## **REPORT by Narell C. Joyner**

### July 27, 2011

I.	Overview.			
I have been asked to investigate the services like is receiving from the Montgomery Public Schools (MPS), including the following questions:				
	A.	Whether can and should be served in a regular classroom in a neighborhood school.		
	В.	Whether MPS has provided planning and services that would enable to receive a free and appropriate public education (FAPE)?		
	C.	What planning and services does require to receive FAPE?		
I have substantial professional experience administering children's mental health systems and consulting with schools on how to serve students with emotional disturbance. I reviewed 's records, interviewed adults in 's life, and observed in his classroom. It is my strong opinion that can and should be served in a regular classroom in a neighborhood school.				
has significant strengths and interests, including that he continues to try to meet academic expectations at school. Can succeed in school if (1) he receives an appropriate assessment, including of his strengths, interests, and needs; (2) MPS develops a plan for that identifies appropriate interventions, including those that build on strengths to meet his needs; and (3) MPS adjusts the plan when needed. Moreover, if such steps are taken, can be educated in a regular classroom in a neighborhood school. Serving in a regular classroom will not require extraordinary efforts on the part of MPS, but rather basic assessment, planning, and intervention that every school district should be able to do.				
MPS has not served appropriately. Instead of providing needed academic and mental health supports, it has responded by punishing behavior that is a product of his emotional disturbance, including by transferring him to an alternative school and by placing him on				

Because MPS has failed to serve appropriately, as a serve is far behind his grade level

of school. and other MPS students with emotional disturbance are capable of

peers, and is at significant risk for continued involvement with juvenile justice and dropping out

"homebound" status.

progressing in school, graduating, and living successfully in their own homes and communities. MPS's systemic failure to properly serve students with emotional disturbance is depriving them of the opportunity to do so.

#### II. Background and Experience.

For the past 22 years I have worked in the area of children's mental health. This has included participating in, and supervising assessments, planning, and service delivery for children with emotional disturbance. I have participated in many system reviews, including reviews of services provided by and in schools. These reviews typically include record reviews; interviews with children, their families, and persons who provide professional or natural support to the family; service planning; and system organization. I have participated in such reviews in many states across the country, including North Carolina, Alabama, Florida, Illinois, California, Arizona, New Jersey, Massachusetts, Missouri, Arkansas, and the District of Columbia.

At the beginning of my career I worked as a special education teacher and supervised other teachers at the Murdoch Center, an institution for children and adults with developmental disabilities in North Carolina. At the Murdoch Center I taught students functional skills and developed their behavior plans. I also worked with "Project TEACCH," an organization supporting children with autism and their families. I assessed the strengths and needs of these children, and consulted with their teachers on developing IEPs and behavior plans, and structuring the classroom to better meet the students' needs.

For seven years I worked for the state of North Carolina as a regional coordinator for the "Willie M." program. This program, developed as a result of a lawsuit, served children with serious emotional disturbance and challenging behavior. The program offered, among other services, clinical services, in-home supports, and case management.

Almost all of the "Willie M." children were school-aged; always, if a child was struggling in school, I would go to the school to work with staff on service planning and implementation. I attended hundreds of IEP meetings.

While I was working in the "Willie M." program, I became a consultant to the child welfare system in Alabama as part of the "R.C." lawsuit. My job included helping particular counties, primarily Shelby and Jefferson counties, develop the "system of care" required by the "R.C." consent decree. My work included getting to know each community I worked in; reviewing records; meeting children and families; and helping to develop and implement service plans. I also trained case workers and their supervisors on assessment and service planning. I worked with hundreds of Alabama families during this time. I worked with schools, too: inviting school personnel to service planning meetings, observing children in school settings, and participating in IEP team meetings.

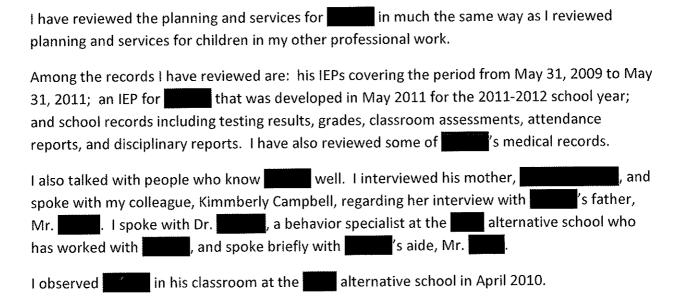
After working on "Willie M.," I became a regional mental health coordinator for the State of North Carolina. In that job I worked with the children's mental health system in western North Carolina. I consulted on treatment planning and, if need be, helped organize and facilitate team planning meetings. I served on service planning teams for hundreds of children before I retired from my position with the State in 2002. Many of these teams included school staff.

I have worked as a consultant to the Arizona Department of Behavioral Health, the Durham (NC) Mental Health Center, the Alexander Youth Network, the Annie Sullivan Foundation in Chicago, Project Friend in the Bronx, New York, and the District of Columbia public schools. This work has included identification, assessment, and service planning for children. I have also conducted numerous trainings on providing services to children, as well as on developing service systems. I currently consult with the Mecklenberg County Child and Adolescents Mental Health Program in Charlotte, North Carolina, where I live. I also consult with private providers in the County on how to serve clients who have the most significant issues. I helped develop and work with the "MeckCares" training institute. "MeckCares," in collaboration with Charlotte-Mecklenberg Schools, provides monthly consultation to the public schools in Mecklenberg County on how to serve challenging children. Together we create successful individualized service plans for students.

I have also worked on the "Rosie D." lawsuit in Massachusetts. My work included reviewing services for a sample of children with emotional disturbance.

My CV is attached as Exhibit A.

#### III. Work Performed.



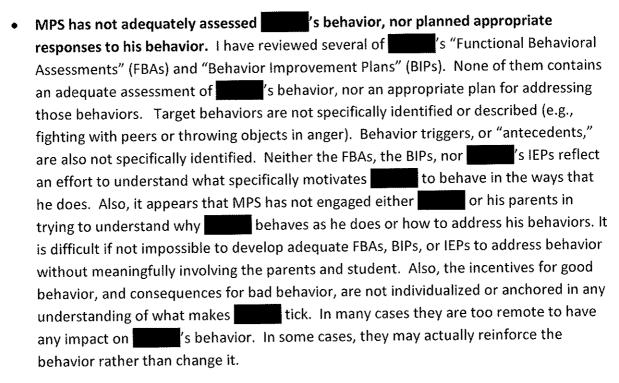
# IV. Background.

According to his mother, meet early childhood developmental milestones. He began to exhibit disruptive behavior at age three. At age four he attended a neighborhood Head Start program, where the staff knew his family and involved them in efforts to understand and manage his behavior.
Ms. reports that enrolled in kindergarten at second in MPS. She states that in kindergarten engaged in disruptive behavior and was expelled from kindergarten. 's father stated that was at home for nine months after leaving kindergarten and before starting first grade.
Ms. reports that clinicians at the Montgomery Area Mental Health Authority (MAMHA) first saw at age five. Mr. stated that was first administered psychiatric medication at about the same time, following his expulsion from kindergarten.
returned to for first grade. According to his mother, he was removed from first grade for nine weeks for his behavior. attended three different schools in the second grade: Elementary School, Elementary School, and the Learning Center. 's mother reports that Elementary School "put out after which he attended the Learning Center.
At his parents' request, and while he was in second grade, MPS evaluated for eligibility for special education. He was found eligible for special education as a student with emotional disturbance. His first IEP that I reviewed was developed during the 2005-2006 school year, during which he was in third grade, and was to be implemented during the 2006-2007 school year. He attended the Learning Center, a segregated school for special education students in grades K-12, from 2005-2008.
I have not had access to see so see see
began sixth grade at Middle School in the fall of 2008. According to Ms.  school staff at Learning Center planned 's transition from to  to  did not follow the transition plan, and "crashed" almost  immediately. He was suspended during the second week of sixth grade at this, he was placed in a "Behavior Improvement Program" (BIP) classroom, a segregated class

for students with emotional disturbance, which included students from all grades at He remained in the BIP classroom for about three months, through January 2009. He was then placed on "homebound status" from February-May 2009. While on "homebound," he was supposed to receive four hours of special education at home each week, but his mother reports that the teacher only came to the home twice during this period. During this time he also received in-home mental health services from MAMHA. began seventh grade, in the fall of 2009, in the BIP classroom at Middle School, but quickly was disciplined because of his behavior. MPS sent to the alternative school because of his behavior. At the alternative school, was assigned to a segregated classroom for special education students. When MPS proposed returning him to the BIP classroom at Middle School, his parents requested that he stay at the alternative school for the remainder of seventh grade, because had not been successful and because his father was receiving extensive medical treatment at the time. spent his eighth grade school year (2010-2011) in the BIP classroom at continued to have behavior problems, including fighting with other students and staff. During the school year, he was admitted to the Childrens' Hospital and later Hospital. In May 2011 school year, when is to be enrolled in the ninth grade at High School in Montgomery. currently lives with his mother and three siblings. His father lives in Montgomery but has a close relationship with his father. does not live with the family. MPS Has Not Served Appropriately. V. can be successfully served in a regular classroom in a neighborhood public has a strong interest in computers. He responds well when teachers speak with him in a calm manner, and when they praise him for meeting expectations. He attempts to complete assignments when they are communicated to him effectively. Both of parents have high school diplomas, and they have participated in his education. Significantly, is trying to stay in school and learn, even after all of the disruptions and struggles with academics and behavior. has not received the planning and services that he needs to make progress in school, to learn at grade level, or to be served in a regular classroom. As a result, he is behind academically, his behavior in school has improved little if at all, and he has spent most of his time in segregated settings.

Based on my experience in mental health and in working with schools to meet the needs of students with emotional disturbance, it is my opinion that MPS has failed in a number of specific ways:

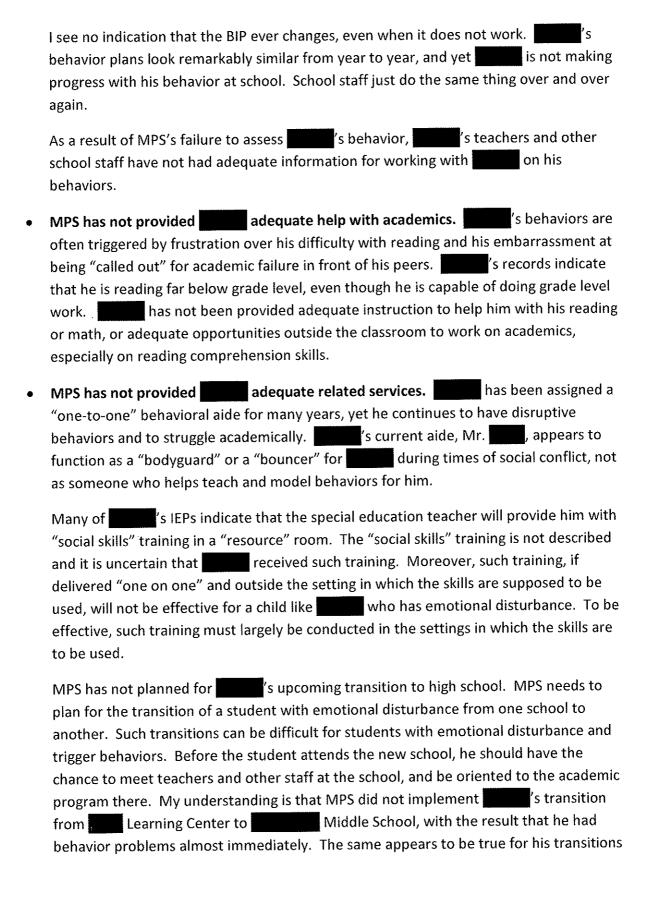
•	MPS did not timely identify as eligible for special education. According to his
	parents, was expelled from kindergarten, first grade, and second grade for
	disruptive behavior. But he was not found eligible for special education services until, at
	the earliest, the end of the second grade year. By that time had already lost
	months of instructional time, and was behind his peers socially and academically. MPS
	should have identified much earlier as a student with emotional disturbance and
	provided him the related services he needed. MPS had ample evidence that he needed
	special education.
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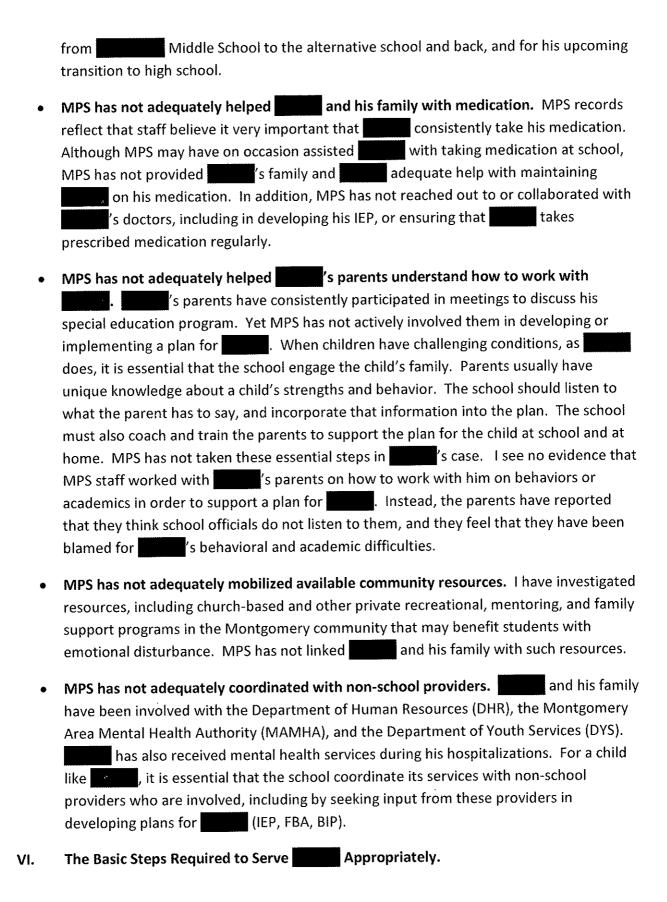


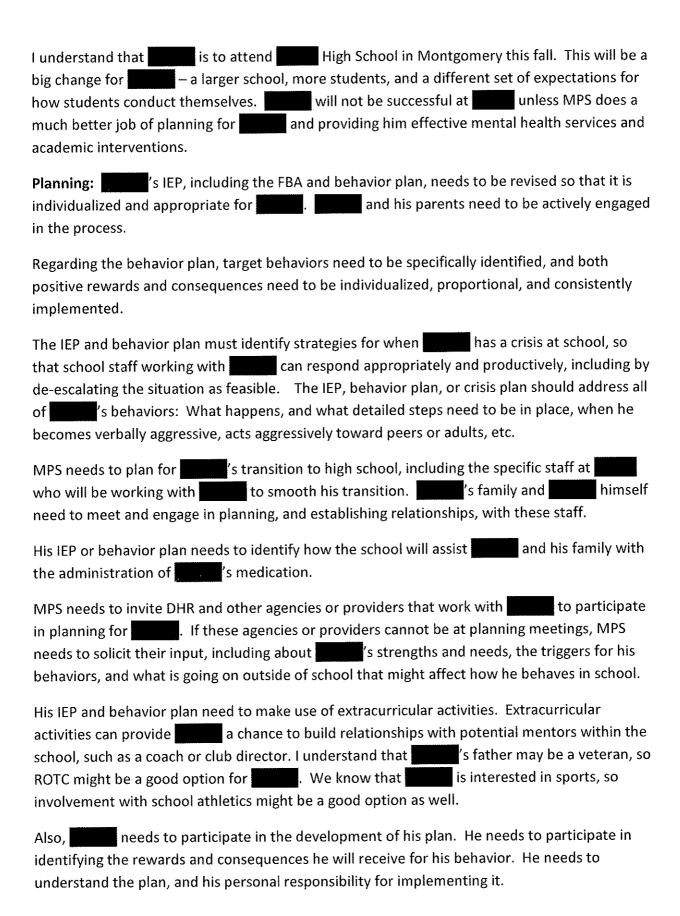
Neither the BIP nor the IEP includes strategies for addressing crises that will likely occur. One result is that staff often call strategies for addressing crises that will likely occur. Ye parents to come pick him up from school when they find his behaviors unmanageable or misunderstand the reasons for his behavior.

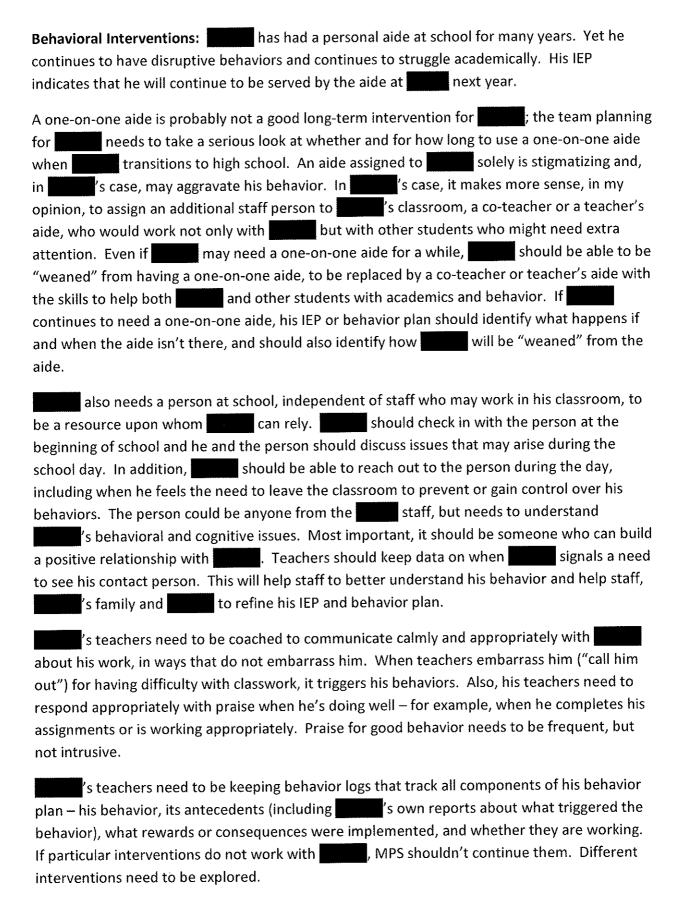
The IEP and BIP also do not address transitions between classrooms or other spaces within the school.

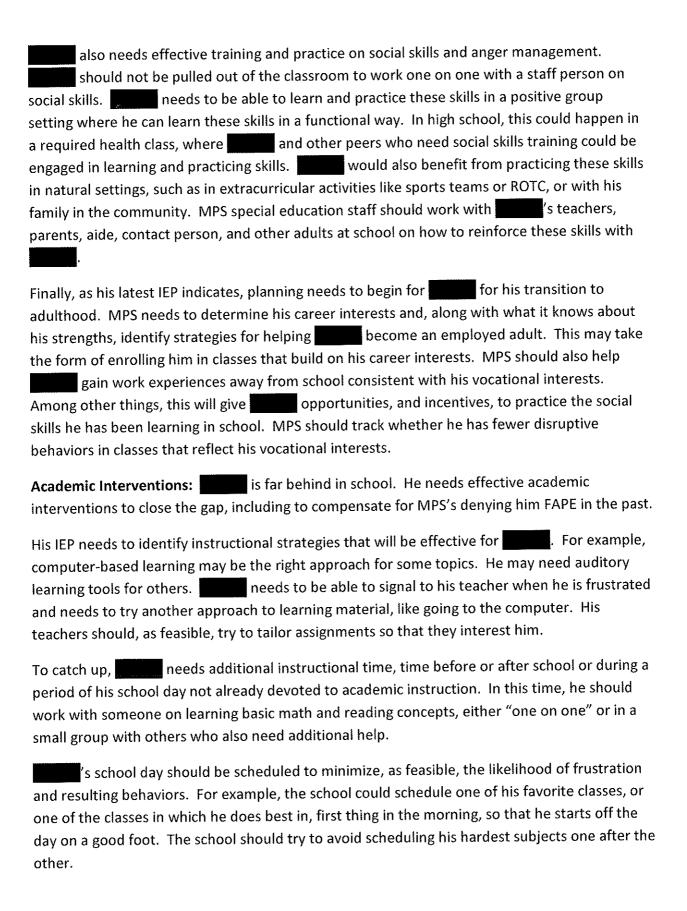
's parents have not been coached to help implement interventions at home that reinforce what the school is doing.

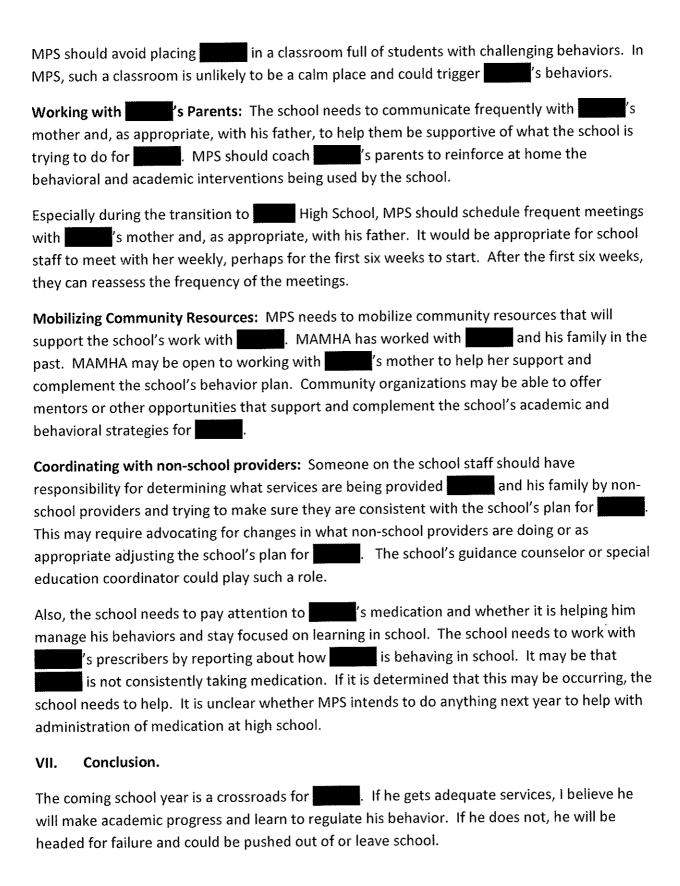












The interventions needs are basic intervent school system the size of MPS, should be able to prestudents with emotional disturbance.	
I have investigated the services MPS has available a disturbance. MPS has limited capacity to, and it ro students with emotional disturbance. systemic problem.	utinely fails to, provide effective services to
MPS. The same is true for other students with emonadequately will require MPS to engage families and services; to provide services of sufficient intensity; mobilize and coordinate with non-school providers working.	otional disturbance in MPS. To serve them distudents in planning; to individualize to craft competent behavior plans; to
Signed:	Date: