

New Jersey Department Of Education Special Education Monitoring

District: Pemberton Township

Monitoring Dates: January 5-7, 11-13, 1999²⁰⁰⁰

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Background Information

On December 16, 1999, prior to the monitoring visit, NJDOE facilitated a focus group public meeting with parents and district representatives. There were a number of parents, staff, and board members in attendance. Information was provided regarding least restrictive environment and placement decisions, IEP development, provision of special education and related services, assessment, and transition.

The information obtained from this meeting was used, in addition to other sources of information, to highlight areas of concern for the on-site visit. Other sources of information included reviews of documentation, interviews with district personnel and parents, classroom observations, as well as a review of other relevant information as determined appropriate by the monitoring team.

The purpose of the on-site monitoring was to determine the district's compliance with the requirements of the Individuals with Disabilities Education Act (IDEA) 1997 and the New Jersey Administrative Code (N.J.A.C.) 6A:14. Areas of need were noted and are identified in the following report of findings. Additionally, improvement plan directives are provided to assist the district in correcting all areas of need.

Section I: General Provisions

Summary of Findings:

The district submits, on an annual basis, required IDEA reports regarding the numbers of students with disabilities and a report of certified and contractual staff. Review of the district's policies and procedures indicated that those in effect at the time of the monitoring had not been revised to reflect the new requirements of IDEA 1997 and N.J.A.C. 6A:14. In addition, there was a failure on the part of Pemberton Township to monitor its own system and procedures, thus incomplete forms, lack of required components and inconsistency goes uncorrected.

Areas of Need:

Current Policies and Procedures - The district's current policies and procedures are not compliant with IDEA 1997 and N.J.A.C. 6A:14.

- The district is directed to revise their policies and develop procedures as

directed in the memo issued by the Office of Special Education Programs.

Oversight and Supervision – There is a need to identify a more comprehensive and effective system to supervise staff and processes. Currently, the district is unable to ensure the implementation of compliant procedures due to its inability to adequately monitor and oversee staff and the activities performed by staff.

- The district must revise its current organizational structure to ensure a more effective system of oversight and supervision. This structure must include specific job responsibilities and must identify the chains of command and communication.

Section II: Free, Appropriate Public Education

Summary of Findings:

The district does not consistently make available a free appropriate public education to students with disabilities between the ages of 3 to 21. Special education students do participate in a wide variety of extra curricular sports and activities, however, related services are not provided as prescribed in student IEP's. In addition, there is a lack of sufficient materials and supplies to insure an appropriate education for all students. Of the staff currently employed, all are fully certified. Coverage for special education teachers, in the event of absence, is not provided on a consistent basis. This results in lost or reduced services for students with disabilities. Extended school year is not consistently considered, discussed or appropriately documented in the IEP for each child. The district does not consistently document that transfer students are provided services without delay and according to an IEP.

Areas of Need:

Availability of Sufficient Staff and Materials – Interviews, observations and review of class lists established that there was a need for additional related service providers, especially speech-language specialists. This affects IEP decisions regarding appropriate levels of services. Interviews indicate that CST caseloads are high and as a result, their availability to staff as an educational resource is limited. Staff members report a lack of instructional materials and supplies. In addition, interviews indicate that when special education teachers are absent, substitute coverage is not consistently provided, resulting in doubled or cancelled classes. As a result, IEPs are not fully implemented.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to review the need for additional staff and instructional materials, and as the need warrants, obtain additional staff and/or materials.
- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure the provision of required IEP services

including related services. In addition, this plan must include procedures to ensure that services continue in the event of teacher absence.

Extended School Year - A review of student records and interviews indicated that the district did not individually determine the need for an extended school year program. The IEPs reviewed did not consistently contain documentation that an extended school year was considered for each student. Interviews indicated that the consideration of the need for an extended school year was not regularly discussed at IEP meetings.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure the need for an extended school year program is considered for every child and discussed at IEP meetings. Should it be determined that an extended school year program is required, the district must ensure that all required services are included in that program.

Transfer Students - Record review and interviews indicated that procedures for transfer students do not consistently include and document an immediate review of the evaluation information and IEP. In addition, when the district disagreed with the current evaluation and/or IEP, there was inconsistent documentation that an interim IEP was developed and provided to instructional staff.

- The district is directed to develop an improvement plan that will identify a procedure that ensures that transfer students with disabilities are provided services without delay and according to an IEP.

Section III - Procedural Safeguards

Summary of Findings:

The monitoring of this section resulted in a determination that there was no consistent system to ensure the provision of notice for identification, eligibility, re-evaluation, and IEP meetings. When notice was provided, the required components were not consistently included. Records did not document that parents were contacted at least twice with sufficient notice to attend meetings. The district did not consistently convene a meeting within 20 days of receiving a written request for initial evaluation. Written notice following meetings was not provided within required timelines, nor did the notices include all required components. In addition, there was inconsistent documentation that parents receive a copy of the IEP. In instances when the short procedural safeguards statement was provided, the district did not include all required information. There was inconsistent documentation that the district provided copies of 6A:14 and 1:6A.

Areas of Need:

Meeting Notices - The district did not document that notice of a meeting was consistently provided. The district has revised all meeting notices, but these new notices were not being consistently used. The district has written a corrective action plan based

on Program Review from the 1998-99 school year to address the components of notice for an identification meeting. The district must implement this plan. In addition to this plan, record reviews indicated that notices of IEP meetings did not include a statement informing parents of their right to invite individuals with knowledge or special expertise. The district did not consistently convene an identification meeting within 20 days of receipt of a written referral.

- The district is directed to develop an improvement plan that identifies the procedures it will follow to document the provision of IEP meeting notices, including all required components, and that documentation is maintained in student files.
- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that more than one attempt is made to secure parent participation at meetings, including the option for teleconferencing. The plan must include procedures to ensure that written notice is provided early enough to ensure that parents and/or adult students have the opportunity to attend.
- The district is directed to develop an improvement plan that will identify procedures to ensure that identification meetings are convened within 20 days of receipt of a written referral.

Written Notice - The district did not consistently document the provision of written notice within 15 days. When notice included the IEP, this document was also not consistently provided within 15 days. The district has written a corrective action plan to ensure that notice of evaluation includes a rationale for the decision. The district must implement this plan. In addition, notice of evaluation did not consistently document the provision of 6A:14 and 1:6A. Notice of eligibility (for both initial and re-evaluation) did not sufficiently document the decision-making process, including the rationale for the determination. When providing the short procedural safeguards statement, the district did not include the name of the district contact person.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure provision of written notice, including all required components, within mandated timelines and that documentation is maintained in student records.

Section IV- Location, Referral and Identification

Summary of Findings:

The district utilizes Child Find location efforts via mailings to various agencies and medical facilities concerned with the education of children ages 3-21. The district also requests and obtains consent prior to conducting initial evaluations. Issues were

identified regarding the district's procedures for making direct referrals to the child study team. Meetings were not consistently conducted within 20 days of receiving a referral and written notice of the evaluation-planning meeting did not include the required components (Corrective action for meeting the 20-day timeline and written notice is addressed in Section III—Procedural Safeguards.) The district did not consistently document the effectiveness of pre-referral interventions.

Areas of Need:

Direct Referral Process – Interviews indicated that the district lacks a school wide system for making direct referrals to the Child Study Team. Referrals from parents are sent directly to the team, however, staff members reported that all district referrals must first go through the PAC (Pupil Assistance Committee) process. Staff members were generally unaware that they could directly refer a student to the Child Study Team. The current system delays the process of referral and service to students. In addition, the district has procedures in place for an internal review and approval of referrals by the Supervisor. This is contrary to the requirements of the administrative code.

- The district is directed to develop an improvement plan that identifies an appropriate procedure for directly referring students to the Child Study Team. This plan must also include a mechanism for informing staff of this procedure.

Identification Meetings – The provision of written notice either proposing or denying an evaluation was not consistently and completely documented for each student, nor did this notice include all required components. Corrective action for these issues is addressed in Section III—Procedural Safeguards.

Section V- Protection in Evaluation and Evaluation Procedures

Summary of Findings:

The district implements evaluation procedures that are technically sound, are neither culturally nor racially discriminatory, and are administered by trained personnel. The district conducts evaluations using a multi-disciplinary team. At least one evaluator is knowledgeable in the area of the suspected disability. The district evaluates only after consent has been obtained. In addition, written reports were signed and dated by the evaluators. Those reports, however, did not include all the required components of functional assessments. In addition, the timeline from initial consent to implementation of the initial IEP did not consistently meet the 90-day requirement.

Area of Need:

Evaluations – The evaluation process does not consistently include all required components, specifically observations in other than a testing session and an interview

with the child's teacher. In addition, the evaluation process was not consistently completed within required timelines.

- The district is directed to develop an improvement plan that identifies procedures that the district will follow to ensure that, within 90 days of parental consent for initial evaluation, determination of eligibility, and if eligible, development and implementation of an IEP is completed. These procedures must include a mechanism for oversight.
- The district is directed to develop an improvement plan that identifies a procedure the district will follow to ensure that evaluation reports include observations in other than a testing session and an interview with the child's teacher.

Standard VI- Re-evaluation

Summary of Findings:

Multi-disciplinary reevaluations are conducted, but not consistently within required timelines. The IEP teams reviewed existing data to determine whether additional data was needed. If additional data was needed, the IEP teams determined the nature and scope of the reevaluation. Re-evaluation plans, however, were not consistently followed.

Area of Need:

Re-evaluation – A review of the records demonstrated that in many cases, reevaluation did not take place within three years. Reevaluations were conducted prior to three years, when warranted, however, teachers interviewed were unaware that they could request reevaluations sooner, if warranted. When reevaluations were conducted, there were instances in which assessments were conducted that had not been identified in the re-evaluation plans and these files did not contain revised plans.

- The district is directed to develop an improvement plan that identifies the procedure the district will follow to ensure that re-evaluations are conducted at least every three years and must be considered if requested sooner by the student's parent or teacher. This plan must also include a mechanism for informing staff members of this procedure.
- The district is directed to develop an improvement plan that identifies the procedure the district will follow to ensure that the assessments conducted follow the evaluation plans determined by the IEP teams. If it is necessary to amend an evaluation plan, the district must provide appropriate written notice to the parent.

Section VII- Eligibility

Summary of Findings:

Eligibility is determined by meeting the criteria in one or more of the eligibility categories and is based on all assessments conducted, including assessment by CST members and other specialists. The district employs appropriate specialists who use diagnostic instruments to determine eligibility. Eligibility is determined consistent with N.J.A.C. 6A:14-3.5 (c) and 3.6 (b), and is based on the required assessments. The district documents eligibility statements. However, a statement of the determination of eligibility is not provided within required timelines.

Area of Need:

Eligibility Meetings - The district does not consistently document the provision of a statement of the determination of eligibility within the required timelines, including copies of the evaluation reports.

- The district is directed to develop an improvement plan that identifies the procedure the district will follow to ensure that a statement of the determination of eligibility is provided within the required timelines, including copies of the evaluation reports.

Section VIII- Individualized Education Program

Summary of Findings:

The records reviewed indicated that the IEP meeting is held within 30 calendar days of the eligibility determination. In fact, these meetings are often held concurrently. IEPs were implemented as soon as possible following the IEP meeting. However, the staff responsible for implementing the IEP's indicated that the document does not include specific strengths and weaknesses and levels of performance, which can be used to plan instruction. Other concerns included: participants at the IEP meeting, decision-making process during IEP development, and inadequate documentation in the IEP.

Areas of Need:

Meeting Participants - Notices of IEP meetings were not consistently found in student files. (This issue is addressed under Section III—Procedural Safeguards.) When they were available, the notices did not consistently contain documentation that all required members of the IEP team were present at the IEP meeting. Signatures on the IEP indicated that regular education teachers were not always present at IEP meetings, as required.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that regular education teachers, in addition to special education teachers attend IEP meetings.

IEP Development – Interviews with teachers and parents indicated that child study team members make placement decisions independently. Collaborative development of the IEP does not usually take place at the IEP meeting. Parents reported that they were not always informed of IEP changes nor were they asked for input when changes and revisions were made. The district does not consistently reconvene IEP meetings when proposing changes to student programs.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that all members of the IEP have input into the content of the IEP and that decision making reflected in the IEP is collaborative.
- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that IEP meetings are convened prior to making program and placement changes for students with disabilities.

IEP Documentation – The IEPs did not include all components necessary for compliance. IEPs consistently lacked individualized goals and objectives. Decisions regarding level of services were not individualized. Statements of present levels of performance were not individualized and teachers reported that documents were not useful for planning instruction, due to lack of information on student strengths and weaknesses. Behavior plans were not included for students who had a history of behavioral concerns. (This will be addressed in Section XI—Discipline.) The district has written a corrective action plan addressing IEP documentation of individualized decision-making and rationale for placement. The district must implement this action plan immediately. Interviews indicate that the district currently uses a computerized IEP format and that this drives many of the IEP decisions. The district reported that a committee had been established to review the district's IEP format and suggest revisions. This committee discontinued meeting after July of 1999. It is recommended that this committee be reestablished for the purpose of reviewing the district's IEP to determine its compliance status. In addition, it is recommended that the district adopt the State IEP format. Student files lacked documentation that copies of IEPs are provided to parents. (Corrective action on this issue is addressed in Section III—Procedural Safeguards.)

- The district is directed to develop an improvement plan that identifies procedures to ensure that IEPs contain all of the required components established in code.

Section IX- Least Restrictive Environment

Summary of Findings:

Students are placed in a variety of education programs including supported regular education, in-class and pullout resource programs, special classes and out-of-district placements but not at all levels, in all schools. Students with disabilities are provided instruction related to the core curriculum standards, however, these decisions are not individualized. In addition, decisions regarding supplemental aids and services are not individualized. Interviews indicated that teachers, both regular and special education, have expressed the need for additional training regarding inclusion and the implementation of curriculum, least restrictive environment, and IEP development. Although the district has begun to address inclusion, special education students continue to have limited access to regular education programs and curriculum, especially those students in self-contained programs.

Student placement is often determined solely by the child study team and is not a collaborative decision between the IEP team members: including the parent, regular, and special education teachers. Placement decisions are based on available programs and space and not on student need. In addition, there are administrative and scheduling barriers to provision of programs. Special education students do not consistently have access to the regular curriculum.

Areas of Need:

Preschool Disabled. – Interviews and review of documentation indicate that placement decisions for preschool students do not consistently include consideration of regular education placements. Based on the December 1, 1999 Annual Data Report, 81% of the classified students ages 3-5 are placed in self-contained or out-of-district settings. The district currently has developed a corrective action plan as a result of Program Review 1998-99 that addresses LRE documentation and they must implement the plan immediately.

LRE Documentation - The IEPs reviewed did not consistently document that an individualized decision-making process was used regarding placement. In addition, regular education teachers and special education teachers expressed a need for staff development opportunities for inclusion and other special education topics that are relevant to their teaching responsibilities, such as IEP development and least restrictive environment. This district has developed a corrective action plan as a result of Program Review 1998-99 that addresses LRE documentation and staff in-service. The corrective action plan must be implemented immediately. The district has placed approximately 18% of the classified population in out-of-district placements. Based on the 1999 Annual Data Report, 78% of the Autistic population are placed out-of-district. In addition, 48% of the Multiply Disabled population and 100% of the Cognitively Impaired population are placed out-of-district. Interviews indicate a need for more programs in district to accommodate these students.

- The district is directed to develop an improvement plan that identifies the procedures it will follow to review the need for in-district programs, and should the need be identified, develop such programs.

Annual Reviews – Student records indicate that IEP team meetings are not consistently reconvened when the district proposes to change a student's program during the course of the school year. (Corrective action for this component is addressed in Section VIII—IEP.)

Availability and Consideration of General Education Program Options and Access to the General Education Curriculum- A review of IEPs and interviews indicated that the availability of general education program options varied depending on the building, grade level, and subject area. According to information obtained through interviews, program recommendations were limited by program availability factors. In addition, many students are placed in self-contained programs (39% of the classified population) and are mainstreamed on a limited basis (for lunch and recess only). Interviews indicate that these decisions regarding access to regular education programs are not consistently based on student need.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that program and placement options are determined and based on the individual needs of the students and not on the availability of programs currently offered by the district.

Section X- Transition

Summary of Findings:

Transition from School to Post-School

IEPs included transition information, however, documentation of this process was inadequate. Interviews indicated that agencies such as the Division of Developmental Disabilities (DDD) and the Division of Vocational Rehabilitation (DVR) had not been part of IEP meetings and there was no documentation in files of students 14 and older to supporting invitation and attendance of these agencies.

Areas of Need:

For students, 14 years and older, there was a lack of consistent documentation that they are invited to IEP meetings. While some students signed as participants, there was no documentation of invitations for students who did not attend. In addition, there was inadequate documentation of consideration and determination of student interest and preferences. Invitations to agencies needed for transition services were not consistently documented. Transition opportunities for students were limited and IEPs did not include measurable goals. Transition plans also did not consistently reflect the courses of study that students were actually taking.

- The district is directed to develop an improvement plan that identifies the procedures it will follow to ensure that students, age 14 and older, are invited to IEP meetings and that documentation of these invitations is maintained in student files.
- The district is directed to develop an improvement plan that identifies the procedures it will follow in determining student interests and preferences and how that information will be documented in the IEP.
- The district is directed to develop an improvement plan that identifies the procedures it will follow to ensure that agencies are invited to attend IEP meetings when appropriate. The plan should include procedures to ensure that if agency representatives are unable to attend, documentation is maintained of other attempts to secure their participation.
- The district is directed to develop an improvement plan that identifies the procedures it will follow to ensure that opportunities for transition experiences are available for students with disabilities, that IEPs include measurable transition goals, and that student schedules are consistent with IEP transition plans.

Transition to Preschool

The district facilitates transition from early intervention to preschool by arranging for a child study team member to attend the preschool transition planning conferences. Preschoolers with disabilities have their IEPs implemented no later than age three.

Section XI - Discipline

Summary of Findings:

Behavior plans are not consistently developed for students with known behavior concerns. Interviews indicated that CST members are not consistently informed when classified students are suspended.

Area of Need:

Discipline Procedures – A review of the files did not show evidence of development of behavior management plans. In addition, there was a lack of documentation that functional behavioral assessments or manifestation determinations were conducted when required. Interviews indicated that staff members do not understand what is required in order to suspend a classified student.

- The district is directed to develop an improvement plan that identifies the procedures it will follow to ensure compliance with discipline requirements

established in the Federal regulations and to ensure appropriate documentation of those procedures.

Section XII - Statewide Assessment

Summary of Findings:

The majority of students in Pemberton participate in the statewide assessments. However, most of the students are exempt from passing the tests, including those students who are fully mainstreamed. Accommodations for students and decisions regarding assessment were not made on an individual basis.

Area of Need:

IEP Documentation - The review of IEPs indicated that a majority of students participating in statewide assessments are exempt from passing. This includes students who are mainstreamed on a full-time basis. IEPs lacked documentation as to the rationale for these decisions. In addition, decisions regarding accommodations and modifications were not made on an individual basis.

- The district is directed to develop an improvement plan that ensures appropriate documentation of decisions regarding participation in the statewide assessment process and the need for accommodations and/or modifications.

Section XIII - Graduation

Summary of Findings:

A review of the records indicated that graduation requirements were not determined on an individual basis. In addition, credit information was not documented in IEPs.

Area of Need:

The IEPs of students in the high school did not specifically address graduation requirements.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that, for high school students, the IEP format addresses graduation requirements.

Section XIV - Programs and Services

Summary of Findings:

As noted in Section II, the availability of special education program options varied depending on grade level and subject area. Related services were not consistently provided, as required by student IEPs and determinations were not individualized to the students' needs.

Areas of Need:

Related Services – Interviews of staff and parents indicated that additional counseling was needed. Speech services were not consistently provided and levels of services were not individualized in the IEP. In addition, the related services listed in the IEP did not consistently match the services the child receives.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure that students receive appropriate related services and that these services are documented accurately in their IEPs.

Section XV - Student Records

Summary of Findings:

The district did not have a procedure in place to allow and limit, as appropriate, access to a student's file. Each file did not contain an access sheet.

Review of records demonstrated that maintenance of records and compilation, as well as destruction of pupil records, were in need of corrective action.

Area of Need:

Maintenance, Compilation and Destruction of Records – Student records were disorganized. It was difficult to locate specific information and establish a sequence of events. In addition, notices were missing from many files. Access sheets were not consistently a part of each file.

- The district is directed to develop an improvement plan that identifies the procedure it will follow to ensure pupil files are compiled, maintained, retained or destroyed in a manner that is consistent with federal and state regulations.