow curriculum guidelines. Comment(s):

- Modified curriculums (2)
- We have no self-contained programs.
- Where appropriate.

6. **Which programs have modified curriculums?** Number of programs having modified curriculum reported according to numbers given. The first being the largest group and last being the smallest. Multiple responses were given. Self-contained programs (14), resource center (9), emotionally disturbed (6), eligible for day training (6), preschool handicapped (1), primary multiply handicapped (1), in-class support (1).

Modifications are IEP driven.

**Discussion**

Self-contained programs, resource centers, classrooms for the emotionally disturbed as well as other more severe disabilities provide modified curriculums for their special education population. 68% of programs being offered to special education students still follow district curriculum guidelines. Curriculums should be modified
according to the IEP. NJAC 6:28 in compliance with IDEA requires an IEP for each student. Others areas of concern are in the standardized testing of special education students. The group exemption rate from standardized testing is 36.9%, just over one third of the population. The rationale of exemption is to protect the student's from undue stress of testing and to protect district standings on their district scores. Some student's are required to take the tests but the scores are not aggregated, or incorporated into the district's overall score. 78% of the district's report that the administration supports the exemption of students from standardized testing. Some district's report that alternative testing appropriate to the student's capabilities is done at the student's ability, not grade, level.

Section Six: Results
Miscellaneous

Four questions addressing several of the minor changes proposed in August, relate to case management, pre-referral issues and receiving programs.

1. *What effect will the case manager change have on evaluation, classification and programming issues?* Comment(s):

   - If case managers are not experienced team people and others new to the role are not trained, there may be procedural errors.

   - We see problems, who will be responsible for training on guidelines, due process, code, etc. More districts will end up in court.
• It will benefit the programming issue. If appropriate, students with medical issues will be service by the nurse. Those being served by guidance counselor will have that member as case manager.

• It is difficult to anticipate at this time

• non CST member may not have necessary contact time with other team members.

• Not viable or realistic, need CST member as case manager.

• Case manager must know every detail about the student. Teachers not a good choice because they have “tunnel vision”.

• As we understand it, it may help.

• More time can be spent with students.

2. Will it be more difficult to find receiving programs with the change in approved clinics and agencies? Four (17%) report it will be more difficult to find receiving programs. Sixteen (70%) report it will not be more difficult. Three (13%) are not sure what the impact will be.

3. Will reduced numbers in evaluation, classification meetings allow more time to provide support services to teachers in PAC stage of referral? Three (13%) report significant changes in time changes to support services. Fourteen (61%) report somewhat more time available. Five (22%) report changes will not be significant.

Comment(s):

• This assumes there will be a reduction in evaluations.

• Hope so, but Board of Education will probably cut back.
4. Will reduced numbers in evaluation, classification meetings allow more time to observe students in the classroom and allow for in-class support for special and regular education teachers? Four (17%) report that significant changes will occur. Twelve (52%) report that there will be somewhat of a change while six (25%) report that changes will not be significant. Comment(s):

- More time will be available if team is not cut back. Work loads are increasing.

Discussion

There are some concerns about the possible changes in case management as understood by the directors surveyed. One concern relates to the understanding of the intricacies of the law and the potential of lawsuits. Another addresses lack of contact time with the other members of the team or with the students. While some are concerned, others express a positive outlook on the possibilities of outside case managers. One issue is that professionals more closely related to the child will have better knowledge. Also, as an opposite to the concerns, team members will have more time to spend with students.

Another area addressed in these questions is about the availability of outside clinics and agencies. 70% report that the proposed changes will not affect availability while an additional 13% are not sure. Only 17% report that difficulties will occur.

The last area is related to the amount of contact time available to students if the number of evaluations are reduced. 74% report that more time will be available to support services during the PAC stage of pre-referral. 69% indicate that more time will be available for observations and assistance in the classrooms if evaluation numbers are reduced. This supports student contact time and services.
Summary

The changes Dr. Klagholz has proposed potentially could have some significant effects on the services provided to special education students in New Jersey, if they are accepted and incorporated into future revisions of NJAC 6.28. Through this survey the five major amendment groups were explored as well as some of the other issues.

Throughout the survey there were strong opinions from the directors which often presented different points of view. In other areas there was uncertainty. Under Child Study Team results the main issue is that contact time will be increased. Results were consistent in this area as well as questions posed in the miscellaneous section of the survey. Other areas were large percentages were shown was in the use of the school social worker. No districts used her as the primary team member and 78% stated that if team members were to be reduced the social worker would be eliminated but at the same time 70% report that teams will stay the same.

In the area of programs, significant results were reported on the importance of severe discrepancy. A total of 77% report an effect of severe discrepancy on the classification process. The failure of districts to use a common discrepancy model is significant in terms of equality of educational opportunity for all LD students across districts. With a special education population of comprised of 61% LD students, the inability to have uniform criteria to define a learning disability becomes more critical. In addition to the inability to agree on a definition of LD, 78% of the districts classify students based on functional guidelines which are not defined. Functionally classified students make up 12.2% of the LD population.
Approximately half of the districts state that changes in classification categories will effect classification. These changes may or may not effect services available depending on the nature of the disability.

In the area of programs, few significant results were found. Many of the questions were answered with an even distribution of answers. For example, concerning the development of inclusionary practices, 30% report changes will be significant, 43% report changes will not be significant and 26% are not sure. In addition, 43% will implement new programs if special service funding is cut, while 43% will not implement new programs, the last 13% are not sure. The one question which was answered consistently is related to the availability of space. 78% of the districts do not have additional space available to house new programs.

In the area of P2R, the answers were broad and not consistently based on any one issue. The most consistent answers relate to the descriptions of class types and the lack of classification names. There were responses both in support of the exclusion and inclusion of category names. Providing guidelines for more inclusionary practices within the school districts, classification, and both functional and statistical criteria may need to be addressed by the State Board of Education.

The section relating to assessment and curriculum shows that 70% of the population participate in standardized testing although some do not aggregate the scores. Other test modifications include extended time limits and administering alternative assessments at the appropriate skill level. 62% of the district's special education
Curriculums follow district guidelines with modifications in self-contained programs according to IEP stipulations.

In the final section, there seems to be no consensus on the proposed changes in case management. There are arguments both for and against. The proposed changes to clinics and agency regulations will not significantly reduce availability of the same. In respect to contact time with staff and students, the reduction in the number of evaluations required should allow more contact time and staff assistance in pre-referral and in-class support situations. These answers support the movement towards inclusionary practices and the return of the student to his or her home school.
Chapter V
Summary, Findings, and Conclusions

In 1911 the state of New Jersey passed the first legislation mandating special educational services for the disabled student. Since then New Jersey has continued to be in the forefront and in excess of the law in providing a quality education for the special needs student. Today this "excess" is being examined to determine its effectiveness and cost efficiency. Governor Christine Whitman has ordered that all programs in excess of federal law be reviewed for effectiveness and amended to meet federal requirements. In August 1996, Dr. Leo Klagholz proposed five major amendments and several minor ones to the New Jersey Administrative Code on Special Education (NJAC 6:28). This research explores the implications of these proposed amendments on the educational services of the special education student population in New Jersey.

Summary:

Twenty-three of thirty districts in southern New Jersey responded to a survey that investigates the effect of proposed changes to areas of the special education code. The surveys were sent to supervisors of the child study team and consisted of seven sections. Statistical data was obtained to indicate district size and special education populations. The remaining sections contain questions related to each area of Dr. Klagholz's (1996) proposed changes including Child Study Team, classification, programs, P2R, curriculum and assessment, case management and outside agency licensure. The results were tabulated and several significant findings emerged.
The most significant findings show uncertainty on the part of the districts as to the effects of these proposed changes on special education. The respondents indicate concerns that these changes will lead to increased litigation and a reduction in services to special education students. Data indicates inconsistencies in defining and classifying learning disabled students using both severe discrepancy models and functional guidelines. Inclusionary practices may or may not increase but districts consistently report that they do not have the space necessary to develop additional programs in district. If adopted, direction by the State Board of Education will be necessary to provide a smooth transition and the continuance of quality programs for special education students.

Conclusions:

What are the implications of Dr. Klagholz's proposed amendments to special education in New Jersey and will they increase flexibility? The research presented here supports some flexibility in programs. It does not consistently define the areas of special education that will be effected, nor do these proposed changes provide guidelines to follow in classification and placement.

The research shows that district Child Study Team supervisors expect to maintain the status quo for evaluations. They will in most cases continue to use the school psychologist and learning consultant to complete assessments. Nurses and others will be utilized on an as needed basis and could eliminate one of the team members in the classification process.

In the area of classification, the research shows the inconsistencies present in identifying students as learning disabled. As yet guidelines from the state regarding a
definition of severe discrepancy or functional criteria have not been presented. These
areas vary widely among the respondents and should be addressed if the proposed changes
go through. The elimination of classification categories will not have a significant impact
on the number of students classified. It appears that for the time being classification
groups will be maintained. During a recent revision, the federal code was not changed,
therefore the categories set forth in IDEA must be utilized.

The programs provided to special education students will be affected by the
proposed changes. The current trend is to have more students placed in their home
districts within the regular education classroom. With decreased funding to Special
Service districts and increased tuition, districts will be forced to bring students back into
their home district. A third of the respondents reported that inclusionary services will
increase. Advocates of inclusion recognize the importance of collaboration and planning
time, however just under half of those surveyed report that planning time will be adequate.
One concern is in the lack of space available to house these new programs. The recent
school budget plan does not support construction and maintenance of buildings. Yet three
quarters of the responding districts do not have adequate space. These changes could
further interfere with the move to bring the students back.

Dr. Klagholz wants students to follow district curriculum guidelines and to take
district standardized tests. Most districts reported that the students do follow curriculum
standards modified by the IEP to meet the students needs. Also, most districts reported
that the majority of the students do participate in district testing. The supervisors also
report that the administration supports the exemption of these students. Some of these exclusions occur to protect the district’s overall performance on district wide testing.

Issues of case management seem to spark the fear of increased litigation due to lack of knowledge and training in the area of special education. Although the use of non team members in case management may be appropriate for some students, it is critical that instruction in the federal and state code be completed to maintain adherence to the code and to reduce costly court battles which hurt the student as well as the parent-district relationship. Potential financial losses should be considered.

The licensure of outside agencies, if changed, should not have a significant impact on the availability and provision of services.

If these proposed changes are made, and districts continue to employ team members to assist the process and offer support, then the students and teachers could benefit from increased placements in the regular classroom. It is this researcher’s concern, however, that these measures are meant to be cost reducing therefore, a reduction in staff will occur and support will not be available. The districts must continue to strive for a thorough and efficient education for all students while maintaining appropriate free public education for the special education population, as mandated by IDEA. The districts should be held accountable for the implementation and successes of programs found in the special education system, but the dissolution of the current system should not occur without support and guidance from the state. The changes should support those issues mandated in IDEA:

* Free appropriate public education
- An individual education plan
- A multi disciplinary assessment
- Least restrictive environment
- Due process.

Implications for Further Study

If these proposed changes are to take effect further study into possible implications are necessary. The special education population is already at a disadvantage in their inability to learn like their "normal" counterparts. To put them in a position of trial and error could further isolate them from their peers and from productive placements in their future lives.

Additional surveys should be sent to areas outside of Southern New Jersey to see if the results are universal across the state. Questions that could be added would address possible changes occurring due to the new funding formula. One issue is the new funding's effect in assisting those students not currently eligible through the additional moneys mandated for programs for the at risk population. These programs may encompass the "functionally" classified students and promote programs within the regular education system. Also, information as to administrative policy and beliefs on inclusionary practices in regard to collaboration and planning time would be beneficial in helping the state to address, and regulate, if necessary, these areas if these changes do occur. Not only would it be beneficial to survey directors of special education across the state, but also to survey superintendents and chief business administrators to gather their insight into the proposed changes. In addition, questions related to their current
knowledge of special education code and their involvement in special education policy and placement could assist in the tabulation and analysis of the data they provide. If the State Board of Education chooses to change the code on special education by accepting these proposed amendments it is hoped that they will attempt to gather knowledge about the student population and successes of programs currently in existence. In everything, there is room for improvement. Part of any educational program should include evaluation and revision to best support the students, thus it is true in the development of policy and procedure. It is the hope of this researcher that any changes be done with thorough knowledge and the best interests of the students involved in mind. The student's mind is their future, we cannot bank on an empty mind.
References


New Jersey Administrative Code, Title 6, Chapter 28.


Appendix I
Survey

Dear Director,

I am a graduate student at Rowan College of New Jersey completing my Masters of Arts in Learning Disabilities. Part of the requirements is to complete a thesis project and I have chosen to research the implications of Dr. Klagholz’s policy paper and possible amendments to NJAC 6:28. Please complete the attached survey and return it by November 15, 1996 in the enclosed envelope. All survey responses will be confidential. You will not in any way be associated with information you provide. If you prefer to not participate in this study, please return the blank questionnaire.

Thank you for your time and help in completing this survey. A summary of the survey results will be sent to all participants.

Sincerely,

Heidi Chausse

Name of District: (for record keeping purposes only)

Size of District: total number of students total number of special education students

Grades of District: 

Location: North, South or Central New Jersey

Type of community (e.g.: rural, urban)

Socioeconomic level of community: 

Educational Background of community: 

Number of Child Study Team Members:

   School Psychologist Learning Consultant
   Social Worker
Your Position on CST: ________________________________

Do you currently evaluate students for your district? ________________

PLEASE ANSWER ACCORDING TO YOUR DISTRICT

Child Study Team Questions: If Dr. Klagholz’s amendments are implemented, only one CST member will be required to evaluate potential students who might be eligible for special education. Also, medical evaluations will no longer be required. Below are questions related to this amendment. Please answer them to the best of your ability according to how your district will respond to the change.

If evaluations are required by only one CST member, who will it be?
Psychologist Learning Consultant School Social Worker

Who will be responsible for the other evaluation(s) necessary to make a multi-disciplinary team?
CST member Teacher Nurse Other __________

Will the reduction in number of evaluations, allow more contact time with students by the CST?
Significantly Somewhat Not Significantly

NJAC 6:28 states that CST members will be employed by the local school district. Will districts continue to maintain a full team to complete evaluations and provide other services?
Yes No Not Sure

Will CST members be eliminated from the team due to lack of need?
Yes No Not sure

If yes, who will most likely be eliminated?
School Psychologist Learning Consultant Social Worker

Will the reduction of team evaluations promote the development of intermediate unit CST to assist in evaluations and classifications? Will it promote regionalization of CST units?
Yes No Not Sure

Will medical evaluations still be completed to rule out medical disabilities which may have a negative educational impact?
Yes No As deemed necessary

How will medical determinations be made?
Record review Medical History(pre/post natal) School Nurse
CLASSIFICATION: The second major amendment issued in the special education policy paper was in classification. It includes the elimination of educational classifications to the Plan to Revise Special Education (P2R) guidelines (eligible for full-time special education, part-time special education, and eligible for related services.) A definition of specific learning disability will be established.

What percentage of your special education population is currently classified as perceptually or neurologically impaired (learning disabled)?

________________________ percent

What impact has the severe discrepancy model had on classification?

Significant

Somewhat

Not significant

What is your current definition of severe discrepancy?

1 1/2 standard deviation

2 standard deviations

other ______________________

What effect if any, would a change in classification categories have on the number of students eligible for special education?

________________________

Is this change an effort to reduce the number of classifications to within the 10% cap presented earlier by the Department of Education?

Yes

No

Not sure

Do you currently classify children according to functional guidelines if a severe discrepancy is not found?

Yes

No

What percentage of learning disabled students are classified on a functional basis?

________________________

Do children get classified as eligible for special education services, when pressure is exerted from teachers, administrators and/ or parents?

Yes

No

Not sure

Programs: Dr. Klagholz's amendment will eliminate the current programs and set new criteria for student-teacher ratios, description of class make-up and class size regulations.

Will these changes allow more flexible programming, better able to meet student's needs.

Yes

No

Not Sure
Will these changes allow for a "dumping ground" effect in placement of children?
   Yes  No  Not Sure

Is there currently a special services district meeting the needs of your county (district)?
   Yes  No  Not sure

Will reduced funding to special service districts force your district to implement new special education programs to meet student needs.
   Yes  No  Not Sure

Is there enough space within your district to implement the needed programs currently contracted for?
   Yes  No  Not Sure

Will your district have to pay additional moneys to provide out of district placement for students currently in special service districts?
   Yes  No  Not Sure

Will this change in programs increase inclusionary practices?
   Yes  No  Not Sure

Will teachers be provided ample collaboration time and training in implementing inclusionary practices in your schools?
   Yes  No  Not Sure

How will these changes effect your ability to provide related services?
   Significantly  Somewhat  Not Significantly

Which services are most difficult to provide?
   Occupational Therapy  Physical Therapy  Speech and Language Counseling  Other

Plan to Revise Special Education: Dr. Klagholz plans on implementing some of the changes made in the P2R era. He has not stated which factors will be kept and which will be removed. He has indicated some changes in classification and programming that are in line with P2R. These issues were addressed in the sections above.

What other areas of P2R are worth keeping?

What areas would you like changed or removed?
Curriculum Standards and Assessment: The fifth amendment addresses curriculum and assessment standards for special education students. Dr. Klagholz is questioning the integrity of special education programs in providing challenging programs which follow standard school curriculums. According to IEP guidelines each student exempt from standardized testing must provide alternative assessment procedures and rationale for exemption.

Does your district exempt special education students from standardized testing as standard procedure?
Yes    No

Are students exempt from district wide testing to protect districts overall performance on standardized testing?
Yes    No

Does the administration support the exemption of special education students from district testing?
Yes    No

What percentage of special education students in your district are exempt from district wide standardized testing? ________________

Do your self-contained programs follow district curriculum guidelines?
Yes    No

Which programs have modified curriculums?
Resource Center    Self-contained    Eligible for Day Training

                        Emotionally Disturbed    Other __________________________

Other Amendment Concerns:

What effect will the case manager change have on evaluation, classification and programming issues?

Will it be more difficult to find receiving programs with the change in approved clinics and agencies?
Yes    No

Will reduced numbers in evaluation, classification meetings allow more time to provide support services to teachers in PAC stage of referral?
Significantly    Somewhat    Not Significantly
Will reduced numbers in evaluation, classification meetings allow more time to observe students in the classroom and allow for in-class support for special and regular education teachers?  

Significantly  |  Somewhat  |  Not Significantly
Appendix II
Results

Child Study Team Questions: If Dr. Klagholz's amendments are implemented, only one CST member will be required to evaluate potential students who might be eligible for special education. Also, medical evaluations will no longer be required. Below are questions related to this amendment. Please answer them to the best of your ability according to how your district will respond to the change.

If evaluations are required by only one CST member, who will it be?

<table>
<thead>
<tr>
<th>Role</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Psychologist</td>
<td>8</td>
</tr>
<tr>
<td>Learning Consultant</td>
<td>11</td>
</tr>
<tr>
<td>School Social Worker</td>
<td>0</td>
</tr>
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</table>

Who will be responsible for the other evaluation(s) necessary to make a multi-disciplinary team?

<table>
<thead>
<tr>
<th>Role</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>CST member</td>
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<tr>
<td>Teacher</td>
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</tr>
<tr>
<td>Nurse</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
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</table>

Will the reduction in number of evaluations, allow more contact time with students by the CST?

<table>
<thead>
<tr>
<th>Significance</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Significantly</td>
<td>5</td>
</tr>
<tr>
<td>Somewhat</td>
<td>1</td>
</tr>
<tr>
<td>Not Significantly</td>
<td>4</td>
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</table>

NJAC 6:28 states that CST members will be employed by the local school district. Will districts continue to maintain a full team to complete evaluations and provide other services?

<table>
<thead>
<tr>
<th>Decision</th>
<th>Count</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
<td>11</td>
</tr>
<tr>
<td>No</td>
<td>3</td>
</tr>
<tr>
<td>Not Sure</td>
<td>8</td>
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</table>

Will CST members be eliminated from the team due to lack of need?

<table>
<thead>
<tr>
<th>Decision</th>
<th>Count</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
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</tr>
<tr>
<td>No</td>
<td>16</td>
</tr>
<tr>
<td>Not Sure</td>
<td>5</td>
</tr>
</tbody>
</table>

If yes, who will most likely be eliminated?

<table>
<thead>
<tr>
<th>Role</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Psychologist</td>
<td>1</td>
</tr>
<tr>
<td>Learning Consultant</td>
<td>0</td>
</tr>
<tr>
<td>Social Worker</td>
<td>9</td>
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</table>

Will the reduction of team evaluations promote the development of intermediate unit CST to assist in evaluations and classifications? Will it promote regionalization of CST units?

<table>
<thead>
<tr>
<th>Decision</th>
<th>Count</th>
</tr>
</thead>
<tbody>
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<td>2</td>
</tr>
<tr>
<td>No</td>
<td>6</td>
</tr>
<tr>
<td>Not Sure</td>
<td>11</td>
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</tbody>
</table>
Will medical evaluations still be completed to rule out medical disabilities which may have a negative educational impact?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>As deemed necessary</th>
</tr>
</thead>
<tbody>
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<td>n = 6</td>
<td>n = 2</td>
<td>n = 16</td>
</tr>
</tbody>
</table>

How will medical determinations be made?

<table>
<thead>
<tr>
<th>Record review</th>
<th>Medical History(pre/post natal)</th>
<th>School Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>n = 13</td>
<td>n = 14</td>
<td>n = 11</td>
</tr>
</tbody>
</table>

CLASSIFICATION: The second major amendment issued in the special education policy paper was in classification. It includes the elimination of educational classifications to the Plan to Revise Special Education (P2R) guidelines (eligible for full-time special education, part-time special education, and eligible for related services.) A definition of specific learning disability will be established.

What percentage of your special education population is currently classified as perceptually or neurologically impaired (learning disabled)?

Group A: 9, 10.5, 50, 60, 66, 70, 80, 85, 85
Group B: n/a, 0 (P2R), 50, 60, 65, 75, 90
Group C: 60, 64.4, 65, 67.5, 75, 75, 85

What impact has the severe discrepancy model had on classification?

<table>
<thead>
<tr>
<th>Significant</th>
<th>Somewhat</th>
<th>Not significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>n = 5</td>
<td>n = 13</td>
<td>n = 5</td>
</tr>
</tbody>
</table>

What is your current definition of severe discrepancy?

<table>
<thead>
<tr>
<th>1 standard deviation</th>
<th>1 1/2 standard deviation</th>
<th>2 standard deviations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n = 3</td>
<td>n = 9</td>
<td>n = 2</td>
</tr>
</tbody>
</table>

Other

n = 8

What effect if any, would a change in classification categories have on the number of students eligible for special education?

see comments Chapter IV

Is this change an effort to reduce the number of classifications to within the 10% cap presented earlier by the Department of Education?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Not sure</th>
</tr>
</thead>
<tbody>
<tr>
<td>n = 11</td>
<td>n = 3</td>
<td>n = 8</td>
</tr>
</tbody>
</table>

64
Do you currently classify children according to functional guidelines if a severe discrepancy is not found?

Yes  No
n = 18  n = 3

What percentage of learning disabled students are classified on a functional basis?

Group A: n/a, 0, 2, 5, 9, 30, 30
Group B: 7.5, 7.5, 12.5, 35.5, n/a, n/a, n/a
Group C: n/a,?, 0, 5, 10, 20, 30

Do children get classified as eligible for special education services, when pressure is exerted from teachers, administrators and/or parents?

Yes  No  Not sure
n = 5  n = 16  n = 2

Programs: Dr. Klagholz’s amendment will eliminate the current programs and set new criteria for student-teacher ratios, description of class make-up and class size regulations.

Will these changes allow more flexible programming, better able to meet student’s needs?

Yes  No  Not Sure
n = 9  n = 4  n = 10

Will these changes allow for a “dumping ground” effect in placement of children?

Yes  No  Not Sure
n = 5  n = 10  n = 8

Is there currently a special services district meeting the needs of your county (district)?

Yes  No  Not sure
n = 17  n = 6  n = 0

Will reduced funding to special service districts force your district to implement new special education programs to meet student needs?

Yes  No  Not Sure
n = 10  n = 10  n = 3

Is there enough space within your district to implement the needed programs currently contracted for?

Yes  No  Not Sure
n = 4  n = 18  n = 1

Will your district have to pay additional moneys to provide out of district placement for students currently in special service districts?

Yes  No  Not Sure
n = 9  n = 8  n = 6
Will this change in programs increase inclusionary practices?
Yes No Not Sure
n = 7 n = 10 n = 6

Will teachers be provided ample collaboration time and training in implementing inclusionary practices in your schools?
Yes No Not Sure
n = 10 n = 4 n = 9

How will these changes effect your ability to provide related services?
Significantly Somewhat Not Significantly
n = 0 n = 11 n = 12

Which services are most difficult to provide?
Occupational Therapy Physical Therapy Speech and Language
n = 10 n = 13 n = 1
Counseling Other
n = 8 n = 0

Plan to Revise Special Education: Dr. Klagholz plans on implementing some of the changes made in the P2R era. He has not stated which factors will be kept and which will be removed. He has indicated some changes in classification and programming that are in line with P2R. These issues were addressed in the sections above.

What other areas of P2R are worth keeping?
see comments Chapter IV

What areas would you like changed or removed?
see comments Chapter IV

Curriculum Standards and Assessment: The fifth amendment addresses curriculum and assessment standards for special education students. Dr. Klagholz is questioning the integrity of special education programs in providing challenging programs which follow standard school curriculums. According to IEP guidelines each student exempt from standardized testing must provide alternative assessment procedures and rationale for exemption.

Does your district exempt special education students from standardized testing as standard procedure?
Yes No
n = 7 n = 16
Are students exempt from district wide testing to protect districts overall performance on standardized testing?

Yes  No  
\[ n = 8 \quad n = 12 \]

Does the administration support the exemption of special education students from district testing?

Yes  No  
\[ n = 18 \quad n = 5 \]

What percentage of special education students in your district are exempt from district wide standardized testing?

Group A: 0, 1, 2, 5, 12, 70, 75, 100
Group B: n/a, n/a, 1, 8, 25, 50, 75,
Group C: n/a, n/a, n/a, 2, 5, 60, not sure

Do your self-contained programs follow district curriculum guidelines?

Yes  No  
\[ n = 13 \quad n = 8 \]

Which programs have modified curriculums?

<table>
<thead>
<tr>
<th>Program Type</th>
<th>Resource Center</th>
<th>Self-contained</th>
<th>Eligible for Day Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>n</td>
<td>n = 9</td>
<td>n = 14</td>
<td>n = 6</td>
</tr>
<tr>
<td>Emotional Disturbed</td>
<td>n = 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>1-PSH</td>
<td>1-MH</td>
<td>1-in-class support</td>
</tr>
</tbody>
</table>

Other Amendment Concerns:

What effect will the case manager change have on evaluation, classification and programming issues?

see comments Chapter IV

Will it be more difficult to find receiving programs with the change in approved clinics and agencies?

Yes  No  Not Sure  
\[ n = 4 \quad n = 16 \quad n = 2 \]

Will reduced numbers in evaluation, classification meetings allow more time to provide support services to teachers in PAC stage of referral?

Significantly  Somewhat  Not Significantly  
\[ n = 3 \quad n = 14 \quad n = 5 \]
Will reduced numbers in evaluation, classification meetings allow more time to observe students in the classroom and allow for in-class support for special and regular education teachers?

<table>
<thead>
<tr>
<th>Significantly</th>
<th>Somewhat</th>
<th>Not Significantly</th>
</tr>
</thead>
<tbody>
<tr>
<td>$n = 4$</td>
<td>$n = 12$</td>
<td>$n = 6$</td>
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