

School Psychologist Position Statement High Plains Education Cooperative

Background Information:

High Plains Educational Cooperative (HPEC) is an educational interlocal that provides special education services in southwest Kansas. HPEC supports 17 rural school districts within 12 counties covering a 10,000 square mile area. The cooperative employs approximately ten School Psychologists and eight School Psychologist Paraeducators. School Psychologists are highly trained in both psychology and education. They help children and youth succeed academically, socially, and emotionally by collaborating with educators and parents.

Position:

HPEC believes authentic assessment practices to be important components of school psychology services. A strong focus is placed on the collection of information that relates directly to the school curriculum, state standards, and meeting requirements set forth in "No Child Left Behind." The development of research-based interventions and documentation of student response to intervention are critical components in determining the child's needs. By focusing on these components, all children can benefit, regardless of whether or not qualifying criteria have been met.

"Customer Service" Focus:

We view families, students, teachers and other school personnel as "consumers" of school psychologists' services. With this notion, we view these "customers" as having definite wants and needs. Our goal is then to provide quality services that are user-friendly, referral-driven and referral-focused in order to yield positive effects for students. Our services extend far beyond determining eligibility for special education.

Families and teachers are seen as equal partners in the solution-oriented problem solving approach. We place high regard on parents' and teachers' abilities to identify student strengths, areas of concerns and appropriate interventions for students. Parent, teacher, and student interviews together with rating scales are utilized to gain first-hand knowledge about students. Parents and teachers are asked to contribute student work samples, portfolios, or other examples to document their opinions. We have found that intervention "buy in" is much higher when family and teacher involvement is initiated early and encouraged throughout the problem solving process.

Similarly, in response to our customers, we are committed to providing functional assessment that leads to effective interventions. Our intent is to gather useful information directly related to student performance and to continually strive to develop relevant and workable solutions.

Finally, in meeting the needs of our "consumers", we have had to thoroughly examine the school psychologists' roles and functions in schools. We believe psychologists can assist all children by providing services in the following areas: consultation, intervention, prevention, behavior/classroom management, counseling, classroom instruction, school improvement planning, and helping schools meet the requirements of "No Child Left Behind".

Assessment Tied to Instruction:

The usefulness of information gathered during an evaluation should be foremost in the minds of the evaluators. This information is most useful when it can easily be incorporated into the teacher's daily lessons and is tied to the classroom curriculum. We assess students using:

- State standards and outcomes
- Grade level outcomes developed by individual school districts

- Criterion Referenced Tests
- Error analysis of work samples (reading running records, written and spoken t-units, etc.)
- Existing data (local assessments such as STAR, Terra Nova, ITBS, etc.)
- Curriculum Based Measurements (CBM)
- Activity-Based Assessments (ABA and AEPS)
- Response to interventions
- Parent, teacher, and student interventions
- Classroom observations
- Behavior rating scales

We seldom use standardized achievement tests or IQ tests, as we believe our time is better spent assessing areas that directly impact student performance. We base our assessments on research-based practices that are directly tied to the student's curriculum. For example, we assess many students with reading deficits. We have thoroughly read the literature on the development of reading skills, and all students are assessed in the areas of phonemic awareness, phonics, fluency, vocabulary, and comprehension. The student's instructional plan is then developed to address areas of deficit using strategies that are research-based.

Problem Solving Focus/Multi-Tiered System of Support:

We are committed to serving as many children as possible through resources provided by regular education. We support a MTSS model in which districts provide multiple supports to meet student needs. Any student experiencing an academic and/or social emotional problem is referred to the school intervention team. This team is composed of general education personnel, special education personnel, the school administrator, and the student's parents. As school psychologists, we are committed to being active members of this team and becoming involved with students prior to the referral for evaluation. We believe early intervention is essential, and this allows us to become involved with more students when problems are first identified.

Intervention teams focus on finding solutions that promote student progress. We recognize that not every deficit is an intra-child problem. As a result, during the problem analysis stage of the intervention process, the team discusses the school environment, instruction, curriculum, and the learner. Research-based interventions are developed and high-quality classroom instruction is then provided to the student.

The student's response to intervention is reviewed and if student progress is not adequate, a referral for evaluation is made. It is our belief that most students referred for evaluation will qualify for special education services if interventions are properly implemented.

Team Decision Making:

When making placement decisions, the school psychologist is no longer the "gatekeeper", but a single member of the team. This empowers other team members and increases buy-in, thus leading to better student performance. We facilitate discussions to determine if a child is eligible for special education services. Who should be eligible for special education services? The State of Kansas has developed the following questions to determine student eligibility:

1. Does the response of the presenting concern to general education interventions indicate the need for intense or sustained resources?
2. Are the resources needed to support the student's participation and progress in the general education curriculum beyond those available through general education or other resources?
3. Is there evidence of a severe discrepancy between the performance of a student and his/her peers or evidence of a severe discrepancy between the student's ability and performance in the area(s) of concern?
4. Is the presence of an exceptionality substantiated by convergent data from multiple sources?

No single piece of data or score collected directly determines special education eligibility, but a synthesis of

data is used. This data includes a student's response to intervention and ability to meet curricular outcomes and standards. Staffing teams collectively address all information gathered and make determinations by answering the questions outlined above.

Following a determination of special education eligibility, procedures need to be in place for objectively determining when those special education services should be faded or discontinued. A discussion of this criterion is held prior to initiation of special education services.

When services are initiated, we strive to service the student in the least restrictive environment. A large percentage of our services are provided in the regular education classroom. We believe most students make greater gains when they continue to receive grade level instruction with needed adaptations and modifications, rather than being placed in a resource room and given a separate curriculum.

Multidisciplinary Report/Educational Team Report:

All information gathered and the synthesis of data is included in a multidisciplinary team report. All team members have access to the report via the Internet. Each member enters information and contributes to the development of a comprehensive report. We understand that all components work together; thus, information collected by the speech pathologist, OT, teacher, psychologist, etc. should be integrated instead of reported separately in many individualized reports. The parents are also given a voice in the report through an interview conducted by the school psychologist. The multidisciplinary report and the IEP are integrated into one document.

Counseling/Emotional Health Development:

School psychologists are often the only school personnel with an extensive background in mental health. Thus, we believe we should spend more of our time focusing on counseling and mental health services and less time conducting and managing the comprehensive evaluation process. We can significantly impact a child's social development through group counseling, individual counseling, the development of behavior plans, and teacher consultation.

Continuous Improvement:

After we discontinued using IQ tests as standard protocol in 1993, we quickly discovered a need for professional development. Our practices have forced us to increase our knowledge base in the areas of reading, classroom instruction, curriculum, counseling, and responsiveness to intervention. We have gained this knowledge through monthly study group meetings that include all the psychologists in our cooperative. As we changed our practices, other groups began to examine their practices. Our speech language pathologists have studied the connection between reading and language development and now provide vital information when assessing a student with a reading deficit. Our interrelated teachers and motor personnel have also made similar changes in their practices through study groups and regular meetings throughout the school year. We have also instituted summer study groups to address specific areas and needs of our staff.

Summary/Conclusion:

Many of the traditional practices in school psychology have not met the needs of students and the professionals who work with them. These concerns were a driving force in HPEC's shift toward more functional assessment and delivery practices. The emphasis on nationally normed tests, the IQ/achievement discrepancy, and categorical labeling has been replaced by an emphasis on local curriculum, student need, and student response to intervention. This assessment/service delivery model is guided by a solution-oriented problem solving approach. Assessment practices focus on the collection of information that will relate directly to interventions, whether or not a student is determined eligible for special education services. Families and teachers are key members of intervention/assessment teams, and services are provided as a result of assessments that are tied to instruction and the local curriculum.

As a group, we have found our jobs to be more intellectually rewarding since changing our practices. We no

longer spend our time giving countless IQ tests. Instead, we are helping teams develop strategies to improve student performance. We spend our time consulting with teachers and parents, providing counseling, assisting with school improvement planning, and implementing quality instructional strategies.