



Dr. Gertrude A. Barber National Institute

Corporate Headquarters

100 Barber Place • Erie, PA 16507-1899 • (814) 453-7661 • FAX (814) 455-1132

E-mail: BNierie@BarberInstitute.org • www.BarberInstitute.org

July 27, 2007

2618

Ms. Michael A. Totino
 Regulatory Analyst
 Independent Regulatory Review Commission
 333 Market Street, 14th Floor
 Harrisburg, PA 17101

INDEPENDENT REGULATORY
 REVIEW COMMISSION

2007 JUL 30 PM 3:32

RECEIVED

Dear Ms. Totino:

We applaud the efforts of the State Board of Education to strengthen the requirement for the design and delivery of special education programs and services that are individually functional and based on positive approaches. The language of proposed Chapter 14 clarifies, and therefore improves, the requirements related to the provision of quality special education programs and services.

As an Approved Private School and a contracted provider of Early Intervention preschool services, the Elizabeth Lee Black School of the Dr. Gertrude A. Barber National Institute provides special education and early intervention supports and services to eligible students and young children in Erie County, northwestern Pennsylvania. Meeting the needs of thousands of children and families since 1952, we are acutely aware of the depth of support and severity of educational and developmental need demonstrated by the students of our Approved Private School. It is with these students in mind that we provide the following comments regarding two specific proposed regulatory changes:

§ 4.105. Personnel

We are gravely concerned with the proposed requirement that all paraprofessionals working in special education programs will be required to possess an associate degree, or complete 2 years of post-secondary student, within the next 3 years. While we agree that training and continuing education are critical to the development of quality paraprofessionals, the language of this proposed section does not take into consideration the individuals with established competencies as Special Education Paraeducators, those currently certified by the Department of Education and those with years of proven skill. Will these PDE certified paraeducators who have already established their

abilities, knowledge and instructional skill be forced to participate in college courses only to earn an associate's degree?

In addition, paraprofessionals working with students with significant disabilities must develop skills and knowledge in areas far different and very precursory to **“academic assessment of knowledge of, and the ability to assist in instruction, reading readiness, writing readiness and mathematics readiness, as appropriate...”**. This description of the scope of a paraprofessional's expected knowledge and skills does not begin to take into account the reality of special education for students with severe cognitive and multiple disabilities. For those students participating in education that is based on Alternate Standards and delivered via very adapted and modified instructional programs, the areas of knowledge and related skills are vastly different. If the **“formal state or local assessment of knowledge”** is intended to account for evaluation of paraprofessional skills in educating students with severe disabilities, alternate content areas must be included.

Finally, we have serious doubt as to the availability or existence of such qualified persons to meet local needs across the Commonwealth, given the effective dates. Simple possession of an associate degree does not equate to proven ability to assist in education of children with the most severe disabilities.

§ 14.133. Behavior support.

Our concern with the proposed language of new 22 PA Code 14.133(c)(1) is its requirement that restraints be built into the students' IEP. While it is important to ensure that families participate in deciding when and under what circumstances restraints should be used, building specific restraints into the education plan seems counterintuitive to the positive behavioral supports found elsewhere in this revision. Detailing restraints in the IEP could also lead to staff inability to maintain safety, should the IEP-approved restraint fail to control the situation. We acknowledge that sometimes a restraint is needed to assure the safety of a student, his or her peers and staff, but do not agree that only restraints be included in the IEP. It is much more important to fully develop the IEP to include specific positive behavior intervention strategies designed to maximize the individualization of reinforcement types and schedules which will aide in student achievement.

If the requirement for inclusion of restraints in the IEP remains, it would be important to also require listing of what the steps would be for the school should the parent refuse permission for restraint when behavior becomes a danger to student or others – steps such as police support, 302 admission, suspension, etc.

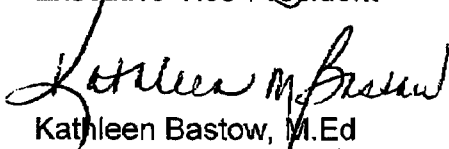
There are often situations in which the IEP team recognizes that the student's behavior will reoccur frequently, and neither the staff nor the parent see a reason to meet each time a restraint is required. The parent should be given the option at the IEP meeting, or any subsequent review, to indicate that they do not wish to have the IEP team reconvened each time a restraint is used. If this option is incorporated into the IEP document, it is even more imperative that the parent always be informed when a restraint has been used. The parents would retain the right to determine, through review of a written report describing the behavioral event and use of restraint, whether they need to convene the IEP team. We strongly recommend that a time-frame, such as 48 hours or 2 school days, be assigned to the requirement for a written notice to the parents of the behavioral event which necessitated the use of restraint.

We appreciate the opportunity to comment on these areas of concern within the proposed revisions to Title 22 Chapter 14 Special Education Services and Programs.

Sincerely,



Maureen Barber-Carey, Ed.D.
Executive Vice-President



Kathleen Bastow, M.Ed
Quality Assurance & Compliance Coordinator