



Lillian M. Lowery, Ed.D.
State Superintendent of Schools

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March 24, 2015

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Mrs. Joan Rothgeb
Director of Special Education
Prince George's County Public Schools
John Carroll Elementary School
1400 Nalley Terrace
Landover, Maryland 20785

RE: XXXXX
Reference: #15-050

Dear Parties:

The Maryland State Department of Education (MSDE), Division of Special Education/Early Intervention Services (DSE/EIS), has completed the investigation of the complaint regarding special education services for the above-referenced student. This correspondence is the report of the final results of the investigation.

ALLEGATION:

On February 4, 2015, the MSDE received a complaint from Ms. XXXXXXXXXXX, hereafter, “the complainant,” on behalf of her son, the above-referenced student. In that correspondence, the complainant alleged that the Prince George’s County Public Schools (PGCPS) violated certain provisions of the Individuals with Disabilities Education Act (IDEA) with respect to the student.

The MSDE investigated the allegation that the PGCPS has not ensured that the Individualized Education Program (IEP) has addressed the student’s social, emotional, and behavioral needs since the start of the 2014-2015 school year, in accordance with 34 CFR§300.324.

INVESTIGATIVE PROCEDURES:

1. On February 4, 2015, Ms. Marjorie Shulbank, Section Chief, Family Support Section, MSDE, conducted a telephone interview with the complainant and clarified the allegation

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for investigation. On the same date, the MSDE sent a copy of the complaint, via facsimile, to Mrs. Joan Rothgeb, Director of Special Education, PGCPS; Dr. LaRhonda Owens, Supervisor of Compliance, PGCPS; Ms. Gail Viens, Deputy General Counsel, PGCPS; and Ms. Kerry Morrison, Special Education Instructional Specialist, PGCPS.

2. On February 5, 2015, the MSDE sent correspondence to the complainant that acknowledged receipt of the complaint and identified the allegation subject to this investigation. On the same date, the MSDE notified the PGCPS of the allegation and requested that the PGCPS review the alleged violation.
3. On February 13 and 19, 2015, the PGCPS provided the MSDE with documentation to consider.
4. February 18, 2015, Ms. Anita Mandis, Section Chief, Complaint Investigation Section, MSDE, conducted a telephone interview with the complainant about the allegation being investigated.
5. On February 19, 2015, the MSDE requested additional documents from the PGCPS.
6. On February 20 and 24, 2015 and March 11, 2015, the PGCPS provided additional documents to the MSDE for consideration.
7. On February 27, 2015, Ms. Mandis and Ms. Sharon Floyd, Education Program Specialist, MSDE, conducted a site visit at XXXXXXXXXXXXXXXX (XXXXXXXXXX) to review the student's educational record, and interviewed the following school system staff:
 - a. Ms. XXXXXXXXXXXXXXXX, Special Education Department Chairperson, XXXXXXXXXXXX;
 - b. Mr. XXXXXXXXX, General Education Teacher, XXXXXXXXXXXXXXXX;
 - c. Mr. XXXXXXXX, Assistant Principal, XXXXXXXXXXXXXXXX;
 - d. Ms. XXXXXXXXXXXXXXXX, School Counselor, XXXXXXXXXXXXXXXX;
 - e. Ms. Sharon Neill, Coordinator, Home and Hospital, PGCPS;
 - f. Ms. Abby Portney, Coordinator, Home and Hospital, PGCPS;
 - g. Dr. XXXXXXXX, Speech Pathologist, PGCPS; and
 - h. Ms. XXXXXXXX, School Psychologist, PGCPS.

Ms. Morrison and Ms. Shelly Woodson, Compliance Specialist, PGCPS, attended the site visit as a representative of the PGCPS and to provide information on the school system's policies and procedures, as needed.

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8. On March 9, 2015, Ms. Mandis conducted telephone interviews with Dr. XXXXXXXX, the student's private psychiatrist, and the complainant, respectively. On the same date, the PGCPS provided additional information to the MSDE to consider.
9. The MSDE reviewed documentation, relevant to the findings and conclusions referenced in this Letter of Findings, which includes:
 - a. The student's report cards for the 2012-2013 and 2013-2014 school years;
 - b. The PGCPS Administrative Procedure #5011, *Home and Hospital Teaching*, dated April 25, 2014 and the *PGCPS Office of Home and Hospital Teaching Reference Guide*, dated August 2014;
 - c. IEP, dated November 12, 2013 and the results of classroom-based assessments conducted in April 2013 and April 2014;
 - d. Invitation to the September 17, 2014 IEP team meeting and written summary of the meeting;
 - e. IEP, dated November 10, 2014, invitation to the November 10, 2014 IEP team meeting, and the written summary of the meeting;
 - f. Report of a bullying incident, dated November 17, 2014;
 - g. Report of the school staff's investigation of the report of a bullying incident, dated November 17, 2014;
 - h. Correspondence from the school system staff to the complainant, dated November 24, 2014;
 - i. Correspondence from the student's private psychiatrist to the school system staff, dated November 26, 2014;
 - j. Invitation to the December 11, 2014 IEP team meeting and written summary of the meeting;
 - k. Correspondence from the student's private psychiatrist to the complainant, dated December 17, 2014;
 - l. Verification of an emotional condition, dated December 29, 2014;
 - m. Invitation to the January 14, 2015 IEP team meeting and written summary of the meeting;
 - n. Plan to transition the student back to school, developed on January 14, 2015;
 - o. Correspondence from the student's private psychiatrist to the complainant, dated February 2, 2015;
 - p. Correspondence from the school staff to the complainant, dated February 5, 2015;
 - q. Correspondence from the complainant alleging violations of the IDEA, received by the MSDE on February 4, 2015;
 - r. Invitation to the February 18, 2015 IEP team meeting;
 - s. Invitation to the March 4, 2015 IEP team meeting and written summary of the meeting;
 - t. The student's attendance record for the 2014-2015 school year;
 - u. Receipts of documents from the complainant from December 3, 2014 through February 4, 2015; and

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- v. Electronic mail correspondence from the school system staff to the MSDE, dated March 9, 2015.

BACKGROUND:

The student is fourteen (14) years old, is identified as a student with a Specific Learning Disability under the IDEA, and has an IEP that requires the provision of special education and related services. He is enrolled at XXXXXXXXXXXX Middle School (XXXXXXXXXXXX MS), but is not currently attending school (Docs. s and t).

There is documentation that, during the time period covered by this investigation, the complainant participated in the education decision-making process and was provided with notice of the procedural safeguards (Docs. d, e, j, and s).

FINDINGS OF FACTS:

1. The IEP states that the student is in the eighth (8th) grade and identifies needs in the areas of math and written language, where he is performing at the second (2nd) grade level, and in reading, where he is performing at the third (3rd) grade level. The IEP also identifies needs in the areas of receptive and expressive language. It includes goals for the student to improve his skills in all of these areas, and requires the provision of special education instruction and speech/language therapy to assist the student in achieving the goals (Doc. e).
2. On September 17, 2014, the IEP team convened to address the complainant's concerns about the student's progress and "student interactions." Although the written summary of the meeting states that the concerns were addressed, it does not describe the concerns or how they were addressed. The school staff report that the team discussed that the student's academic progress has been slow due to his "borderline intelligence" and his "severe receptive language" skills deficits.¹ The school staff further report that, at the meeting, the complainant expressed concern that another student was calling the student names, and that the team discussed that the student was transferring to another class and that it was not expected that the students would have further interaction with each other (Docs. c, d, and interviews with the school staff).
3. On November 10, 2014, the IEP team convened to conduct the annual IEP review. The IEP that was revised as a result of the meeting states that the student "is more willing to come to school" and that he is "self advocating." The school staff report that, while the student had difficulty with regular school attendance during prior school years, he was

¹ While the IEP reflects that the student was performing at the same grade levels that he was performing at the previous annual IEP review on November 12, 2013, the classroom-based assessments indicate growth within the grade levels (Docs. c and e).

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- not having problems with attendance at the time. However, by that time, the student had six (6) unexcused absences and five (5) excused absences. Although the student began attending XXXXXXXXXXXXX MS at the start of the 2013-2014 school year, the school staff report that they are unaware of the reason for the student's difficulty with school attendance during prior school years (Docs. a, e, t, and interviews with the school staff).
4. On November 17, 2014, the complainant filed a *Bullying, Harassment and Intimidation Reporting Form* with the school related to an incident that occurred on November 14, 2014 between the student and other students (Docs. f and g).
 5. On November 24, 2014, a PGCPS Pupil Personnel Worker sent correspondence to the complainant indicating that the student had been absent from school for eleven (11) days, and informing her that continued absenteeism would result in a referral to the authorities under Maryland's compulsory attendance law (Doc. h).
 6. On December 3, 2014, the complainant provided the school staff with correspondence from the student's private psychiatrist indicating that the student was unable to return to school until December 17, 2014 due to anxiety related to the November 14, 2014 incident (Docs. i and u).
 7. The PGCPS Administrative Procedure #5011, *Home and Hospital Teaching*, dated April 25, 2014, states that the school principal or designee must inform a parent about Home and Hospital Teaching (HHT) services if a student will be absent for an extended period due to a medical or psychological condition or a hospitalization. The principal must also provide the parent with an Initial Contact and Referral form within one (1) school day of the request for HHT services. The principal is required to conduct a conference with the parent and both the parent and principal must complete the Initial Contact and Referral form (Doc. b).
 8. The school system's procedure requires that, within one (1) school day of the parent's completion of the *Contact and Referral Form*, the principal must submit the form and a verification of need to the PGCPS Office of Home and Hospital Teaching. In the case of an extended absence, if a parent does not complete the request for HHT services, the Pupil Personnel Worker must be notified (Doc. b).
 9. There is no documentation that the school staff informed the complainant about HHT services following the receipt of information from the complainant on December 3, 2014. The school staff report that this is because they did not anticipate that the student would be absent for an extended period of time, despite the fact that a referral had been made to the Pupil Personnel Worker for excessive absenteeism (Docs. i and u).
 10. On December 11, 2014, the IEP team convened to address the student's lack of school attendance since the November 14, 2014 incident. The documentation of the meeting

reflects that information was shared from the student's private psychiatrist indicating that the student "suffers from anxiety." Based on that information, the IEP team recommended that educational, speech/language, and psychological assessments, including both cognitive and social/emotional functional testing, be conducted. In the meantime, the team decided that the student would be placed on a different bus route from those students involved in the incident, that peer mediation would be conducted between the student and students involved in the incident, and that the student will be escorted to and from all classes (Doc. j).

11. On December 17, 2014, the student's private psychiatrist sent correspondence to the school staff indicating that the student could not return to school through December 21, 2014 due to his anxiety. The letter states that although the IEP team determined that the school staff would conduct peer mediation between the student and the other students involved in the November 14, 2014 incident, the complainant had informed the psychiatrist that mediation had previously been conducted with the same students in the past after a previous incident without success. The letter also explains that, while the student's bus route has been changed so that he no longer has to ride with the students who were involved in the November 14, 2014 incident, he must walk past those students at the new bus stop in order to get to his new bus stop (Doc. k).
12. In his December 17, 2014 correspondence, the student's private psychiatrist also reported that it was his understanding that the complainant's request for the student to be transferred to another school had been denied and that it was his belief that having an adult accompany the student throughout the school day would not be successful "due to the stigma involved." Therefore, the student's private psychiatrist requested that the student be provided with Home and Hospital Teaching (HHT) services (Doc. k).
13. The school system's procedures require that, if verification of a student's inability to attend school is provided by a psychologist or psychiatrist, the PGCPSS Office of Psychological Services must review the verification to ensure that it documents an emotional condition that prevents a student from attending school. If the staff from that office is unable to sufficiently address questions relative to the verification of need, the school system may deny the request for HHT services. The PGCPSS Office of Home and Hospital Teaching must notify the school and parent if a request for HHT services is denied. The notice must include an explanation of the reason for the denial and a notice of the parental right to appeal the decision (Doc. b).
14. The school system staff report that, when a parent of a student with a disability requests HHT services, the IEP team convenes with participation from the PGCPSS Office of Home and Hospital Teaching, and determines whether there is verification that documents an emotional condition that prevents a student from attending school (Interview with the school system staff).

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15. The school staff took no action in response to the December 17, 2014 request for HHT services. They report that this is because the information provided by the private psychiatrist about prior attempts at mediation is inaccurate and that they believe that the information provided by the private psychiatrist was based on misinformation provided by the complainant (Interview with the school system staff).
16. On January 7, 2015, the complainant provided the school staff with verification from the student's private psychiatrist that the student has "severe anxiety" resulting in his "being unable to function in school" (Docs. l and u).
17. On January 14, 2015, the IEP team convened and decided that the student doesn't require Home and Hospital Teaching (HHT) services. The team documented that the decision was "based on the team's successful coordination of school based options for [the student] including an alternate bus and route for [the student], individual conflict resolution as requested by parent to address the 11/14/14 incident, increased adult supervision in and between classes, and supervised lunches in the guidance department to assist [the student's] transition back to school..." However, there is no documentation that a decision was made about whether the verification provided by the private psychiatrist documented an emotional condition that prevents the student from attending school (Docs. m and n).
18. While members of the PGCPs Home and Hospital Office staff report that they participated in the January 14, 2015 IEP team meeting, they also report that they were not provided with the verification document until after the meeting was completed and that there was no discussion about whether the verification provided by the private psychiatrist documented an emotional condition that prevents the student from attending school (Interviews with the school system staff).
19. There is no documentation that the complainant was provided with a letter of denial and information about how to resolve a dispute regarding the student's need for HHT services from the PGCPs Office of Home and Hospital Teaching (Interviews with the school system staff).
20. The student attended school on January 15, 16, and 20, 2015, but did not return to school thereafter (Doc. t).
21. On February 4, 2015, the complainant provided the school staff with correspondence from the student's private psychiatrist, dated February 2, 2015, indicating that he had been informed by the complainant that another incident involving a physical altercation between the student and another student occurred on January 20, 2015. The letter states that, due to the anxiety related to these incidents, the student was "unable to attend his current school" through February 23, 2015, and again requested HHT services for the student (Doc. o).

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22. The school staff report that they do not believe that there was a subsequent incident on January 20, 2015. They also report that the school psychologist conferred with the student's private psychiatrist, and that based on the information she obtained, she does not believe that the student is unable to attend school. However, the complainant has not been provided with a denial of HHT services or information about how to dispute the denial, and an IEP team meeting was scheduled for February 18, 2015 to consider the request for services (Doc. r and interview with the school system staff).
23. The student's private psychiatrist reports that the school psychologist informed him that she thought that the complainant had devised a false story about an incident on January 20, 2015 in order to keep the student out of school, but that there was no discussion about whether the student was demonstrating symptoms of anxiety (Interviews with the school staff and the student's private psychiatrist).
24. On February 5, 2015, notice was sent to the complainant indicating that the student had been absent from school for forty (40) days and informing her that continued absenteeism would result in a referral to the authorities under Maryland's compulsory attendance law (Doc. p).
25. The February 18, 2015 IEP team meeting did not take place due to inclement weather (Doc. r and interview with the school system staff).
26. At the MSDE site visit that was conducted on February 27, 2015, the school system staff reported that it would address the February 2, 2015 request for HHT services at another IEP team meeting that was scheduled for March 4, 2015 in order to conduct a reevaluation (Doc. r and interview with the school system staff).
27. The written summary of the March 4, 2015 IEP team meeting states that the February 2, 2015 documentation from the student's private psychiatrist "was brought to the attention of the IEP team at today's meeting and was not addressed prior to this." The written summary further states that another IEP team meeting will be held to consider the information, but that HHT services will be provided until that meeting is held in order to remediate any delay in the consideration of the student's need for the services (Docs. s, u, v, and interview with the school system staff).
28. The written summary of the March 4, 2015 IEP team meeting reflects that, at the meeting, the complainant requested a change in educational placement due to the "severe anxiety" that he continues to experience. The summary states that the team rejected the request because the school staff report that they "do not see the manifestation of severe and overwhelming anxiety at school," they have "not witnessed bullying issues" and have received only one (1) report of an incident of bullying from the complainant, and that the student "participates in his classes, is focused, organized and is able to access the general curriculum." However, the written summary also states the following:

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[The student] has displayed behaviors, as verbally reported by teachers, such as saying mean things to others, falsely accusing others or is easily annoyed by others (Doc. s).

29. Despite the fact that the student has not returned to school, the IEP team also decided the following on March 4, 2015:

Although these are behaviors observed at times, they do not impede [the student's] learning or access to the general education curriculum, but may interfere with forming peer relationships (Doc. s).

30. The written summary of the March 4, 2015 IEP team meeting does not indicate that the IEP team considered positive behavioral interventions and strategies at that meeting to address the student's lack of school attendance or the behavior related to peer relations that was reported by the school staff (Doc. s).

LEGAL REQUIREMENTS:

IEP Development

In order to provide a student with a Free Appropriate Public Education (FAPE), the public agency must ensure that an IEP is developed that addresses all of the needs that arise out of the student's disability that are identified in the evaluation data. The public agency must ensure that all of the student's special education and related services needs are identified and addressed, whether or not commonly linked to the disability category in which the student has been classified (34 CFR §§300.101, .301- .305, and .320).

In developing each student's IEP, the public agency must ensure that the IEP team considers the strengths of the student, the concerns of the parents for enhancing the education of the student, the results of the most recent evaluation, and the academic, developmental, and functional needs of the student. In the case of a student whose behavior impedes the student's learning or that of others, the IEP team must consider positive behavioral interventions and supports, and other strategies, to address that behavior (34 CFR §300.324).

The public agency must ensure that the IEP team reviews the IEP periodically, but not less than annually, to determine whether the annual goals are being achieved (34 CFR §300.324). In addition to reviewing the IEP at least annually, the public agency must ensure that the IEP team reviews and revises, as appropriate, the IEP to address any information from the parents and the student's anticipated needs (34 CFR §300.324).

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Complaint Investigation Procedures

The United States Department of Education, Office of Special Education Programs (OSEP), requires that, during the investigation of an allegation that a student has not been provided with an appropriate educational program under the IDEA, the State Educational Agency (SEA) review the procedures that were followed to reach determinations about the program. The SEA must also review the evaluation data to determine if decisions made by the IEP team are consistent with the data (OSEP Letter #00-20, July 17, 2000 and *Analysis of Comments and Changes to the IDEA*, Federal Register, Vol. 71, No. 156, p.46601, August 14, 2006).

DISCUSSION/CONCLUSIONS:

In this case, the complainant alleges that the school system has taken no action to address the student's social, emotional, and behavioral needs because the school staff believe that the student initiates problems with his peers (Doc. q and interviews with the complainant).

Based on the Findings of Facts #1 - #6, #10, #11, #16, #20, #21, #24, #28, and #29, the MSDE finds that there is documentation that the student has experienced problems with peer relations and lack of regular school attendance throughout the 2014-2015 school year. Based on those Findings of Facts and the Finding of Fact #30, the MSDE further finds that the PGCPs has not ensured that the IEP team has addressed these needs, and that a violation has occurred.

Based on the Findings of Facts #6, #10, #11, #16, #20, #21, #24, #28, and #29, the MSDE finds that the IEP team's March 4, 2015 decision that the student's behaviors do not impede his learning or access to instruction is inconsistent with the data that the student had not returned to school.

For the reasons stated above, this office finds that the PGCPs has not ensured that the student's social, emotional, and behavioral needs have been met during the 2014-2015 school year, and that a violation has occurred.

ADDITIONAL ISSUE IDENTIFIED DURING THE COURSE OF THE COMPLAINT INVESTIGATION – HOME AND HOSPITAL TEACHING SERVICES PROCEDURES

Each public agency must make instructional services available to students, including students with disabilities, who are unable to attend the school of enrollment due to a physical or emotional condition (COMAR 13A.03.05.03). The need for HHT services is determined by verification from a licensed physician, a certified school psychologist, a licensed psychologist, or a licensed psychiatrist that the student has a physical or emotional condition that prevents the student from participating in the student's school of enrollment (COMAR 13A.03.05.04). The public agency must develop a review process to resolve any disagreement that arises regarding the provision of HHT services (COMAR 13A.03.05.03).

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The instructional service must begin as soon as possible, but not later than ten (10) school calendar days following the notification to the public agency of the inability of the student to attend the school of enrollment and receipt of the verification of the need for the services (COMAR 13A.03.05.04). For students with disabilities, the IEP team must determine the instructional services to be provided and must develop a plan for returning the student to a school-based program (COMAR 13A.05.01.10).

Based on the Findings of Facts #5 - #9, the MSDE finds that the PGCPS did not ensure that the school staff followed the school system's procedures for informing the complainant of the availability of HHT services following her provision of documentation from the student's private psychiatrist, on December 3, 2014, that the student was unable to attend school due to anxiety. Based on the Findings of Facts #5 and #10, the MSDE finds that, while the school staff report that they did not believe that the student's absences were excessive enough to take such action, this is inconsistent with the fact that the matter was referred to a Pupil Personnel Worker and to the IEP team to address excessive absenteeism.

Based on the Findings of Facts #7, #8, and #12, the MSDE finds that the PGCPS again did not ensure that the school staff followed the school system's procedures for informing the complainant of the availability of HHT services following the December 17, 2014 request for HHT services from the student's private psychiatrist. Based on the Findings of Facts #11 - #15, the MSDE further finds that the PGCPS did not ensure that proper procedures were followed to determine whether information provided by the student's private psychiatrist on December 17, 2014 about his anxiety and inability to attend school documented an emotional condition that prevented the student from attending school.

Based on the Findings of Facts #16 - #19, #21 - #23, and #25 - #27, the MSDE finds that the PGCPS did not ensure that proper procedures were followed for determining whether the subsequent information and verification of the student's need for HHT services from the student's private psychiatrist documented an emotional condition that prevented the student from attending school.

Based on the Findings of Facts #7, #13, #14, #17, #18, #19, and #21 - #27, the MSDE further finds that the school system's use of the IEP team process to respond to requests for HHT services for students with disabilities is inconsistent with its own procedures. Based on those Findings of Facts, the MSDE further finds that the school system's practice results in the lack of accountability for determining the sufficiency of verifications and for the provision of responses to requests for HHT services. Based on those Findings of Facts, the MSDE also finds that the practice can result in an impermissible delay in the provision of HHT services for students who are determined to require them. Therefore, this office finds that violations have occurred with respect to the provision of HHT services.

CORRECTIVE ACTIONS/TIMELINES:

Student-Specific

The MSDE requires the PGCPS to provide documentation by May 1, 2015 of the following:

1. That proper procedures have been followed to determine whether there is information from the student's private psychiatrist that documents an emotional condition that prevents the student from attending school.
2. If it is determined that the student requires HHT services, that the IEP team has determined the services to be provided, developed a plan to transition the student back to a school-based program, and that the HHT services have been provided no later than ten (10) days from the date the decision is made that the student requires the services.
3. If HHT services are denied, that the complainant has been provided with proper written notice of the decision and of her rights related to the resolution of any dispute regarding the decision.
4. The IEP team has considered positive behavioral interventions to address the student's interfering behavior and has reviewed and revised the IEP to ensure that it addresses the student's social, emotional, and behavioral needs.
5. The IEP team has determined the services required to remediate the denial of a FAPE from the start of the 2014-2015 school year until the date of the IEP team meeting, based on data regarding the student's current levels of performance and the levels of performance he was expected to demonstrate by the date of the IEP team meeting;
6. The IEP team has developed a plan for the provision of the services needed to remediate the violations identified in this investigation to the student within one (1) year of the date of this Letter of Findings.

School-Based

The MSDE requires the PGCPS to provide documentation by the end of the 2014-2015 school year of the steps it has taken to ensure compliance at XXXXXXXXXXXXXXX Middle School with the requirements for addressing students' social, emotional, and behavioral needs and for responding to requests for HHT services.

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System-Based

The MSDE requires the PGCPS to provide documentation by the start of the 2015-2016 school year of the steps taken to ensure the following:

- a. The PGCPS HHT procedures are being implemented for students with disabilities in a manner that ensures accountability for determining whether verifications document an emotional condition that prevents students from attending school.
- b. The PGCPS HHT procedures are being implemented for students with disabilities in a manner that ensures accountability for notifying parents when a request for HHT services are denied and of their rights to resolve disputes related to those decisions.
- c. The PGCPS HHT procedures are not implemented for students with disabilities in a manner that could delay the provision of those services beyond the timelines required by the COMAR.

Documentation of all corrective actions taken is to be submitted to this office to the attention of the Chief of the Family Support and Dispute Resolution Branch, Division of Special Education/Early Intervention Services, MSDE.

TECHNICAL ASSISTANCE:

Technical assistance is available to the complainant and the PGCPS by Dr. Kathy Aux, Compliance Specialist, Family Support and Dispute Resolution Branch, MSDE, at (410) 767-0255.

Please be advised that both the complainant and the PGCPS have the right to submit additional written documentation to this office, which must be received within fifteen (15) days of the date of this letter, if they disagree with the findings of facts or conclusions reached in this Letter of Findings. The additional written documentation must not have been provided or otherwise available to this office during the complaint investigation and must be related to the issues identified and addressed in the Letter of Findings.

If additional information is provided, it will be reviewed and the MSDE will determine if a reconsideration of the conclusions is necessary. Upon consideration of this additional documentation, this office may leave its findings and conclusions intact, set forth additional findings and conclusions, or enter new findings and conclusions. Pending the decision on a request for reconsideration, the school system must implement any corrective actions consistent with the timeline requirements as reported in this Letter of Findings.

Questions regarding the findings, conclusions and corrective actions contained in this letter should be addressed to this office in writing. The complainant and the school system maintain the right to request mediation or to file a due process complaint, if they disagree with

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the identification, evaluation, placement, or provision of a FAPE for the student, including issues subject to this State complaint investigation, consistent with the IDEA. The MSDE recommends that this Letter of Findings be included with any request for mediation or a due process complaint.

Sincerely,

Marcella E. Franczkowski, M.S.

Assistant State Superintendent

Division of Special Education/

Early Intervention Services

MEF/am

c: Kevin W. Maxwell
Shawn Joseph
LaRhonda Owens
Kerry Morrison
XXXXXXXXXXXXX
Dori Wilson
Anita Mandis
Kathy Aux