

Board of Education Agenda Item

Item: I.

Date: January 13, 2011

Topic: Final Review to Reaffirm the 2009 Recommendations to the Standards of Quality

Presenter: Ms. Anne D. Wescott, Assistant Superintendent for Policy and Communications

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Origin:

Topic presented for information only (no board action required)

Board review required by
 State or federal law or regulation
 Board of Education regulation
 Other: _____

Action requested at this meeting

Action requested at future meeting: _____

Previous Review/Action:

No previous board review/action

Previous review/action
date November 18, 2010
action First review

Background Information: Article VIII, § 2 of the *Constitution of Virginia* requires the Board of Education to determine and prescribe Standards of Quality for the public schools in Virginia. The *Constitution* says:

Article VIII, § 2. Standards of quality; State and local support of public schools.

Standards of quality for the several school divisions shall be determined and prescribed from time to time by the Board of Education, subject to revision only by the General Assembly. The General Assembly shall determine the manner in which funds are to be provided for the cost of maintaining an educational program meeting the prescribed standards of quality, and shall provide for the apportionment of the cost of such program between the Commonwealth and the local units of government comprising such school divisions. Each unit of local government shall provide its portion of such cost by local taxes or from other available funds.

The *Code of Virginia* requires the Board of Education to review the Standards of Quality every two years. Section 22.1-18.01 of the *Code* says, in part:

§ 22.1-18.01. Biennial review of the standards of quality required; budget estimates.

A. To ensure the integrity of the standards of quality, the Board of Education shall, in even-numbered years, exercise its constitutional authority to determine and prescribe the standards, subject to revision only by the General Assembly, by reviewing the standards and either (i) proposing amendments to the standards or (ii) making a determination that no changes are necessary....

Summary of Major Elements: During 2009, the Board conducted a review of the Standards of Quality and proposed policy directions, options for revisions to the Standards of Quality, and issues for further study, as follows:

Policy Directions

- Enhance the Standards of Quality so that the Commonwealth’s basic foundation program for K-12 public education reflects a comprehensive educational program of the highest quality.
- Provide clarity and greater transparency in SOQ funding with the goal of maintaining the Commonwealth’s commitment to public education funding at the state and local levels and encouraging a continued emphasis on school-based instructional services.
- Provide greater flexibility to school divisions in using noninstructional personnel funding for instructional support services.
- Support the appropriateness of establishing ratio standards for individual categories of “support service” positions as is the current practice used for instructional personnel.
- Advocate against permanent structural changes to the Standards of Quality that result in decreased funding for K-12 public education.
- Begin building a more comprehensive basic foundation program by including in the SOQ gifted, special education, and career and technical staffing ratios and certain incentive programs that have become core components of K-12 educational programs statewide and currently funded in the Appropriation Act.
- Set priorities for the Board’s unfunded SOQ recommendations from previous years so that these instructional staffing standards can be fully implemented in future years.
- Begin to address the Board’s school leadership priorities of requiring a principal in every school and increasing the number of assistant principals in schools with the greatest need.
- Mitigate the perverse incentive of reducing a school division’s special education funding when it mainstreams students with disabilities into general education classrooms or uses Response to Intervention (RtI) and/or other instructional supports to reduce the number of students identified as needing special education services.

- Provide additional policy guidance and direction to school divisions offering alternative or nontraditional educational programs, such as the Individual Student Alternative Education Plan (ISAEP).

SOQ Language Revisions to Address Policy Directions

- Codify the Board of Education’s recommendations that were included in the 2009 Appropriation Act providing flexibility in the use of existing funds for hiring reading specialists, mathematics specialists, data coordinators, and instruction of English language learners.
- Codify the provisions of the Early Intervention Reading Initiative and the Algebra Readiness program by including them in the Standards of Quality and requiring all school divisions to provide these interventions with funding currently appropriated for these incentive programs.
- Codify the Appropriation Act provision that the Standards of Quality includes a minimum of 58 licensed, full-time instructional positions per 1,000 students, including instructional positions for special education, gifted education, and career and technical education.
- Codify the staffing standards for special education (currently in regulations), gifted education (currently in the Appropriation Act), and career and technical education (currently in regulations).
- Provide school divisions the flexibility to deploy assistant principals to the schools with the greatest needs, so long as they employ a sufficient number of assistant principals divisionwide to meet the total number required in the current SOQ staffing requirement.
- Define the categories of personnel who make up “support services,” and specify how those positions are funded, and require transparency in the use of funds by mandating divisions publicly report the state and local amounts budgeted and expended for each category.
- Permit school divisions to use funds for support services to provide additional instructional services and include instructional services as a separate category to be reported publicly.

Issues for Further Study

As resources become available, conduct a comprehensive study of the following complex funding issues and report the findings to the Governor and General Assembly for consideration as part of the Standards of Quality:

- The feasibility of converting the prevailing costs for each major category of the “support services” positions into ratios (for example, based on positions per 1,000 students), and including ratios for some or all of the categories in the Appropriation Act.
- The feasibility of establishing alternative staffing approaches to provide school divisions with additional instructional resources to address identified needs. This could include ratios based on positions per 1,000 students for assistant principals, school counselors, and library-media specialists that would reduce funding “cliffs.” It could also include assigning weights for students who may be at-risk and require additional support, including special education services, services to English language learners, and services to disadvantaged students.

- The feasibility of creating a special education incentive fund or other funding methodologies to mitigate the perverse incentive of reducing a school division's special education funding when it mainstreams students with disabilities into general education classrooms or uses Response to Intervention (RtI) and/or other instructional supports to reduce the number of students identified as needing special education services.
- The feasibility of updating technology staffing ratios, taking into consideration the increased role of technology in instruction, assessment, and operations since staffing standards were first established in the SOQ.
- The feasibility of updating career and technical education staffing ratios, taking into consideration the (i.) implementation of new curricular pathways that require high-tech equipment and specialized instruction and (ii.) anticipated increased enrollments in CTE courses given the newly created standard technical and advanced technical diplomas.

The Board of Education authorized a 30-day period of public comment. Twenty-five comments were received. Eighteen comments supported reduced caseloads for speech-language pathologists, and three commenters requested an extension of the public comment period to enable additional speech-language pathologists to send comments to the Board. Three comments addressed support positions. One comment was in support of including provisions to improve teacher quality in the SOQ. One comment was in support of reading specialists and the Early Intervention Reading Initiative. One comment was in support of the Virginia Preschool Initiative and the At-Risk Add-On initiative. One comment addressed the adequacy of the current SOQ funding and supported additional funding for school divisions.

It should be noted that the Board first recommended a reduction in speech-language pathologists' caseload to the 2004 General Assembly, and has continued to make that recommendation. The Board has also recommended requiring a full-time principal in every elementary school, increasing the number of full-time assistant principals, requiring reading specialists and mathematics specialists, requiring data coordinators, and increasing staffing for students with visual impairments. The total cost of these additional positions is estimated to be \$214.6 million for FY 2012, based on calculations made in July 2009. The cost to reduce the speech-language pathologists' caseloads from 68 to 60 is estimated to be \$5.2 million. However, funding has not been appropriated to support the cost of these additional positions.

As a first step toward implementing the 2009 recommendations, legislation is proposed in Attachment A which would do the following:

- Codify the Board of Education's recommendations that are included in the current Appropriation Act, which provides flexibility to school divisions to use existing funds for hiring reading specialists, mathematics specialists, data coordinators, and for the instruction of English language learners:
 1. Data Coordinators/Instructional Technology Resource Teachers – School divisions are permitted to use SOQ funds to employ: a) instructional technology resource teachers (required by the SOQ); or b) a data coordinator position; or c) a data coordinator/instructional resource teacher blended position;

2. Reading Specialists - School divisions may use the state Early Reading Intervention initiative funding provided from the Lottery Proceeds Fund to employ reading specialists (provided for in the SOQ) to provide the required reading intervention services;
 3. Mathematics Specialists - School divisions may use the state Standards of Learning Algebra Readiness initiative funding provided from the Lottery Proceeds Fund to employ mathematics teacher specialists (provided for in the SOQ) to provide the required mathematics intervention services; and
 4. Services to English Language Learners - School divisions may use funds from the SOQ Prevention, Intervention, and Remediation account to employ additional English Language Learner teachers to provide instruction to identified limited English proficiency students;
- Provide school divisions with flexibility to deploy assistant principals to the schools with the greatest need, so long as they employ a sufficient number of assistant principals divisionwide to meet the total number required in the current SOQ staffing requirement;
 - Define the categories of personnel who make up “support service positions;” and
 - Permit school divisions to use state and local funds for support services to provide additional instructional services.

Superintendent's Recommendation: The Superintendent of Public Instruction recommends that the Board of Education approve the reaffirmation of the 2009 SOQ recommendations and the proposed legislation.

Impact on Resources: The impact on resources is expected to be minimal.

Timetable for Further Review/Action: The Department of Education will prepare and submit a report to transmit the Board’s recommendations and the proposed legislation to the Governor and to the 2011 General Assembly.

Proposed Amendments to the Standards of Quality

§ 22.1-253.13:2. Standard 2. Instructional, administrative, and support personnel.

A. The Board shall establish requirements for the licensing of teachers, principals, superintendents, and other professional personnel.

B. School boards shall employ licensed instructional personnel qualified in the relevant subject areas.

C. Each school board shall assign licensed instructional personnel in a manner that produces divisionwide ratios of students in average daily membership to full-time equivalent teaching positions, excluding special education teachers, principals, assistant principals, counselors, and librarians, that are not greater than the following ratios: (i) 24 to one in kindergarten with no class being larger than 29 students; if the average daily membership in any kindergarten class exceeds 24 pupils, a full-time teacher's aide shall be assigned to the class; (ii) 24 to one in grades one, two, and three with no class being larger than 30 students; (iii) 25 to one in grades four through six with no class being larger than 35 students; and (iv) 24 to one in English classes in grades six through 12.

Within its regulations governing special education programs, the Board shall seek to set pupil/teacher ratios for pupils with mental retardation that do not exceed the pupil/teacher ratios for self-contained classes for pupils with specific learning disabilities.

Further, school boards shall assign instructional personnel in a manner that produces schoolwide ratios of students in average daily memberships to full-time equivalent teaching positions of 21 to one in middle schools and high schools. School divisions shall provide all middle and high school teachers with one planning period per day or the equivalent, unencumbered of any teaching or supervisory duties.

D. Each local school board shall employ with state and local basic, special education, gifted, and career and technical education funds a minimum number of licensed, full-time equivalent instructional personnel for each 1,000 students in average daily membership (ADM) as set forth in the appropriation act. Calculations of kindergarten positions shall be based on full-day kindergarten programs. Beginning with the March 31 report of average daily membership, those school divisions offering half-day kindergarten with pupil/teacher ratios that exceed 30 to one shall adjust their average daily membership for kindergarten to reflect 85 percent of the total kindergarten average daily memberships, as provided in the appropriation act.

E. In addition to the positions supported by basic aid and in support of regular school year programs of prevention, intervention, and remediation, state funding, pursuant to the appropriation act, shall be provided to fund certain full-time equivalent instructional positions for each 1,000 students in grades K through 12 who are identified as needing prevention, intervention, and remediation services. State funding for prevention, intervention, and remediation programs provided pursuant to this subsection and the appropriation act may be used to support programs for educationally at-risk students as identified by the local school boards.

To provide flexibility in the provision of mathematics intervention services, school divisions may use the Standards of Learning Algebra Readiness initiative funding and the required local matching funds to employ mathematics teacher specialists to provide the required mathematics intervention services. School divisions using the Standards of Learning Algebra Readiness initiative funding in this manner shall employ only instructional personnel licensed by the Board of Education.

F. In addition to the positions supported by basic aid and those in support of regular school year programs of prevention, intervention, and remediation, state funding, pursuant to the appropriation act, shall be provided to support 17 full-time equivalent instructional positions for each 1,000 students identified as having limited English proficiency.

To provide flexibility in the instruction of English Language Learners who have limited English proficiency and who are at risk of not meeting state accountability standards, school divisions may use state and local funds from the Standards of Quality Prevention, Intervention, and Remediation account to employ additional English Language Learner teachers to provide instruction to identified limited English proficiency students. Using these funds in this manner is intended to supplement the instructional services provided in this section. School divisions using the Standards of Quality Prevention, Intervention, and Remediation funds in this manner shall employ only instructional personnel licensed by the Board of Education.

G. In addition to the full-time equivalent positions required elsewhere in this section, each local school board shall employ the following reading specialists in elementary schools, one full-time in each elementary school at the discretion of the local school board.

To provide flexibility in the provision of reading intervention services, school divisions may use the state Early Reading Intervention initiative funding and the required local matching funds to employ reading specialists to provide the required reading intervention services. School divisions using the Early Reading Intervention initiative funds in this manner shall employ only instructional personnel licensed by the Board of Education.

H. Each local school board shall employ, at a minimum, the following full-time equivalent positions for any school that reports fall membership, according to the type of school and student enrollment:

1. Principals in elementary schools, one half-time to 299 students, one full-time at 300 students; principals in middle schools, one full-time, to be employed on a 12-month basis; principals in high schools, one full-time, to be employed on a 12-month basis;
2. Assistant principals in elementary schools, one half-time at 600 students, one full-time at 900 students; assistant principals in middle schools, one full-time for each 600 students; assistant principals in high schools, one full-time for each 600 students;

School divisions that employ a sufficient number of assistant principals to meet this staffing requirement may assign assistant principals to schools within the division according to the area of greatest need, regardless of whether such schools are elementary, middle, or secondary;

3. Librarians in elementary schools, one part-time to 299 students, one full-time at 300 students; librarians in middle schools, one-half time to 299 students, one full-time at 300 students, two full-time at 1,000 students; librarians in high schools, one half-time to 299 students, one full-time at 300 students, two full-time at 1,000 students;

4. Guidance counselors in elementary schools, one hour per day per 100 students, one full-time at 500 students, one hour per day additional time per 100 students or major fraction thereof; guidance counselors in middle schools, one period per 80 students, one full-time at 400 students, one additional period per 80 students or major fraction thereof; guidance counselors in high schools, one period per 70 students, one full-time at 350 students, one additional period per 70 students or major fraction thereof; and

~~5. Clerical personnel in elementary schools, part-time to 299 students, one full-time at 300 students; clerical personnel in middle schools, one full-time and one additional full-time for each 600 students beyond 200 students and one full-time for the library at 750 students; clerical personnel in high schools, one full-time and one additional full-time for each 600 students beyond 200 students and one full-time for the library at 750 students.~~

I. Local school boards shall employ five full-time equivalent positions per 1,000 students in grades kindergarten through five to serve as elementary resource teachers in art, music, and physical education.

J. Local school boards shall employ two full-time equivalent positions per 1,000 students in grades kindergarten through 12, one to provide technology support and one to serve as an instructional technology resource teacher.

To provide flexibility, school divisions may use the state and local funds for instructional technology resource teachers to employ a data coordinator position, an instructional technology resource teacher position, or a data coordinator/instructional resource teacher blended position. The data coordinator position is intended to serve as a resource to principals and classroom teachers in the area of data analysis and interpretation for instructional and school improvement purposes, as well as for overall data management and administration of state assessments. School divisions using these funds in this manner shall employ only instructional personnel licensed by the Board of Education.

K. Local school boards may employ additional positions that exceed these minimal staffing requirements. These additional positions may include, but are not limited to, those funded through the state's incentive and categorical programs as set forth in the appropriation act.

L. A combined school, such as kindergarten through 12, shall meet at all grade levels the staffing requirements for the highest grade level in that school; this requirement shall apply to all staff, except for guidance counselors, and shall be based on the school's total enrollment; guidance counselor staff requirements shall, however, be based on the enrollment at the various school organization levels, i.e., elementary, middle, or high school. The Board of Education may grant waivers from these staffing levels upon request from local school boards seeking to implement experimental or innovative programs that are not consistent with these staffing levels.

M. School boards shall, however, annually, on or before January 1, report to the public the actual pupil/teacher ratios in elementary school classrooms by school for the current school year. Such actual ratios shall include only the teachers who teach the grade and class on a full-time basis and shall exclude resource personnel. School boards shall report pupil/teacher ratios that include resource teachers in the same annual report. Any classes funded through the voluntary kindergarten through third grade class size reduction program shall be identified as such classes. Any classes having waivers to exceed the requirements of this subsection shall also be identified. Schools shall be identified; however, the data shall be compiled in a manner to ensure the confidentiality of all teacher and pupil identities.

N. Students enrolled in a public school on a less than full-time basis shall be counted in ADM in the relevant school division. Students who are either (i) enrolled in a nonpublic school or (ii) receiving home instruction pursuant to § [22.1-254.1](#), and who are enrolled in public school on a less than full-time basis in any mathematics, science, English, history, social science, career and technical education, fine arts, foreign language, or health education or physical education course shall be counted in the ADM in the relevant school division on a pro rata basis as provided in the appropriation act. Each such course enrollment by such students shall be counted as 0.25 in the ADM; however, no such nonpublic or home

school student shall be counted as more than one-half a student for purposes of such pro rata calculation. Such calculation shall not include enrollments of such students in any other public school courses.

O. Each local school board shall provide those support services that are necessary for the efficient and cost-effective operation and maintenance of its public schools.

For the purposes of this title, unless the context otherwise requires, "support ~~service services positions~~" shall include ~~services provided by the school board members; the superintendent; assistant superintendents; student services (including guidance counselors, social workers, and homebound, improvement, principal's office, and library-media positions); attendance and health positions; administrative, technical, and clerical positions; operation and maintenance positions; educational technology positions; school nurses; and pupil transportation positions~~ the following:

1. Executive policy and leadership positions, including school board members, superintendents, and assistant superintendents;

2. Fiscal and human resource positions, including fiscal and audit operations, human resources, and procurement;

3. Student support positions, including (i) social workers and social work administrative positions; (ii) guidance administrative positions not included in subdivision H 4; (iii) homebound administrative positions supporting instruction; (iv) attendance support positions related to truancy and drop-out prevention; and (v) health and behavioral positions, including school nurses and school psychologists;

4. Instructional personnel support, including professional development positions and library and media positions not included in subdivision H 3;

5. Technology professional positions not included in subsection J;

6. Operation and maintenance positions, including facilities; pupil transportation positions; operation and maintenance professional and service positions; and security service, trade, and laborer positions;

7. Technical and clerical positions for fiscal and human resources, student support, instructional personnel support, operation and maintenance, administration, and technology; and

8. School-based clerical personnel in elementary schools, part-time to 299 students, one full-time at 300 students; clerical personnel in middle schools, one full-time and one additional full-time for each 600 students beyond 200 students and one full-time for the library at 750 students; clerical personnel in high schools, one full-time and one additional full-time for each 600 students beyond 200 students and one full-time for the library at 750 students.

Pursuant to the appropriation act, support ~~Support~~ services shall be funded from basic school aid ~~on the basis of prevailing statewide costs pursuant to the appropriation act.~~

School divisions may use the state and local funds for support services to provide additional instructional services.

P. Notwithstanding the provisions of this section, when determining the assignment of instructional and other licensed personnel in subsections C through J, a local school board shall not be required to include full-time students of approved virtual school programs.

Public Comments on the Standards of Quality

From: Jim Regimbal
Sent: Tuesday, November 23, 2010 1:24 PM
To: Wescott, Anne (DOE)
Subject: teacher quality

Anne,

I thought a lot of good issues were covered in the “First Review to Reaffirm the 2009 Recommendations to the Standards of Quality” document attached for public comment. However, one critical item is missing – the issue of teacher quality. Many studies, including one I participated in 2004 with NCSL found that teacher quality is the single most important controllable factor in improving student outcomes. I believe there should at least be further study as to how we improve teacher quality in our classrooms. I know it is a complex issue, but one that we should constantly strive to improve – whether by increasing standards, improving working conditions, or pay.

James J. Regimbal Jr.
Fiscal Analytics, Ltd.
1108 E. Main St. Suite 1108
Richmond, VA 23219

From: jbm
Sent: Tuesday, November 30, 2010 2:57 PM
To: Wescott, Anne (DOE)
Cc: State NAACP; Rev. Vines
Subject: Public Comments on Quality of Standards

Ms. Wescott,

There are two areas of interest at this time:

* Will each school division be allowed to develop the "***certain incentive***" programs according to the needs of the school population ? If so, will these programs be funded by state or local sources?

* Will new guidelines be developed (changed) as far as determining ratios.....especially when support personnel are included in establishing a balance ?

Virginia State Conference NAACP Education Committee
Mrs. Janette Boyd Martin, Chair

From: Dawnita Truitt-Calderone
Sent: Tuesday, November 30, 2010 3:22 PM
To: Wescott, Anne (DOE)
Subject: Speech/Language services in Public Schools.

Dear Ms. Wescott,

I understand that a request has been made for comments on the topic of Speech Pathologists' current caseloads in Virginia.

My comment:

Students who have Speech/Language Developmental Delays and/or Disorders are given the opportunity for interventions in schools because of the dramatic impact such impairments have on their lives. Academic impact and social-personal impact is sometimes so pervasive as to have secondary impact on a child's self-esteem. Behavioral issues arising out of inability to communicate and interact are not uncommon.

Currently, Speech/Language Impaired children are by necessity getting their "services" in groups of 4 or 5 (or more) at a time due to the high caseload cap set at 68 students per therapist.

Intervention strategies and therapy utilized for children in large groups such as this are notably less effective. An analogy, if you can imagine - it is like receiving a regular non-therapeutic dosage of needed medication. Remediation of Speech & Language "Developmental Delays" are slowed, giving more time for deeper academic impact. Disordered language and speech skills are even more impacted because of the nature of their issues from the outset. Finally, children with Cerebral Palsy, Apraxia, Stuttering and other severe comprehensive disorders are the most needy and even these children are having diminished quality of service because they are seen in large groups and in the classroom. (In the past, our caseloads had a cap of no more than 58 to 60 students per therapist ~ children were on average in groups of 2 to 3 seen twice weekly/30 minutes per session. In cases of great severity, children are seen up to 5 times weekly for 30 minute sessions.)

Thank you for your consideration in this matter impacting our students with Speech-Language Impairment!

Sincerely,

D. Truitt-Calderone, MS CCC-SLP
Speech Language Pathologist
Mt. View Elementary School

From: Troilen Seward
Sent: Monday, December 06, 2010 10:14 AM
To: Wescott, Anne (DOE)
Subject: Response to SOQ Review

Dear Ms. Saslaw and Members fo the Virginia Board of Education:

The Virginia State Reading Association (VSRA) strongly supports the Board of Education's proposal to reaffirm its 2009 proposed policy directions. We are, of course, particularly supportive of including the EIRI proposal in the SOQ. We see this, however, as only an interim step in providing reading specialists in the schools of the Commonwealth. Our ultimate goal is to have reading specialists in a 1:1000 ratio included in the Standards of Quality.

We are indeed aware of the difficult economic times and understand the necessity of the interim measure. We do indeed express our sincere appreciation to you for your efforts and persistence in trying to improve reading support for the students in this Commonwealth. We can only hope for funding in the future!

Sincerely,
Troilen G. Seward
Legislative Liaison, VSRA

From: Patricia Shaffer-Gottschalk
Sent: Tuesday, December 14, 2010 11:55 AM
To: Wescott, Anne (DOE)
Subject: public comment on SOQ

I am writing with both questions and concerns regarding Board of Education Agenda Item G, dated November 18, 2010, inviting public comment. I refer specifically to "Issues for Further Study", bullet 2, where it states "... feasibility of establishing alternative staffing approaches to provide school divisions with additional instructional resources to address identified needs. This could include ratios based on positions per 1,000 students for assistant principals, school counselors, and library-media specialists that would reduce funding cliffs." The meaning and ramifications of this is very unclear. Would you please explain its meaning?

Furthermore, our school division superintendent commented at the last school board meeting that the DOE was considering reclassifying library media specialist positions to **administrative**, rather than **instructional**. While the media specialist certainly has many administrative functions in managing a school media center, the vast majority of my time is spent in instruction. I teach 35 classes weekly, each 45-minutes in length. The requirement of holding a valid teacher license with add-on endorsements in library media witness to the fact that the DOE has traditionally considered the library media as primarily an educator. This is correct and accurate. To consider the library media specialist as administrator is inaccurate.

I thank you for your time and consideration.

Patricia Shaffer-Gottschalk
Tussing Library Media Specialist
5501 Conduit Road
Colonial Heights, VA 23834

From: Mark Webster
Sent: Tuesday, December 14, 2010 12:02 PM
To: Wescott, Anne (DOE)
Subject: Seeking Public Comment: Standards of Quality

Anne Wescott,

I wanted to offer public comment pertaining to the SOQ. I am probably worried about nothing, but I noticed on the Board of Education agenda for November 18 it stated there was consideration of the "feasibility of establishing alternative staffing approaches to provide school divisions with additional instructional resources to address identified needs. This could include ratios based on positions per 1,000 students for assistant principals, school counselors, and library-media specialists. . ."

I wasn't sure if the intent was to increase staffing for larger schools, or rather have smaller schools (with student numbers less than 100) share these professionals? Hopefully it is the former. However, I wanted to offer public comment on the matter, because I was reading this in the context of the current discussion ("65% rule") surrounding the state reclassifying library media positions as "administrative" rather than "instructional." The library media positions are highly instructional, and should be recognized as instructional because of their integral role within the educational mission of each school, and the powerful role these positions play for information literacy, reading, instructional media and technology, and research skills. Also, practically speaking I would argue it is essential that each school have a dedicated media specialist, regardless of the size of the school or its population.

Thank you for allowing public comment on the matter, it is appreciated!

Sincerely yours,

Mark Webster, Director of Technology and Learning
Colonial Heights Public Schools

From: Torrijos
Sent: Wednesday, December 22, 2010 7:09 PM
To: Wescott, Anne (DOE)
Subject: Speech-Language Pathology caseloads

Ms. Wescott,

I am writing to convey the need for SLP's to have a caseload maximum in the state of VA. Many of us working in the schools have over 65 students, ranging from the most severe 2 year olds with multiple impairments to 21 year old students struggling to transition out of the public school system. Many of these students have very specific disorders, requiring specialized services in individual therapy. After being a Speech-Language Pathologist for over 13 years, I have come to realize that many students on the public school clinician's caseload make very slow progress. It is my sincerest belief that slow progress is largely due to ineffective therapy, conducted in groups of 3 students or more. I work in a relatively small district where one of our clinicians has a caseload of 83! The administration refuses to hire more staff, essentially telling each of us that there is nothing we can do. Unfortunately, I don't predict much progress for many of the students on our caseloads simply due to the large numbers served in groups.

I have often wondered if Speech-Language Pathologists actually belong in the school setting. I entered this profession to help individuals communicate effectively. When I am expected to serve high numbers of students, I feel that the quality of my therapy suffers, and my students make less progress. It is then my responsibility to explain the lack of progress to the parents, without expressing the true reason. No clinician would be allowed to actually say, "I'm sorry Mrs. Jones. Bobby didn't make a lot of progress this year in speech and will have to work on the same goals next year. You see, I have so many kids on my caseload that I had to see Bobby in a group with 4 other kids. Sometimes, we weren't able to actually address his speech goals because one of the other students had a lot of behavior issues, and another student stuttered, requiring me to do a lot of instruction with him. Hopefully, we'll be able to work a little more on his goals next year. What? He's being retained this year? That's a shame. I hope next year will be better for everyone."

There's a reason so many SLP's are leaving the school setting. We need support! We need it from our administration, our district, and our state Department of Education. We need caseload maximums that are reasonable (my suggestion would be 60), and we need the new SLP guidelines! SLP's are typically a forgotten group in the school setting. Although we are small, we are no less important. I fully expect my state DOE to support us as we try to help so many kids!

Thank you for your efforts,
Tanya Torrijos
Speech-Language Pathologist
Powhatan County Public Schools

From: Martha Ruelle
Sent: Wednesday, December 22, 2010 7:42 PM
To: Wescott, Anne (DOE)
Subject: SLP caseload

Dear Ms. Wescott

I hope the BOE understands that the 65:1 Speech Language Pathologist caseload in public schools negatively impacts the quality of services available. It means that students with communication disorders in public schools have to be seen in larger groups than if the caseloads were smaller. That means the students' problems are not resolved as quickly. It also means that it is difficult for school divisions to attract and retain the best qualified SLPs when they have to cope with such a large caseload. The caseload numbers must be capped at a lower number.

Martha Ruelle, M.S. CCC-SLP
Speech Language Pathologist
Fairfax County Public Schools

From: Suealexandria
Sent: Thursday, December 23, 2010 12:29 AM
To: Wescott, Anne (DOE)
Subject: Caseload

I am a very lucky SLP. I work in a non-public facility for emotionally disturbed children. I have been there for 10 years. My case load is only 12. The first 8 years I was full-time and had a caseload of 25. Two years ago I became part-time. All of our therapy is one-on-one, never group. I am very happy with my job, and the low caseload is one of the reasons. I'm able to handle the therapy, meetings, and paperwork comfortably. I wish other SLP's could experience, at least once, a low and reasonable caseload, as it gives one a sense of completeness and thoroughness.

December 22, 2010

Dear Ms. Wescott and the Virginia Board of Education:

I am glad to hear that the Board of Education is reconsidering the maximum caseload size for speech-language pathologists working in the public schools in the state of Virginia. I have worked as an SLP for 5 and a half years in Virginia public schools, and I believe my students' progress is greatly dependent on my caseload size at any given time. As a caseload approaches 55-65, it becomes nearly impossible to give students' the individual and small group time where their progress is maximized. Instead, it is necessary to work with students in large groups and it becomes a challenge to tackle the goals of all the students in a group (which may range from a student who stutters, a student working on using correct speech sounds, to a student working on increasing vocabulary skills).

I can also say from personal experience that a higher caseload correlates with lower job satisfaction and higher stress level. During the two years that my caseload was between 60-65 students, I consistently worked 60-70 hours per week in order to ensure that IEPs and eligibility paperwork were completed and that my students continued to receive high quality therapy services. If the state of Virginia hopes to retain qualified speech-language pathologists, it is important to set a maximum caseload number that is reasonable. I believe a reasonable caseload number is between 40-50.

Thank you for considering this issue.

Sincerely,

Heather Lantz, MA, CCC-SLP

From: Amie Teague, MA/CCC-SLP
Sent: Thursday, December 23, 2010 6:49 AM
To: Wescott, Anne (DOE)
Subject: Caseload maximums for SLPs in Virginia

Dear Ms. Wescott:

I am writing on behalf of the men and women who serve our children as speech/language pathologists in the school systems. I am an administrator of a private practice speech therapy clinic that serves 3-5 counties and cities in the state of Virginia. I have also worked in the schools myself in the past. As an administrator, I see my employees struggle on a daily basis to provide top quality therapy while trying to juggle the demands of planning, documentation, IEP paperwork, referral paperwork, and with little time to be able to complete all of it as caseloads increase and paperwork demands increase as well.

I strongly believe that if caseloads were smaller, the speech therapist could provide higher quality therapy which would reduce the length of time a child would need to be in therapy and therefore actually increase academic success at a faster rate, improve SOL scores for language impaired children at a faster rate, and allow the time needed for the paperwork required to serve a child. The extra time for the paperwork would improve the quality of the paperwork and would be less costly to the school district correcting items while decreasing deficiencies on state audits.

Thank you in advance for any consideration in lowering the caseload maximum for speech/language pathologists to 50 for those serving in the state of Virginia.

I will be happy to provide any additional information upon request.

Merry Christmas,

Amie Teague, MA/CCC-SLP
Executive Director, Speech/Language Pathologist
Piedmont Regional Feeding & Oral-Motor Clinic

From: Vann, C E.
Sent: Thursday, December 23, 2010 8:30 AM
To: Wescott, Anne (DOE)
Subject: School Speech Language Pathologist Caseloads

Dear Ms. Westcott,

I am writing to you on behalf of my Speech-Language Pathologist colleagues who work in the public school system, and from my own experience when I started in the profession more than 25 years ago. I am currently the Director of Rehabilitation Services at a children's hospital, where we employ 57 Speech-Language Pathologists, who all see their children on an individual basis for one-hour sessions. A large number of our speech therapy patients receive services in the public school system as well, but come to us because the parents think that their child isn't getting what they need from the school system therapist – not because of the therapists' skills, but due to the fact that their child may be in a group setting with 2 or more students of varying diagnoses/goals for therapy, and sessions that last only 20-30 minutes. Studies show that increased intensity of services makes a difference in the amount of progress that children make in the therapy setting, and aides in faster remediation of disorders/delays. I am encouraged that the number of Speech-Language Pathologists in the public school system has increased over the years, however, this increase has not kept up with the great demand for services. I encourage you to look at the caseloads of our Speech-Language Pathologists, and make changes that will benefit the children in our community.

Respectfully,
C. Edward Vann

*C. Edward Vann, M.S., CCC-SLP
Director of Rehabilitation Services
Children's Hospital of The King's Daughters
601 Children's Lane
Norfolk, Virginia 23507*



From: bcumberb
Sent: Thursday, December 23, 2010 4:53 PM
To: Wescott, Anne (DOE)
Subject: Caseload maximums

Greeting Ms. Wescott,

I am currently a student who is about to complete my last semester for my graduate program. I just completed an extenship in a Norfolk Public School and must admit that the prospect of being responsible for providing speech services to 65 clients in addition to aligning their lesson plans to the SOL, completing Medicare paperwork, being case managers for their IEP as well as all the duties that the school administrator has me looking at a position in the school as a last resort. Having been a teacher for 7 years the last thing I expected was that being a speech therapist in the school setting was just as if not more overwhelming than being a classroom teacher. I think that rather than simply looking at number of students on case loads the trend should be more like in the medical field where attention is paid to the number of minutes and type of client on the SLP's case load.

Thank you for your attention,
Baseemah M. Cumberbatch-Smith,
B.S. Elementary Education
Graduate Student, Communicative Sciences & Disorders, Hampton University

From: Reed, Vicki Anne
Sent: Thursday, December 23, 2010 8:32 PM
To: Wescott, Anne (DOE)
Subject:

Anne,

I have just been made aware through the Speech, Language, Hearing Association of Virginia (SHAV) that the VA Board of Education is accepting comments regarding caseload maximums for SLPs until December 28th. Most school-based SLPs are likely away for their schools for the school holiday break and would be unlikely to be able to comment. Since these are the most directly affected school professionals with regard to this matter, I'd like to request an extension of the date for receiving comments until the schools return from their break.

Thank you for considering an extension of comment time.

***Vicki A. Reed, Ed.D.
Professor, Department of Communication Sciences and Disorders
Director, Child and Adolescent Language Laboratory (CALL)
James Madison University
701 Carrier Drive
MSC 4304
Room HHS 1139
Harrisonburg, VA 22807***

From: Katie Pyne
Sent: Friday, December 24, 2010 2:23 PM
To: Wescott, Anne (DOE)
Subject: caseload comments extension please!

Hi Anne:

I just received word of the need for comments on caseload size. You may not realize that most SLP's who work in schools are on break and may not have the opportunity to comment until the first of the year. Is there any way you could extend the feedback time to mid-January, so there would be more opportunity for school speech folks to give their input??

Thank-you so much. Happy holidays!

--

Katie Pyne, MA, CCC/SLP
Speech/Language Specialist
Read Mountain Middle School
Lord Botetourt High School

From: Darlene Sommer
Sent: Monday, December 27, 2010 1:29 PM
To: Wescott, Anne (DOE)
Subject: Caseloads and service delivery

So glad that Virginia DOE is open to suggestions. Chesapeake Public Schools' special ed. program underwent an audit by DOE last year. As a result, we were told that we will have to write our number of therapy sessions "per month" as opposed to number of sessions "per semester" as is our current departmental standard. It would be impossible to determine the number of sessions per month as each month in the school calendar varies greatly. Our SLPs have found that the flexibility of "sessions per semester" assists us in working with students' rigorous testing schedules while consistently providing speech-language therapy services.

With regard to caseload size, it is impossible to provide adequate speech-language therapy services to our students while managing a caseload of more than 55 students (particularly if the SLP serves more than one school.)

Thank you for the opportunity to weigh in on this subject.

Sincerely,

Darlene C. Sommer, MS, CCC-SLP
Speech-Language Pathologist
Chesapeake Public Schools

From: ntseward

Sent: Monday, December 27, 2010 10:11 PM

To: Wescott, Anne (DOE)

Subject: caseload size

I have been a speech pathologist in the public schools for 15 years and am having increasing difficulty doing my job effectively due to the caseload size and the accompanying mountains of paperwork. I am struggling to perform all my various job functions in a professional manner while trying to schedule and deliver therapy to a 65+ caseload of 2 to 22 year olds in multiple schools with disabilities ranging from autism to cognitive delays to fluency. While I am thankful to even have a job in this current economic climate, I had much better job satisfaction and was a more effective SLP when the caseload was a more manageable size of 55.

Thank you for your time. Nancy T Seward MS/CCC

12-28-2010

Board of Education:

It is sad that with advances in so many areas in our field, after 33 years as a public school speech/language pathologist, caseload numbers have only decreased from a maximum of 75 in 1978 to 65 in 2010.

Caseload numbers that are too high reduce the quality of services that can be provided. Although services are free, lip service is paid to the provision of "appropriate" services. Regardless of the severity of a student's impairment, he often receives the standard, one size fits all, twice weekly services in a group of 2 to 4 if speech impaired, or a group of up to 6 if language impaired. High caseload numbers make it difficult or impossible for individual daily planning, coordination of therapy efforts with parents, and preparation of student homework.

If caseload numbers were reasonable, time to see and provide truly appropriate services would not be as severely difficult as it is now and always has been. High caseload numbers with the insurmountable paperwork and number of procedures and more recently Medicaid billing have made the job of the public school speech/language pathologist a mockery of the profession, and an exercise in frustration and futility as we struggle to make progress in the limited time we have with our students.

Below is a letter in part that I submitted to our director of special education, 05-05-2010, in compliance to a request to respond to why I was not billing every child on my caseload who qualified for Medicaid.

The answer is "TIME".

As speech pathologists we have a long list of duties that we are to perform over the course of each day and year; however, the schedules we are pressured to maintain usually only allow the time needed to provide the (minimal) therapy required to remain in compliance with our students' IEPs. We understand that all but a fraction of the day (usually 30-40 minutes) must be used to provide therapy.

This would not be as problematic if it were not for the fact that we are also trained diagnosticians expected to conduct assessments and to perform the follow-up duties associated with testing.

We are **not** allowed to schedule regular blocks of assessment time during the school day to conduct assessments on referrals, reevaluations, or triennials. No time can be specifically scheduled for screening kindergarteners, incoming transfers throughout the year, or preschoolers at the administration building in the spring. Neither are we allowed scheduled time during the day to score assessments, time to write assessment reports, time to send invitations or communicate with parents, time to write IEPs, or hold eligibility meetings and IEP meetings. No time is allowed to do progress reports.

Because the regular classroom teacher has a 30-40 minute planning period, we have been allowed this same amount of time for our daily “planning”. The catch is, being that we have no other time in our schedules to conduct the aforementioned duties it is understood that this “planning time” is when we should be conducting all the requirements that do not fall under the “therapy” heading. As for planning, any planning and preparation of materials for the individualized instruction of the 50-65 students we see must be done after the school day.

It must also be noted that there is no time allowed during the school day to perform Medicaid activities. Writing POCs, preparing treatment plans, and maintaining soap notes, must be done after school or during the students’ therapy sessions.

Personally, I find it appropriate that our fellow coworkers, the psychologists and educational diagnosticians are allowed time during the regular school day to conduct their assessments, score their assessments, write their reports, and even hold eligibility meetings. I find it discriminatory that I am not allowed at least some time during my school day to conduct the exact same activities they conduct and are allowed ample time.

I get my children seen and I do a good job with them. If there are administrative, teacher, or parent complaints I am unaware of them. I already work many hours after school and at home to get accomplished what I am doing now. I have no more hours or weekends to give. More Medicaid means a reduction in the already strained quality of services that our children now receive. It might even demand noncompliance with our students’ IEPs. I already have enough required responsibilities that threaten noncompliance.

In past years, as SLPs, we were never afforded enough time during the school day to get all our responsibilities such as test scoring, report writing, IEP writing, and other clerical duties completed, but we were minimally allowed half a day weekly to do screenings and assessments. In more recent years, we have been robbed of our limited, but precious assessment time and we have been saddled with additional clerical work with more forms to fill out and more procedures to perform, and Medicaid. We have, set before us, an impossible task for even the most conscientious professional.

Lynda C. Adkins, M.S. CCC
Speech/Language Pathologist

From: Wanda
Sent: Tuesday, December 28, 2010 11:58 AM
To: Wescott, Anne (DOE)
Subject: Caseloads

As a school based SLP with a large caseload I am not as effective or efficient as I could be with a smaller caseload. Having to see 70 students (and growing) plus IEPs, Medicaid notes, meetings, and travel between schools is overwhelming.

It would be helpful to have a smaller caseload and have SLPs included in the standards of quality.

Wanda Pascucci, MA, CCC-SLP
Franklin, VA

From: Cornelia Long
Sent: Tuesday, December 28, 2010 9:04 PM
To: Wescott, Anne (DOE)
Subject: Caseload Maximums

Hi,

Thanks for accepting comments on the issue of Standards o Quality and caseload maximums for speech-language pathologists in the public school system. First, the national caseload average is 50 according to the American Speech-Language Hearing Association.org (2010). The maximum speech caseload in VA is 68, a difference of 18. I am asking that the DOE please lower the maximum to 55. There are several speech pathologists who work with 68+ children and with that many children and the demands of paperwork, and triennial meetings plus IEP meetings can leave a speech pathologists feeling overworked and burned out. A more reasonable caseload of 55 would ensure that the speech pathologists offers qualitative therapy with less paperwork pressure thereby ensuring more students are dismissed from speech therapy earlier. Please keep in mind that the attrition rate for speech pathologists is relatively high for the state of VA and that is due, in part, to paperwork burdens and the size of expanding caseloads.

It is also my request to have speech pathologists back in the Standards of Quality. Speech pathologists are highly specialized professionals. Most practicing speech pathologists are certified by the American Speech-Language and Hearing Association and are licensed by the Board of Examiner's.

Thank you for perusing this request.

Cornelia H Long, M.S. CCC-SLP
VP Govt. Affairs

From: Cornelia Long
Sent: Tuesday, December 28, 2010 9:09 PM
To: Wescott, Anne (DOE)
Subject: Extension for Comments Caseload Maximums/Standards of Quality

Hi Mrs. Wescott,

On behalf of the speech pathologists in the state of VA, I respectfully request an extension to the open comments period to the VA DOE. Two consecutive holidays have occurred during this time and many SLPs may not be privy to this comment period due to holiday breaks.

Sincerely,

Cornelia H. Long, M.S. CCC-SLP
Speech Pathologist
VP Governmental Affairs
Speech-Language Hearing Association of VA

From: DeAnne Lindsey
Sent: Thursday, December 30, 2010 10:01 AM
To: Wescott, Anne (DOE)
Subject: Caseload Reduction

Good morning,

Thank you for the opportunity to express my continued concerns about school-based caseloads. Several years ago I was involved in SHAV's activities to reduce caseloads from 68 to 60. I was so pleased that we were finally able to influence this change and so disappointed that even this small change was never funded by our legislature.

I have been a practicing SLP for 35+ years, in both private and school settings. I have practiced as a speech pathologist, a special education administrator, and now again as an SLP and department chair. I began those many years ago just before the passage of PL 94-142 when the legal requirements were minimal. While I don't regret the degree of stringency that this law and those that followed required, they impose other constraints that have become overwhelming.

The problem is not just the pure numbers of students, although there is an abundance of research regarding that. The problem is not in the number of more severely involved and medically fragile students - and those are tremendously increased. The problem is not just that parents are becoming more savvy about the types of services they want and litigious to accomplish that.

The problems for school-based SLPs come from the additional engagements in school affairs that are for the benefit of students but take an enormous amount of time and therefore impact the amount of time available for seeing students. Participation in such activities include Medicaid billing (and the accompanying extra paper work), frequent revisions of IEPs, IEP meetings that can take literally hours, preparation in due process proceedings and the like. But most importantly, SLPs are an integral part of schools' child study and eligibility processes and RtI processing. Frequently SLPs are asked to chair these committees because of their involvement with the school populations and because of their understanding of the educational process. In order to accommodate participation in these committees, either caseloads are reduced (causing an overload on other therapists) or students must be grouped into overly large groups.

As a result of Response to Intervention and other child monitoring processes, the SLP's time is often spent not only in direct services to students with an IEP. An enormous amount of time is spent in observing students in classrooms, data collection, consultation with teachers and parents regarding recommendations for students, and suggestions for modifications in teacher presentations and classroom engineering. Additional time may be spent in programming and implementation of assistive technology devices into daily activities.

For all of these reasons and many more it is imperative that the DOE recommend to the legislature, and the legislature to respond with funding to allow school-based

caseloads to be reduced. Without this flexibility SLPs cannot properly serve their students by either providing the excellent therapies they were trained to do or by facilitating improvements with via their other school responsibilities.

Thank you for soliciting input once more. I hope that we will be successful in affecting a change.

Sincerely,
DeAnne Lindsey, CCC/SLP
Speech Language Pathologist
Chesapeake Public Schools

Ms. Wescott,

I understand that you are accepting letters regarding caseload sizes for Speech-Language Pathologists in the public schools. I am currently working in the public school sector as a Speech-Language Pathologist in Virginia. I am writing in support for regulations limiting caseload size and workload size. As an SLP with a strong work ethic, dedication to the service we provide, a strong belief that we make a difference in the lives of our students and concern for students, I feel this is an area of strong need. I also genuinely feel that it is a relevant topic as a person and family member.

I have worked in varied settings across the years, with approximately 17+ years in public schools from 1975 through 2010 served in three states [New York, Virginia and Kentucky], twelve districts and almost thirty schools. There have been many changes across the years in all settings per my experience; which gives me unique perspective. Many changes have been needed and have bettered the provision of speech-language therapy services. However, other changes have rendered us with less time to do that which most impacts our students--time spent in direct service. No matter how we dress up this need and justify that we are working better and working smarter, most of us who do the work every day know that there is no real substitute for direct service time. I believe that one of the reasons our caseload numbers persist now at middle school and high school ages reflects directly on declining direct service at the preschool and elementary ages. We are discharging fewer students; and continue to support more students through their public school years. Although there are other factors that impact discharge rates, time to instill the basics in the early years remains a critical need. We cannot spend the necessary time with high caseloads. Experience tells me that greater time spent in the early years will provide our students with the skills to go forward in their secondary years without continued speech-language support needed. Until we learn to manufacture time, there is no alternative to moderating caseload demands while covering today's expectations.

All caseloads are not equal; but are being treated as such in today's public school arena. In the 70's, we had higher caseloads; but fewer students with high level disabilities, the option to decide and provide what our students appeared to need, minimal overall paperwork and began writing annual IEP's that reflected the student's needs. In the 80's and early 90's, the SLP who had students with higher disabilities had lower caseloads. In the last dozen years, we are all impacted by declining budget factors, the ravages of litigation and the blitz of accountability paperwork. We all understand that, not only do many of our students have higher level communication need, they also have more demanding parents and frequently include greater daily paperwork. I have been required to report daily, weekly and monthly to some parents; and to provide routine work samples that are dramatically beyond the expectation outlined in our job descriptions and provided to students in general. Added expectations increase the time demand; which decreases the time available for other students and/or demands that the SLP work longer overtime hours. Students with greater disabilities also have a usual tendency to have higher demands in meeting times; with greater team and parent interaction to plan; and multiple meetings for annual IEP's that take two to sixteen hours to complete in lieu of the usual 45 to 60 minute meeting. Again, this diminishes time available for other students on our caseloads. We also face increasing time demands in completing Medicaid paperwork, which does and should require [per confidentiality] separate paperwork. With the current economic condition in our country, many of us have a steadily increasing number of students who qualify

for Medicaid reimbursement. Our primary responsibility is to provide the mandated IEP time to our students. Medicaid paperwork is being primarily completed after contract hours. We are not reimbursed for this; but time is the more critical issue. Caseload expectations need to accommodate time factors. Until we learn to manufacture time, there is no alternative to moderating caseload demands while covering today's expectations.

Speech-Language Pathologists as human beings and members of families is a highly pertinent reason to consider caseload management control. We are all professionals. We cannot exist in this profession unless we are dedicated, caring, flexible, smart, strong, creative and giving. No one talks about the human toll, because it sounds less professional. But this is a topic worthy of discussion and consideration. Throughout my career, I have been dedicated and given 125% or more. However, I see the change, and it should be highlighted. The time commitment has been altered across the years. I used to spend hours at home creating materials for my students. We all understand that the majority of materials used by Speech-Language Pathologists in the public schools are hand-made. Although we are smarter about sharing now, this is still true. In today's world, we still manufacture therapy materials routinely. However, our after-contract hours are also spent in writing draft IEP pages, scoring assessments; working after school when school protocol programs dictate; preparing varied report forms, making calls and completing accountability paperwork. The dictates for accountability, recording time, recording all contacts, keeping data and keeping notes is increasingly demanding – and requires additional time during the work day and after hours. I have always taken data; but ironically, the increase in time-demand responsibilities is actually counterproductive in being able to take relevant data. Early on in my career, I spent 8 to intermittently 9 hours per day at work with report-writing time allowed; and likely 5 to 10 hours at home creating materials. My usual day now begins at 7:00 a.m. and is more often 10 to 12 hours; and I usually work 4 to 8 hours on Sundays. End-of-month and grading period reporting require additional marathon hours. In a previous school assignment [2005 to 2007] that included elementary and preschool students, I often worked 20-30 hours per week beyond contract hours routinely. I can email numerous SLP coworkers at 6:00 or 7:00 p.m. who are still at their desks or working from home. Family time is impacted by the high time demand at work – with a direct relationship to high caseloads. When time during contract hours are spent with students and in meetings, all else must be completed after hours. My children are grown. I cannot imagine having young children at home now and being a public school SLP; with the need to pick up children on time or pay overtime for childcare. I do have high parent-care issues at this time; which is just as relevant. When I leave work on time now, it is to care for parents. If you do the math, I may get home at 7:30 and try to be in bed by 9:00. This does not work, so the impact is inadequate sleep hours. When we are at work for lengthy days, we are not at home caring for our own families. We are not protecting our own health with exercise, relaxation and rest. When we are assigned reasonable caseloads, we are better able to maintain healthy family, church and community involvement. Having a well-rounded life makes for a better professional. Until we learn to manufacture time for work at work and allow for a healthy personal life, there is no alternative to moderating caseload demands while covering today's expectations.

In summary, consideration for caseload control is a relevant, necessary and critical factor in maintaining a healthy profession. We are enduring and meeting an increasing demand for paperwork and accountability that impacts our working day. We are facing a crisis in meeting the needs of students in literacy skill that can be best met with direct student service at a time

when direct student service is declining. In addition, higher work demands are increasingly impacting our ability to maintain personal and family health. I have always loved this profession, and I still have such an enthusiasm for what we do! However, when I am asked now to support students considering the profession, I have to stop and think – “*should I tell them?*”

Sincerely,
Karen Jackson, CCC-SLP
12/23/10



Chesapeake Public Schools

Office of the Superintendent

Post Office Box 16496
Chesapeake, Virginia 23328

December 21, 2010

Mrs. Anne D. Wescott
Assistant Superintendent
Division of Policy and Communication
Virginia Department of Education
P. O. Box 2120
Richmond, Virginia 23218

Dear Mrs. Wescott:

In response to Superintendent's Memo # 295-10, I am providing the following comments regarding revisions to the Standards of Quality.

The Constitution of Virginia gives the General Assembly the responsibility of providing for a free system of public elementary and secondary schools and further states that they should "seek to ensure that an educational program of high quality is established and continually maintained." It is also the responsibility of the legislative body to determine the cost of the high quality program and the method of apportioning those costs between the Commonwealth and the local government units.

Prior to the Joint Legislative And Review Commission (a research arm of the General Assembly) study conducted in the mid-1980's, the General Assembly was criticized for not "fully funding" the Standards of Quality. They authorized the JLARC study to eliminate that criticism. The result did provide a method for calculating the cost of the Standards and a biennial recalculation of costs based on the complicated methodology, but most importantly, it gave legislators the opportunity to say that the Standards of Quality were fully funded. Still left unanswered were questions about the adequacy of the Standards.

Faced with that inadequacy, another JLARC study in 2000 addressed some key questions such as the ways in which localities were exceeding the SOQ mandated funding levels. That study not only pointed out how much more localities were spending above the required match, but it also showed a number of "errors and omissions" that had placed additional costs on localities since the implementation of the previous JLARC study. A list of proposed changes was provided and some of those recommendations were implemented, benefiting the local school divisions.

We Promote Excellence

*The Chesapeake Public School System is an equal educational opportunity school system.
The School Board of the City of Chesapeake also adheres to the principles of equal opportunity in employment and, therefore,
prohibits discrimination in terms and conditions of employment on the basis of race, sex, national origin, color, religion, age, or disability.*

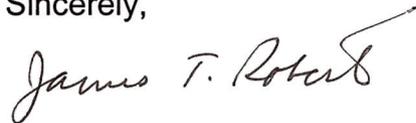
Recent adjustments to the state funding formula, however, have resulted in significant losses for local school divisions. The reductions were carefully made, similar to the work of a skilled surgeon who uses his knowledge of medicine to perform delicate operations. Because of the economic crisis and the need to match state revenue to state expenditures, someone took the opportunity to dismantle the previously adopted methodology for funding schools. In addition to changing the methodology, funds such as the Lottery and the Stimulus dollars were shifted to cover costs previously provided through state general fund revenues, thereby reducing dollars going to school divisions. Almost as disturbing as the loss of funds is the change of attitude in Richmond. Funding for K-12 education was once considered a priority and was not adversely affected in balancing the state budget. Now, just the opposite seems to be the case. In fact, it almost seems that education is the prime target.

Most recently, the proposed budget released by the Governor provides further cuts to the educational program ("high quality" no longer can be used as a modifier), and the one attraction that has kept dedicated employees in public service, the Virginia Retirement System, is being used to provide localities the "opportunity" to save money. This again proves that political leaders do not appear to recognize the value of a strong K-12 educational program.

The Policy Directive proposed by the State Board advocates "...against permanent structural changes to the Standards of Quality that result in decreased funding for K-12 public education." Chesapeake Public Schools certainly supports that policy. All other policy directives are also supported by our system, but it would seem that a reversal of the recent adjustments to the Standards of Quality would be a more appropriate direction for the State Board to propose.

Thank you for the opportunity to provide comments on this important matter.

Sincerely,

A handwritten signature in black ink that reads "James T. Roberts". The signature is written in a cursive style with a prominent flourish at the end of the name.

James T. Roberts, Ph.D.
Superintendent

JUSTCHILDREN

A Program of the

LEGAL AID JUSTICE CENTER

Angela A. Ciolfi
Legal Director
angela@justice4all.org

December 28, 2010

Ms. Anne Wescott
Assistant Superintendent for Policy and Communications
Virginia Department of Education
P. O. Box 2120
Richmond, VA 23218-2120
Anne.Wescott@doe.virginia.gov
Fax: 804/ 225-2524

RE: Public Comment on the Standards of Quality

Dear Anne:

Thank you for the opportunity to submit public comment on this year's proposed revisions to the Standards of Quality. We support the policy directions outlined at November's Board meeting.

In particular, we wholeheartedly support the Board's effort to look to existing programs funded outside of the Standards of Quality and recognize those practices that may be prevailing across the Commonwealth and should be incorporated into the Standards of Quality. In addition to the Early Intervention Reading Initiative and the Algebra Readiness program, we suggest that the At-Risk Add-On and the Virginia Preschool Initiative also be considered for inclusion within the Standards of Quality.

The General Assembly has found that poor children are more at risk of educational failure than children from more affluent homes, and that targeted at-risk programs result in improved academic performance.¹ Nevertheless, Virginia has a relative flat per pupil funding structure that provides proportionately little supplemental funding for the increased costs associated with adequately educating students with special needs – *i.e.*, special education students, economically disadvantaged students, and students with limited English proficiency. Authorities estimate that a 40-60% “add-on” is needed to fund research-based interventions such as high quality preschool, teacher quality, smaller class sizes, and intensive early reading and math programs for students at-risk of educational failure.

Most programs for at-risk students are funded outside of the Standards of Quality and are particularly vulnerable to budget cuts. To the extent that these programs are recognized by most school divisions as necessary for students to meet state standards, they should receive constitutional protection.

¹ Va. Code Ann. § 22.1-199.1.

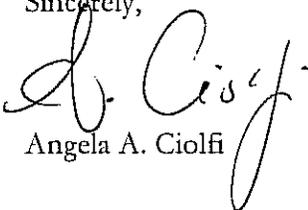
In addition to the Early Intervention Reading Initiative and the Algebra Readiness program, least two of the incentive programs for at-risk students meet the prerequisite that the Standards of Quality “must be realistic in relation to current educational practice.”²

- The *Virginia Preschool Initiative* provides funding for a high quality preschool program for at-risk four-year-olds. The current VPI program serves over 15,000 children statewide. A 2007 report by the Joint Legislative and Audit Review Commission found that children who participate in VPI are significantly better prepared for kindergarten. By reaching more at-risk children, it will mean fewer state dollars down the road for remedial and special education, social services, public benefits – allowing these students to have the tools they need to lead a self-sustaining life. Over time, these benefits translate to a rate of return of \$7-\$16 for every dollar invested in the Virginia Preschool Initiative. We recognize this is an extremely difficult budget year, but VPI is a lean program with a direct impact on at-risk 4-year-olds. VPI is currently funded through lottery funds, not general fund dollars, and competes with other lottery funded programs. Including VPI in the SOQ would recognize that, like early reading and algebra intervention programs, VPI builds a critical foundation for later success on SOL tests. For that reason, it is best described as an essential component of our existing K-12 program and should be included in the Standards of Quality. (FY 2011 state funding = \$60 million)
- The *At-risk Add-on Program* provides incentive funds to school divisions above the SOQ to support programs that address the needs of students educationally at-risk. It recognizes that it costs more to ensure that economically disadvantaged students receive an education that enables them to meet rigorous standards and provides school divisions flexibility to use the funds to meet the needs of those students.³ Accountability is provided by requiring schools to meet SOL pass rate and (soon) graduation benchmarks in order to achieve full accreditation. Schools report using these funds for SOL remediation, dropout prevention, tutoring services, ESL, computerized remediation programs, class size reduction, truancy officers, and reading and math resources teachers. All local school divisions participate in this program. (FY 2011 state funding = \$63 million)

In summary, recognizing these programs in the Standards of Quality would go a long way toward accomplishing one of the Board’s stated goals: to provide school divisions with additional instructional resources to address identified needs.

Thank you for your leadership and commitment to our students. Please let me know if you have any questions or concerns.

Sincerely,



Angela A. Ciolfi

² Task Force on Financing the Standards of Quality for Virginia’s Public Schools, December 1972 and July 1973.

³ See Dickey, Kent C., supra note 3.

Public Comments on the Standards of Quality

From: Jim Regimbal
Sent: Tuesday, November 23, 2010 1:24 PM
To: Wescott, Anne (DOE)
Subject: teacher quality

Anne,

I thought a lot of good issues were covered in the “First Review to Reaffirm the 2009 Recommendations to the Standards of Quality” document attached for public comment. However, one critical item is missing – the issue of teacher quality. Many studies, including one I participated in 2004 with NCSL found that teacher quality is the single most important controllable factor in improving student outcomes. I believe there should at least be further study as to how we improve teacher quality in our classrooms. I know it is a complex issue, but one that we should constantly strive to improve – whether by increasing standards, improving working conditions, or pay.

James J. Regimbal Jr.
Fiscal Analytics, Ltd.
1108 E. Main St. Suite 1108
Richmond, VA 23219

From: jbm
Sent: Tuesday, November 30, 2010 2:57 PM
To: Wescott, Anne (DOE)
Cc: State NAACP; Rev. Vines
Subject: Public Comments on Quality of Standards

Ms. Wescott,

There are two areas of interest at this time:

* Will each school division be allowed to develop the "***certain incentive***" programs according to the needs of the school population ? If so, will these programs be funded by state or local sources?

* Will new guidelines be developed (changed) as far as determining ratios.....especially when support personnel are included in establishing a balance ?

Virginia State Conference NAACP Education Committee
Mrs. Janette Boyd Martin, Chair

From: Dawnita Truitt-Calderone
Sent: Tuesday, November 30, 2010 3:22 PM
To: Wescott, Anne (DOE)
Subject: Speech/Language services in Public Schools.

Dear Ms. Wescott,

I understand that a request has been made for comments on the topic of Speech Pathologists' current caseloads in Virginia.

My comment:

Students who have Speech/Language Developmental Delays and/or Disorders are given the opportunity for interventions in schools because of the dramatic impact such impairments have on their lives. Academic impact and social-personal impact is sometimes so pervasive as to have secondary impact on a child's self-esteem. Behavioral issues arising out of inability to communicate and interact are not uncommon.

Currently, Speech/Language Impaired children are by necessity getting their "services" in groups of 4 or 5 (or more) at a time due to the high caseload cap set at 68 students per therapist.

Intervention strategies and therapy utilized for children in large groups such as this are notably less effective. An analogy, if you can imagine - it is like receiving a regular non-therapeutic dosage of needed medication. Remediation of Speech & Language "Developmental Delays" are slowed, giving more time for deeper academic impact. Disordered language and speech skills are even more impacted because of the nature of their issues from the outset. Finally, children with Cerebral Palsy, Apraxia, Stuttering and other severe comprehensive disorders are the most needy and even these children are having diminished quality of service because they are seen in large groups and in the classroom. (In the past, our caseloads had a cap of no more than 58 to 60 students per therapist ~ children were on average in groups of 2 to 3 seen twice weekly/30 minutes per session. In cases of great severity, children are seen up to 5 times weekly for 30 minute sessions.)

Thank you for your consideration in this matter impacting our students with Speech-Language Impairment!

Sincerely,

D. Truitt-Calderone, MS CCC-SLP
Speech Language Pathologist
Mt. View Elementary School

From: Troilen Seward
Sent: Monday, December 06, 2010 10:14 AM
To: Wescott, Anne (DOE)
Subject: Response to SOQ Review

Dear Ms. Saslaw and Members fo the Virginia Board of Education:

The Virginia State Reading Association (VSRA) strongly supports the Board of Education's proposal to reaffirm its 2009 proposed policy directions. We are, of course, particularly supportive of including the EIRI proposal in the SOQ. We see this, however, as only an interim step in providing reading specialists in the schools of the Commonwealth. Our ultimate goal is to have reading specialists in a 1:1000 ratio included in the Standards of Quality.

We are indeed aware of the difficult economic times and understand the necessity of the interim measure. We do indeed express our sincere appreciation to you for your efforts and persistence in trying to improve reading support for the students in this Commonwealth. We can only hope for funding in the future!

Sincerely,
Troilen G. Seward
Legislative Liaison, VSRA

From: Patricia Shaffer-Gottschalk
Sent: Tuesday, December 14, 2010 11:55 AM
To: Wescott, Anne (DOE)
Subject: public comment on SOQ

I am writing with both questions and concerns regarding Board of Education Agenda Item G, dated November 18, 2010, inviting public comment. I refer specifically to "Issues for Further Study", bullet 2, where it states "... feasibility of establishing alternative staffing approaches to provide school divisions with additional instructional resources to address identified needs. This could include ratios based on positions per 1,000 students for assistant principals, school counselors, and library-media specialists that would reduce funding cliffs." The meaning and ramifications of this is very unclear. Would you please explain its meaning?

Furthermore, our school division superintendent commented at the last school board meeting that the DOE was considering reclassifying library media specialist positions to **administrative**, rather than **instructional**. While the media specialist certainly has many administrative functions in managing a school media center, the vast majority of my time is spent in instruction. I teach 35 classes weekly, each 45-minutes in length. The requirement of holding a valid teacher license with add-on endorsements in library media witness to the fact that the DOE has traditionally considered the library media as primarily an educator. This is correct and accurate. To consider the library media specialist as administrator is inaccurate.

I thank you for your time and consideration.

Patricia Shaffer-Gottschalk
Tussing Library Media Specialist
5501 Conduit Road
Colonial Heights, VA 23834

From: Mark Webster
Sent: Tuesday, December 14, 2010 12:02 PM
To: Wescott, Anne (DOE)
Subject: Seeking Public Comment: Standards of Quality

Anne Wescott,

I wanted to offer public comment pertaining to the SOQ. I am probably worried about nothing, but I noticed on the Board of Education agenda for November 18 it stated there was consideration of the "feasibility of establishing alternative staffing approaches to provide school divisions with additional instructional resources to address identified needs. This could include ratios based on positions per 1,000 students for assistant principals, school counselors, and library-media specialists. . ."

I wasn't sure if the intent was to increase staffing for larger schools, or rather have smaller schools (with student numbers less than 100) share these professionals? Hopefully it is the former. However, I wanted to offer public comment on the matter, because I was reading this in the context of the current discussion ("65% rule") surrounding the state reclassifying library media positions as "administrative" rather than "instructional." The library media positions are highly instructional, and should be recognized as instructional because of their integral role within the educational mission of each school, and the powerful role these positions play for information literacy, reading, instructional media and technology, and research skills. Also, practically speaking I would argue it is essential that each school have a dedicated media specialist, regardless of the size of the school or its population.

Thank you for allowing public comment on the matter, it is appreciated!

Sincerely yours,

Mark Webster, Director of Technology and Learning
Colonial Heights Public Schools

From: Torrijos
Sent: Wednesday, December 22, 2010 7:09 PM
To: Wescott, Anne (DOE)
Subject: Speech-Language Pathology caseloads

Ms. Wescott,

I am writing to convey the need for SLP's to have a caseload maximum in the state of VA. Many of us working in the schools have over 65 students, ranging from the most severe 2 year olds with multiple impairments to 21 year old students struggling to transition out of the public school system. Many of these students have very specific disorders, requiring specialized services in individual therapy. After being a Speech-Language Pathologist for over 13 years, I have come to realize that many students on the public school clinician's caseload make very slow progress. It is my sincerest belief that slow progress is largely due to ineffective therapy, conducted in groups of 3 students or more. I work in a relatively small district where one of our clinicians has a caseload of 83! The administration refuses to hire more staff, essentially telling each of us that there is nothing we can do. Unfortunately, I don't predict much progress for many of the students on our caseloads simply due to the large numbers served in groups.

I have often wondered if Speech-Language Pathologists actually belong in the school setting. I entered this profession to help individuals communicate effectively. When I am expected to serve high numbers of students, I feel that the quality of my therapy suffers, and my students make less progress. It is then my responsibility to explain the lack of progress to the parents, without expressing the true reason. No clinician would be allowed to actually say, "I'm sorry Mrs. Jones. Bobby didn't make a lot of progress this year in speech and will have to work on the same goals next year. You see, I have so many kids on my caseload that I had to see Bobby in a group with 4 other kids. Sometimes, we weren't able to actually address his speech goals because one of the other students had a lot of behavior issues, and another student stuttered, requiring me to do a lot of instruction with him. Hopefully, we'll be able to work a little more on his goals next year. What? He's being retained this year? That's a shame. I hope next year will be better for everyone."

There's a reason so many SLP's are leaving the school setting. We need support! We need it from our administration, our district, and our state Department of Education. We need caseload maximums that are reasonable (my suggestion would be 60), and we need the new SLP guidelines! SLP's are typically a forgotten group in the school setting. Although we are small, we are no less important. I fully expect my state DOE to support us as we try to help so many kids!

Thank you for your efforts,
Tanya Torrijos
Speech-Language Pathologist
Powhatan County Public Schools

From: Martha Ruelle
Sent: Wednesday, December 22, 2010 7:42 PM
To: Wescott, Anne (DOE)
Subject: SLP caseload

Dear Ms. Wescott

I hope the BOE understands that the 65:1 Speech Language Pathologist caseload in public schools negatively impacts the quality of services available. It means that students with communication disorders in public schools have to be seen in larger groups than if the caseloads were smaller. That means the students' problems are not resolved as quickly. It also means that it is difficult for school divisions to attract and retain the best qualified SLPs when they have to cope with such a large caseload. The caseload numbers must be capped at a lower number.

Martha Ruelle, M.S. CCC-SLP
Speech Language Pathologist
Fairfax County Public Schools

From: Suealexandria
Sent: Thursday, December 23, 2010 12:29 AM
To: Wescott, Anne (DOE)
Subject: Caseload

I am a very lucky SLP. I work in a non-public facility for emotionally disturbed children. I have been there for 10 years. My case load is only 12. The first 8 years I was full-time and had a caseload of 25. Two years ago I became part-time. All of our therapy is one-on-one, never group. I am very happy with my job, and the low caseload is one of the reasons. I'm able to handle the therapy, meetings, and paperwork comfortably. I wish other SLP's could experience, at least once, a low and reasonable caseload, as it gives one a sense of completeness and thoroughness.

December 22, 2010

Dear Ms. Wescott and the Virginia Board of Education:

I am glad to hear that the Board of Education is reconsidering the maximum caseload size for speech-language pathologists working in the public schools in the state of Virginia. I have worked as an SLP for 5 and a half years in Virginia public schools, and I believe my students' progress is greatly dependent on my caseload size at any given time. As a caseload approaches 55-65, it becomes nearly impossible to give students' the individual and small group time where their progress is maximized. Instead, it is necessary to work with students in large groups and it becomes a challenge to tackle the goals of all the students in a group (which may range from a student who stutters, a student working on using correct speech sounds, to a student working on increasing vocabulary skills).

I can also say from personal experience that a higher caseload correlates with lower job satisfaction and higher stress level. During the two years that my caseload was between 60-65 students, I consistently worked 60-70 hours per week in order to ensure that IEPs and eligibility paperwork were completed and that my students continued to receive high quality therapy services. If the state of Virginia hopes to retain qualified speech-language pathologists, it is important to set a maximum caseload number that is reasonable. I believe a reasonable caseload number is between 40-50.

Thank you for considering this issue.

Sincerely,

Heather Lantz, MA, CCC-SLP

From: Amie Teague, MA/CCC-SLP
Sent: Thursday, December 23, 2010 6:49 AM
To: Wescott, Anne (DOE)
Subject: Caseload maximums for SLPs in Virginia

Dear Ms. Wescott:

I am writing on behalf of the men and women who serve our children as speech/language pathologists in the school systems. I am an administrator of a private practice speech therapy clinic that serves 3-5 counties and cities in the state of Virginia. I have also worked in the schools myself in the past. As an administrator, I see my employees struggle on a daily basis to provide top quality therapy while trying to juggle the demands of planning, documentation, IEP paperwork, referral paperwork, and with little time to be able to complete all of it as caseloads increase and paperwork demands increase as well.

I strongly believe that if caseloads were smaller, the speech therapist could provide higher quality therapy which would reduce the length of time a child would need to be in therapy and therefore actually increase academic success at a faster rate, improve SOL scores for language impaired children at a faster rate, and allow the time needed for the paperwork required to serve a child. The extra time for the paperwork would improve the quality of the paperwork and would be less costly to the school district correcting items while decreasing deficiencies on state audits.

Thank you in advance for any consideration in lowering the caseload maximum for speech/language pathologists to 50 for those serving in the state of Virginia.

I will be happy to provide any additional information upon request.

Merry Christmas,

Amie Teague, MA/CCC-SLP
Executive Director, Speech/Language Pathologist
Piedmont Regional Feeding & Oral-Motor Clinic

From: Vann, C E.
Sent: Thursday, December 23, 2010 8:30 AM
To: Wescott, Anne (DOE)
Subject: School Speech Language Pathologist Caseloads

Dear Ms. Westcott,

I am writing to you on behalf of my Speech-Language Pathologist colleagues who work in the public school system, and from my own experience when I started in the profession more than 25 years ago. I am currently the Director of Rehabilitation Services at a children's hospital, where we employ 57 Speech-Language Pathologists, who all see their children on an individual basis for one-hour sessions. A large number of our speech therapy patients receive services in the public school system as well, but come to us because the parents think that their child isn't getting what they need from the school system therapist – not because of the therapists' skills, but due to the fact that their child may be in a group setting with 2 or more students of varying diagnoses/goals for therapy, and sessions that last only 20-30 minutes. Studies show that increased intensity of services makes a difference in the amount of progress that children make in the therapy setting, and aides in faster remediation of disorders/delays. I am encouraged that the number of Speech-Language Pathologists in the public school system has increased over the years, however, this increase has not kept up with the great demand for services. I encourage you to look at the caseloads of our Speech-Language Pathologists, and make changes that will benefit the children in our community.

Respectfully,
C. Edward Vann

*C. Edward Vann, M.S., CCC-SLP
Director of Rehabilitation Services
Children's Hospital of The King's Daughters
601 Children's Lane
Norfolk, Virginia 23507*



From: bcumberb
Sent: Thursday, December 23, 2010 4:53 PM
To: Wescott, Anne (DOE)
Subject: Caseload maximums

Greeting Ms. Wescott,

I am currently a student who is about to complete my last semester for my graduate program. I just completed an extenship in a Norfolk Public School and must admit that the prospect of being responsible for providing speech services to 65 clients in addition to aligning their lesson plans to the SOL, completing Medicare paperwork, being case managers for their IEP as well as all the duties that the school administrator has me looking at a position in the school as a last resort. Having been a teacher for 7 years the last thing I expected was that being a speech therapist in the school setting was just as if not more overwhelming than being a classroom teacher. I think that rather than simply looking at number of students on case loads the trend should be more like in the medical field where attention is paid to the number of minutes and type of client on the SLP's case load.

Thank you for your attention,
Baseemah M. Cumberbatch-Smith,
B.S. Elementary Education
Graduate Student, Communicative Sciences & Disorders, Hampton University

From: Reed, Vicki Anne
Sent: Thursday, December 23, 2010 8:32 PM
To: Wescott, Anne (DOE)
Subject:

Anne,

I have just been made aware through the Speech, Language, Hearing Association of Virginia (SHAV) that the VA Board of Education is accepting comments regarding caseload maximums for SLPs until December 28th. Most school-based SLPs are likely away for their schools for the school holiday break and would be unlikely to be able to comment. Since these are the most directly affected school professionals with regard to this matter, I'd like to request an extension of the date for receiving comments until the schools return from their break.

Thank you for considering an extension of comment time.

***Vicki A. Reed, Ed.D.
Professor, Department of Communication Sciences and Disorders
Director, Child and Adolescent Language Laboratory (CALL)
James Madison University
701 Carrier Drive
MSC 4304
Room HHS 1139
Harrisonburg, VA 22807***

From: Katie Pyne
Sent: Friday, December 24, 2010 2:23 PM
To: Wescott, Anne (DOE)
Subject: caseload comments extension please!

Hi Anne:

I just received word of the need for comments on caseload size. You may not realize that most SLP's who work in schools are on break and may not have the opportunity to comment until the first of the year. Is there any way you could extend the feedback time to mid-January, so there would be more opportunity for school speech folks to give their input??

Thank-you so much. Happy holidays!

--

Katie Pyne, MA, CCC/SLP
Speech/Language Specialist
Read Mountain Middle School
Lord Botetourt High School

From: Darlene Sommer
Sent: Monday, December 27, 2010 1:29 PM
To: Wescott, Anne (DOE)
Subject: Caseloads and service delivery

So glad that Virginia DOE is open to suggestions. Chesapeake Public Schools' special ed. program underwent an audit by DOE last year. As a result, we were told that we will have to write our number of therapy sessions "per month" as opposed to number of sessions "per semester" as is our current departmental standard. It would be impossible to determine the number of sessions per month as each month in the school calendar varies greatly. Our SLPs have found that the flexibility of "sessions per semester" assists us in working with students' rigorous testing schedules while consistently providing speech-language therapy services.

With regard to caseload size, it is impossible to provide adequate speech-language therapy services to our students while managing a caseload of more than 55 students (particularly if the SLP serves more than one school.)

Thank you for the opportunity to weigh in on this subject.

Sincerely,

Darlene C. Sommer, MS, CCC-SLP
Speech-Language Pathologist
Chesapeake Public Schools

From: ntseward

Sent: Monday, December 27, 2010 10:11 PM

To: Wescott, Anne (DOE)

Subject: caseload size

I have been a speech pathologist in the public schools for 15 years and am having increasing difficulty doing my job effectively due to the caseload size and the accompanying mountains of paperwork. I am struggling to perform all my various job functions in a professional manner while trying to schedule and deliver therapy to a 65+ caseload of 2 to 22 year olds in multiple schools with disabilities ranging from autism to cognitive delays to fluency. While I am thankful to even have a job in this current economic climate, I had much better job satisfaction and was a more effective SLP when the caseload was a more manageable size of 55.

Thank you for your time. Nancy T Seward MS/CCC

12-28-2010

Board of Education:

It is sad that with advances in so many areas in our field, after 33 years as a public school speech/language pathologist, caseload numbers have only decreased from a maximum of 75 in 1978 to 65 in 2010.

Caseload numbers that are too high reduce the quality of services that can be provided. Although services are free, lip service is paid to the provision of "appropriate" services. Regardless of the severity of a student's impairment, he often receives the standard, one size fits all, twice weekly services in a group of 2 to 4 if speech impaired, or a group of up to 6 if language impaired. High caseload numbers make it difficult or impossible for individual daily planning, coordination of therapy efforts with parents, and preparation of student homework.

If caseload numbers were reasonable, time to see and provide truly appropriate services would not be as severely difficult as it is now and always has been. High caseload numbers with the insurmountable paperwork and number of procedures and more recently Medicaid billing have made the job of the public school speech/language pathologist a mockery of the profession, and an exercise in frustration and futility as we struggle to make progress in the limited time we have with our students.

Below is a letter in part that I submitted to our director of special education, 05-05-2010, in compliance to a request to respond to why I was not billing every child on my caseload who qualified for Medicaid.

The answer is "TIME".

As speech pathologists we have a long list of duties that we are to perform over the course of each day and year; however, the schedules we are pressured to maintain usually only allow the time needed to provide the (minimal) therapy required to remain in compliance with our students' IEPs. We understand that all but a fraction of the day (usually 30-40 minutes) must be used to provide therapy.

This would not be as problematic if it were not for the fact that we are also trained diagnosticians expected to conduct assessments and to perform the follow-up duties associated with testing.

We are **not** allowed to schedule regular blocks of assessment time during the school day to conduct assessments on referrals, reevaluations, or triennials. No time can be specifically scheduled for screening kindergarteners, incoming transfers throughout the year, or preschoolers at the administration building in the spring. Neither are we allowed scheduled time during the day to score assessments, time to write assessment reports, time to send invitations or communicate with parents, time to write IEPs, or hold eligibility meetings and IEP meetings. No time is allowed to do progress reports.

Because the regular classroom teacher has a 30-40 minute planning period, we have been allowed this same amount of time for our daily “planning”. The catch is, being that we have no other time in our schedules to conduct the aforementioned duties it is understood that this “planning time” is when we should be conducting all the requirements that do not fall under the “therapy” heading. As for planning, any planning and preparation of materials for the individualized instruction of the 50-65 students we see must be done after the school day.

It must also be noted that there is no time allowed during the school day to perform Medicaid activities. Writing POCs, preparing treatment plans, and maintaining soap notes, must be done after school or during the students’ therapy sessions.

Personally, I find it appropriate that our fellow coworkers, the psychologists and educational diagnosticians are allowed time during the regular school day to conduct their assessments, score their assessments, write their reports, and even hold eligibility meetings. I find it discriminatory that I am not allowed at least some time during my school day to conduct the exact same activities they conduct and are allowed ample time.

I get my children seen and I do a good job with them. If there are administrative, teacher, or parent complaints I am unaware of them. I already work many hours after school and at home to get accomplished what I am doing now. I have no more hours or weekends to give. More Medicaid means a reduction in the already strained quality of services that our children now receive. It might even demand noncompliance with our students’ IEPs. I already have enough required responsibilities that threaten noncompliance.

In past years, as SLPs, we were never afforded enough time during the school day to get all our responsibilities such as test scoring, report writing, IEP writing, and other clerical duties completed, but we were minimally allowed half a day weekly to do screenings and assessments. In more recent years, we have been robbed of our limited, but precious assessment time and we have been saddled with additional clerical work with more forms to fill out and more procedures to perform, and Medicaid. We have, set before us, an impossible task for even the most conscientious professional.

Lynda C. Adkins, M.S. CCC
Speech/Language Pathologist

From: Wanda
Sent: Tuesday, December 28, 2010 11:58 AM
To: Wescott, Anne (DOE)
Subject: Caseloads

As a school based SLP with a large caseload I am not as effective or efficient as I could be with a smaller caseload. Having to see 70 students (and growing) plus IEPs, Medicaid notes, meetings, and travel between schools is overwhelming.

It would be helpful to have a smaller caseload and have SLPs included in the standards of quality.

Wanda Pascucci, MA, CCC-SLP
Franklin, VA

From: Cornelia Long
Sent: Tuesday, December 28, 2010 9:04 PM
To: Wescott, Anne (DOE)
Subject: Caseload Maximums

Hi,

Thanks for accepting comments on the issue of Standards o Quality and caseload maximums for speech-language pathologists in the public school system. First, the national caseload average is 50 according to the American Speech-Language Hearing Association.org (2010). The maximum speech caseload in VA is 68, a difference of 18. I am asking that the DOE please lower the maximum to 55. There are several speech pathologists who work with 68+ children and with that many children and the demands of paperwork, and triennial meetings plus IEP meetings can leave a speech pathologists feeling overworked and burned out. A more reasonable caseload of 55 would ensure that the speech pathologists offers qualitative therapy with less paperwork pressure thereby ensuring more students are dismissed from speech therapy earlier. Please keep in mind that the attrition rate for speech pathologists is relatively high for the state of VA and that is due, in part, to paperwork burdens and the size of expanding caseloads.

It is also my request to have speech pathologists back in the Standards of Quality. Speech pathologists are highly specialized professionals. Most practicing speech pathologists are certified by the American Speech-Language and Hearing Association and are licensed by the Board of Examiner's.

Thank you for perusing this request.

Cornelia H Long, M.S. CCC-SLP
VP Govt. Affairs

From: Cornelia Long
Sent: Tuesday, December 28, 2010 9:09 PM
To: Wescott, Anne (DOE)
Subject: Extension for Comments Caseload Maximums/Standards of Quality

Hi Mrs. Wescott,

On behalf of the speech pathologists in the state of VA, I respectfully request an extension to the open comments period to the VA DOE. Two consecutive holidays have occurred during this time and many SLPs may not be privy to this comment period due to holiday breaks.

Sincerely,

Cornelia H. Long, M.S. CCC-SLP
Speech Pathologist
VP Governmental Affairs
Speech-Language Hearing Association of VA

From: DeAnne Lindsey
Sent: Thursday, December 30, 2010 10:01 AM
To: Wescott, Anne (DOE)
Subject: Caseload Reduction

Good morning,

Thank you for the opportunity to express my continued concerns about school-based caseloads. Several years ago I was involved in SHAV's activities to reduce caseloads from 68 to 60. I was so pleased that we were finally able to influence this change and so disappointed that even this small change was never funded by our legislature.

I have been a practicing SLP for 35+ years, in both private and school settings. I have practiced as a speech pathologist, a special education administrator, and now again as an SLP and department chair. I began those many years ago just before the passage of PL 94-142 when the legal requirements were minimal. While I don't regret the degree of stringency that this law and those that followed required, they impose other constraints that have become overwhelming.

The problem is not just the pure numbers of students, although there is an abundance of research regarding that. The problem is not in the number of more severely involved and medically fragile students - and those are tremendously increased. The problem is not just that parents are becoming more savvy about the types of services they want and litigious to accomplish that.

The problems for school-based SLPs come from the additional engagements in school affairs that are for the benefit of students but take an enormous amount of time and therefore impact the amount of time available for seeing students. Participation in such activities include Medicaid billing (and the accompanying extra paper work), frequent revisions of IEPs, IEP meetings that can take literally hours, preparation in due process proceedings and the like. But most importantly, SLPs are an integral part of schools' child study and eligibility processes and RtI processing. Frequently SLPs are asked to chair these committees because of their involvement with the school populations and because of their understanding of the educational process. In order to accommodate participation in these committees, either caseloads are reduced (causing an overload on other therapists) or students must be grouped into overly large groups.

As a result of Response to Intervention and other child monitoring processes, the SLP's time is often spent not only in direct services to students with an IEP. An enormous amount of time is spent in observing students in classrooms, data collection, consultation with teachers and parents regarding recommendations for students, and suggestions for modifications in teacher presentations and classroom engineering. Additional time may be spent in programming and implementation of assistive technology devices into daily activities.

For all of these reasons and many more it is imperative that the DOE recommend to the legislature, and the legislature to respond with funding to allow school-based

caseloads to be reduced. Without this flexibility SLPs cannot properly serve their students by either providing the excellent therapies they were trained to do or by facilitating improvements with via their other school responsibilities.

Thank you for soliciting input once more. I hope that we will be successful in affecting a change.

Sincerely,
DeAnne Lindsey, CCC/SLP
Speech Language Pathologist
Chesapeake Public Schools

Ms. Wescott,

I understand that you are accepting letters regarding caseload sizes for Speech-Language Pathologists in the public schools. I am currently working in the public school sector as a Speech-Language Pathologist in Virginia. I am writing in support for regulations limiting caseload size and workload size. As an SLP with a strong work ethic, dedication to the service we provide, a strong belief that we make a difference in the lives of our students and concern for students, I feel this is an area of strong need. I also genuinely feel that it is a relevant topic as a person and family member.

I have worked in varied settings across the years, with approximately 17+ years in public schools from 1975 through 2010 served in three states [New York, Virginia and Kentucky], twelve districts and almost thirty schools. There have been many changes across the years in all settings per my experience; which gives me unique perspective. Many changes have been needed and have bettered the provision of speech-language therapy services. However, other changes have rendered us with less time to do that which most impacts our students--time spent in direct service. No matter how we dress up this need and justify that we are working better and working smarter, most of us who do the work every day know that there is no real substitute for direct service time. I believe that one of the reasons our caseload numbers persist now at middle school and high school ages reflects directly on declining direct service at the preschool and elementary ages. We are discharging fewer students; and continue to support more students through their public school years. Although there are other factors that impact discharge rates, time to instill the basics in the early years remains a critical need. We cannot spend the necessary time with high caseloads. Experience tells me that greater time spent in the early years will provide our students with the skills to go forward in their secondary years without continued speech-language support needed. Until we learn to manufacture time, there is no alternative to moderating caseload demands while covering today's expectations.

All caseloads are not equal; but are being treated as such in today's public school arena. In the 70's, we had higher caseloads; but fewer students with high level disabilities, the option to decide and provide what our students appeared to need, minimal overall paperwork and began writing annual IEP's that reflected the student's needs. In the 80's and early 90's, the SLP who had students with higher disabilities had lower caseloads. In the last dozen years, we are all impacted by declining budget factors, the ravages of litigation and the blitz of accountability paperwork. We all understand that, not only do many of our students have higher level communication need, they also have more demanding parents and frequently include greater daily paperwork. I have been required to report daily, weekly and monthly to some parents; and to provide routine work samples that are dramatically beyond the expectation outlined in our job descriptions and provided to students in general. Added expectations increase the time demand; which decreases the time available for other students and/or demands that the SLP work longer overtime hours. Students with greater disabilities also have a usual tendency to have higher demands in meeting times; with greater team and parent interaction to plan; and multiple meetings for annual IEP's that take two to sixteen hours to complete in lieu of the usual 45 to 60 minute meeting. Again, this diminishes time available for other students on our caseloads. We also face increasing time demands in completing Medicaid paperwork, which does and should require [per confidentiality] separate paperwork. With the current economic condition in our country, many of us have a steadily increasing number of students who qualify

for Medicaid reimbursement. Our primary responsibility is to provide the mandated IEP time to our students. Medicaid paperwork is being primarily completed after contract hours. We are not reimbursed for this; but time is the more critical issue. Caseload expectations need to accommodate time factors. Until we learn to manufacture time, there is no alternative to moderating caseload demands while covering today's expectations.

Speech-Language Pathologists as human beings and members of families is a highly pertinent reason to consider caseload management control. We are all professionals. We cannot exist in this profession unless we are dedicated, caring, flexible, smart, strong, creative and giving. No one talks about the human toll, because it sounds less professional. But this is a topic worthy of discussion and consideration. Throughout my career, I have been dedicated and given 125% or more. However, I see the change, and it should be highlighted. The time commitment has been altered across the years. I used to spend hours at home creating materials for my students. We all understand that the majority of materials used by Speech-Language Pathologists in the public schools are hand-made. Although we are smarter about sharing now, this is still true. In today's world, we still manufacture therapy materials routinely. However, our after-contract hours are also spent in writing draft IEP pages, scoring assessments; working after school when school protocol programs dictate; preparing varied report forms, making calls and completing accountability paperwork. The dictates for accountability, recording time, recording all contacts, keeping data and keeping notes is increasingly demanding – and requires additional time during the work day and after hours. I have always taken data; but ironically, the increase in time-demand responsibilities is actually counterproductive in being able to take relevant data. Early on in my career, I spent 8 to intermittently 9 hours per day at work with report-writing time allowed; and likely 5 to 10 hours at home creating materials. My usual day now begins at 7:00 a.m. and is more often 10 to 12 hours; and I usually work 4 to 8 hours on Sundays. End-of-month and grading period reporting require additional marathon hours. In a previous school assignment [2005 to 2007] that included elementary and preschool students, I often worked 20-30 hours per week beyond contract hours routinely. I can email numerous SLP coworkers at 6:00 or 7:00 p.m. who are still at their desks or working from home. Family time is impacted by the high time demand at work – with a direct relationship to high caseloads. When time during contract hours are spent with students and in meetings, all else must be completed after hours. My children are grown. I cannot imagine having young children at home now and being a public school SLP; with the need to pick up children on time or pay overtime for childcare. I do have high parent-care issues at this time; which is just as relevant. When I leave work on time now, it is to care for parents. If you do the math, I may get home at 7:30 and try to be in bed by 9:00. This does not work, so the impact is inadequate sleep hours. When we are at work for lengthy days, we are not at home caring for our own families. We are not protecting our own health with exercise, relaxation and rest. When we are assigned reasonable caseloads, we are better able to maintain healthy family, church and community involvement. Having a well-rounded life makes for a better professional. Until we learn to manufacture time for work at work and allow for a healthy personal life, there is no alternative to moderating caseload demands while covering today's expectations.

In summary, consideration for caseload control is a relevant, necessary and critical factor in maintaining a healthy profession. We are enduring and meeting an increasing demand for paperwork and accountability that impacts our working day. We are facing a crisis in meeting the needs of students in literacy skill that can be best met with direct student service at a time

when direct student service is declining. In addition, higher work demands are increasingly impacting our ability to maintain personal and family health. I have always loved this profession, and I still have such an enthusiasm for what we do! However, when I am asked now to support students considering the profession, I have to stop and think – “*should I tell them?*”

Sincerely,
Karen Jackson, CCC-SLP
12/23/10



Chesapeake Public Schools

Office of the Superintendent

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December 21, 2010

Mrs. Anne D. Wescott
Assistant Superintendent
Division of Policy and Communication
Virginia Department of Education
P. O. Box 2120
Richmond, Virginia 23218

Dear Mrs. Wescott:

In response to Superintendent's Memo # 295-10, I am providing the following comments regarding revisions to the Standards of Quality.

The Constitution of Virginia gives the General Assembly the responsibility of providing for a free system of public elementary and secondary schools and further states that they should "seek to ensure that an educational program of high quality is established and continually maintained." It is also the responsibility of the legislative body to determine the cost of the high quality program and the method of apportioning those costs between the Commonwealth and the local government units.

Prior to the Joint Legislative And Review Commission (a research arm of the General Assembly) study conducted in the mid-1980's, the General Assembly was criticized for not "fully funding" the Standards of Quality. They authorized the JLARC study to eliminate that criticism. The result did provide a method for calculating the cost of the Standards and a biennial recalculation of costs based on the complicated methodology, but most importantly, it gave legislators the opportunity to say that the Standards of Quality were fully funded. Still left unanswered were questions about the adequacy of the Standards.

Faced with that inadequacy, another JLARC study in 2000 addressed some key questions such as the ways in which localities were exceeding the SOQ mandated funding levels. That study not only pointed out how much more localities were spending above the required match, but it also showed a number of "errors and omissions" that had placed additional costs on localities since the implementation of the previous JLARC study. A list of proposed changes was provided and some of those recommendations were implemented, benefiting the local school divisions.

We Promote Excellence

*The Chesapeake Public School System is an equal educational opportunity school system.
The School Board of the City of Chesapeake also adheres to the principles of equal opportunity in employment and, therefore,
prohibits discrimination in terms and conditions of employment on the basis of race, sex, national origin, color, religion, age, or disability.*

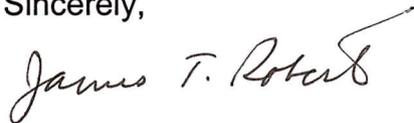
Recent adjustments to the state funding formula, however, have resulted in significant losses for local school divisions. The reductions were carefully made, similar to the work of a skilled surgeon who uses his knowledge of medicine to perform delicate operations. Because of the economic crisis and the need to match state revenue to state expenditures, someone took the opportunity to dismantle the previously adopted methodology for funding schools. In addition to changing the methodology, funds such as the Lottery and the Stimulus dollars were shifted to cover costs previously provided through state general fund revenues, thereby reducing dollars going to school divisions. Almost as disturbing as the loss of funds is the change of attitude in Richmond. Funding for K-12 education was once considered a priority and was not adversely affected in balancing the state budget. Now, just the opposite seems to be the case. In fact, it almost seems that education is the prime target.

Most recently, the proposed budget released by the Governor provides further cuts to the educational program ("high quality" no longer can be used as a modifier), and the one attraction that has kept dedicated employees in public service, the Virginia Retirement System, is being used to provide localities the "opportunity" to save money. This again proves that political leaders do not appear to recognize the value of a strong K-12 educational program.

The Policy Directive proposed by the State Board advocates "...against permanent structural changes to the Standards of Quality that result in decreased funding for K-12 public education." Chesapeake Public Schools certainly supports that policy. All other policy directives are also supported by our system, but it would seem that a reversal of the recent adjustments to the Standards of Quality would be a more appropriate direction for the State Board to propose.

Thank you for the opportunity to provide comments on this important matter.

Sincerely,

A handwritten signature in black ink that reads "James T. Roberts". The signature is written in a cursive, flowing style.

James T. Roberts, Ph.D.
Superintendent

JUSTCHILDREN

A Program of the

LEGAL AID JUSTICE CENTER

Angela A. Ciolfi
Legal Director
angela@justice4all.org

December 28, 2010

Ms. Anne Wescott
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RE: Public Comment on the Standards of Quality

Dear Anne:

Thank you for the opportunity to submit public comment on this year's proposed revisions to the Standards of Quality. We support the policy directions outlined at November's Board meeting.

In particular, we wholeheartedly support the Board's effort to look to existing programs funded outside of the Standards of Quality and recognize those practices that may be prevailing across the Commonwealth and should be incorporated into the Standards of Quality. In addition to the Early Intervention Reading Initiative and the Algebra Readiness program, we suggest that the At-Risk Add-On and the Virginia Preschool Initiative also be considered for inclusion within the Standards of Quality.

The General Assembly has found that poor children are more at risk of educational failure than children from more affluent homes, and that targeted at-risk programs result in improved academic performance.¹ Nevertheless, Virginia has a relative flat per pupil funding structure that provides proportionately little supplemental funding for the increased costs associated with adequately educating students with special needs – *i.e.*, special education students, economically disadvantaged students, and students with limited English proficiency. Authorities estimate that a 40-60% “add-on” is needed to fund research-based interventions such as high quality preschool, teacher quality, smaller class sizes, and intensive early reading and math programs for students at-risk of educational failure.

Most programs for at-risk students are funded outside of the Standards of Quality and are particularly vulnerable to budget cuts. To the extent that these programs are recognized by most school divisions as necessary for students to meet state standards, they should receive constitutional protection.

¹ Va. Code Ann. § 22.1-199.1.

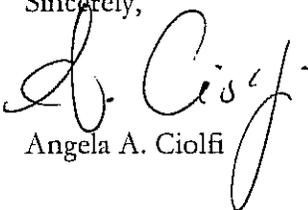
In addition to the Early Intervention Reading Initiative and the Algebra Readiness program, least two of the incentive programs for at-risk students meet the prerequisite that the Standards of Quality “must be realistic in relation to current educational practice.”²

- The *Virginia Preschool Initiative* provides funding for a high quality preschool program for at-risk four-year-olds. The current VPI program serves over 15,000 children statewide. A 2007 report by the Joint Legislative and Audit Review Commission found that children who participate in VPI are significantly better prepared for kindergarten. By reaching more at-risk children, it will mean fewer state dollars down the road for remedial and special education, social services, public benefits – allowing these students to have the tools they need to lead a self-sustaining life. Over time, these benefits translate to a rate of return of \$7-\$16 for every dollar invested in the Virginia Preschool Initiative. We recognize this is an extremely difficult budget year, but VPI is a lean program with a direct impact on at-risk 4-year-olds. VPI is currently funded through lottery funds, not general fund dollars, and competes with other lottery funded programs. Including VPI in the SOQ would recognize that, like early reading and algebra intervention programs, VPI builds a critical foundation for later success on SOL tests. For that reason, it is best described as an essential component of our existing K-12 program and should be included in the Standards of Quality. (FY 2011 state funding = \$60 million)
- The *At-risk Add-on Program* provides incentive funds to school divisions above the SOQ to support programs that address the needs of students educationally at-risk. It recognizes that it costs more to ensure that economically disadvantaged students receive an education that enables them to meet rigorous standards and provides school divisions flexibility to use the funds to meet the needs of those students.³ Accountability is provided by requiring schools to meet SOL pass rate and (soon) graduation benchmarks in order to achieve full accreditation. Schools report using these funds for SOL remediation, dropout prevention, tutoring services, ESL, computerized remediation programs, class size reduction, truancy officers, and reading and math resources teachers. All local school divisions participate in this program. (FY 2011 state funding = \$63 million)

In summary, recognizing these programs in the Standards of Quality would go a long way toward accomplishing one of the Board’s stated goals: to provide school divisions with additional instructional resources to address identified needs.

Thank you for your leadership and commitment to our students. Please let me know if you have any questions or concerns.

Sincerely,



Angela A. Ciolfi

² Task Force on Financing the Standards of Quality for Virginia’s Public Schools, December 1972 and July 1973.

³ See Dickey, Kent C., supra note 3.