



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

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July 17, 2015

Ms. Kay Han
Law Office of Kay H. Han, LLC
6701 Democracy Blvd. #300
Bethesda, Maryland 20817

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Ms. Nancy Fitzgerald
Executive Director of Special Education &
Student Services
Howard County Public Schools
10910 Route 108
Ellicott City, Maryland 21042-6198

RE: XXXXX
Reference: #15-074

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.

ALLEGATIONS:

On May 19, 2015, the MSDE received a complaint from Ms. XXXXXXXXXX, Mr. XXXXXXXXXX, the student's parents, and Ms. Kay Han, their attorney, on behalf of the above-referenced student. In that correspondence, the complainants alleged that the Howard County Public Schools (HCPS) violated certain provisions of the Individuals with Disabilities Education Act (IDEA) with respect to the above-referenced student.

The MSDE investigated the following allegations:

1. The HCPS did not follow proper procedures when determining the student's educational placement on July 28, 2014, in accordance with 34 CFR §§300.114-.116.

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2. The HCPS has not ensured that the Individualized Education Program (IEP) addresses the student's transition planning, functional mobility, and social, emotional and behavioral needs, since July 28, 2014, in accordance with 34 CFR §300.324.
3. The HCPS did not ensure that the IEP team followed proper procedures when determining that an assessment for English proficiency was not required on July 28, 2014, in accordance with 34 CFR §300.324.
4. The HCPS has not ensured that the following has been provided, as required by the IEP, in accordance with 34 CFR §300.324:
 - a. Use of an ambulation device with the student, since August 26, 2014;
 - b. Use of a standing device with the student, since August 26, 2014; and
 - c. Training of the school staff on the use of the devices as well as on transferring the student, and recognizing the student's discomfort levels, as required by the IEP since November 19, 2014.

INVESTIGATIVE PROCEDURES:

1. On May 21, 2015, the MSDE sent a copy of the complaint, via facsimile, to Ms. Patricia Daley, former Executive Director of Special Education and Student Services, HCPS and Ms. Judith Pattik, Coordinator of Special Education, HCPS.
2. On June 2 and 3, 2015, Ms. Sharon Floyd, Education Program Specialist, MSDE, discussed the allegations being investigated with Ms. Kay Han.
3. On June 19, 22, and 24, 2015, Ms. Floyd again discussed the allegations being investigated with Ms. Han. On June 24, 2015, Ms. Han provided additional information clarifying the allegations.
4. On June 26, 2015, the MSDE sent correspondence to the complainants reflecting the clarification to allegation #4 that was provided by Ms. Han.
5. On June 15, 16, 17, 22, 26, and 30, 2014, Ms. Floyd spoke with Ms. Kelly Russo, Resource Teacher, Nonpublic Services and Special Education Compliance, HCPS, about the allegations being investigated.
6. On June 18, 2015, Ms. Floyd and Ms. Memuna Bangura, Monitoring and Accountability Specialist, MSDE, conducted a site visit at XXXXXXXXXXXXXXXXXXXX to review the student's educational record, and interviewed the following:
 - a. Ms. XXXXXXXXXXX, Assistant Principal;
 - b. Dr. XXXXXXXXXXX, Certified School Psychologist;

- c. Mr. XXXXXXXXXXXX, Special Education Case Manager;
- d. XXXXXXXXXXXX, Instructional Team Leader; and
- e. XXXXXXXX, Physical Therapist.

Ms. Russo, and Ms. Missie Baxter, Special Education Resource Teacher, HCPS, attended the site visit as representatives of the HCPS to provide information on the HCPS policies and procedures, as needed.

- 7. On July 2, 6, and 9, 2015, the HCPS provided the MSDE with information to be considered during the investigation.
- 8. The MSDE reviewed documentation, relevant to the findings and conclusions referenced in this Letter of Findings, which includes:
 - a. Notice of the procedural safeguards, provided to the student's parents on July 28, 2014;
 - b. Consent and permission for the MSDE to release information to Ms. Han, dated November 24, 2014;
 - c. Student's schedule for the 2014-2015 school year;
 - d. Student's attendance since 2008;
 - e. IEP, dated June 9, 2015, invitation to the June 9, 2015 IEP team meeting and written summary of the meeting;
 - f. IEP, dated April 24, 2015, invitation to the April 24, 2015 IEP team meeting, written summary of the meeting, and progress reports;
 - g. IEP, dated March 26, 2015, invitation to the March 26, 2015 IEP team meeting, written summary of the meeting and progress reports;
 - h. IEP, dated October 28, 2014, invitation to the October 28, 2014 IEP team meeting, written summary of the meeting and progress reports;
 - i. IEP, dated July 28, 2014, invitation to the July 28, 2014 IEP team meeting, written summary of the meeting and progress reports;
 - j. IEP, dated January 16, 2014, from Montgomery County Public Schools (MCPS);
 - k. Invitation to the December 22, 2014 IEP team meeting, written summary of the meeting and progress reports;
 - l. Invitation to the December 9, 2014 IEP team meeting;
 - m. Invitation to the February 17, 2015 IEP team meeting;
 - n. Invitation to the September 30, 2014 IEP team meeting and written summary of the meeting;
 - o. Invitation to the September 23, 2014 IEP team meeting;
 - p. IEP amendment, dated March 25, 2014;
 - q. Transition planning log; description of the student's work experience;
 - r. Teacher's gauge of the student's pain levels before and after transfer, dated January 14, 2015–June 12, 2015;
 - s. Student's self-rating gauge of morning pain/feelings, dated October 1, 2014–June 8, 2015;

- t. Letter from associate professor of pediatrics, XXXXXXXXXXXXXXXXXXXX
XXXXXXX, to the student's teachers and staff, dated April 15, 2015;
- u. The student's report cards, dated 2014-2015;
- v. Physical therapy reevaluation/plan of care report, therapy logs dated
August 21, 2014-May 25, 2015;
- w. Physical and Occupational Therapy report dated February 20, 2015;
- x. Speech and Language Assessment, dated February 24, 2015;
- y. Notification of placement in English for Speakers of Other Languages Program,
(ESOL), to the parents, dated January 18, 2014;
- z. Emergency room report, to the parents, dated February 17, 2015;
- aa. Report of psychological assessment, dated February 26, 2015;
- bb. Report of warehouse delivery request, dated April 24, 2015;
- cc. Report of warehouse delivery request, dated February 25, 2015;
- dd. Reports of the student's progress towards achievement of the annual IEP goals
during the 2014-2015 school year; and
- ee. Functional Motor Skills Assessment, dated January 13, 2015.

BACKGROUND:

The student is eighteen (18) years old and attends XXXXXXXXXXXXXXXXXXXX. He is identified as a student with Multiple Disabilities including an Intellectual Disability and an Orthopedic Impairment under the IDEA. He has an IEP that requires the provision of special education instruction and related services (Doc f).

The student transferred to the Howard County Public Schools (HCPS) from the Montgomery County Public Schools (MCPS) on July 7, 2014. During the time period covered by this investigation, the parents were provided with notice of the procedural safeguards (Doc a).

ALLEGATION #1 DETERMINING THE STUDENT'S EDUCATIONAL PLACEMENT ON JULY 28, 2014

FINDING OF FACT:

1. On July 28, 2014, the IEP team revised the IEP that had been developed by the Montgomery County Public Schools (MCPS) on January 16, 2014 while the student was attending Rockville High School. At the July 28, 2014 IEP team meeting, the team decided to change the student's educational placement. However, the team did not document the basis for the decision (Docs. d and i).

DISCUSSION/CONCLUSIONS:

The educational placement decision must be made based on the IEP and be consistent with the Least Restrictive Environment (LRE) requirements (34 CFR §300.116). The IDEA requires that

a Free Appropriate Public Education (FAPE) be provided to students with disabilities through an IEP that meets the needs that result from the disability and enable them to be involved in and make progress in the general curriculum (34 CFR §§300.101,.103, .320, and .323). Therefore, IEP team decisions must be based on the student's individual needs and not solely on factors such as the configuration of the service delivery system, availability of staff, or administrative convenience

(34 CFR §300.116, COMAR 13A.05.01.10, and *Letter to Clay*, United States Department of Education, Office of Special Education Programs, 23 IDELR 341, May 17, 1995).

Based on the Finding of Fact #1, the MSDE finds that there is no documentation that the change to the educational placement was based on the data regarding the student's needs. Therefore, this office finds a violation occurred.

**ALLEGATION #2 IEP DOES NOT ADDRESS THE STUDENT'S TRANSITION
PLANNING, FUNCTIONAL MOBILITY, AND SOCIAL
EMOTIONAL AND BEHAVIORAL NEEDS SINCE
JULY 28, 2014**

TRANSITION PLANNING

FINDINGS OF FACTS:

2. On July 28, 2014 the IEP team, including the student, met and considered information that was obtained from the student about his interests in working with computers, as well as being employed and receiving job development services upon completion of high school. The IEP team determined that the postsecondary goals will include job development services from a community rehabilitation program where the student can participate in volunteer work and a training program designed to provide rehabilitative, vocational supports and medical supports. The team also decided that the student would participate in a course of study in Human Services, Consumer Services, and Hospitality and Tourism (Docs. i and j).
3. On December 22, 2014 the IEP team, including the student, met. At the meeting, the student's parents were given the Developmental Disabilities Administration (DDA) and Division of Rehabilitative Services (DORS) applications to complete. A Transition Timeline Planning Checklist was also given to the student's parents. The transition service coordinator discussed Social Security Insurance and Medical Assistance with the parents and informed them of the Annual Transition Fair held in Howard County. The transition services coordinator reported that the DDA application completed for the student by the MCPS was being transferred to the HCPS (Docs. k and q).
4. On March 26, 2015, the IEP team, including the student, met and revised the postsecondary goals based on information from the student that he wanted to participate in a supported employment program and explore a career working with

computers. However, the employment and training goals, as revised, are not stated in terms of measureable outcomes to be achieved (Docs. g and q).

5. On April 24, 2015, the IEP team, including the student, met and added to the IEP that the student would attend a work group within the community, attend a computer lab program, and attend supervised work training community programs. Information about a transition fair, free county workshops and the transition checklist were given to the parents. The team decided to reconvene in six weeks to discuss the status of the parent's completion of applications (Doc f and q).
6. On June 9, 2015, an IEP team, including the student, met. The coordinator of community services for Maryland programs was in attendance at the meeting. Information was shared about the resources available for the student after high school completion. The team discussed the importance of completing an application for services from the DORS, which had previously been provided to the parent. The team also discussed that the student actively participates in the school work experience (Docs. e and q).

DISCUSSION/CONCLUSIONS:

Beginning not later than the first IEP to be in effect when a student turns fourteen (14) years old, the IEP must include appropriate measurable postsecondary goals based upon age-appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills. The IEP must also include the transition services, including courses of study needed to assist the student with the goals. In addition, the IEP must include a statement of both the public agency and a participating agency's responsibilities or linkages, or both, as appropriate; before the student leaves the secondary school setting (34 CFR §300.320 and COMAR 13A.05.01.09). When the purpose of an IEP team meeting is to consider the transition plan, the public agency must ensure that the student is invited to the IEP team meeting and, if the student is unable to attend the meeting, that the public agency takes steps to ensure that the student's preferences and interests are considered (34 CFR §300.321).

Based on the Findings of Facts #2-#6, the MSDE finds that the HCPS took steps to obtain the student's interests and preferences and determined the services, including course of study and participating agency linkages, when conducting transition planning.

However, based on the Finding of Fact #4, the MSDE finds that since March 26, 2015, the IEP has not included transition goals that are measurable. Therefore, the MSDE finds a violation occurred with this aspect of the allegation.

FUNCTIONAL MOBILITY

FINDINGS OF FACTS:

7. The IEP in effect at the start of the 2014-2015 school year, dated July 28, 2014, indicates that the student requires the use of his power wheelchair to navigate the school environment. With adult assistance, he is able to operate the elevator to access the classrooms on various floors of the school building. The IEP states that the student needs to assist staff with sit-to-stand transfers by bearing weight on his legs and arms. It further states that the student is able to participate in physical education class; however, he needs to use a gait trainer (with chest, ankle, forearm, hip, and thigh prompts). The IEP also states that the student needs to use a supine stander for at least thirty (30) minutes a session to participate in classroom activities (Doc i).
8. The annual goal for the student to improve functional mobility, which was included in the IEP dated July 28, 2014, states that, given therapeutic interventions, appropriate assistance, and fading support, the student will navigate the school environment and participate in school-related activities (Doc i).
9. At the IEP team meeting held on October 28, 2014, the parents reported concerns about the student's weight loss, the amount of energy he exerts daily, his lack of appetite, and increased hip soreness. The parents also stated that the physical therapist at XXXXXXXXXXXXXXXX (XXX) reported concerns about the student's muscle tone, motion of his lower extremities, core strength, balance, motor control and coordination. After reviewing the student's current progress, attendance (the student had been absent seventeen (17) days since the start of the 2014-2015 school year) and recommendations from health care providers, the IEP team proposed a shortened school day for the student (Doc d).
10. The November 3, 2014, progress report states that the student made sufficient progress towards meeting his functional mobility goal. It states that, "The student assists with sitting to standing transfers by bearing his own weight with greater efficiency so far this first quarter. It further states that in restroom transfers as well as transfers that allow the student to lie down and stretch out he does a good job bearing weight on his upper and lower extremities." The report indicates that when the student aligns his power chair in the correct location before the start of transfers, he is able to be more successful, and that he continues to need prompting to make sure his chair lined up in a position where he can be more successful. The amount of assistance the student needs depends upon his level of fatigue, and that when he is less fatigued he is able to bear more of his weight (Doc h).
11. At the IEP team meeting held on December 22, 2014, the IEP team documented that the student is able to access the school environment in his power wheelchair, with supervision, including the bus lift for transportation. The team also documented that

the student's posture is good in his power chair, and that he is able to access the elevator and the switch activated entrance door (Doc k).

12. At the time of the December 22, 2014 IEP team meeting, the student had been absent for twenty-seven (27) days since the start of the 2014-2015 school year. The IEP team considered information from the student's parents that they felt that he was able to return to a full school day, and decided that the school staff would be provided with additional training to assist the student with transitions and to support the student's physical environmental needs (Docs. k and d).
13. The student did not return to school on a full time basis as the result of his continued health related issues following the December 22, 2014 IEP team meeting (Doc d).
14. The student's private orthopedist, reported on January 7, 2015, that the student was to limit his transfers and to do no unnecessary standing or transfers for two-three (2-3) weeks (from January 7, 2015) due to the student's complaint of a left hamstring strain (Doc j).
15. A progress report developed on January 23, 2015, states that the student was continuing to make sufficient progress to meet the functional mobility goal. It also states that the student continues to assist with transfers in the bathroom and demonstrates good weight bearing during the transfers (Doc f).
16. At the IEP March 26, 2015 IEP team meeting, the team documented that the student travels to and from school on a bus equipped with a lift. The IEP also states the following, "The student has a personal power wheelchair which he is able to maneuver with supervision within the school building. He demonstrates safe technique and appropriate speed. The student is able to perform a stand-pivot transfer with moderate assistance of one and stand by assistance of another staff member for bathroom transfers. He is able to transfer to and from a large bean bag chair with moderate assistance. He has transferred to the recumbent bike with moderate to maximal assistance. He has been able to walk approximately six-eight (6-8) feet with forearm supports, trunk support and moderate support. The student has been able to transfer to a XXXXXXXXX with moderate assistance. He is able to stand statically in the XXXX with close supervision" (Doc g).
17. At the IEP team meeting held on March 26, 2015, the results of a Functional Motor Skills Summary Assessment was shared. The report states that the student is able to independently move himself around the classroom using his power wheelchair with supervision. It states that he is able to carry books, obtain materials from a drawer or cabinet, and manage a book bag. It also states that he can write using his right hand, erases, types, operate a computer, handles scissors, and copy from a near point. He is able

to go through the cafeteria line, use food utensils, get lunch from a bag or box, un-wrap food and straw, open a milk carton or thermos, feed and clean up after himself (Docs. g and ee).

18. The student's attendance for the 2014-2015 school year included fifty-nine and a half (59.5) absences. Thirty-two and a half (32.5) of these absences were excused absences and twenty-seven (27) were unexcused (Doc d).
19. On June 19, 2015, the student's progress on the functional mobility goal was reported indicating that the student was no longer making sufficient progress to meet the goal due to the student's lack of consistent school attendance. The report states the following, "The student has been using the stroller as he reports the power wheelchair is uncomfortable. When he is in the wheelchair, he is able to navigate throughout the building well with supervision. The student has not used the gait trainer due to his complaints of pain and reporting that he does not want to do it. Similarly, he has not used the stander due to his complaints of pain and stating that he does not want to get up in the stander" (Doc dd).
20. The IEP team, to date, has not met to address the lack of expected progress, and Home and Hospital Teaching (HHT) services has not been explored for the time that the student is unable to attend school due to his medical condition (Doc e).

DISCUSSION/CONCLUSIONS:

The IEP team must revise the IEP to address any lack of expected progress toward achieving the goals, to reflect the results of any reevaluation, to reflect information about the student provided to or by the student's parent, or to address the student's anticipated needs (34 CFR §300.324).

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).

Based on the Findings of Facts #6-#20, the MSDE finds that, to date, the HCPS IEP team hasn't addressed the student's lack of expected progress and has not explored the provision of HHT services for the student when he is unable to attend school due to health related issues. Therefore, this office finds a violation with respect to this aspect of the allegation.

SOCIAL, EMOTIONAL AND BEHAVIORAL NEEDS

FINDINGS OF FACTS:

21. At the December 22, 2014 IEP team meeting, the recommendation was made to assess the student's social and emotional functioning based on the school staff's reports that the student appears to demonstrate work avoidance and often asks to see the nurse, and that

he verbally shares that he does not like school and states that he would like to be home on a regular basis (Doc k).

22. On March 26, 2015, the IEP team considered the report of a psychological assessment which indicates that the student's responses may be attributable, at least in part, "To his significant cognitive and adaptive skills deficits." The report states that, "While an emotional condition is not identified at this time, the student's emotional responses should be monitored and supported in the classroom as needed through frequent breaks and encouragement to participate in extracurricular activities such as Allied Sports" (Docs. g and aa).
23. At the IEP team meeting, it was recommended that the school psychologist meet with the student to determine if the student would benefit from counseling services. The school psychologist met with the student on June 11, 2015 (Docs. g and aa).

DISCUSSION/CONCLUSIONS:

In order to provide a student with a Free and 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. 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 team must consider the use of positive behavioral interventions and supports and other strategies, to address that behavior (34 CFR §§300.101, .320 and .324 and COMAR 13A.05.01.06).

Based on the Findings of Facts #21-#23, the MSDE finds that the IEP team obtained data that did not identify needs in this area and has followed up on recommendations for monitoring the student. Therefore, the MSDE does not find a violation occurred with respect to this aspect of the allegation.

ALLEGATION #3

THE IEP TEAM DID NOT FOLLOW PROPER PROCEDURES WHEN DETERMINING THAT AN ASSESSMENT FOR ENGLISH PROFICIENCY WAS NOT REQUIRED ON JULY 28, 2015

FINDINGS OF FACTS:

24. The IEP from MCPS includes a recommendation for an English for Speakers of Other Languages (ESOL) assessment based upon the decision that the student does not have English proficiency and his parents' refusal to accept ESOL services (Doc i).

25. Parental consent was not sought for the ESOL assessment when the student transferred to the HCPS (Doc y).
26. On April 24, 2015, the IEP team considered the need for the student to have an ESOL assessment. The speech/language pathologist and service provider for the student, reported that based on her observations of the student, she did not believe the student required an ESOL assessment. Based upon this information, the IEP team members decided that the assessment is not required (Doc f).

DISCUSSION/CONCLUSIONS:

The public agency must offer each student with a disability a FAPE through an IEP that includes special education and related services that address the student's identified needs. 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 child with limited English proficiency the IEP team must consider the language needs of the child as they relate to the IEP (34 CFR §§300.101, .320 and .324).

If additional data is needed to determine a student's needs, the public agency must promptly request parent consent to assess and if obtained, ensure that assessment procedures are conducted and that the results of the assessment are considered by the IEP team within ninety (90) days (COMAR 13A.05.01.04 - .06).

Based on the Findings of Facts #24 and #25, the MSDE finds that the HCPS did not attempt to obtain consent from the parents and ensure that the ESOL assessment was conducted as recommended. Therefore, this office finds that a violation occurred.

Notwithstanding the violation, based on the Finding of Fact #26, the MSDE finds that the IEP team did subsequently decide that the assessment was not required based on data from the student's speech/language service provider. Therefore, no student-based corrective action is required.

ALLEGATION #4 PROVISION OF EQUIPMENT AS REQUIRED BY THE IEP

FINDINGS OF FACTS:

AMBULATION DEVICE SINCE AUGUST 26, 2014

27. The IEP, dated July 28, 2014, which was in effect since the start of the 2014-2015 school year, documented that the student will use an appropriate ambulation device to participate in gross motor activities needed to achieve the IEP goal (Doc i).

28. The IEP progress report, dated November 3, 2014, stated that on October 30, 2014, the physical therapist was able to acquire an appropriate ambulation device for the student(Docs. h and dd).

STANDING DEVICE SINCE AUGUST 26, 2014

29. The IEP includes a goal that requires the student to use an appropriate standing device with necessary supports and adult assistance for transfers in order to assist the student to stand to enhance participation in classroom related activities (Doc i).
30. On April 24, 2015, the physical therapist was able to acquire an appropriate standing device (Doc bb).

TRAINING ON DEVICES, TRANSFERRING STUDENT, AND RECOGNIZING THE STUDENT'S DISCOMFORT LEVELS SINCE NOVEMBER 19, 2014

31. At the IEP team meeting held on December 22, 2014, the IEP team determined the school staff would receive additional training to assist the student with transitions and to support the student's physical environmental needs (Docs k).
32. On November 25, 2014, training was provided to the school staff on the ambulation device and transferring the student (Doc v).
33. Ongoing training was provided on transferring the student in response to information provided by the student and his parents about the student's levels of pain (Doc v).
34. There is no documentation that training was provided on the use of the appropriate standing device until standing device was obtained on April 24, 2015 (Doc v).

DISCUSSION/CONCLUSIONS:

The public agency is required to ensure that the student is provided with the special education and related services required by the IEP (34 CFR §300.101).

Based on the Findings of Facts #30-#35, the MSDE finds that while training of school staff was provided in accordance with the IEP team's decisions, there was a delay in the use of training on devices required by the IEP as a result of the lack of necessary equipment. Therefore, the MSDE finds violations occurred with respect to these allegations.

CORRECTIVE ACTIONS/TIMELINE:

Student-Specific

The MSDE requires the HCPS to provide documentation by start of the 2015-2016 school year that it has followed proper procedures to explore HHT. The HCPS must also provide documentation that the IEP team has convened to ensure the following:

1. Considered the student's educational placement and documented that the educational placement decision is consistent with the data;
2. Reviewed and revised the transition goals to ensure that they are stated in measureable terms;
3. Reviewed and revised, as appropriate, the IEP to address lack of expected progress;
4. Determined the amount and nature of compensatory services to redress the violations identified in this investigation and developed a plan for the provision of those services within one (1) year of the date of the Letter of Findings.

The HCPS must ensure that the complainants are provided with written notice of the IEP team's decisions. The student's parents maintain the right to request mediation or to file a due process complaint to resolve any disagreement with the team's decisions.

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

Technical Assistance

Technical assistance is available to the parties from Dr. Kathy Aux, Compliance Specialist, MSDE at (410) 767-7770.

Please be advised that the HCPS and the complainants have the right to submit additional written documentation to this office within fifteen (15) days of the date of this letter if they disagree with the findings of fact 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

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conclusions. Pending the decision on a request for reconsideration, the school system must implement any corrective actions within the timelines 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 parties maintain the right to request mediation or to file a due process complaint, if they disagree with 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 due process.

Sincerely,

Marcella E. Franczkowski, M.S.
Assistant State Superintendent
Division of Special Education/Early Intervention Services

MEF: sf

c: Renee A. Foose
Judith Pattik
XXXXXXXXX
Kelly Russo
Dori Wilson
Anita Mandis
Sharon Floyd
Kathy Aux