I. Program/Service Information

Name of Program or Services:
Special education for children with Other Health Impairments (OHI)

Personnel Responsible for Evaluation:
John Brubaker, Director of Special Education

Date of Evaluation:
November/December 2004

Goal/Objective of Program/Services:
To provide a wide variety of individualized educational programming and support services for children and adolescents with Other Health Impairments designed to ensure each student’s successful contribution to our community.

Brief description of relationship between program goals, CSIP and MSIP Standards:
Information gathered would assist the District in adjusting curriculum and instruction (MSIP Standard 6.2) and in achieving Rolling Plan Goal 1, Objectives 5 and 6 (LRE and reducing incidence rate).

Demographic Description of Program:
Children with educational diagnoses of OHI and special education placements at the modified regular education level are attending all St. Louis County public schools.

Virtually all Special School District administrators, special education teachers, paras, and related service staff assigned to general education schools have responsibilities with OHI diagnosed students in modified regular education placements.

II. Description of Stakeholders Engagement in Program Evaluation:
Standard Program and Service Evaluation Template
(Board of Education Approved on June 1, 2004)

SSD staff:
John Brubaker, Director (Affton)
Sharon Campione, Area Coordinator (Ferguson Florissant)
Catherine McGinty, Area Coordinator (Normandy)
Janice Brooks, Effective Practice Specialist (South Region)
Cheryl Heatley, Special Education Teacher (Normandy)

Partner
District: Donnette Green, Director of Student Services (Pattonville)

Parent: Thressa Paplanus (Affton School District)

III. Evaluation Criteria for Programs/Services Offered:

Special Education referral/evaluation information review
IEP review
Movement to LRE

IV. Data Collection Methodology:

File review of 242 files to determine:

1) What percentage of the children initially evaluated in the 2003-04 school year with a singular diagnosis of OHI currently receiving special education services at the modified regular education level had a building level team plan, health plan or 504 Plan in effect prior to their referral for special education services?

2) Do the current IEPs for the above children who had no less restrictive plan in place prior to special education identification reflect direct services or accommodation?

Background information in each file was reviewed to determine if each student had benefit of a 504 plan, health plan, grade level team plan, or building level team plan prior to referral for special education consideration (see attachments). Goals and objectives were reviewed to determine the type of service, direct intervention or accommodation, provided each student (see attachments).

V. Results
Time spent on program evaluation:

Committee meetings = 28 aggregate staff hours
File reviews = 24 aggregate staff hours
Secretarial collation = 08 hours
Chairperson collation = 04 hours
Report writing = 04 hours
Total hours = 68 hours

Strengths of program/service:

A wide variety of goals and objectives was found in the IEPs of 242 student files reviewed. Goals and objectives to meet individual student needs were documented in the following areas:

a) Task focus/completion
b) Homework
c) Pre-academics/academics
d) Self-advocacy
e) Organization
f) Behavior
g) Language
h) Related services
   1) Social work
   2) Occupational therapy
   3) Psychological counseling

Concerns regarding program/service:

a) The incidence of students within the disabled population with an educational diagnosis of OHI in the State of Missouri is 08% while it is 11% within St. Louis County.

b) The literature suggests that prior to evaluation for consideration for special education services, students should have some form of accommodation plan (504, building level team, health, or grade level team). Only 7.4% of students referred for consideration of an OHI diagnosis had some kind of accommodation plan in effect prior to their referral/evaluation.

c) 38% of student’s IEPs reviewed only had goals/objectives reflecting accommodation for their lack of task focus, organization and homework.
completion. If students with OHI only have goals/objectives related to task focus, organization, and homework completion, their needs should be accommodated through general education based plans.

d) Adding in behavior monitoring goals and objectives, fully 54% of student’s IEPs reviewed only had goals/objectives reflecting accommodation for their lack of appropriate school related behaviors, task focus, organization and homework completion.

Recommendations regarding program/service:

a) Support/assist partner districts in implementing problem solving models to provide data driven accommodation/intervention plans for students.

b) Support provision of ongoing 504 Evaluation/Program awareness/training such as scheduled by and for pupil personnel directors on March 17, 2005.

c) Retrain SSD diagnostic staff in:

1) Screening review processes relative to referral acceptance and the need for data based prior intervention/accommodation.

2) Document G-8 (DESE Compliance Standards & Indicators) regarding requirement of a comprehensive evaluation by a licensed physician, licensed psychologist, licensed professional counselor, or licensed clinical social worker before consideration of an educational diagnosis of OHI.

VI. Action Plan for Recommendations as A Result of Program Evaluation

Person responsible to champion action plan

John Brubaker, Director of Special Education

Timeframe for reporting updates to Board of Education

Share results of this program evaluation with St. Louis Area Pupil Personnel Director group by 6/05.
Share results of this program evaluation with SSD diagnostic staff by 6/05.

Share information in newly revised IDEA regarding use of IDEA funds to support general education with St. Louis County Superintendents by 10/05.

Train/retrain SSD diagnostic staff in OHI eligibility criteria (DESE DOC G-8), specifically the need for a comprehensive health/psychological evaluation for consideration of OHI by 0/05.

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Date:_________
Signature of Administrator Responsible for Chairing Evaluation