To: KAPS EC
From: Bob Illback
Re: Meeting on 3/2/85

As we agreed at the last meeting, there will be an EC meeting following Janet Graden's workshop on Saturday, March 2. Charlene informs me that we will move to Room 722 in the Administration Building at NKU for our meeting. I assume everyone has a map from Charlene's mailing, and have not included one in this letter. The tentative agenda is as follows (let me know if there are other items):

1. Secretary
   Minutes
   Mental Health Coalition
   NASP

2. Treasurer
   Financial report
   FY 85 Budgets as submitted by committee chairs

3. Past President
   By-laws revisions
   NASP regional report
   Corporal punishment
   Status of discipline code

4. President
   Status of KAR revisions
   Essential skills
   Special education coalition initiatives
   Counselor intellectual evaluation issue
   Governor's Council on Education Reform

5. Ethics and Professional Standards
   Complaint adjudication procedures

6. Liaison and Public Relations
   Poster
   Consumer's Guide
   KCSEC - booth, Handbook
   Mental Health Resource Fair
   School Psychology: A Blueprint for Training and Practice
   KPA
   TV promotion
   ED NEWS

7. Legislative
   Unit funding
   KRS 319

8. Program
   Convention site, arrangements, speakers, KACE, etc.
   Summer Institute

9. Newsletter
   LD issue?

10. CPD
    Submissions, enrollment

11. Membership
    Status of membership, roster

12. State consultant
    Merit Rating
    Current events
Ms. Lois Adams, Associate Superintendent
Office of Education for Exceptional Children
Capital Plaza Tower
Frankfort, KY 40601

Dear Lois,

Thank you for the opportunity to provide input to the process of reviewing and revising the Kentucky Administrative Regulations pertaining to special education. As an organization concerned with the appropriate identification, placement, and education of handicapped children, the Kentucky Association for Psychology in the Schools has a number of specific issues in regard to the KARs as they are presently construed. In the remainder of this letter I will attempt to specify these.

1. In most of the categorical areas, the section of the KARs dealing with child evaluation specifies a component of the evaluation to be an individual intellectual assessment. In many districts, this translates into the generation of an IQ score through the administration of an IQ test (often by a minimally trained examiner). We believe that, as in nearly all other states, this requirement should be more properly termed individually administered school psychological evaluation, to imply a more thorough assessment of the child's cognitive functions by a school psychologist or psychometrist. Clearly, no one score is to determine a child's classification, and we believe the above will serve to clarify the intent of the regulation. Additionally, it is our hope that such language will lead to higher quality assessment services.

2. We believe that the KARs should explicitly require that LEAs make provisions to have the assessment specialist(s) who administer the assessment present at the meeting in which critical decisions about the child in question are made. We believe that many decisions are made without this critical involvement and input, leading to misclassification and related poor decisions. Concern about pupil identification procedures and
effects is an emerging and complex issue, and we believe much of the
problem relates to the regulation as currently written. In many
districts, unfortunately, school psychologists are prevented from
contributing to such decisions due to abnormally high testing loads and a
lack of sanction for their involvement. We hope this can be corrected
through a regulation change.

3. Re-evaluations are a major problem for assessment personnel. We would
like to see some provision made for scaling down the requirements for
re-evaluations, at least to allow for some clinical judgement regarding
the scope of the assessment. Relatedly, we would like to see some
changes in the requirement that graduating high school seniors need to be
re-assessed on schedule.

4. The current KARs are not sufficiently explicit regarding related
services, including school psychological services. We would like to see
some guidelines which delineate LEA responsibilities and appropriate
practices regarding related services (e.g., mechanisms to assure that
related services are integrated with other forms of educational
intervention). Additionally, we would like to see a definition for
school psychological services adopted as part of the related services
component. The definition from the Kentucky Comprehensive School
Psychological Services Handbook, adapted from the National Association of
State Consultants for School Psychological Services, follows.

School psychological services include:

(a) preventing educational and behavioral problems through early
identification and consultation
(b) identifying special needs of children through consultation,
observation, and other psychological and educational assessments,
(c) analyzing, integrating and reporting psychological and
education information about child behavior and conditions related
to learning,
(d) consulting with teachers and other staff members in planning,
implementing, and evaluating school programs and interventions to
meet the identified psychological and educational needs of
individuals and groups of children,
(e) planning and managing a program of psychological services
including:
   1) prereferral, referral and assessment services
   2) early identification services
   3) intervention and counseling for children
   4) parent counseling and training
   5) program evaluation and applied educational research

5. In the area of the mentally handicapped, we would like to see the
language pertaining to adaptive behavior made more explicit, to specify
the essential components of the AAMD definition (which is generally
accepted nationwide).
6. In the area of emotionally disturbed/behavior disordered, we believe there is an emerging crisis in relation to proper identification. At a minimum, we think there should be a requirement for systematic and sophisticated behavioral observation and assessment to pinpoint the nature of the behavioral disabilities. Additionally, we think the child evaluation regulation should read "individual school psychological or psychiatric evaluation".

7. As presently written, the KARs do not give sufficient recognition to the need, in many cases, for pre-referral consultation and intervention. This has resulted in abnormally high referral rates and an over-emphasis on testing. We believe the KARs should explicitly sanction pre-referral consultation and intervention by a range of specialists, to include school psychologists, special education teachers, educational diagnosticians, and others.

8. We believe there is a need to clarify the language pertaining to the category of multiple handicapped, such that these classes are not so vulnerable to become "dumping grounds" for children who do not fit elsewhere.

9. We perceive great pressure to increase class sizes in special education, given the number of identified children, and hope this will not occur. As it is, many special education programs are serving equal or greater numbers of children than are in regular classes. Remediation programs in Grades 1 and 2 with ratios of 13:1 stand in sharp contrast to special education classes with 20 or more children.

I trust the above suggestions will be useful in your efforts to make judicious and useful revisions to the existing KARs. We stand ready to assist in whatever way you perceive as useful, knowing that your overriding purpose is to improve the quality of services provided to Kentucky schoolchildren. Thank you again for the opportunity to provide input.

Sincerely,

Robert J. Illback
President

cc: Dr. Randy Kamphaus, Legislative
    Ms. Cookie Cahill, Legislative
    Ms. Pat Guthrie, KDE
    Mr. Bill Nallia, KASA
December 11, 1984

Dr. James Fouche, Assistant Superintendent
Office of Instruction
Kentucky Department of Education
Capital Plaza Tower
Frankfort, KY 40601

Dear Dr. Fouche,

The purpose of this letter is to express a concern regarding the psychological assessment of children by relatively untrained school personnel. As you may be aware, at the present time a number of role groups have been defined as "qualified examiners" for the purpose of administering and interpreting psychological tests, most typically for the diagnosis and placement of children into programs for the handicapped. School psychologists are considered "qualified examiners" by virtue of an extensive training program, including 60 graduate hours of training and a school-based internship of at least one-half year's duration, leading to Standard certification. School psychometrists trained prior to 1985 are considered to also be qualified by virtue of certification guidelines. It is notable in this regard that psychometry was dropped as a certification area because the Council for Teacher Education and Certification determined that the certification requirements were not sufficiently stringent for this role (attached please find a set of documents describing the Council's considerations in this regard).

The concern of the Kentucky Association for Psychology in the Schools is that school counselors have also been authorized by the Kentucky Department of Education to conduct such evaluations. This was originally a policy statement issued by Superintendent Graham which has never been considered by the Council on Teacher Education and Certification or codified in certification regulations. Essentially all that is required for counselors to perform this function is the completion of one three-hour course on the administration of intelligence tests (typically, the WISC-R) and certification by the local superintendent that the individual is indeed qualified to perform this function. This seems inconsistent with the current emphasis on rigorous training standards for practice.
We believe the current situation is problematic for a number of reasons. For one, there is no requirement that training in the areas of special/remedial education, child exceptionality, cognitive development, psychometric theory, diagnosis, or psychoeducational interventions accompany counselor proficiency in administering intelligence tests. There is an extensive body of knowledge with which practitioner's need to be familiar in order to appropriately use such tests, and counselor training typically does not include these areas. Additionally, PL 94-142 and the relevant KARs stress a multifaceted and integrated assessment which does not solely focus on "intelligence testing" for decision-making. Assessment specialists must therefore be able to gather and integrate a range of assessment information, not just generate an IQ. Moreover, "intelligence testing" is a function that counselors have been given in local school districts which is non-traditional for their profession, which most have no wish to perform, and which is a responsibility that prevents them from performing more traditional (and vitally needed) counselor functions (e.g., classroom guidance, personal counseling, and vocational/career guidance). It is notable that in nearly every state, including each state on Kentucky's borders, school psychologists conduct the intellectual/cognitive evaluation as part of the total assessment required by law.

I have also attached the position statement of the American Psychological Association on this matter, for your information.

Please be assured that in no way do we wish to imply that school counselors have not diligently and strenuously sought to carry out their assigned responsibilities with the best of intentions. Historically, counselors have been asked to wear many hats in Kentucky, and we believe this has caused difficulties in carrying out the role. Our goal in this letter is to articulate a concern which we think our colleagues in the Kentucky Association for Counseling and Development share, and to seek solutions which will insure that the highest quality services will be provided to the children of the Commonwealth. We would like the Department of Education to reconsider its current policy on this issue, and develop a plan for further developing and improving assessment services.

We would be pleased to provide further input into this issue at the appropriate time. Thank you for your consideration of this matter.

Sincerely,

Bob Illback
Robert J. Illback, Psy.D.
President

cc: Dr. Sidney Simandle, Teacher Certification
Ms. Lois Adams, OECC
Ms. Margaret McClain, Student Services
Ms. Pat Guthrie, KACD
Mr. Bill Nallia, KASA
KENTUCKY COALITION FOR THE HANDICAPPED

STATEMENT OF PURPOSE

WHEREAS, Handicapped individuals have a legal and moral right to equal educational, vocational, and social opportunities, and,

WHEREAS, Handicapped individuals have a range of needs which require more extensive and intensive services, and,

WHEREAS, Parents, professionals, and the community as a whole need to be committed to the development of needed services, and,

WHEREAS, Full equity and accessibility of services for handicapped individuals have not yet been attained,

NOW THEREFORE, BE IT RESOLVED THAT THE KENTUCKY COALITION FOR THE HANDICAPPED IS FORMED FOR THE PURPOSES OF INFORMATION SHARING AND ADVOCACY IN PUBLIC POLICY.