

APPROVED
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Rockville, Maryland
February 17, 1994

The Board of Education of Montgomery County met in special session at the Carver Educational Services Center, Rockville, Maryland, on Thursday, February 17, 1994, at 7:45 p.m.

ROLL CALL Present: Mrs. Carol Fanconi, President

in the Chair
Mr. Stephen Abrams
Ms. Carrie Baker
Mrs. Frances Brenneman
Dr. Alan Cheung
Mr. Blair G. Ewing
Mrs. Beatrice Gordon
Ms. Ana Sol Gutierrez*

Absent: None

Others Present: Dr. Paul L. Vance, Superintendent
Mrs. Katheryn W. Gemberling, Deputy
Dr. H. Philip Rohr, Deputy
Mr. Thomas S. Fess, Parliamentarian

RESOLUTION NO. 141-94 Re: BOARD AGENDA - FEBRUARY 17, 1994

On recommendation of the superintendent and on motion of Mrs. Gordon seconded by Ms. Baker, the following resolution was adopted unanimously by members present:

Resolved, That the Board of Education approve its agenda for February 17, 1994, with the addition of a resolution on the death of Mr. Phil Campbell.

RESOLUTION NO. 142-94 Re: DEATH OF MR. PHIL CAMPBELL

On motion of Mrs. Gordon seconded by Ms. Baker, the following resolution was adopted unanimously by members present:

WHEREAS, Phil C. Campbell taught at Francis Scott Key from 1977 to 1984 where he coached soccer, track, and basketball; and

WHEREAS, Mr. Campbell taught sociology at Paint Branch High School from 1984 until his retirement in 1993 and sponsored the Ebony Awareness Club, the Student Government Association, the Asian Awareness Club, and Amnesty International; and

WHEREAS, Mr. Campbell earned national recognition for the death education unit he introduced in 1985 at Paint Branch; and

WHEREAS, Mr. Campbell valued diversity and demonstrated, by his involvement in the lives of his students, a strong appreciation of and respect for individual differences; and

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WHEREAS, Mr. Campbell will be remembered by students, staff, and community as a teacher, coach, sponsor, mentor, and friend; and

WHEREAS, Mr. Campbell used every opportunity to encourage discussion and debate on issues, including difficult topics such as racial and ethnic diversity, death, and dying; and

WHEREAS, Typical of Mr. Campbell, he took his own illness as an opportunity to help students understand death and dying and the effects of HIV and AIDS and, in turn, for his honesty and courage, he received the love and support of his students, parents, staff, and community; now therefore be it

Resolved, That the members of the Board of Education express their sorrow at the untimely death of Phil C. Campbell and extend their deepest sympathy to his family.

Re: MEDICAL ADVISORY COMMITTEE ANNUAL REPORT - 1992-1993

Dr. Eugene Sussman, chairperson of the committee, presented the following recommendations to the Board:

1. Health Room Technician. They requested that the Montgomery County Board of Education, with the Montgomery County Department of Health, petition the County Council and county executive that the remaining 26 school health rooms be covered by a health room technician with appropriate school nurse supervision during school hours to support the physical and psychological well being of each child. They prefaced this on the change in society and their concerns about single parent homes, uninsured children in need of health care, latchkey children, dual working parents, before- and after-school child care, and inclusion of children with disabilities into home schools.

2. Hepatitis B Vaccinations. Hepatitis B is a viral infection preventable through the administration of a series of three inoculations. The committee recommended that every member of the teaching and support staff at risk receive the Hepatitis vaccinations. Also, the committee recommended that any student or staff member at risk for a potential blood, saliva, or fecal exposure receive the Hepatitis B vaccinations.

3, Half-credit in Health Education. The scope of the State of Maryland mandated .5 credit in health was very complex. The committee has reviewed extensively the curriculum that MCPS was developing. The committee recommended that the topic of eating disorders needed to be addressed throughout the elementary and secondary curriculum as well as in the required health education course. The committee endorsed this new graduation requirement wholeheartedly.

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4. Linkages to Learning Program. There were now three school-based centers operational and filling the community need that led to their creation. These centers were at Summit Hall and Highland elementary schools and the Rocking Horse Road facility.

The committee supported the expansion of this interagency effort to offer health, social service, and mental health services at one site. The centers needed to address health concerns related to alcoholism, physical abuse, mental health, and social service related issues. They hoped that Montgomery County would receive one of the two state sites for other school-based clinic models.

5. CPR - Cardiac Pulmonary Resuscitation. In recent years, MCPS had had to drop the high school CPR training from the curriculum.

This decision was a financial one due to the high cost of maintenance of the training equipment and costs associated with teacher training to meet continually certification requirements.

In June of 1993, the Montgomery County Fire and Rescue Department, with the Montgomery County Medical Society, stated the first "Lifesavers Day." The program would be an annual event in Montgomery County to educate and train adults and children, 12 and older, in basic community CPR. They believed it was the intent of county government to train as many individuals as possible in the skills of lifesaving. The newer equipment was easier and might be less expensive to maintain. In this era of fiscal restraint, they had to look at other avenues of CPR education. The committee recommended that MCPS develop an interagency CPR program for all high school students. This program should include the services of Montgomery County Fire and Rescue, the Medical Society, and the school system.

Dr. Sussman stated that prior to discussing the sixth recommendations on Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome (HIV/AIDS), he would like to give an introduction. The World Health Organization reported on November 26, 1993, that well over 5,000 people became infected with AIDS every day, and they called for an urgent action to fight this disease which could strike some 40 million people by the year 2000. Their director general stated that HIV was spreading faster than efforts to slow it, and few areas in the world remained untouched by HIV/AIDS. On January 21, 1993, the Maryland State Medical Society released its strategic plan that defined the goals and objectives set by the Committee on AIDS. They recommended condom availability through drug rehabilitation, public health clinics, and school nurses. In 1993 the report of the Montgomery County Task Force on AIDS/HIV was completed. They recommended establishing a resource committee to study the feasibility of a condom availability program in junior and senior high schools. On September 13, 1993, the executive board of the Montgomery County Medical Society reviewed the medical advisory committee's report, and they were unanimously in support of the recommendations contained in tonight's report.

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Dr. Sussman commented that HIV epidemic made it necessary to immediately make preventative measures available to the adolescent population. He reported that a majority of adolescents were sexually active and most did not use condoms. Studies had shown that adolescents were more likely to use condoms if they believe they were at risk for AIDS and if condoms were simple to obtain.

Dr. Sussman remarked that in five major cities in the United States AIDS was the leading cause of death in young adults who were in their twenties. This meant these individuals acquired HIV as teenagers. In Montgomery County between 1983 and 1992, almost 700 residents were diagnosed with AIDS. The Centers for Disease Control estimated that as many as ten times that number, or almost 7,000 county residents, might be infected with the virus that caused AIDS. In 1991, AIDS/HIV killed 29,850 people.

AIDS was a fatal disease and was the number nine cause of death in the United States. There was no known cure or immunization. Therefore, they must protect the adolescent who was at risk. For the past two years, the Medical Advisory Committee had been researching the issue of condom education and condom distribution in the high schools of this county.

Dr. Sussman stated that many adolescents engaged in unsafe and risky behaviors. One of these was unprotected sexual activity. By age 19, most adolescents had engaged in sexual intercourse, but fewer than half had used condoms. Use of condoms might help those adolescents who are at risk from contracting sexually transmitted diseases such as AIDS.

The Medical Advisory Committee voted unanimously (the staff liaison not voting) that the Board of Education should take the lead in AIDS and other communicable disease prevention by including abstinence-based education in the curriculum. They further recommended that the Board, in consultation with the Montgomery County Health Department, also consider condom distribution to students in high school health rooms with required educational and counseling components along with the distribution of condoms.

Dr. Sussman quoted from a student, "If condoms were distributed or easily available through the nurse's office, more students would use them." This student thought they should be more concerned about the students' health than the political pressure from parents regarding condom availability. He thanked the Board for listening to their report.

In regard to health room technicians, Mrs. Brenneman asked that if the committee had testified before the County Council. Dr. Sussman replied that he had sent letters and Dr. Tuck had testified. Mrs. Brenneman suggested that the committee appear

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during this budget session. Mrs. Fanconi recalled that last year the Board had sent a letter in support of increasing the school health technicians, and she suggested that if they did so this year they include school-related statistics.

Mr. Abrams asked about the age appropriate for Hepatitis B shots.

Dr. Sussman replied that as of July, 1992, the American Academy of Pediatrics recommended all children a year and under start immunizations. They also recommended children 12 and older, and they were starting to vaccinate in high school because of shared needles, blood exposure, or sexual intercourse. The downside to the recommendation is this was very costly, and it was not required by the state. Vaccine availability was a problem. The adult dose was \$40, which meant \$120 for the series. Mrs. Fanconi said she had a question about the prevalence of hepatitis among staff so they could determine the types of employees most at risk.

Mrs. Fanconi noted that the students seemed to focus on the need to know more about eating disorders. Dr. Sussman replied that many students did not know their friends had the disorder and found out when the youngster became ill or was hospitalized. They needed to teach early recognition by friends and family members. They wanted to address teaching good eating habits to children as well as some self esteem.

Dr. Cheung pointed out that the parents, relatives, and friends of students were taking prescription and over-the-counter drugs.

He asked whether the health education curriculum addressed the issue of appropriate use of drugs other than saying drugs and alcohol were bad. Dr. Sussman explained that they had discussed this; however, there was a lot to be included in just a half credit course. Mr. Russell Henke replied that prescription drugs were covered in units on tobacco and alcohol and in personal and consumer health. This started in fourth and continued in sixth, seventh, eighth, and in high school.

Ms. Gutierrez asked whether the committee presented curriculum recommendations to staff or presented these recommendations in their report to the Board. Dr. Sussman replied that Mr. Henke and other staff members had been very receptive to recommendations from the committee. Ms. Gutierrez asked whether the Board had to take an action on the basis of the committee's recommendations. Mrs. Fanconi explained that the superintendent would be sending the Board his response to the recommendations of the committee. At that point, the Board could take action as necessary. Ms. Gutierrez expressed her thanks to the committee for the time they spent in reviewing curriculum.

In regard to linkages to learning, Mrs. Fanconi said she would be asking about the cost to MCPS for the school-based centers, and she thought the committee should ask this question of the county

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government as well. She indicated that Dr. Vance would be providing information on the cost of the CPR recommendations. Mrs. Fanconi requested a copy of the World Health Organization comments.

Mr. Abrams thought that the statistical reviews were not Montgomery County specific. Dr. Sussman replied that HIV was not a reportable disease and only became reportable when it became AIDS. HIV was a hidden disease for the first ten years, and when people became infected in 1994, they would not be reported until the year 2000 or thereafter. They were concerned about the teenage group as well as the middle age group because these were the two groups having multi-partner sexual relationships, and the risk was great.

Mr. Abrams asked whether they had statistics on the sexual activities of teenagers in Montgomery County. Dr. Sussman replied that they were using national surveys as well as surveys of suburban areas like Montgomery County. There had been no surveys in Montgomery County. Mr. Abrams asked whether they had statistics on venereal disease in Montgomery County, and Dr. Sussman replied they did. Mr. Abrams asked about comparisons with other similar jurisdictions. Dr. Paul Feldman replied that he was familiar with surveys in similar counties such as one done in the Boston area. If children got the HIV virus during adolescence, they would develop AIDS in their mid-twenties. This was what was happening in the county because 20 percent of all new cases of AIDS were presumed to occur during adolescence. In his own private practice which was middle and upper class, he saw that adolescents were very sexually active and were getting STDs. He had not seen a lot of cases of AIDS in his own practice. Mrs. Fanconi suggested that it would interesting to get some data from the Health Department. Ms. Carol Mathews reported that 23 percent of the STD cases were under the age of 18. There had been a decrease in gonorrhea and an increase in syphilis among the 13-14-15 year old children.

Mrs. Fanconi noted that the committee was recommending including abstinence-based education in the curriculum. They already had abstinence as part of the curriculum, and she wondered if they were recommending increasing this, only offering abstinence, or offer a combination. Dr. Sussman replied that they would like to continue teaching abstinence-based education, and they would like to offer something additional for those not following that particular line of thought, those who were sexually active. He remarked that some students had met with the committee in January, and one student from Paint Branch had commented that when students saw someone they respected and loved wither away from AIDS, at that point they understood what AIDS was about and why people were telling them not to be sexually active or not to have sex without protection.

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Mr. Abrams thought they could bring in speakers or models which students could identify with. He was getting at whether the support for an abstinence-based curriculum was more lip service as opposed to a true belief that it could be effective. Dr. Sussman replied that the committee felt it worked in some households with a stable family unit; however, the family unit had changed. He believed that if they set examples as parents many of their children would follow that lead, but a small percentage of students did not because of who they befriended. He could not guarantee that a teenager was not going to look for a warm, loving relationship and not have intercourse. He wanted to make sure those students did not get a disease that was going to kill them.

Dr. Feldman commented that abstinence-based education was most effective with pre-teenagers and younger teenagers, those who had not yet had sexual intercourse. Studies had shown that when they worked with these children on abstinence they were more likely to remain abstinent when they got to their mid-teens. When they worked with those who had already had sexual intercourse, it was much more difficult to talk about abstinence. There was something called "secondary virginity" which spoke to children who had already had intercourse about stopping that trend. It was found to have no long-term positive effects. These students needed more information about condom usage and alternatives to sexual intercourse to express their emotions. He believed that if abstinence was going to work, it had to be in the younger age groups and those who had not yet had sexual intercourse.

Mrs. Fanconi thanked the committee. On the distribution of condoms, Mrs. Fanconi believed that this was a health issue and that the Health Department needed to make the policies here. It seemed to her there were many ways to make condoms available not only to youngsters but to the general population including vending machines. She said it was somewhat simplistic to say the only place that a youngster could get a condom was in school, and she suggested that the committee testify before the Council and encourage them to take some positive steps along the lines of making condoms available to the general public and not to focus only on the schools. She appreciated the work of the committee and the tremendous service the committee provided on public health.

Re: UPDATE OF THE SUCCESS FOR EVERY
STUDENT PLAN

Dr. Vance explained that he would be bringing in recommendations for action to the Board at a future time. He stated that he and staff were pleased to present an update of the Success for Every Student Plan. He did not think the Board took enough credit for the success of the plan. At the recent AASA convention, he noted that in the past two years school systems and state departments

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of education had adopted a variation of this theme. MCPS was getting requests for copies of the plan and for staff to be speakers and consultants in other school systems.

Dr. Vance believed that the original vision and goals approved by the Board remained timely and consistent with today's needs. They would have to have a strategic plan for a very time to address success for all students. The progress made in the past two years in addressing these issues reinforced the original intent of the plan and re-emphasized the value of maintaining continuity even as they sought continuous improvement. One of the strongest aspects of the plan was its flexibility; therefore, this evening's update incorporated new initiatives and highlighted areas where they had made demonstrable progress. They had included new Board policies in the update, organizational changes, and other modifications to strengthen the plan's ability to continually address the needs of every student.

Dr. Vance commented that the Success for Every Student plan remained a vital and effective strategic framework for MCPS. Because of it, they had not only changed attitudes and ideas, but they had also taken concrete steps to ensure that every child was expected to succeed and to give that child the opportunity and tools to do so. They did not believe that a child had a right to fail.

Mrs. Gemberling explained that staff kept the plan not in a hard copy but rather in their computers, and as things changed, they had changed their working document. At this point, they felt that the printed document should reflect the working document. The document contained organizational changes, feedback received from users and the public, and new Board initiatives, policy, and action areas.

Mrs. Gemberling noted that there were few changes in the introduction except for an addition of a paragraph. Success for Every Student began with looking at the individual student and being aware of the success or lack thereof and having the earliest possible intervention strategies and monitoring those results. They had focused on mathematics and still considered that the gateway, and they were pleased with some of the gains in these areas. They had changed some of the future tense to the present because they had started to accomplish these goals. In the outcomes they had added two outcomes regarding the MCPS assessment program and their own local CRTs. In the standards section, they had added additional standards from the state or locally. Executive staff members would take the Board through the goals and strategies to highlight changes.

Dr. Hiawatha B. Fountain, associate superintendent, stated that the document now reflected the new special education policy. Strategies 1.4 and 1.5 focused on reducing the disproportionate

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representation of African-American males in special education. The revisions incorporated feedback from the staff and the community and took into account the role of the equity assurance officer. They needed to collect data to address the issue of disproportionate representation. They knew the Educational Management Team (EMT) was the gateway, and they were now gathering information which would allow them to determine who was being referred to the EMT, for what purpose, and what happened to these students. Schools would collect this information and use it to develop school improvement plans.

In regard to Strategy 1.5, Dr. Fountain explained that the focus of this strategy had been shifted away from the concept of readiness for the mainstream. Now there was a two-pronged approach. The first approach was to ensure effective implementation of appropriate procedures for the identification of students with disabilities. The second was the identification of student goals, instructional strategies, and needed supports for success in the least restrictive environment that might identify students who could be successful in general education without the need for special education services. They would be looking at students currently in special education who might be able to manage without these services. Many of those students were in the area of serious emotional disturbance. Another section reflected the training under Policy IOB: Education of Students with Disabilities. They would have emphasis on pre-referral and early intervention strategies that might prevent students from going into special education. They would also have competencies to assist school-based staff in the identification of individual student goals, instructional strategies, and needed supports for success in the least restrictive environment which replaced the readiness profile.

Dr. Fountain said that the purpose of these tasks was to identify students who could be successful in general education without special education services. Another section included the equity assurance officer who would monitor this and look at the effectiveness of efforts to return students back to general education.

Dr. Cindy Sullivan, representing Dr. Joseph Villani, reported that Strategy 1.7 reflected Policy IEF: Early Childhood Education and also addressed one of the ten action areas adopted by the Board. This was an added strategy to ensure readiness for school. They had four tasks. The Office of Instruction and Program Development would organize all units with responsibility for early childhood education to achieve the most efficient and focused use of resources to implement the early childhood policy.

In order to achieve this, they presented a plan to realign all of the early childhood services on January 24. They hoped the realignment would ensure full implementation of the policy by providing higher levels of communication, cooperation,

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collaboration, and coordination among the various programs.

Dr. Sullivan reported that the next task was for OIPD to continue to provide training for all teachers of pre-kindergarten through grade three in using developmentally appropriate practices. They had been engaged in very intensive staff development opportunities, and much of this was supported by Chapter 2 funds.

She recalled that on January 24, they had reported to the Board that they were collaborating with county agencies by helping to train day care providers and other aides. The next task was a collaboration to establish a model program of developmentally appropriate practice in one or more schools to use as a training resource. They were gathering information and visiting other LEAs as well as relying on very exemplary classrooms in Montgomery County. This fall they planned to have these classes at some level, and in FY 1995 they had additional funds to support their extensive training efforts. On their last task, OIPD and DEA would work with principals and teachers to identify developmentally appropriate assessment strategies to provide information on the readiness for learning and the academic progress of early childhood students. They had a new training series that would assist principals, teachers, and parents to understand and accept authentic assessment including carefully recorded observations and portfolio collections of student progress.

Dr. Sullivan indicated that they had a committee on assessment, development, and implementation which they called CADI. They had another committee called the School Assessment Leadership Team (SALT). These were in place to address assessment which would be presented to the Board in March. They had been working diligently to make sure they focused on students through the entire continuum.

Dr. Phinnize Fisher, associate superintendent, said she would be discussing Tasks 2.1.7, 2.2.5, and 2.6.6 because they dealt with providing an effective educational program for students with disabilities. OIPD in collaboration with the Office of Special and Alternative Education would identify strategies to increase mathematics achievement levels for students who have alternative outcomes. Students with disabilities had individual educational programs (IEPs) that specified the objectives and outcomes they were expected to reach. As part of their push to ensure that all students met with success in mathematics and in reading/language arts, it required a joint effort between OIPD and OSSE in identifying instructional strategies that were particularly appropriate for students whose IEPs included mathematics and reading/language arts outcomes. Task 2.6.6 required OIPD, OSSE, and DEA to identify measures and indicators of achievements for students with disabilities for whom existing measures were inapplicable or invalid. A related issue was that the achievement measures used with regular students such as the

criterion-reference test and mathematics/reading/language arts were not appropriate for some students with disabilities. However, they would measure the academic progress of these students.

Dr. Fisher called attention to Task 2.1.8 and Task 2.2.6. One referred to mathematics and the other to reading/language arts. In November OIPD did establish a Council on Assessment Development and Implementation (CADI). Although mathematics and reading/language arts were presented as separate tasks for Success for Every Student, they had only one Council which would review and recommend assessments in mathematics and reading/language arts.

In Tasks 2.7.3 and 2.7.4 OIPD and the Department of Technology Planning and Data Operations had been working on the implementation plan for the Board's policy on educational technology. The implementation plan would be coming to the Board for discussion on February 22. One part of that plan involved providing all schools with access to the Internet. Currently only Montgomery Blair High School had this access. They wanted all schools to have access to this information superhighway and believed it would be an invaluable resource for gifted and talented students at all levels. Using the Internet, students would be able to consult electronically with adults with specialized expertise and collaborate on projects with students from other schools.

Dr. Fisher said that Task 2.8.3 required OIPD and the magnet school staff to continue to work to disseminate successful practices from magnet programs that could be extended to other schools in order to expand the array of creative and challenging learning experiences for highly able students. Staffs in magnet schools were constantly trying new programs and approaches with their students. With the help of OIPD, successful practices would be disseminated to other schools. For example, the staff at Montgomery Knolls ES already had received extensive training in the use of multiple intelligences. Teachers at Montgomery Knolls had been trained to identify students who were gifted in different ways and to differentiate instruction for them. Based on the success of this program, training would be offered to staff members from other schools. On March 10, there would be a high school conference to disseminate successful magnet and program practices.

Dr. Elfreda Massie, associate superintendent, reported that Strategies 2.9 and 2.10 were new ones and grew out of Board discussions and initiatives. The first was to ensure instructional excellence by defining and assessing student knowledge and skills, based on measurable expectations, progress, and outcomes. The purpose of the strategy was to define what students knew and what they should be able to do. The first task

under the strategy required staff to develop a process for conducting a comprehensive review of instructional objectives, content area by content area. After that, they would conduct an internal review of the complete curriculum objectives from pre-kindergarten through grade 12. They saw this as a multi-year process. They believed that all students were gifted and had talents, and they also believed that all students should have opportunity to have access to all MCPS programs. They wanted to improve both early childhood and gifted and talented programs to make them richer, more rewarding, and more challenging. At the same time, they would make these programs more accessible to all students.

Dr. Massie indicated that the second new strategy was to assure services for students with limited English proficiency through an examination of instructional and service delivery models to ensure that each student with limited English proficiency received a quality education. This was a specific action area of the Board of Education, and they would be discussing this in April. The first task was to establish a comprehensive work group to look at existing services, to review the Board of Education policy, to review research and national trends, and to look at existing successful instructional and delivery model. The work group would make recommendations to the superintendent who would then present them to the Board of Education.

Mr. Larry Bowers, chief financial officer, stated that the third goal was to strengthen productive partnerships in education. The strategies and tasks included in this goal were critical to the continuous improvement of both the instructional programs and the administrative services of MCPS. The first strategy was to encourage and facilitate the informed participation of parents in the educational program of their children. This included the task of conducting parent and student surveys. Customer surveys were an important activity in many of their continuous improvement efforts. These included surveys of students, parents, staff, and the community. As part of the implementation of a number of the recommendations of the Corporate Partnership on Managerial Excellence, units in the Office of Planning, Technology, and Supportive Services will consider conducting such customer surveys. In addition, DEA would conduct parent/student satisfaction surveys at each school at least every three years. An important addition to this goal was the inclusion of the Office of Special and Alternative Education in these surveys. DEA and OSSE would develop an instrument and process to conduct parent/student/employee satisfaction surveys once every three years to assess the management and implementation of ongoing restructuring of special and alternative education services and programs. He thought this was an important time to do this because of the implementation of the reorganization of OSSE this past fall. This planning process would include dissemination of information about the reorganization, both the structural and

organizational changes, to staff, parents, and the community. This planning stage would involve all these groups in this process. In addition to that, the survey conducted after the implementation would help them to identify modifications or improvements that needed to be considered in order to continuously improve the special and alternative education services and programs.

Mr. Bowers said the next task indicated that OSAE would continue to make available to schools a standard document that could be used to inform parents about the educational management team and the admissions, review and dismissal process and other educational supports available to their children. Final revisions had been made to update this document with the assistance of the Parent Information and Training Centers personnel and with the involvement of parents. The document would be prepared and distributed in five different languages which would allow them to reach out to the entire community and to help the community to better understand the processes.

Mr. Bowers indicated a new Task 3.3.4 addressed the recommendations of the Corporate Partnership and the relationship between this initiative and the Success for Every Student plan. The Office of the Deputy Superintendent for Planning, Technology, and Supportive Services would continue to manage the implementation of recommendations from the Corporate Partnership and identify specific ways in which to support the Success for Every Student plan through the involvement of the corporate partners.

Dr. Rohr stated that the fourth goal was to create a positive work environment in a self renewing organization. Since the Success for Every Student plan was originally written, the Department of Staff Development had been restructured into the School Improvement Training Unit and the Systemwide Training Unit. Task 4.1.1 was revised to reflect that restructuring. Both units used the Success for Every Student document as a major focus for providing training and developmental activities. They continued to review the plan with appropriate offices to assure that adequate training and support occurred. Both units had also incorporated the Success for Every Student goals into all training sessions and in-service courses as well as cablecasts for teachers, principal trainees, and principal interns. These goals were included in meetings and conferences with administrators and supervisory staff and workshops for support staff.

Dr. Rohr called attention to a new Strategy 4.4 which stated that they would build the concept of continuous improvement of school system processes, services, products, and customer satisfaction into all MCPS efforts to implement the Success for Every Student Plan. His office would analyze, assess, and provide

recommendations on continuous improvement and quality management strategies, strategic planning, and other related recommendations from the Corporate Partnership. By the beginning of March, they would have completed the training of the Office of Planning, Technology, and Supportive Services leadership staff, and they would be developing implementation plans to extend continuous improvement practices to all levels. In the FY 1995 Operating Budget, the Board approved a position to support implementation of the Corporate Partnership recommendations. This would be helpful to his office in planning and monitoring as well as adjusting the process.

In Task 4.4.2 the Office of Personnel Services would work with all offices to identify systemwide training needs and to make recommendations for training in leadership, site-based participatory management, staff empowerment, and continuous improvement techniques that could be incorporated into annual improvement management planning and strategies. The Board approved additional resources in FY 1995 to enable the systemwide training unit to plan and implement leadership training for all A&S staff. This unit would work with associate superintendents and directors to identify training needs to support MCPS initiatives related to site-based management and continuous improvement. The executive staff would continue to promote staff decision-making at the lowest possible level. This philosophy was reflected in new policies and practices at both the local school and office level. As they progressed further with continuous improvement processes to support this implementation, they expected that empowerment would become institutionalized as managers and employees grew more comfortable with making decisions at the appropriate level.

Mrs. Gemberling reported that the final sections of the document contained the implementation timelines which reflected the new strategies. In the final section on data collection, they had made adjustments where they had established baseline data. They indicated how they would gather the data for outcomes K and L which were added in the area of the local CRTs. She commented that when they reread the document, one of the most significant statements was that ultimately their success was dependent, not upon their individual ideas, but rather upon their collective will. Their commitment to these goals must be singular and unwavering, and it was their opinion that the Board of Education in the past two years had been singular and unwavering in its commitment to these goals. They hoped the document reflected not only the support but also the enhancement the Board had provided to the original document.

Mrs. Fanconi thanked staff for an excellent presentation. She was impressed by the clear message of how committed everyone was to the success of all students, no matter what a person's job description was.

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Mrs. Brenneman called attention to the third page and suggested that the language should read "...developing partnerships with universities or private corporations." In regard to local standards, she recalled that Mr. Seleznow had come to the table to talk about benchmarks. They were now talking about how the plan affected the more able students, but they were still talking about a proficiency satisfactory level of 75 percent for grades 3 to 8. She wondered about the student who was already at 75 percent and what they could do for that child. Mrs. Gemberling replied that the 75 percent was not the proficiency level that an individual student attained. This was the percent of students reaching that level. In March they would be sharing a new reporting form to parents which contained an excellence level as well as a proficiency level.

Mrs. Brenneman pointed out that the plan was "Success for Every Student" and not "Success for Every School." She wanted to know how the plan reflected the success for the student. Mrs. Gemberling replied that this would be reflected on the individual student reports. This would not be reflected in the plan. Mrs. Brenneman asked whether or not this should be reflected in the plan because she just saw school for every school in the plan. Mrs. Gemberling explained that the plan was parallel to all of the kinds of standards such as the state standards which did not use individual student scores.

Mrs. Brenneman noted that they were talking about modifications in the plan, and a number of parents felt that the needs of their children were not reflected in this plan. For example, she wanted to know where in the plan the parents of gifted and talented students could see that their child was expected to improve by X-amount. Mrs. Gemberling replied that they had not set goals for the excellence level. This had not been established by the standards committee, but they would be examining this. They had standards for excellence, but they had not established goals; therefore, this was not reflected in the plan before the Board.

Mr. Ewing remarked that Success for Every Student was a good plan, and he was glad to see the changes the superintendent was proposing. However, he thought they had a residue of successive adoption of goals and objectives that was difficult to follow, to cross reference, and to understand. It seemed to him this was something they needed to come to grips with. For example, a person might look at the Goals of Education, the MCPS Vision and Goals, the Standards, and the Board of Education Goals for Improvement of Minority Educational Achievement and might agree with these; however, that person might wonder how all of these related. This might be something of a problem for some people. At some juncture, they needed to bring more coherence to this plan.

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Mr. Ewing was concerned that they simultaneously did two things which might not always be consistent with one another. They should not lose sight of the fact that they began this enterprise with the idea in mind that they wanted to address disparities in performance between Caucasian students and African-American and Hispanic students. They had added in a vast number of things in the interest of making sure the plan was designed to focus on success for every student. He worried that they might attempt to make the plan do all things for all people, and it might not be possible to make one document do all of that. He raised this in order to say that it was a continuing concern that they should address and keep in mind.

Mr. Ewing stated that if they were going to address the issue of performance, he was assuming that as they developed reports they would provide the public and the Board with trend lines. He assumed they would be able to see change over time and that they would be able to see it across all the measures of the plan. He was pleased to see some measures that had been developed for showing how abler students could be measured as well, but this needed to be made more systematic in the document. They needed to be able to say what they had been able to do with students as they moved through the grades and to compare this over time. They should be able to show this by racial and ethnic group. They should be able to show what happened to the abler students over time. It seemed to him that when they had that in front of them they would be able to say whether or not the plan had begun to pay off. He thought they needed to make sure they had some measures for students who were high achievers and some goals and strategies for them. It had been suggested it would be useful to have the number and percent of African-American and Hispanic students who completed eighth grade algebra as well as the number taking and completing AP and honors course by type of course.

Mr. Ewing said it would be useful to have an outline of what a report or series of reports might look like once they began to get trendlines. He would like to know what kind of information and what format was likely to become available to them. This could be teased out of this document, but it was not as clear to him as he would like it to be. He realized this was an evolving thing, but it needed a framework. This was partly due to the fact that the Board might not have been as clear about what it wanted to see in the way of information. He wanted to see a framework that included a clear set of elements that showed how they were doing not only with all students but with particularly high achievers in the African-American and Hispanic groups.

Dr. Vance commented that he and Dr. Frankel had spent many an hour discussing those matters and trendlines. He thought that as a consequence of some of those deliberations came a report which showed the longer that students remained in MCPS, the better they

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did, particularly immigrant children. He stated that the data was very clear about African-American children. In pre-school and kindergarten there was very little that separated African-American children from white children in terms of their cognitive and/or creative ability. The data showed the longer those youngsters stayed in public schools, the further behind their white classmates they got. He thought it was extremely important to look at what happened to those children now in Montgomery County. Dr. Frankel also found some interesting things when looking at the data, and Mrs. Gemberling had discovered something when she had been principal at Parkland. They found that if they took black, Hispanic, Asian, and white students with the same backgrounds and test scores and looked at whom the teachers were recommending for gifted and talented programs and for advanced math class, it was disproportionately white and Asian. He remarked that there was a significant part of Success for Every Student that addressed changes in attitudes and ideas. They would continue to report that data.

Ms. Gutierrez disagreed with Mr. Ewing's remarks. She thought they were confusing reporting and tracking. She heard him saying they should set different standards for different color or ethnic students. She thought what they had tried to do by looking at success for all students was to say they were expecting the highest of every individual student. The minute they started saying for those identified as gifted they would set a higher standard this would be going back to what they were trying to correct. It was going back to the institutional practices they had called tracking. This was the last thing she would want to see in this plan. The highest performance should always be open to every child. She did not understand why they were seeking once again to differentiate gifted and talented children from other children because in her book every child was gifted and talented, and it was up to MCPS to develop those gifts and talents.

Mr. Ewing stated that clearly he did not communicate very well because he had absolutely the reverse intention that Ms. Gutierrez suggested. It was his view that they set standards and that they made decisions about students based on who achieved the standard. Standards were not always perfectly objective, but they should be the same for all students. However, it was important to recognize that having set those standards, it would be the case that there would be a substantial number of African-Americans and Hispanic students who would exceed those standards.

They would want to measure in ways that would tell where these students were achieving well, just as they wanted to measure where white and Asian students were achieving well. If students were not achieving, inquiries should be made. Ms. Gutierrez commented that this was reporting not setting different standards. Mr. Ewing emphasized that he was not suggesting setting different standards.

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Dr. Cheung complimented staff for the continuous improvement of the SES plan. In regard to state and local standards, he explained that when they set standards on a one-dimensional basis, they would end up with a bell-shaped curve and percentages. They should be looking at something that was more than just one dimension. They had talked about trend lines and information they wanted to gather. He said that an individualized automated student profile would form the database from which they would get their information. A second dimensional aspect was the individual student's improvement. He had not seen this in their standards. Rather than just compare with peers, they had to maximize the achievement and performance of each student who could reach as far as they could go. He thought this was the key. The student profile information would become a dynamic process because it would be updated all the time. They had learned this from medical profiles and patient care. They had the diagnosis, treatment, and outcomes in terms of patient care, and here they were talking about student care.

Mrs. Gemberling reported that in March they would see the individual student report. This was a changed design and would reflect all years as opposed to the single one picture. They did establish a standardization that would allow them to see individual student growth. The committee planned to establish improvement outcome goals, but they needed a couple of years of baseline to be able to determine that. This was part of the long-range assignment to that assessment council. They could not bring this forward at this time because they did not have sufficient data, but it was in the plan.

Mr. Abrams agreed that this was the missing component here. They should go state, local, and individual standard, and they were saying they were not in a position to identify specific outcomes yet because they had no baseline. He thought that this addressed Mrs. Brenneman's question as well because this would focus right in on all students but in particular student who were off the curve. Dr. Sullivan added that this would be reflected in the presentation they had for the Board. They were looking at working with certain statistical programs. They were looking at a regular analysis of data and the variances. The assessment group was tying ISM and CRT scores, and they were looking at the whole idea of reliability and validity of not only the instructional program but interim growth and benchmarks. This would be shown to the Board at the next update.

Ms. Gutierrez asked for a clarification between the state standards and the local standards because they seemed to be the same. For the general public, it might be necessary to explain the intent. She was looking at pages six and seven and suggested maybe a footnote explaining that the state standards were set by the state. She asked their intent in repeating the same level of

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standard at the local level. The only difference was the tenth grade component at the local level. Mrs. Gemberling explained that their purpose was to be consistent with the reports they had been providing to the Board over time so that there could be comparison. The difference between the state standards and the local standards was that local data was based on students who had been in MCPS two or more years. While the standards were the same, the population was different. Ms. Gutierrez suggested clarifying this, and Mrs. Gemberling pointed out that the two-year statement was included at each level in the local portion. Mrs. Fanconi suggested including a paragraph between the two explaining how they related to each other.

On the data collection, Mrs. Fanconi asked why the data was not reflected in the standards. For example, they were collecting data on numbers of students in various courses and student suspensions. Mrs. Gemberling replied that they had the standards, and the question was what data would be reported on each of the standards. The section on data outlined the basis for collecting for the December report.

Mrs. Fanconi said that Mr. Ewing had discussed a framework for the reports, information, and format and what that would trigger. She wanted to know how they trained staff to use data. For example, were all the schools aware of what they could get from the SIMS data? Mrs. Gemberling replied that this had been the mission of Dr. Fisher and her directors. Mrs. Fanconi asked how they were reflecting this because clearly this was a very different way of using data. If they were able to use this data, she wondered why they were not seeing something reflected here about how they collected and used data and how that made it different for the students. She wanted to know where the interventions came in because they had to gather data and use data in order to decide when they were going to intervene and do something differently. She thought that was missing in the paper.

Dr. Fisher explained that they viewed this as a countywide management document. They moved it through the stages to the lowest level. In her office, using SIMS, they could look at individual student grades, test CRT results, ISM results, and any other information related to students. They had three people looking at data, and this data was used to work with the directors. In March there would be meetings with individual schools to make sure schools understood the data. The principals had been trained in how to use their data, how to disaggregate it, manipulate it, etc. OSA was helping principals by showing them trends and comparisons and how to look at the data to improve the individual school. This information was used for the school improvement plan and for looking at individual student data, classroom data, grade level data, and cluster information.

When they found a problem, they would have a cluster objective

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from first to twelfth grade. OSA would want to know how this information would be addressed with individual students. However, if they started including this information in this management level document, it would never end. They had had four complete sessions this fall on how to look at data.

Dr. Vance recalled that they had provided Board members with samples of management plans in years past, and they could do that again. This would give Board members a better sense of what was included in the school improvement plan. He asked Board members to let him know the schools they would be interested in.

Mrs. Fanconi said it would be helpful to look at whether or not they had the right strategies in the document to produce the results. She had difficulty in seeing how this was used. They were looking at getting an outcome that would appropriately bring services to children, and that was what was bothering her in these strategies. On special education, she would like to see some evidence of early intervention services prior to or in lieu of special education. She did not see how this was factored or counted in or where they triggered these specific supports and how these were evaluated those pre-steps before they got to the ARD.

In regard to 1.5.1 and 1.5.2, Mrs. Fanconi said she was pleased to see the rewording and how that reflected the discussions they had had. It focused on the kind of positive things they had been talking about. In 1.5.1, staff had said something verbally. The addition was "with emphasis on pre-referral and early intervention strategies which may prevent identification as special education." She thought those words were important except that she would not say "prevent identification as special education." She would say, "meets the special needs of students prior to, or in lieu of, special education services." On 1.1.5, she hoped they were monitoring the effectiveness of the return of African-American students to general education. Were these students able to succeed once they returned to regular education? She did not care how effective they were in identifying them if they did not succeed once they moved from special education. She suggested that someone check the language her.

Dr. Fountain said there were disproportionate numbers of African-American males in certain special education categories. These categories could be determined by opinion. For example, these students were in Learning Disabilities and SED. The percentage of these students in SED was almost double their number in MCPS. They wanted to see whether or not there were students in these categories who should not be there. Many of them might have been placed in the program when different assessments were used. The equity assurance officer would be looking at those students. He agreed they had to develop other kinds of strategies to make sure these students were successful. Mrs. Fanconi explained that she

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was just saying they needed to be specific in the wording. She believed that everyone was trying to have that happen, but she wanted to see this reflected in the document. She would like to see them add, "this is not disproportionate in all areas of the special education population, but in certain areas...."

Ms. Gutierrez commented that what Mrs. Fanconi was getting to was something she also felt. When they looked at the plan, it was a very positive and open plan. They were making very positive statements of what they wanted to see happen, and their goals were positive. She thought that the general public was waiting for the other shoe to drop -- how was it that they were doing against these goals? Was there a way they could closely couple the fact that they were going to assessing, monitoring, and reporting against this? It was not necessary in the wording of the plan that they had to be specific as to the goal they wanted to achieve. She pointed out that statement that all staff should be models for students and must demonstrate respect for individuals. This was a positive statement, but how did they see whether they were achieving that or not? She asked whether there was an audit mechanism or a verification or validation. She thought they had the pieces but somehow they were not coming together clearly for whoever picked up the plan. How did they use the plan to assess MCPS?

Dr. Fountain replied that page five was the most significant page in the plan. The outcomes page drove everything they did as it related to Success for Every Student. The outcomes page determined what school plans would look like. The general executive plan was never intended to be specific to the point of some of the discussion he was hearing. It was always intended to be global enough so that each department or unit could build on their unique needs. The kind of discussion he was hearing tonight was really at the unit level, at the school level, and at the department level. He said this level of the plan was never intended to be in the document before the Board.

Dr. Fisher explained that they would not have a test to measure every task in the document. The outcomes would be a result of the total document. Her office had copies of thick management plans that showed evidence of attainment. For example, if an office did training on attitudes, they might not have test results but would include the evaluation forms from the training.

She reported that every Friday morning the executive staff reviewed the plan task by task. Dr. Massie added that the outcomes on page five related to the instructional program, and someone might ask how the Office of Personnel Service fit in with that. She said that for each strategy, many outcomes were not reflected. For example, one issue was having staff as role models for students. Every single office and department in MCPS was involved in this. When they gave the Board an update, they shared examples of what was happening in each office. In her

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office it would differ from what was happening in Food Services, for example. Therefore, it would be difficult to have a standard way of reporting progress and might limit what they wanted to accomplish.

In regard to Strategy 1.5, Mr. Ewing noted that in the original language it said that one would identify students, particularly African-American students, who may not need special education services and then return them to regular education. This language did not get used again because the strategy statement had changed. The language in 1.5.4 and 1.5.5 was that they would be monitoring the effectiveness of efforts in identifying African-American students for return to general education. He thought that this was somewhat ambiguous language. It was fine to monitor the effectiveness of these efforts, but if the intent was to return students to general education, they should use a set of verbs somewhere that said this. If they looked at 1.6.1, very active verbs were used, and the same was true of 1.7; however, the verbs in 1.5 were very passive.

Mr. Ewing said the point had been made that a lot of activity was going on, but what was important was that the Board got not a huge stack of materials that he knew staff had but rather some summary from time to time of the actions and decisions staff had taken within their authority as well as those requiring the Board's action. Somehow they needed to get to that so that the Board had a sense of what had happened, was happening, and was to happen. He thought this was also important for the public. He asked about the intent of 1.5. Was the intent to identify and monitor the effectiveness of efforts to identify? Was the intent that at the end of that process some students would be returned to general education? Dr. Fountain replied that it was the latter. Mrs. Fanconi suggested taking the language from 1.6.1 and combining it with 1.5.

Mr. Ewing stated that he liked the statement of the strategy under Strategy 2.9, and the tasks were clear. In regard to 2.9.1, he hoped that the connection between curriculum objectives and defining and assessing what students ought to know was not necessarily a one on one. The reason to look at curriculum objectives was to decide what they now did and what they expected students to know as compared to what it was they would like students to know. He thought it would help to state their purpose here which was to see if there were changes they wanted to make.

Mr. Abrams said it seemed to him that in those areas where activities had already begun that they reflect that rather than say an activity was beginning. On Task 2.8.3 on dissemination of successful practices from magnet programs, he asked whether the intent was to limit that dissemination only to highly able students. Dr. Fisher replied that the dissemination was intended

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to benefit all students, and Mr. Abrams suggested that the language be changed from "highly able students" to "all students."

Mrs. Brenneman said she wanted to discuss 2.8.3 in relation to 3.4 and the Corporate Partnership. The last recommendation of the Corporate Partnership spoke to public relations and how MCPS disseminated information. For example, the public did not know about the active dissemination of lessons learned from magnet programs. A lot of people did not know that magnet people came in to the schools to do training. She suggested that staff look into dissemination of information which was tied into the Corporate Partnership recommendation on public relations.

Mrs. Gordon stated that on Task 2.8.3 she would like to see this expanded. There were a lot of successful practices occurring in all schools, not just the magnet programs. She hoped that they were disseminating this information as well as information from the magnet schools. If they looked at results and data, there were a number of schools that were not magnet schools that had been very successful in improving student achievement.

In regard to 4.4, Mr. Ewing said they spoke about continuous improvement and the related concept of assuring customer satisfaction. He was sure that those who had been involved with TQM in the school system would be aware of the difficulty in deciding who was the customer. He hoped that staff was going to address this. Some people believed that students were the customers and others believed the opposite. The simple part was in the business part of the school system, and the tough part was in instruction. As they focused on this, they had to come to some definitions reflecting the judgment of senior staff and the Board. He thought there would be several different approaches and definitions around the table, and it might be worth the time to come to some consensus.

Ms. Gutierrez stated that they should not be surprised that people perceived their customers differently, and the debate about this issue was a healthy one. On 4.3.3, she thought it should be expanding to add "working units" after "teaching area."

On 2.7.4, she hoped that the use of Internet would not be limited to use by gifted and talented students. She had attended a session on educational technology, and a comment that had been made was that in today's classroom there was more knowledge and information out side that classroom than inside. This was the reverse of the more traditional model.

Mrs. Fanconi remarked that from this discussion it was evident that the executive really knew this document. It was the first time she realized how pervasive the document was. It was important for the Board to see different ways the Success for Every Student plan was implemented through all staff activities.

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She did think they needed to do a better presentation to everyone of what they were doing. Dr. Vance thought that one or their over-arching objectives had been attained which was the process of continuing and frequent updates for the Board. He had indicated at the outset that this item was for discussion and not action because action connoted a finality. This process must remain open ended. They would be back soon to discuss assessment and to review further updates of the plan.

Mrs. Fanconi suggested that in terms of the wording changed that reflected tenses and changes in titles of offices she hoped these would be final. All Board members wanted to continue to be involved in the evaluation, but she did hear consensus in a number of things that could go forward when the document was reprinted, but she hoped they would continue to have discussions.

Dr. Vance indicated that they would make those changes in some instances, and they might get back in touch with some Board members to ask them to write out their proposals.

RESOLUTION NO. 143-94 Re: ADJOURNMENT

On recommendation of the superintendent and on motion of Mr. Abrams seconded by Mrs. Gordon, the following resolution was adopted unanimously:

Resolved, That the Board of Education adjourn its meeting at 10:45 p.m.

PRESIDENT

SECRETARY

PLV:mlw