

## ABSTRACT

Title of Dissertation:       **CHARACTERISTICS OF PRIVATE HIGH SCHOOLS  
FOR STUDENTS WITH EMOTIONAL DISABILITIES  
AND PERCEPTIONS OF THEIR PUBLIC SCHOOL  
CASE MANAGERS**

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Placement of students with disabilities in private special-education schools remains costly and controversial. This is particularly concerning, given the lack of research on the characteristics and quality of these restrictive settings. The purpose of this study was to identify the academic and vocational course offerings and behavioral supports provided in private special-education schools the serve high school students with emotional disabilities (ED). Second, the research examined the perceptions of the quality of services in these setting from the perspectives of public school case managers. Using a mixed-method design to collect data, 9 administrative heads of private special-education schools were surveyed, and 7 public school case managers were interviewed. Results indicated that (a) private special-education schools offer the basic academic core courses needed to meet graduation requirements, (b) vocational options for students enrolled in these schools are quite limited, (c) these schools provide a variety of behavioral interventions and supports, and (d) case managers are concerned with the lack

of academic rigor and inconsistent programming at these schools but applauded the notion that students with ED are exiting with a high school diploma. Findings from this study may have policy implications for improving and developing programming options for high school students with ED.

CHARACTERISTICS OF PRIVATE HIGH SCHOOLS FOR STUDENTS WITH  
EMOTIONAL DISABILITIES AND PERCEPTIONS OF THEIR PUBLIC  
SCHOOL CASE MANAGERS

by

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## List of Abbreviations

BIP—Behavior Intervention Plan

COMAR—Code of Maryland Regulations

ED—Emotional disability

ELL—English-language learners

FAPE—Free and Appropriate Education

FBA—Functional behavioral assessment

IDEA—Individual with Disabilities Education Act

IEP—Individualized education plan

LRE—Least restrictive environment

MANSEF—Maryland Association Nonpublic Special Education Facilities

MSDE—Maryland State Department of Education

NCLB—No Child Left Behind

OSEP—Office of Special Education Programs

SLD—Specific learning disability

SST—Social-skills training

# Chapter 1: Problem of the Practice

## Problem Statement

This study investigated how school systems judge the effectiveness of private special-education schools. The investigation focused on a large diverse suburban district located in the Mid-Atlantic States (hereafter referred to as “the District”). During the 2013–2014 school year, the District placed 915 students in private special-education schools at a cost of \$28.8 million for tuition (Maryland State Department of Education (MSDE), 2014c). However, little is known about the effectiveness of these programs in meeting the needs of the District’s students. Of the 915 students receiving special-education services in these restrictive settings, 464 had a primary disability designation as emotional disabilities (ED) (MSDE, 2014c). Yet, the District has no systematic tool to assess the quality of services or effectiveness of these programs.

The inability to evaluate program effectiveness and quality of private special-education schools is particularly concerning because of the number of schools that serve students with ED. Historically, students with ED have well-documented poor outcomes in the areas of academics, employment, and independence (Lane, Barton-Arwood, Nelson, & Wehby, 2008; Nelson, Benner, Lane, & Smith, 2004; Wagner, 1995). In this post-No Child Left Behind (NCLB) climate of constant accountability and reform, some researchers have documented that private special-education schools and similar separate educational facilities servicing students with ED have been marginally linked to accountability systems (Gagnon, Maccini, & Haydon, 2011; Gagnon & McLaughlin, 2004). The lack of a structured method to measure the effectiveness and extent of

services provided by private special-education schools adversely impacts the District's ability to ensure all students' needs are met.

### **Educating Students with Disabilities in the District**

The District offers a variety of public school programs for students with disabilities across all ages. These students with disabilities can receive special-education services in the general-education classroom in the form of consultative or collaborative support (coteaching) between the general-education teacher and the special educator. Students with greater needs can receive additional supports using the District's resource model. The resource model provides instruction in the form of a pull-out or removal from the general-classroom into another setting where a student is provided small group or one-to-one instruction from a special educator. The special educator is responsible for reviewing core content and addressing Individualized Education Program (IEP) goals and objectives. The amount of resource time needed varies, based on a student's individual needs. The next option is the full-time self-contained special-education class. Students served by these classes require small-group instruction throughout the school day. They receive intensive academic, behavioral, and related services support. Students in full-time self-contained special classes access general education at varying levels, based on their needs ("District", 2014). These students most often access elective classes, such as physical education and music, with general-education peers.

Although comprehensive schools provide the models of service delivery noted above, the District also provides special-education services to students with significant/severe disabilities in public separate day schools. The District has four of these public schools that serve students specifically with severe intellectual disabilities

and autism. These schools use a transdisciplinary approach to teaching daily living and functional academic skills. Last, the District partners with 38 private special-education schools in Maryland, Virginia, and the District of Columbia, as well as other states, to provide special-education services to over 800 students.

### **District Educational Programs for Students with ED**

According to data retrieved from the Maryland State Department of Education (2014b), the District served 14,355 students with disabilities aged 3 through 21 as of October 2014. Of this number, schools identified 896 or 6.24% as having a primary disability of ED. The District offers specialty programs specifically geared toward students with ED in Grades K–12. These programs are regionally located through the county in comprehensive schools. Although programs vary, the goals of these programs include identifying specific challenging behaviors and employing strategies that will help students improve their behaviors. Features of the programs include small teacher-to-student ratios, social-skills training (SST), related services, crisis intervention, and counseling, as needed (“District”, n.d.). In some programs, the District is able to provide family therapy, case management, psychiatric consultation, and training to staff and families (Slade et al., 2009). If the District cannot meet the needs of these students, the students are referred or placed in a private special-education school. When the District places students in private special-education schools, the District pays the tuition cost and provides a case manager to oversee and ensure the school implements each student’s IEP.

Educating students with disabilities outside of their home school in private and public separate schools has been controversial. Some researchers and educators have argued that these placements lack academic rigor and positive peer role models (Heubert,

1994; Lane, Webby, Little, & Cooley, 2005). However, others believe that separate special-education services are more individualized; therefore, more appropriately implementing the curriculum needs for students with disabilities (Heubert, 1994; Zigmond, Kloo, & Volonino, 2009). Regardless of one's position on the use of these schools, the Individuals with Disabilities Education Act (IDEA) affords school systems the option to use separate schools when a student's needs cannot be met in general-education settings.

### **Fiscal Costs Associated with Private Special-Education School Placement**

In 2010, the District's per student cost of placement in a private special-education school was nearly triple the \$23,338 allocated to special-education students educated in public schools and nearly five times the \$14,019 average per pupil cost of a non-special-education student. These data reflect costs across all disabilities. In 2011, the District allocated \$67,885 for each student placed in a private special-education-school setting. This dollar amount includes per pupil costs of instruction and transportations (Stanski, 2010; U.S. Department of Commerce, 2012). Although these data focus on only 1 year, students placed in private special-education schools generate years of cost because these placements are seldom reversed (Parrish et al. 2008, as cited in Slade et al., 2009). Given that the state requires students with disabilities to have access to public education until the age of 21, and assuming the 2011 allocation will remain constant, a student placed at the age of 7, and remaining in a private special-education school until 21, can cost the school system a total of \$950,390 (unadjusted for inflation) during the student's educational career.

## **Accountability Associated with Private Special-Education School Placement**

Beyond the high cost, the outcomes for students and the efficacy of the schools are largely unknown. Like public schools, private special-education schools are held accountable for administering statewide assessments and receive ratings based on student performance. These ratings include all students including students from various school systems that are enrolled at that particular private special-education school. Although these data may be useful to the school, it does not allow individual school systems to assess the progress of students they have placed in a particular school. Additionally, the state's previous accountability system did not apply sanctions to private special-education schools for not meeting adequate-yearly-progress requirements (COMAR 13A.01.04.00; Maryland Division of State Documents, 2016). It is unclear how private special-education schools will participate in the newly developed state accountability model. Although the District does monitor each student's progress through the IEP process, a collective measure of progress for students enrolled at a particular school is unavailable at the District and state levels.

### **Summary**

As previously mentioned, placing students with disabilities in private special-education schools is costly and controversial. Furthermore, in the absence of a method to determine the effectiveness of such schools, local school systems are ill-informed consumers paying a high price. This is of particular concern in the District due to the significant number of students who are placed in these schools each year. More importantly, over a third of all the District's students identified with ED received special-education service in these schools during the 2013–2014 school year (MSDE, 2014b;

MSDE, 2014c). These schools provide services at nearly triple the cost of educating students with disabilities in public schools, yet the District has no systematic method of determining the effectiveness of these schools (Stanski, 2010; U.S. Department of Commerce, 2012). The quality and effectiveness of these programs should be paramount, as this population of students is traditionally associated with marginal outcomes in skill acquisition, obtaining employment, and independence (Lane et al., 2008; Nelson et al., 2004; Wagner 1995). Without adequate monitoring tools and an accountability system, the District is an ill-informed consumer at a costly monetary price, with an additional possible cost of student underachievement.

### **Literature/Research Background**

To better understand the phenomenon of educating students with ED in private special-education schools, I conducted a review of the literature using EBSCOhost, ERIC, and WorldCat databases to locate relevant literature. Search terms included *educational accountability, effective schools, school effectiveness, least restrictive environment (LRE), private special-education schools, day treatment and residential placements for students with ED, program evaluation, special-education program evaluation, and nonpublic schools*. Initially, I limited the search to scholarly articles produced between 2003 and 2012; however, due to the limited amount of information available from that time period, the publication range changed to included scholarly articles from 1990 to 2013. Additionally, literature emerged through examining the bibliography of previously found articles. Overall, limited research exists on private special-education schools. However, existing research contains several important themes including educational access, least restrictive environment (LRE), cost, and



accountability. Additionally, literature involving effective approaches to educating students with ED and school effectiveness was essential to this discussion.

### **Access to Education**

In 1954, *Brown v. Board of Education* unequivocally identified the denial of equal educational opportunities due to race as unconstitutional. This ruling would become the foundation for a national movement to increase access and participation for students with disabilities in public education. Before the mid-1970s, practices barring students with disabilities from accessing public schools were widespread. More than 1 million students with disabilities lacked access to public education. Students with disabilities who attended public schools received inadequate educational services (Office of Special Education Programs [OSEP], 2000). These facts, combined with inactivity by Congress, propelled advocacy coalitions to advocate through litigation.

Several landmark court cases improved access to public education for students with disabilities. First, the *Pennsylvania Association for Retarded Citizens (PARC) v Commonwealth of Pennsylvania* established the right to public education for children with intellectual disabilities in Pennsylvania. Likewise, *Mills v Board of Education of District of Columbia (D.C.)* recognized the right to public education for students with behavioral/emotional problems and hyperactivity in Washington, DC. The *Maryland Association of Retarded Citizens (MARC) v. Maryland* required the state to provide free education for all students with disabilities, develop standards for educational programs for students with disabilities, and required districts to provide students with disabilities with transportation to and from school programs, public and private. *MARC v. Maryland* also banned local school systems from referring students to private facilities without

paying for the services the student required, forced school systems to only refer students to accredited educational programs that could immediately offer admission to the student and provide adequate services, and prohibited the use of a student's disability as a permissible reason for home instruction (Abeson & Bolick, 1974).

### **Federal Intervention**

In response to this growing national concern, P. L. 94-142, also known as the Education for All Handicapped Children Act of 1975, was signed into law. With this law, the federal government offered financial incentives to states that passed laws ensuring students with disabilities received a free and appropriate public education (FAPE). P. L. 94-142 required states to provide special education and related services to students with disabilities at public expense. Services had to meet the standards of the educational authority and provide accessibility at the elementary and secondary school levels. P. L. 94-142 would undergo several changes to improve the identification process for students with disabilities, standards of educating these students, and efforts to evaluate the effectiveness and due process protection for students and families. In 1990, the name of the law changed to the IDEA. IDEA included the addition of autism and traumatic brain injury as disability categories and the mandate of providing transition services to students aged 16 and older. Later versions of IDEA would address meaningful educational goal setting, encouraged resolution of differences, strengthen parents' rights, and add disciplinary provisions to the law (Katsiyannis, Yell, & Bradley, 2001).

### **Continuum of Placement and Least Restrictive Environment**

The IDEA and the State's laws require that all school systems have a continuum of services for students with disabilities as a provision of a FAPE. This continuum of

services and the setting in which students receive these services forms the continuum of placement. Table 1 illustrates the State’s continuum of placement. When supplementary aids and services (supports needed in an educational setting) cannot be effective in the general classroom due to the severity of a student’s disability, IDEA allows the use of special classes, separate schooling, or other accommodations. Students can progress through this continuum of separate placements for a variety of reasons, based on the determinations of the IEP team; however, IDEA favors the integration of students with disabilities in the general-education setting to the maximum extent possible, thus establishing each student’s LRE.

Table 1

*The State’s Continuum of Placement*

| Environment | Setting of special-education services                           |
|-------------|---|
| A           | inside the general education classroom 80% or more of the day   |
| B           | inside the general education classroom 40-79% of the day        |
| C           | inside the general education classroom less than 40% of the day |
| D           | homebound placement   |
| E           | hospital placement  |
| F           | public separate day schools                                     |
| G           | private separate day schools (nonpublic schools)                |
| H           | public residential facility                                     |
| I           | private residential facility or center (nonpublic schools)      |
| U           | correctional facilities   |
| V           | parentally placed in private school                             |

*Note.* Adapted from *Placement determination of school age students with disabilities, 6–21*, by Maryland State Department of Education, retrieved November 5, 2012, from <http://67.199.2.126/34FNLTAB9A6to21LRE.pdf>

The determination of special-education services is the responsibility of the IEP team. This team consist of the parents, a special-education teacher, a general-education teacher (if the student is in the general-education environment), a school-system

administrator with the knowledge of the agency's policies and resources, related service providers (e.g., a counselor, speech and language therapist, or occupational therapist), someone to interpret assessment results, and the student, when appropriate (U.S. Department of Education, 2006). Using a variety of data, the IEP team determines the need for supplementary aids and services, the nature and severity of the student's disability, the student's progress, and the LRE placement. Because of the subjective nature of the process, LRE placement has been the most litigated component of IDEA (Yell & Katsiyannis, 2004).

**Litigation.** During the 1980s, the courts established a two-part test to guide the placement of students with disabilities, as well as a two-part test to determine if schools have met the LRE requirement. Court rulings during this era established the standards for mainstreaming; that is, the integration of students with disabilities into the general-education classroom to the maximum extent appropriate based on individual assessments. Second, the court rulings established the use of supplementary aids and services to ensure that students reach satisfactory achievement in the general-education setting. Litigation in the early 1990s yielded the concept of providing continuum-of-placement options and a shift from mainstreaming to full inclusion, defined as all students being educated in the general-education setting as a fundamental right, regardless of the severity of their disabilities (Douvanis & Hulsey, 2002; Hocutt, 1996). During the mid to late 1990s, findings from court cases moved away from inclusive placement as absolute, as courts examined the educational benefits a student would receive in a given placement. Courts also established that social benefits from general-education placement are subordinate to educational benefits and provided guidance to determine when behavior warrants

removal from the general-education classroom (Douvani & Hulsey, 2002; Yell & Katsiyannis, 2004).

**The State and the District's least-restrictive environment status.** The intent of the LRE and the continuum of placement is to protect students with disabilities from discrimination and provide students with a setting that will meet their individual educational needs. However, the passage of NCLB increased school accountability, based on the yearly progress of individual subgroups of students at grade level and enhanced concepts of educating students with disabilities in the general-education setting. National data indicated a significant increase, from 34% in 1990 to 58% in 2007, in placements in the general-education classroom and a substantial decrease of 25% in students receiving special-education services in a special class or separate school (McLeskey, Landers, Williamson, & Hoppey, 2012). Like many other states, the Maryland joined in the effort to reduce the number of students with disabilities receiving special-education services in a more restrictive environment. In 2003, MSDE increased its monitoring of LRE in the Maryland State Performance Plan by adding indicators to address the percentage of students receiving special-education services in varying placements. Table 2 illustrates statewide LRE data.

Table 2

*LRE State Performance Plan Data 2013–2014*

| Target   | Status  | Percentage | Placement  |
|----------|---------|------------|--|
| ≤ 68.40% | Met     | 68.40      | students receiving services inside regular education 80% or more of the day                                  |
| ≥ 13.26% | Met     | 13.26      | students receiving services inside regular education less than 40% of the day                                |
| ≥ 6.69%  | Not met | 6.97       | students receiving services in separate schools that do not house programs for students without disabilities |

*Note.* Adapted from *MSDE Public Website of State Performance Plan Results*, by Maryland State Department of Education, 2014a, retrieved January 3, 2016, from <http://mdideareport.org/default.aspx>

Overall, the data in Table 2 indicate an increase in students with disabilities accessing the general-education environment since 2003.

Although the District has improved in having students access services in the general-education setting, the District continues to perform below expectation. Table 3 displays the District’s LRE data and rank among the 24 counties in the State.

Table 3

*The District LRE Data October 1, 2014*

| Percentage         | Placement   | Rank in the state counties |
|--------------------|---|----------------------------|
| 54.39              | Receiving services inside the regular education classroom 80% or more of the day                                    | 24th out of 24             |
| 8.57               | Receiving services 79-40% of the day inside regular education classrooms  | 11th out of 24             |
| 27.09 <sup>a</sup> | Receiving services inside regular education less than 40% of the day  | 1st out of 24              |
| 9.64 <sup>*</sup>  | Receiving services in separate facilities that do not house programs for students without disabilities <sup>*</sup> | 1st out of 24              |

*Note:* <sup>a</sup>THE DISTRICT has the highest number of students receiving services inside regular-education less than 40% of the day; <sup>\*</sup>the District has the highest number of students receiving services in separate facilities; Adapted from *Maryland Special Education/Early Intervention Services Census Data and Related Tables*, by Maryland State Department of Education, 2014b, retrieved January 3, 2016, from <http://mdideareport.org/SupportingDocuments/MDSpecialEducationEarlyInterventionCensusDataRelatedTables.pdf>

The data shown in Table 3 indicate a need for improvement in all areas. Specifically, the number of students enrolled in separate facilities implies a need in the District to build capacity around providing instruction and services for students most frequently placed in separate facilities. Increased professional development to help IEP teams with timely identification, choosing appropriate levels of services, and determining LRE may also help improve the District's data.

### **Characteristics of Students with ED**

Students with ED are identified based on the legal definition provided by IDEA. Emotional disturbance means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child's educational performance:

(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors. (B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers. (C) Inappropriate types of behavior or feelings under normal circumstances. (D) A general pervasive mood of unhappiness or depression. (E) A tendency to develop physical symptoms or fears associated with personal or school problems. (ii) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted, unless it is determined that they have an emotional disturbance under paragraph (c)(4)(i) of this section (IDEA, 2004).

Accordingly, students with ED exhibit inappropriate behaviors that adversely impact their ability to access instruction (Bradley, Doolittle, & Bartolotta, 2008; Kauffman, 2001; Wehby, Lane, & Falk, 2003). Behaviors can include aggression,

noncompliance, social withdrawal, and verbal abuse. These behaviors can make it difficult for students with ED to establish and maintain relationships with classmates and staff (Kauffman, 2001; Landrum, Tankersley, & Kauffman, 2003). Thus, academic and social deficits impact these students (Cook et al., 2008; Nelson et al., 2004). These academic and social deficits lead to poor schooling outcomes such as high absenteeism, grade retention, and high dropout rates. Likewise, high levels of unemployment and crime characterize postsecondary outcomes (Bradley et al., 2008; Lane et al., 2008; Nelson et al., 2004; Wagner, 1995; Wehby et al., 2003). The behavior challenges presented by many of these students have often led to their removal from general-education and comprehensive schools.

### **Private Special-Education Schools**

Private special-education schools are a critical placement on the continuum as they provide special-education services to some of the most challenging students with disabilities. These schools provide academic supports in a small, highly structured, therapeutic learning environment using clinical and behavioral interventions. Psychiatric-treatment options and related services (i.e., speech, occupational, and physical therapies) are also available as needed (Carran, Kerins, & Murray, 2005). Public school settings often lack this high level of structure and support (Slade et al., 2009).

In Maryland, many private special-education schools are members of the Maryland Association of Nonpublic Special Education Facilities (MANSEF), a nonprofit organization of private special-education schools approved by the MSDE. This organization comprises 94 private special-education schools serving more than 4,500 students with various disabilities including intellectual disability, hearing impairment,



ED, speech or language impairment, visual impairment, specific learning disability, other health impairment, orthopedic impairment, autism, multiple disabilities, deaf-blindness, traumatic brain injury, and developmental delay (Maryland Association of Nonpublic Special Education Facilities, 2014).

### **Placement Impact on Students**

When students are placed in private special-education schools, they may have a highly structured environment in a small setting with additional instructional and behavior supports (Carran et al., 2005; Osher, Morrison, & Bailey, 2003; Slade et al., 2009). Many students also receive mental health services that are lacking in public school programs (Carran et al., 2005). Equally important, students and families often perceive the move to a private special-education school as a “new slate” in a more welcoming environment with staff members that are expertly trained to educate challenging students. The small environment also reduces the number of transitions a student must encounter throughout the day such as interacting with numerous teachers for varying subject-area instruction. This reduction to transition is helpful for students who do not respond favorably to change (Osher et al., 2003).

In contrast, placement in private special-education schools limits student access to extracurricular activities provided by the public school system because of the logistics of scheduling and travel time between the private special-education school and the public school. Additionally, students placed in private special-education schools often endure longer travel time to and from school because distances to these specialized schools are often greater than traveling to their neighborhood school (Slade et al., 2009). Greater travel time may negatively affect the administration of medicine and attendance at family

events as well as possibly increase undesirable behaviors during transport. Finally, because many private special-education schools specialize in providing services to students based on disability category, students enrolled in these schools may not have positive peer models who can aid students in learning appropriate social skills and academic behaviors (Hocutt, 1996).

To date, limited research exists on the effectiveness of private special-education schools. Researchers of a 3-year study found that students with ED graduated from private special-education schools at a higher rate than national and regional averages and had lower arrest rates during the study period. Like many other longitudinal studies, participant rate declined over time (Carran et al., 2005). Tobin and Sugai (as cited in Carran et al., 2005) conducted a comparative study of middle school students placed in restrictive settings compared to those who received integrated services in a public school. Findings suggested that “students who received additional services in a restrictive setting were likely to have more success in a less restrictive environment later in high school” (Carran et al., 2005, p. 120).

At first glance, the use of private special-education schools seems to be a direct contradiction to IDEA and the Maryland’s laws because these schools offer more restrictive educational settings that preclude students with disabilities from interacting with their peers who are not disabled. However, IDEA and the Maryland’s laws recognize the need for more specialized education and require school systems to have a variety of options to meet the complex needs of a student with disabilities. Despite the lack of compelling research that supports LRE placement as critical factor in the academic or social progress of students with disabilities, continued deficiencies in

providing the necessary structure and supports in public schools, coupled with the complex needs of students with ED, suggests an ever-present need for private separate special-education schools (Hocutt, 1996; Zigmond, 2003).

### **Funding Special Education**

Funding for special-education programs comprises federal, state, and local funds (Apling, 2004; Aron & Loprest, 2012; Parrish, Harr, Anthony, Merickel, & Esra, 2003, Parrish, Harr, Anthony, Merickel, & Esra, 2004). Since 1975, the federal government has provided funding to offset the excess cost of educating students with disabilities. IDEA stipulated that the federal government would provide funds up to 40% of the additional cost of special-education (Parrish et al., 2004). During school year 1999–2000, federal dollars accounted for roughly 10.2% of the additional funds used to educate students with disabilities nationwide (Chambers, Parrish, & Harr, 2004). Likewise, in 2004, the federal government only provided 18.6% of the estimated excess cost for providing special-education services (Apling, 2004). Although 2004 spending represented an increase in federal funding, federal spending for special-education has remained somewhat stagnant since that time, excluding funds provided as a result of the American Recovery and Reinvestment Act of 2009 (Aron & Loprest, 2012).

Ultimately, states and local jurisdictions serve as the primary funders of special-education programs. In Maryland, state funding for special education per pupil varies based on the local jurisdiction's contributions. With 50% being the median, more economically challenged school systems receive more than 50% of state funding per pupil. In contrast, the state allocates fewer funds to wealthier school systems, as their local tax base can provide the necessary funding for local special-education programs.

According to the Bridge to Excellence in Public School Act (2002), no school system can receive less than 40% of state aid.

**The cost of placement in a private special-education school versus alternative public school.** In examining the national total expenditure for students with disabilities during the 1999–2000 school year, Chambers et al. (2004) found that the national average cost of tuition for private special-education schools was \$26,440 per year, which is double the average rate of providing services to a student in special education in the public school system. As with many services and products, the cost of tuition to these schools varies depending on the geographical region (Slade et al., 2009). In Maryland, during the 2001–2002 school year, a total of \$270.8 million was spent on tuition for students enrolled in private special-education schools (Parrish, Brock, Perez, & Shkolnik, 2003). This figure does not include the additional cost of transporting students to and from these specialized programs, which is often expensive because of the distance and the required personnel needed to monitor students during transport (Slade et al., 2009).

Although the use of these schools is expensive, researchers indicated that contracting out to these schools is inherently less expensive for taxpayers and possibly less expensive for local school systems, depending on state policies (ASHA, 2007; National Association of Private Special Education Centers [NAPSEC], 2012; Parrish, Graczewski, Stewart-Teitelbaum, & Van Dyke, 2002). Regarding taxpayers, two studies found that taxpayers achieved considerable saving by only paying tuition at private special-education schools because the tuition is all inclusive, excluding transportation (ASHA, 2007; NAPSEC, 2012). In contrast, if the same students were enrolled in public schools and given the same level of supports, taxpayers would incur a lower estimated

tuition cost. However, the hefty price tag for the required fringe benefits (health care, retirement, etc.) of the numerous new staff needed to support these students would negate the savings and increase spending.

Several studies addressed cost concerns by examining the development of public school-based mental health programs (MacMillan et al., 1997; Slade et al., 2009). Although these programs have provided cost savings to districts, studies of these programs do not include fringe benefits for human capital as a cost factor (ASHA, 2007; MacMillan et al., 1997; Slade et al., 2009). Also, in an instance where mental health supports were pushed into an existing public high school program, savings were based on the shared resources such as the transportation of students, administrative supports, and facilitating management (Slade et al., 2009). However, one could argue that students who were successful in this public program with mental health supports are students who do not need the intense structure provided at private special-education schools.

**The financial impact of placing students in a private special-education school.** In Maryland, local school systems must first pay the equivalent of their 300% local basic costs per pupil toward the student's placement. Once paid, the MSDE pays 80% of the remaining cost (Parrish et al., 2003; Verstegen & Jordan, 2009). Although this practice somewhat incentivizes the use of private special-education schools, two major problems arise with receiving additional funds from the MSDE. First, the MSDE uses a reimbursement system to distribute the funds; thus, school districts must initially allocate enough resources to pay the full cost of students in private special-education schools. This prevents districts from allocating a substantial amount of funds (presumed reimbursement funds) to other critical-need areas. The second problem is that the cost of

transportation continues to negatively impact the budget. Table 4 displays the tuition cost for the District and the MSDE share for placing the District’s students in private special-education schools.

Table 4

*Tuition Cost from School Fiscal Years 2010–2014*

|               | SFY 2010 | SFY 2011 | SFY 2012 | SFY 2013 | SFY 2014* |
|---------------|----------|----------|----------|----------|-----------|
| District      | \$31.3   | \$30.2   | \$27.6   | \$27.3   | \$28.8    |
| MSDE          | \$20.4   | \$15.9   | \$17.3   | \$19.1   | \$21.5    |
| Total Tuition | \$51.7   | \$46.6   | \$44.9   | \$46.4   | \$50.3    |

*Note.* All tuition costs are expressed as millions. \*SFY 2014 totals are reflected as of April 25, 2014; SFY = school fiscal year; adapted from *Nonpublic Special Education Section Local School System Placement Data Summary*, Maryland State Department of Education, 2014c, Baltimore, MD: Author.

**Private Special-Education Schools’ Efficacy and Accountability**

Although a great debate on the definition of “school effectiveness” exists in the literature, scholars have consistently identified the following characteristics of effective schools: (a) strong instructional leadership; (b) shared vision/mission and goals; (c) safe and orderly environment; (d) high expectations; (e) a concentration on teaching and learning, inclusive of monitoring student progress; and (f) structures to promote a positive home–school partnership (Edmonds, 1982; Lezotte & Snyder, 2011; Sammons, Hillman, & Mortimore, 1995; Townsend, 1994; Witte & Walsh, 1990). Much of the literature on school effectiveness has focused on typical school environments. Few studies have focused specifically on the effectiveness of private special-education schools and the outcomes of students receiving services in these settings.

In one study that did examine a nontraditional school setting, researchers evaluated a private residential-treatment special-education program that provided services to 84 adolescent boys with ED (DeSouza & Sivewright, 1993). The authors identified

academic behaviors students performed as an indication of the effectiveness of the special-education program. These researchers determined that the school had met its goal of increasing appropriate student behaviors and decreasing competing behaviors during class time. However, the study also indicated that students largely engaged in isolated busywork rather than actively engaging with the teacher or peers during the lesson. In response to the findings, the researchers reported that school officials instructed teachers to increase active-learning opportunities by providing more challenging assignments and immediate feedback.

Addressing the quality of instruction, concerns arose that students in private special-education schools are most often taught by teachers who have little or no teaching experience and are non-credentialed (Zetlin & Weinberg, 2006). To understand the needs of the teachers in such environments, researchers conducted a focus group of eight educators who were teaching or had taught in private special-education schools. All participants were pursuing their special-education credentials for teaching. Results indicated that the teachers felt woefully unprepared to address planning for multigrade classes, behavioral challenges, and the high absentee rate and mobility of students.

In a study that evaluated a day-treatment program with an academic component designed for students with disruptive behaviors, the authors compared students who received multimodal interventions (group therapy, family therapy, medication, and parent training) to students who were on the waitlist to access services (Grizenko, Papineau, & Sayegh, 1993). Students who were enrolled made and maintained gains for 6 months in the area of behavior. However, academic gains were not as evident. The authors attribute the lack of academic gains to the behavioral focus of the program.

**Research on effective programs for students with ED.** The OSEP issued recent significant policy guidance that specifies the expectation that every student with a disability must be provided with academic programs based on their state's grade-level standards. As a matter of FAPE, the policy guidance emphasizes that IEP goals must align with the state academic grade-level standards that correspond to the grade level in which the child is enrolled. OSEP further stated that student with disabilities can learn and make progress on grade-level content if given the necessary instruction, services, and supports (U.S. Department of Education, 2015). Although this emphasis on academic achievement is not new, the need to offer guidance signals a gap in policy and practice as well as underscores the need for appropriate programming for students with disabilities. Researchers echoed similar concerns for students with ED.

Researchers documented the academic difficulties of students with ED (Nelson et al., 2004). Overall, these students exhibited difficulties engaging and completing academic tasks, which led to poor academic performance. Their poor academic performance continues across grade levels, perhaps due to the lack of focus on academic needs versus behavioral management (Grizenko et al., 1993; Levy & Chard, 2001; Wagner et al, 2005; Wehby et al., 2003). More disturbing are the results of a 5-year study conducted by Anderson, Kutash, and Duchnowski (2001). The authors studied students with ED who began receiving full-time special-education services in kindergarten. These students continued to perform well below national averages despite receiving 5 years of intensive special-education services. Additionally, students with ED in self-contained classrooms did not receive more specialized instruction when compared to students with ED receiving services in the general-education classroom (Maggin, Wehby, Moore



Partin, Robertson, & Oliver, 2011). These findings point to the need for educators to use proven effective academic interventions for students with ED (Bradley et al., 2008).

Although research is limited on academic interventions for students with ED, several interventions have proven effective in improving academic outcomes for these students (Coleman & Vaughn, 2000; Mooney, Benner, Nelson, Lane, & Beckers, 2008; Mooney, Ryan, Uhing, Reid, & Epstein, 2005; Nelson et al., 2004). Specifically, self-management interventions have increased academic success for students with ED in reading, writing, and basic mathematics (Landrum et al., 2003; Mooney et al., 2008, 2005). Because students with ED find it difficult to self-regulate and attend to instruction, educators must explicitly teach self-management skills (Coleman & Vaughn, 2000; Nelson et al., 2004). These skills include self-monitoring, self-evaluation, self-instruction, goal setting, and strategy instruction (Mooney et al., 2005). Other positive instructional approaches often include a combination of these skills, such as Collaborative Strategic Reading (Mooney et al., 2008).

In addition to academic difficulties, social competence deficits are evident in students with ED. The inability to effectively interact with others in the school setting adversely impacts their ability to benefit from academic instruction (Gresham, 2015; Lane, 2007). Furthermore, the lack of appropriate social skills and status connects to various negative outcomes (Cook et al., 2008). As an intervention, social skills training (SST) focuses on developing prosocial behaviors and minimizing problem behaviors (Cook et al. 2008). Researchers have found that SST has a positive impact on most students with ED and led to improved academic outcomes (Cook et al, 2008; Gresham et al., 2004). For this reason, SST is a much-needed component of any education program

for students with ED (Cook et al., 2008; Gresham, 2015; Gresham et al., 2004; Lane, 2007).

Other widely accepted program features needed to educate students with ED include (a) having a trained and committed staff, (b) providing mental health and case-management services for students and families, (c) establishing a well-planned and developed behavior-management system that is individualized and program wide, (d) community linkage, and (e) ongoing program evaluation and monitoring of student outcomes (Kutash, Duchnowski, Sumi, Rudo, & Harris, 2002; Puddy et al., 2008; Simpson, Peterson, & Smith, 2010; Slade et al., 2009).

**Lack of accountability.** In 2001, NCLB propelled public school systems into data collection and use in efforts to improve student achievement. Unlike previous attempts to hold educational institutions accountable, this new reform focused specifically on student performance on statewide assessments and individual school performance. Previous accountability systems focused on district-level data including a district's fiscal management, curricular offerings, facilities, certified staff, graduation rates, and provisions for special-needs students (Fuhrman & Elmore, 2004; McLaughlin & Thurlow, 2003). The theory of action underlying this new model of accountability includes the following assumptions:

1. The purpose of schooling is student achievement, and accountability focusing on student improvement would maximize efforts to improve learning.
2. Assessments can adequately measure student performance.
3. Consequences will motivate school staff and students to improve.

4. Implementation of an accountability system will improve instruction and result in higher performance (Fuhrman & Elmore, 2004; Stecher & Kirby, 2004).

Although many viewed this reform as a means of improving outcomes for all students, including students with disabilities, reform efforts have been challenging (McLaughlin & Thurlow, 2003). One area of concern is participation in statewide assessments. Specifically, it is unclear whether private special-education schools that educate students with ED are participating in reform efforts (Gagnon et al., 2011; Gagnon & McLaughlin 2004). To understand assessment and accountability policies, Gagnon et al. (2011) surveyed 148 principals at private (57.9%) and public (42.1%) secondary special-education schools that provide services to students with ED. The researchers found that 45% of the principals were unaware of their school's adequate-yearly-progress status, 39 principals did not use state assessment results to inform school practices, and only 76% of principals indicated educators in their schools use assessment accommodations throughout the instructional day.

In 2013, Maryland schools began participating in the School Progress Index. The new accountability system measures a school using three of four indicators depending on the grade levels in the school. The indicators include achievement, gap reduction, growth, and college and career readiness. Like the previous accountability system, the School Progress Index also measures and monitors subgroup performance. Subgroups are based on race, socioeconomic status, educational disability, and English-language learners (MSDE, 2012).

According to the state accountability addendum submitted to the federal government, the new accountability system includes all public school students and public schools. The MSDE's definition of public schools includes private special-education schools that are funded by state and local dollars. Clearly, students enrolled in private special-education schools must participate in statewide assessments. Equally, these schools report data to the MSDE (2013) for the purpose of participating in the statewide accountability system. However, problems exist that render the accountability system ineffective as a means of gauging the progress of private special-education schools.

The major barrier to the application of Maryland's accountability-system model is the number of students enrolled in private special-education schools. These schools usually have a small student population that is ever changing due to the high student mobility rate (Maryland Association of Nonpublic Special Education Facilities, 2014; Zetlin & Weinberg, 2006). The current accountability model states that a minimum of five students is needed to be identified as a subgroup. Equally important is that Maryland does not report the performance of subgroups that contain less than 10 students. Additionally, a student can only be counted in the school's scores if they were enrolled by September 30 and maintained enrollment through the assessment date. If students enrolled after September 30, their scores are counted with their previous school (MSDE, 2012). These requirements may have a negative impact on the ability to determine a private special-education school's progress using the current accountability system.

### **Summary**

In summary, the use of private special-education schools is legal and practical due to the complex needs of students with disabilities (ASHA, 2007; NAPSEC, 2012; Slade

et al., 2009). Although these schools help local school systems provide a complete continuum of special-education services, the lack of accountability raises concerns regarding the efficacy and quality of the services offered by private special-education schools (DeSouza & Sivewright, 1993; Gagnon et al., 2011; Gagnon & McLaughlin 2004; Zetlin & Weinberg, 2006). However, continued use of these schools is likely due to the lack of supports provided in a typical school as well as the continued use of state aid to ease the economic burden of placing students in these restrictive settings. This continuation is particularly concerning for secondary students with ED as they are less likely to receive much needed instructional supports thus leading to poor educational outcomes (Grizenko et al., 1993; Levy & Chard, 2001; Mooney, Denny, & Gunter, 2004; Wagner et al, 2005; Zetlin & Weinberg, 2006).

Poor educational outcomes are evident in Maryland's statewide data. In 2014, the state reported that 22.08% of students with ED aged 14 through 21 exited special-education services in the category of dropped out (MSDE, 2014b). Likewise, District data show a steady decline in students with disabilities who exit high school and obtain competitive employment or enroll in postsecondary-education options (MSDE, 2014a). Because the District educates many students with ED in these schools, there is a need to develop an evaluation system that local school systems can use to determine the effectiveness of these schools (Lane et al., 2008; MSDE, 2014c; Nelson et al., 2004; Wagner, 1995).

### **Prior Attempts to Address Problems of Private Placements in the District**

Although the District provides a variety of program options for students with ED, a need for a more intensive option was evident as a means of reducing out-of-district

placements. To address the lack of supports in the District for students with ED, the District launched a mental health initiative. In this program, public school personnel coordinated mental health services and supports to students at risk for private special-education school placement. From 2006 to 2009, this program served a total of 77 students at an estimated saving of \$31,826 per student per year and \$3,232,440 over the 3-year period (Slade et al., 2009). Although this program showed promise, it only served a nominal number of students over the course of 3 years, indicating a continued need for the District to use private special-education schools to educate students with ED. To answer the evident need, the District must develop a method of ensuring students receive quality instruction and services in their private special-education school placements.

Attempts to evaluate private special-school education programs from the referring school system's perspective have not been documented. However, the MSDE does monitor and approve private special-education schools. The MSDE's Nonpublic Approval Branch monitors each school's compliance with state regulations on a 5-year cycle. These state regulations require schools to have proper materials, personnel, policies, and record-maintenance systems; however, ongoing monitoring of the implementation of curriculum and behavioral supports has been left to local school systems that place children in these schools (COMAR 13A.09.10; Maryland Division of State Documents. 2016).

### **Purpose of the Study**

According to data from the MSDE (2014b), students with ED are one of the largest groups of students with disabilities who are placed in private special-education schools. However, little is known about the quality and effectiveness of these schools in

preparing students with disabilities, particularly those with ED, for graduation and postschool life. Proponents of these schools argue that students receive more structure and support when enrolled in private special-education schools (Carran et al., 2005; Osher et al., 2003; Slade et al., 2009). Others suggest the academic progress of students educated in these self-contained schools is minimal when compared to students educated in a more inclusive setting (Lane et al., 2005; Siperstein, Wiley, & Forness, 2011).

In the District, which places students in 38 of these schools, information regarding the effectiveness or even specific program offerings is lacking. To begin this discussion of evaluating private special-education schools, one must collect data regarding program offerings as well as the current strengths and weaknesses, as viewed by the local school system. Therefore, the purpose of this study was to identify the academic and vocational course offerings and behavioral interventions offered in those private special-education high schools that serve students with ED. A second purpose was to obtain the perceptions of District case managers regarding the quality of these services. Information obtained from this study can help guide placement decisions for students with ED as well as lay a foundation for the development of a monitoring tool that can be used to examine the quality of private special-education schools. Ultimately, this information may lead to improvement of districtwide programming for students with ED.

## Chapter 2: Investigation

The purpose of this study was to investigate the courses and behavioral interventions offered in those private special-education schools in the District's immediate geographic area that serve high school students with ED. I also examined District case managers' perceptions regarding the quality of the instruction and behavioral interventions offered by private special-education schools that serve students with ED in Grades 9 through 12. This study was guided by the following questions:

1. What are the academic and vocational/career courses offered in private special-education schools in which the District places high school students with ED?
2. What behavioral interventions, including programs and strategies, do private special-education schools use in which the District places high school students with ED?
3. What are the perceptions of public school special-education case managers regarding instruction and behavioral management at private special-education schools in which the District places high school students with ED?

### **Study Design**

This study employed a mixed-method research design using a web-based survey and interviews. I obtained information on academic courses, vocational/career curricula, and behavioral interventions using a web-based survey of private special-education schools that currently enroll students with ED who are in Grades 9 through 12. In addition to the survey, I conducted interviews to gather the perceptions of local school-system case managers regarding the current state of private special-education schools.



### **Rationale for Survey Design**

Researchers commonly use survey research design to describe the current state of the phenomenon (Creswell, 2012; Gay, Mills, & Airasian, 2006; Groves, 2011; Lodico, Spaulding, & Voegtle, 2010). The rationale for selecting survey design rests on the lack of information about the services offered in private special-education schools. Because survey research focuses on learning about unknown characteristics of a selected population, this methodology helped in obtaining descriptions of the existing state of private special-education schools used to educate the District's students with ED and identified commonly offered courses and interventions used in these schools.

### **Rationale for Interviews**

Semi-structured interviews yielded an in-depth understanding of the perceptions of public school case managers about instruction, academic and behavior interventions, and course offerings of private special-education schools that serve the district's ED students. Interviews are an appropriate method of gathering the opinions, perceptions, and attitudes of a population regarding a program, issue, or process (Gay et al., 2006; Glesne, 2011). Interview questions gathered individual case managers' experiences and perceptions, interactions, and observations of staff and students.

### **Methods and Procedures**

In the following sections, I describe the participants in this study, the survey instruments, and the interview guide. I also describe the procedures used to collect the data and the method of analysis. This section also includes information on the protection of human subjects.

## **Participants**

To adequately address the research questions, I selected two types of individuals to participate in the study: the District's case managers and administrative heads of the private special-education schools. I used purposeful sampling to identify the participants based on the established criteria (Creswell, 2012; Gay et al., 2006). I discuss the criteria for selection in the following sections.

**Case managers.** The District employs a total of eight case managers. I interviewed seven case managers for this study, as I am the remaining case manager. Case managers in the District monitor students placed in private special-education schools. Monitoring includes participating in IEP meetings, conducting student/classroom observations, referring students to other school placements, addressing parental concerns, and verifying billing information for each student. All case managers are certified in special education, awarded through MSDE. All participants had a minimum of 5 years of experience monitoring students placed in private special-education schools. All participants had previous experience in delivering classroom instruction to students with disabilities.

**Administrative heads of private special-education schools.** The District partners with a variety of private special-education schools to provide services to students with disabilities. Of those, this study focused on private special-education schools that provide education to students with ED in Grades 9 through 12 located within a 50 miles radius of a central point in the school system's geographical boundaries. Of the 15 schools identified, each has been approved by the MSDE to provide services to students with disabilities. MSDE requires each school to have an administrative head (COMAR

13A.09.09.06; Maryland Division of State Documents. 2016). Although the role and title of the administrative head may vary from school to school, this person is usually responsible for the daily operations of the school as well as curriculum and behavioral services. I surveyed the designated administrative heads of the identified private special-educations schools.

Initially, I requested a list of the private special-education schools the District uses to educate high school students with ED but was unable to obtain this information. Therefore, I identified schools using the MANSEF directory. I developed a list of private special-education schools based on schools' proximity (less than 50 miles from a central point in the District's geographic boundary). I contacted each school by phone and inquired about the name, title, and contact information of the person responsible for the daily operations of the school (MANSEF, 2015). In many cases, the person responsible was titled educational director, principal, or program coordinator.

### **Instruments**

I used two instruments in this research. The first was a web-based survey I used to obtain information from the private-school administrative heads. The second instrument was a protocol that guided the interviews of the case managers.

**Survey.** To answer Research Questions 1 and 2, I e-mailed an online Qualtrics survey to the designated administrative heads of the 15 private special-education schools serving high school students with ED. This survey was a loosely adapted version of the Private Schools for Students with Disabilities Annual Survey 2010 developed by the Virginia Department of Education (2010). Adaptations included removing questions on licensure, ownership, tuition, school capacity, length of school day and year,

accreditation status, and facility. I also removed questions regarding residential programs, the source of tuition payment, elementary and middle school courses, extracurricular activities, student discharge, graduation, and postsecondary status. I added sections to the survey on additional academic and vocational courses, behavior interventions, and enrollment.

The final survey contained three sections. The first section requested demographic information including school name, physical address, disability categories served, and if the school was approved to provide courses that would lead to a high school diploma. This section also requested the name and title of the person completing the survey and enrollment data. Section 2 of the survey consisted of three questions. These questions collected data regarding academic and vocational courses as well as opportunities for employment-skills development. The final section collected data regarding behavioral supports offered at private separate special-education schools. (See Appendix A for the survey.)

**Interview Guide.** To answer Research Question 3, I interviewed seven case managers, conducting semi-structured face-to-face interviews using open-ended questions (Gay et al., 2006; Lodico et al., 2010). The semi-structured interviewing method allowed participants to provide more contextual answers and offered me the option to ask probing questions. Probing questions helped ensure participants discussed specific information and allowed for the clarification of answers (Creswell, 2012; Glesne, 2011). The protocol served as a written guide that identified the questions to be asked, the sequence of the questions, and additional probing questions. The first section of the protocol contained questions that sought demographic data such as educational

certifications, years of experience, and frequency of interactions with private special-education schools. The second section consisted of eight questions and several probing questions related to instruction, course offerings, and behavior interventions employed at private special-education schools. These questions also focused on case managers' perceptions of the impact of the placement on students, general impressions of the programs, and key indicators of effectiveness. (See Appendix for B for a copy of the protocol.)

### **Pretesting the Instruments**

Prior to beginning the study, I pilot tested the survey and the interview questions. I gave the survey for administrative heads to three individuals who are former educational directors of private special-education schools or current principals of private special-education schools. I pilot tested the interview questions for the District case managers using one former IEP case manager and several special-education instructional specialists who are familiar with private special-education schools. All participants selected for the pretest phase were knowledgeable about special education as well as private special-education schools. After administering the pilot surveys and interviews, I reviewed each question with participants. Adjustments included revising interview questions for clarity and adding probing questions, according to the feedback received. The pretest also allowed me to gauge and adjust the amount of time needed to complete the surveys and conduct the interviews. Last, pretesting helped establish the validity of both instruments (Creswell, 2012; Gay et al., 2006; Lunenburg & Irby, 2008).

## **Data Collection**

I distributed surveys to administrative heads during a 6-week period in spring semester using a three-phase administrative procedure (Creswell, 2012). First, I contacted each school's administrative head by phone to introduce the project, state the purpose of the research, and verify his/her e-mail address. I sent the first e-mail after the introduction. The e-mail explained the purpose of the research and timelines for the survey and offered an incentive of a \$5 gift card to Subway for completing the survey. The e-mail also contained a link to the survey. I asked participants to complete the survey within 2 weeks. After the first deadline for responses had passed, I sent a second e-mail with the link to the survey as a reminder to those administrative heads who did not complete the survey. I initiated a third attempt to collect data from all nonrespondents 2 weeks after the second attempt.

**Interviews.** Interviews followed commonly accepted procedures (Gay et al., 2006). I collected interview data during a 1-month period. Initially, I e-mailed each case manager to explain the purpose of the research, confidentiality agreement, timelines, and the incentive for participation (\$5 gift card to Subway). I asked if they would like to participate. Upon agreement to participate, I selected an interview time and date based on the convenience of the case manager. No interviews occurred during work hours. With permission from the participant and after obtaining informed consent, I digitally recorded the interview session. Using the pre-established interview protocol, when necessary, I used prompting and probing questions to clarify or redirect the discussion. Each semi-structured interview lasted approximately 25 minutes. Within a week, I transcribed the interviews.

## **Analysis**

**Survey.** I analyzed data obtained from the online surveys using the Qualtrics software application to inform Research Questions 1 and 2. I computed descriptive statistics, including frequencies and percentages, for each item (as suggested by Lunenburg & Irby, 2008). I present all results through the use of visual displays of data.

**Interviews.** Using the inductive approach of thematic analysis to analyze the data, I used an edited transcript, a transcript with irrelevant information removed, as the basis of analysis (as presented by Glesne, 2011). I employed the six-step thematic analysis guidelines developed by Braun and Clark (2006). I used Microsoft Office tables to manage the data. First, I became familiar with the data by reading and rereading the data. Second, I developed initial codes based on patterns of concepts found in the data and conflicting or competing ideas (Braun & Clarke, 2006; Johnson & Christensen, 2004). At this point, the table had two columns: transcribed data and key words and phrases (codes). Next, I organized the codes into categories, adding a third column to the table to capture possible themes. I then reread the data to recategorize and reduced the data, as needed, including merging some similar themes and developing new themes for codes that did not fit in an existing theme. I then defined and named the themes and created a Microsoft table for each theme that detailed supporting evidence from the interview data. Last, I completed the final analysis of the data and integrated the findings of the study into a narrative describing the perceptions of public school special-education case managers (Braun & Clarke, 2006).

**Member checking and auditing.** Member checking and auditing aided in reducing research bias and increasing the validity of the study. Member checking requires

researchers to check the accuracy of the data collected and allow for additional clarity (Creswell, 2012; Gay et al., 2006). In this instance, I reviewed the transcript with each interviewee to identify or clarify any misconceptions. Minor changes included the changing of verbiage; however, these changes did not alter the meaning of participants' previous statements. I also shared a summary of the data and outlined patterns in the data with participants (as put forth by Carlson, 2010). Participants agreed with the preliminary findings.

Auditing is the process of having a colleague or external person review the research process including data collection, analysis, and interpretation (Creswell, 2012; Gay et al., 2006). Two external people provided feedback who are familiar with qualitative research; they reviewed the analysis of the data including coding and theme development. They also provided guidance and support with data interpretation. I used member checking and auditing to increase the trustworthiness of the study (as suggested by Creswell, 2012).

### **Human Subject Review**

The University of Maryland's Institutional Review Board and the District's Institutional Review Board approved this study. All participant recruitment was voluntary. Participants had no known risks for involvement in this study. Confidentiality was ensured by using pseudonyms to identify participants and schools (Gay et al., 2006). All databases generated are stored on an external hard drive. I will maintain all data and papers for 5 years under lock and key and only I will have access to the data.

**Surveys.** An implied consent waiver was on the first page of the survey containing the purpose of the study. The first page also stated participant and researcher



expectations including the participant's right to withdraw from the study at any time and the researcher-participant confidentiality agreement (Johnson & Christensen, 2004). The act of clicking on the link to begin the survey implied consent; therefore, no signature was required.

**Interviews.** Prior to conducting the interview, I provided each participant with a written description of the research study. The description contained the purpose of the study, procedures, potential for risks, confidentiality statement, a right-to-withdraw statement, and a statement of consent. This letter of informed consent asked each participant to provide additional contact information, allowing me to schedule any follow-up conversations needed.

### **Summary**

This chapter reiterated the purpose of this study and presented the three guiding research questions. I discussed participant selection, explaining that I identified participants based on set criteria. I employed surveys and interviews to investigate the current state of private special-education schools to capture the perceptions of public school case managers. This chapter presented the data-analysis methods used to answer the research questions and the steps taken to ensure the integrity of the study, including member checking and auditing. In Chapter 3 I present the findings.

## Chapter 3: Results and Impact

Research on the effectiveness of private special-education schools that serve students with ED is limited. The purpose of this study was to identify academic and vocational course offerings as well as behavioral interventions provided at private special-education schools. Second, but of equal significance, this study gathered the perceptions of public school case managers on the quality of programming in these schools. This chapter presents the results and impact of the study.

### Survey Results

Using a survey to obtain information from administrative heads of 15 selected private schools, this study aimed to answer Research Questions 1 and 2:

1. What are the academic and vocational/career courses offered in private special-education schools in which the District places high school students with ED?
2. What behavioral interventions, including programs and strategies, do private special-education schools use in which the District places high school students with ED?

The survey had several sections: (a) school demographic information, (b) academic course offerings, (c) vocational course options, and (d) behavioral supports. Nine of the 15 schools that received the survey completed it. This represents a 60% ( $n = 9$ ) return rate.

To better understand the nonresponders, I used to the MANSEF directory. This directory gives a brief profile of each school. Although the profiles are not

comprehensive, some characteristics are evident. I integrated the nonresponders' characteristic into the survey results.

### **Demographic Information**

Respondents answered questions regarding their student populations including the percentage of students in high school and the percentage of high school students working toward obtaining a diploma. Survey results revealed that 430 students with disabilities received special-education services in the nine schools as of January 1, 2016. Of this number, 274 students were high school students (See Table 5). The remaining 156 (44%) students were elementary or middle school students and were served in four schools, those with larger overall enrollments.

Table 5

#### *Estimated High School Population*

| Schools  | Total student population | Percentage of high school students | High school population |
|----------|--------------------------|------------------------------------|------------------------|
| School 1 | 63                       | 75                                 | 47.25                  |
| School 2 | 20                       | 100                                | 20.00                  |
| School 3 | 16                       | 100                                | 16.00                  |
| School 4 | 27                       | 100                                | 27.00                  |
| School 5 | 13                       | 100                                | 13.00                  |
| School 6 | 48                       | 50                                 | 24.00                  |
| School 7 | 48                       | 25                                 | 12.00                  |
| School 8 | 34                       | 100                                | 34.00                  |
| School 9 | 161                      | 50                                 | 80.50                  |
| Total    | 430                      |                                    | 273.75                 |

All nine respondents indicated their school was approved by MSDE to offer the high school diploma. In addition, 33% ( $n = 3$ ) of respondents also provided services for students who are pursuing a certificate of school completion. Data revealed that 88%

( $n = 241$ ) of high school students receiving special-education in these private special-education schools are pursuing a high school diploma (see Table 6).

Table 6

*Estimated Number of High School Students Pursuing a High School Diploma*

| Schools  | Estimated high school population | Percentage of students on diploma track | Diploma seeking high school students |
|----------|----------------------------------|---|--------------------------------------|
| School 1 | 47.25                            | 75                                      | 35.44                                |
| School 2 | 20.00                            | 100                                     | 20.00                                |
| School 3 | 16.00                            | 100                                     | 16.00                                |
| School 4 | 27.00                            | 100                                     | 27.00                                |
| School 5 | 13.00                            | 100                                     | 13.00                                |
| School 6 | 24.00                            | 25                                      | 6.00                                 |
| School 7 | 12.00                            | 75                                      | 9.00                                 |
| School 8 | 34.00                            | 100                                     | 34.00                                |
| School 9 | 80.50                            | 100                                     | 80.50                                |
| Total    | 273.75                           |   | 240.93                               |

To further understand the possible diversity of the student population at these private special-education schools, respondents identified all disability categories that MSDE approves them to provide special-education services. MSDE more frequently approved schools to serve five disability categories. Table 7 provides an overview of how many schools MSDE approved to provide services for one or more disability category. One respondent reported the school had approval to serve nine of the 12 disability categories. All nine school administrators reported having approval from MSDE to provide services for students with ED. MSDE approved five (55%) schools to provide services to students with specific learning disability, four (44%) to provide services to students with other health impairments, three (33%) to provide services to students with autism, and three (33%) to provide services to students with intellectual disabilities.

Table 7

*Frequency and Percentage of Schools Approved to Provide Services by Disability**Classification*

| Disability                   | All schools |     |
|------------------------------|-------------|-----|
|                              | Frequency   | %   |
| Autism                       | 3           | 33  |
| Deaf-blindness               | 0           | 0   |
| Emotional disability         | 9           | 100 |
| Hearing impairment           | 1           | 11  |
| Intellectual disability      | 3           | 33  |
| Multiple disabilities        | 2           | 22  |
| Orthopedic impairment        | 0           | 0   |
| Other health impairment      | 4           | 44  |
| Specific learning disability | 5           | 55  |
| Speech-language impairment   | 2           | 22  |
| Traumatic brain injury       | 1           | 11  |
| Visual impairment            | 1           | 11  |

To gain an idea of the number of high school students with ED receiving services in these schools, I asked respondents to identify the percentage of high schools students with a primary disability of ED. As previously mentioned, approximately 64% ( $n = 274$ ) of the total student population in the participating schools were high school students. Of these, the majority ( $n = 232$ , 85%) had a primary disability of ED (see Table 8).

**Demographic data of nonresponders.** According to the MANSEF (2015) directory, all nonresponding schools provide services for students with ED. Of the six nonresponding schools, five (83%) provide services to students with a variety of disabilities. MSDE approved all schools to offer the high school diploma. Two (33%) of

the nonresponders only served high school students. Specific student-body population data were unavailable for these schools.

Table 8

*Estimated Number of High School Students with ED*

| Schools  | Estimated high school population | Percentage of high school students with ED | Number of high school students with ED |
|----------|----------------------------------|--|--|
| School 1 | 47.25                            | 75   | 35.43                                  |
| School 2 | 20.00                            | 100  | 20                                     |
| School 3 | 16.00                            | 100  | 16                                     |
| School 4 | 27.00                            | 100  | 27                                     |
| School 5 | 13.00                            | 100  | 13                                     |
| School 6 | 24.00                            | 50   | 12                                     |
| School 7 | 12.00                            | 25   | 3                                      |
| School 8 | 34.00                            | 75   | 25.5                                   |
| School 9 | 80.50                            | 100  | 80.5                                   |
| Total    | 273.75                           |  | 232.43                                 |

*Note.* ED = emotional disability.

### **Core Academic Courses**

Respondents selected the core academic courses offered by their school during the 2015–2016 school year. All schools offered a variety of academic courses. The results of the analysis appear in Table 9. All schools reported offering the following courses: (a) English (Grades 9–12), (b) algebra I, (c) geometry, (d) integrated mathematics, (e) probability and statistics, (f) biology, (g) environmental science, (h) U.S. history, (i) government, and (j) world history. Eight respondents (89%) reported also offering (a) algebra II, (b) integrated science, and (c) physical science. No respondent reported offering (a) calculus, (b) linear algebra, or (c) trigonometry. After further analysis of the data, the size of the student population at individual schools did not impact course offerings. In other words, schools with larger student populations did not report offering

more core academic courses. Similarly, smaller schools did not report offering fewer core academic courses.

Table 9

*Core Academic Courses Offered 2015–2016 School Year*

| Academic courses           | School responses |     |
|----------------------------|------------------|-----|
|                            | Frequency        | %   |
| English 9                  | 9                | 100 |
| English 10                 | 9                | 100 |
| English 11                 | 9                | 100 |
| English 12                 | 9                | 100 |
| Algebra I                  | 9                | 100 |
| Algebra II                 | 8                | 89  |
| Geometry                   | 9                | 100 |
| Precalculus                | 1                | 11  |
| Calculus                   | 0                | 0   |
| Integrated mathematics     | 9                | 100 |
| Linear algebra             | 0                | 0   |
| Trigonometry               | 0                | 0   |
| Probability and statistics | 9                | 100 |
| Biology                    | 9                | 100 |
| Chemistry                  | 6                | 67  |
| Environmental science      | 9                | 100 |
| Integrated science         | 8                | 89  |
| Physics                    | 4                | 44  |
| Physical science           | 8                | 89  |
| U.S. History               | 9                | 100 |
| Government                 | 9                | 100 |
| World history              | 9                | 100 |
| Geography                  | 2                | 22  |
| Psychology                 | 2                | 22  |

**Core academic courses of nonresponders.** Specific academic courses offered at the nonresponding schools were unavailable in the MANSEF (2015) directory. However, the directory indicated that the MSDE approved each school to offer a high school diploma. Therefore, these schools must offer a combination of the academic courses mentioned in Table 9.

### **Vocational Courses**

In addition to reporting core academic courses, I asked survey respondents to select vocational courses from a list of 13 options (see Table 10). Of the schools reporting, 78% ( $n = 7$ ) reported offering at least one vocational course. Work experience was the most frequently reported vocational course (67%,  $n = 6$ ). One respondent reported the school offered five vocational programs excluding work experience: (a) auto mechanics, (b) cosmetology, (c) barbering, (d) carpentry, and (e) business education. Another respondent reported offering culinary arts in addition to work experience. Two schools (22%) did not provide vocational courses for students. The size of the student population at individual schools did not appear to impact vocational offerings.

**Vocational courses offered at nonresponding schools.** According to the MANSEF (2015) directory, all nonresponders offer work experience. Only one school offers additional vocational courses. Those courses include (a) graphic communication, (b) computer science/systems, (c) automotive mechanics, and (d) construction methods.

### **Employment Skill-Development Experiences**

Survey respondents identified on and off campus work or training options provided in their programs. Respondents selected from a list of paid and unpaid options. Overall, options for on- and off-campus work and training varied greatly among the nine



schools. One school offered only one option (unpaid on-campus training) whereas another school, with the smallest reported high school enrollment, offers eight work and training-development experiences.

Table 10

*Vocational Courses Offered at Private Special-Education Schools*

| Vocational courses  | Schools |   |   |   |   |   |   |   |   | %  |
|---------------------|---------|---|---|---|---|---|---|---|---|----|
|                     | 1       | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |    |
| Auto mechanics      |         |   |   |   |   |   |   | X |   | 11 |
| Computer networking |         |   |   |   |   |   |   |   |   | 0  |
| Cosmetology         |         |   |   |   |   |   |   | X |   | 11 |
| Nursing             |         |   |   |   |   |   |   |   |   | 0  |
| Culinary arts       |         |   |   |   |   |   | X |   |   | 11 |
| Graphic design      |         |   |   |   |   |   |   |   |   | 0  |
| Child development   |         |   |   |   |   |   |   |   |   | 0  |
| Carpentry           |         |   |   |   |   |   |   | X |   | 11 |
| Brick masonry       |         |   |   |   |   |   |   |   |   | 0  |
| Business education  |         |   |   |   |   |   |   | X |   | 11 |
| Work experience     | X       | X | X |   |   | X | X |   | X | 67 |
| Horticulture        |         |   |   |   |   |   |   |   |   |    |
| Barbering           |         |   |   |   |   |   |   | X |   | 11 |
| None                |         |   |   | X | X |   |   |   |   | 22 |

All schools reported offering unpaid on-campus training. Eight schools (89%) also offered unpaid on-campus work. More than half (56%,  $n = 5$ ) offered unpaid off-campus work. Likewise, 44% ( $n = 4$ ) of schools offered unpaid off-campus training. In contrast, 44% ( $n = 4$ ) of schools offered paid on-campus work and 44% ( $n = 4$ ) offered paid off-campus work. Two schools (22%) offered paid on-campus training and two

(22%) offered paid off-campus training (see Table 11). Data on nonresponders were unavailable.

Table 11

*Employment Skill-Development Options Offered at Private Special-Education Schools*

| Skill development options  | Schools |   |   |   |   |   |   |   |   | % |     |
|----------------------------|---------|---|---|---|---|---|---|---|---|---|-----|
|                            | 1       | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |   |     |
| On-campus training unpaid  | X       | X | X | X | X | X | X | X | X | X | 100 |
| On-campus work unpaid      | X       | X | X | X | X | X | X |   |   | X | 89  |
| On-campus work paid        | X       | X |   | X |   |   |   | X |   |   | 44  |
| Off-campus training unpaid |         | X |   | X |   |   |   | X |   | X | 44  |
| Off-campus work unpaid     | X       | X |   | X |   | X | X |   |   |   | 56  |
| Off-campus training paid   |         |   |   |   |   | X | X |   |   |   | 22  |
| Off-campus work paid       | X       | X |   | X |   |   |   | X |   |   | 44  |
| On-campus training paid    | X       |   |   |   |   |   |   | X |   |   | 22  |

**Counseling Services**

Survey respondents selected counseling services from a list of options. All respondents reported their schools offered individual counseling and group counseling to students. Eight schools (89%) reported offering social skills training and five (56%) reported offering mentoring. Two schools (22%) reported offering family counseling, and two schools reported offering substance-abuse counseling. No school reported having a certified behavior analyst as a support or providing support to students transitioning to a less restrictive environment (see Table 12).

**Nonresponder schools' counseling services.** According to the MANSEF (2015) directory, all schools offer group and individual counseling. In addition to group and individual counseling, two schools were listed as offering family counseling services and

one school offered transition services to an LRE. No school was listed as offering mentoring, SST, and substance abuse counseling.

Table 12

*Counseling Services Offered at Private Special-Education Schools*

| Services                         | School responses |     |
|----------------------------------|------------------|-----|
|                                  | Frequency        | %   |
| After care/Transition to LRE     | 0                | 0   |
| Board certified behavior analyst | 0                | 0   |
| Family counseling                | 2                | 22  |
| Group & individual counseling    | 9                | 100 |
| Mentoring                        | 5                | 56  |
| Social skills training           | 8                | 89  |
| Substance-abuse counseling       | 2                | 22  |

*Note.* LRE = least restrictive environment.

**Behavior Management**

School administrators selected the name of the behavior-management protocol used from a list of nine options including a write-in option. The most frequently used protocols reported included Safe Crisis Management (44%,  $n = 4$ ) and Therapeutic Aggression Control Technique II (44%,  $n = 4$ ). One school (11%) used Right Response. Data appear in Table 13.

Table 13

*Behavior Management Protocols Utilized at Private Special-Education Schools*

| Behavior-management protocols               | School responses |    |
|---|------------------|----|
|   | Frequency        | %  |
| Comprehensive Crisis Management             | 0                | 0  |
| Crisis Wave                                 | 0                | 0  |
| Handle with Care                            | 0                | 0  |
| MANDT System                                | 0                | 0  |
| Nonviolent Physical Crisis Intervention     | 0                | 0  |
| Professional Crisis Management              | 0                | 0  |
| Right Response                              | 1                | 11 |
| Safe Crisis Management                      | 4                | 44 |
| Therapeutic Aggression Control Techniques 2 | 4                | 44 |

Survey respondents also selected behavior interventions used in their school from a list of 14 options. The most frequently identified behavior intervention strategies reported were (a) verbal deescalation (100%,  $n = 9$ ), (b) out-of-school suspension (100%,  $n = 9$ ), (c) positive reinforcements (100%,  $n = 9$ ), (d) behavioral contracts (100%,  $n = 9$ ), (e) school-wide behavioral-level system (100%,  $n = 9$ ), (f) time-out classroom (89%,  $n = 8$ ), (g) time-out special separate space (89%,  $n = 8$ ), and (h) positive behavior intervention and supports (89%,  $n = 8$ ). Respondents identified seclusion with an open door (44%,  $n = 4$ ) and seclusion with a closed door (44%,  $n = 4$ ) less frequently. No school indicated the use of Saturday school as a behavior intervention (see Table 14). This level of data on behavior management and interventions was unavailable for nonresponding schools.

Table 14

*Behavior Interventions Used at Private Special-Education Schools*

| Behavior interventions                  | School responses |     |
|---|------------------|-----|
|   | Frequency        | %   |
| Verbal deescalation                     | 9                | 100 |
| Time-out classroom                      | 8                | 89  |
| Time-out separate space                 | 8                | 89  |
| Seclusion (open door)                   | 4                | 44  |
| Seclusion (closed door)                 | 4                | 44  |
| Delayed dismissal                       | 6                | 67  |
| Saturday school                         | 0                | 0   |
| In-school suspension                    | 7                | 78  |
| Out-of-school suspension                | 9                | 100 |
| Positive reinforcement                  | 9                | 100 |
| Behavioral contracts                    | 9                | 100 |
| Physical restraint                      | 5                | 55  |
| Positive behavior intervention supports | 8                | 89  |
| School-wide behavioral-level system     | 9                | 100 |

**Interview Results**

Through interviews, I gathered the perceptions of public school case managers regarding the quality of programming offered by private special-education schools that service high school students with ED. Seven case managers participated in the study.

Interview data provided answers to Research Question 3:

3. What are the perceptions of public school special-education case managers regarding instruction and behavioral management at private special-education schools in which the District places high school students with ED?

## Case Managers' Demographics

Each of the case managers had 15 or more years of experience in the field of education. Educational certification for participants ranged from Generic Special Education to Administration II. The group represented a diverse background of work experiences including principal, assistant principal, department chair, teacher, and vocational coordinator. The number of years case managers worked in their current position varied greatly. However, all case managers had been in this position for 5 or more years. Last, all case managers reported visiting private special-education schools on a weekly basis and engaging in ongoing classroom observations (see Table 15).

Table 15

### *Case Manager's Demographics*

| Case managers  | Number of years in the field of education | Number of years as case manager    |
|----------------|---|------------------------------------|
| Case Manager 1 | 15 years or more                          | More than 5 years, up to 10 years  |
| Case Manager 2 | 15 years or more                          | More than 5 years, up to 10 years  |
| Case Manager 3 | 15 years or more                          | More than 10 years, up to 15 years |
| Case Manager 4 | 15 years or more                          | More than 5 years, up to 10 years  |
| Case Manager 5 | 15 years or more                          | More than 5 years, up to 10 years  |
| Case Manager 6 | 15 years or more                          | More than 10 years, up to 15 years |
| Case Manager 7 | 15 years or more                          | More than 15 years                 |

## Themes and Subthemes

I used a multiquestion interview protocol to gather the perceptions of case managers. Based on thematic analysis of the responses to all the questions, eight major themes emerged from case managers' responses: (a) instructional practices, (b) curriculum offerings, (c) behavior management, (d) staffing, (e) environment, (f) student outcomes, (g) indicators of effectiveness, and (h) local school system role.

Another 13 subthemes emerged from analysis of the themes. Figure 1 illustrates the themes and subthemes. Following is a description of each theme and subtheme.

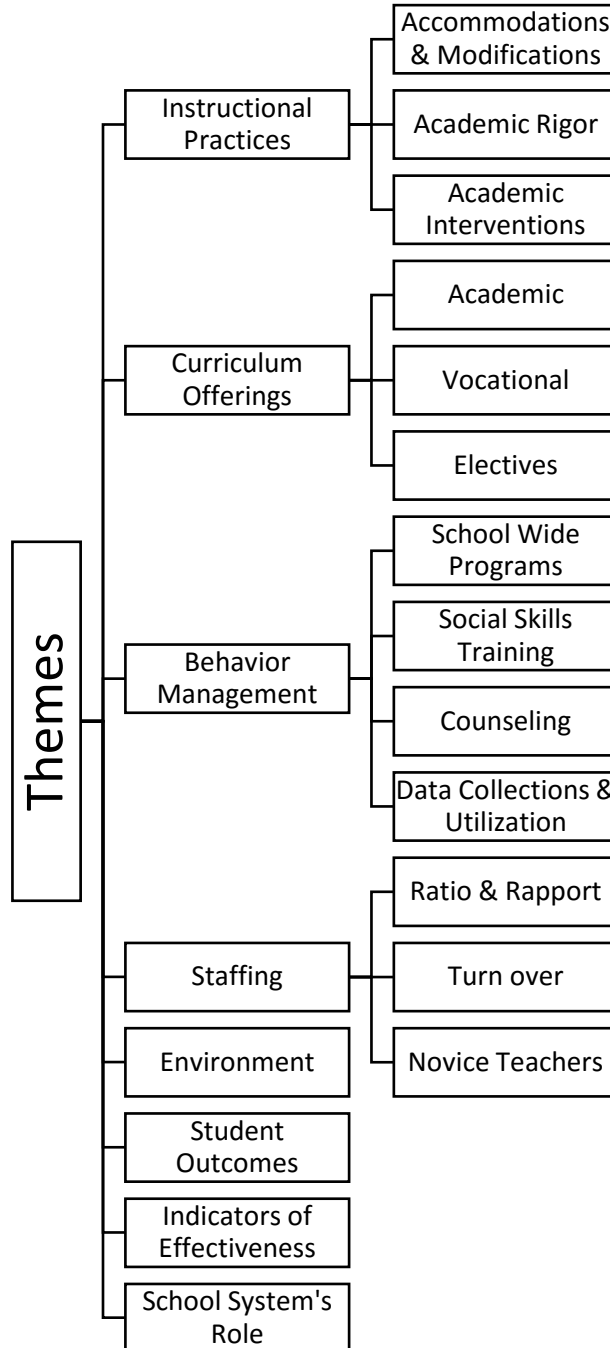


Figure 1. Themes and subthemes.

**Instructional practices.** When I asked case managers to describe their experiences when observing classroom instruction in private special-education schools and about the strengths and weaknesses of private special-education schools, they spoke extensively about teacher and staff practices in those schools. Thus, instructional practices emerged as a central theme. Instructional practices include teacher behaviors and techniques used to promote student learning (i.e., modeling, guided practice, determining the order of skills taught, planning, grouping students, small-group instruction, close proximity of teachers to students, use of graphic organizers, and use of smart boards). In the category of instructional practices, three subthemes emerged: accommodations and modifications, academic interventions, and academic rigor.

***Accommodations and modifications.*** In general, all case managers reported that private special-education schools provide students with the necessary accommodations and modifications to access the curriculum. For instance, among the strengths identified as associated with these programs, Case Manager 1 stated, “That (small class size) makes it very easy for the teacher to work on those curriculum and grade-level-based skills while incorporating preteach and reteach opportunities, chunking of material, and access to teacher’s notes.” When asked specifically to describe accommodations and modifications, Case Manager 6 discussed the use of scaffolding and a slower pace of instruction to help students understand the content. Likewise, Case Manger 7 reported, “They use adaptive textbooks and adaptive novels for literature classes.” Case Manager 1 also confirmed the use of lower level textbooks. Other positive accommodations and modifications identified by case managers included graphic organizers, outlines of lectures provided to students, and shorter assignments.



However, a few case managers expressed concern about students having inconsistent access to accommodations and modifications, as well as the overuse of modifications. Case Manager 3 reported, “I am able to see accommodations and modification at times.” Case Manager 2 stated, “It seems as though the work is extensively modified for the students, even though most of these students are of average or above average intelligence.”

*Academic rigor.* When asked to describe the amount of rigor observed during instruction, all respondents reported a lack of academic rigor. At least two case managers believed that class configuration, the grouping of students into classes with mixed ability, grade levels, ages, and/or disability classification, negatively impacted academic rigor. Case Manager 6 noted that the lack of rigor is partially due to the wide range of student abilities in a classroom. Case Manager 5 stated, “The rigor of instruction is questionable because [teachers] are charged to teach, in many cases, multiple subjects.” Some case managers believed that the focus on behavior management in the schools contributes to the lack of rigor. Case Manager 1 stated, “It is a challenge to be more rigorous because (academic) rigor sets off behaviors.” Case Manager 2 stated, “I think the focus on the social and emotional components drive the lack of [academic] rigor.”

Three case managers also identified specific instructional practices they perceived contributes to the lack of academic rigor. Case Manager 7, stated, “I don’t feel that they use enough questioning techniques at a higher level. They are usually very fundamental, very elementary type questions.” Case Manager 4 shared that an overreliance on individualized instruction has negated opportunities for shared learning and rigorous student-led group discussions. Likewise, Case Manager 2 identified the overuse of

modifications or modified assignments as a contributor to the lack of challenging instruction and activities.

*Academic interventions.* Academic interventions are used to address student-skill deficits in all academic areas including reading, mathematics, and writing. I asked case managers to describe the use of academic interventions, defined as additional instruction in reading, writing, and mathematics to supplement curriculum and improve academic performance in these specialized settings. Unanimously, case managers' reported that students have limited access to academic interventions. Case Manager 4 asked, "We are discussing ED schools, right? I do not see a lot of instructional interventions with ED schools." Case Managers 2 and 3 echoed similar sentiments. All case managers agreed that the use of academic interventions varies from program to program; however, overall they reported such interventions less frequently used with high school students.

When asked specifically about reading and mathematics interventions, four case managers reported that some schools use computer-based programs to provide additional instruction to struggling students. Case Manager 6 stated, "I see more academic reading interventions." Of those private special-education schools that provide computer-based academic interventions, some case managers were concerned about the fidelity of implementation. In others words, case managers believed students may not be receiving the interventions for the recommended amount of time prescribed by the vendors. Case Manager 1 explained, "I think [use of interventions is] consistent, but it might be consistently inconsistent." Case Manager 4 stated, interventions "are not being implemented with fidelity, so we are not getting the results that we expect to get." Case

Manager 5 further explained that building time into the school schedule to access interventions works more effectively.

**Curriculum offerings.** I asked case managers to describe course offerings at the private special-education schools for high school students. Comments included that local system requirements drive academic course offerings and that few schools offer vocational programs. Curriculum offerings emerged as a theme across a number of questions. I interpreted curriculum offerings to refer to subject matter courses, electives, and vocational options. In general, all case managers viewed curriculum offerings as limited.

**Academic courses and electives.** Case managers agreed that schools tailor programs and course offerings to the specifications of the local school system, thereby providing students the necessary courses to earn a high school diploma. However, all case managers acknowledged that these schools offer the required basic academic courses and very few elective options. As Case Manager 4 explained, schools “are able to offer those courses on a rotational basis that the students need, but as far as expanding to advanced courses or expanding math courses, schools are not able to do that.” Case Manager 7 stated, “My only problem is that they do not offer enough electives such as arts, media, and foreign languages.” Case Manager 1 concurred stating, “I do see that [schools] offer some basic technology courses, but nothing compared to what’s being provided in public schools.”

**Vocational options.** Similar to the comments about limited academic coursework, case managers indicated that vocational options are also limited. All case managers interviewed indicated that vocational courses, courses that teach skills needed to gain

entry into a particular occupation, are quite limited in private-school settings but are much needed. Case Manager 3 stated, “There are only two to three schools that actually have a functioning vocational program in real life.” Case Manager 4 explained, “One school is able to offer the options such as barbering, carpentry, and computer technology courses. They have, however, had some problems keeping certified [instructors].” Case Managers 1 and 6 shared that the schools they work with do not provide vocational courses.

In contrast to the lack of vocational coursework, case managers reported that private special-education schools are more likely to provide some form of work experience and employment-skills development. Although work experience allows students to receive credits as a result of paid or unpaid employment, employment-skills development may not be credit based. Case Manager 6 noted that the schools “have work-based experiences. That is mostly what I see.” Case Manager 1 explained, some schools “have a strong transition program that does a lot with job training, job searching, and if the student’s schedule allows it, opportunities to work in the community.” Yet, all but three case managers expressed concerns with work-based experience opportunities at private special-education schools. Case Managers 3 and 5 shared that work-based experiences are limited, loosely structured, not very well planned, and inconsistent. Case Manager 7 explained that some students do community-based internships, but the experience may not align with the student’s interest. Case Manager 4 stated, schools “have not established relationships [with community businesses] where students are able to seek a job, and be monitored after receiving the job.”

**Behavior management.** The third major theme that emerged from the analysis of interview data related to managing behavior. These comments were mostly made in response to a question that asked case managers to describe the behavior management approaches used in these schools. However, comments also emerged during discussions about observing classroom instruction. Most comments centered on schoolwide behavior systems, SST, and counseling. Case managers also mentioned data collection and use of data for behavior management. In general, case managers acknowledged that some programs have a strong behavioral emphasis whereas others do not. Case Manager 1 stated, “To be honest, sometimes I wonder if the schools are as specialized as they claim to be.” However, many case managers identified the counseling and small environment provided by the schools as positive contributors to behavior management.

***Schoolwide behavior systems.*** Case managers noted that most schools have a functioning schoolwide behavioral program. A schoolwide behavioral program is defined as a set of interventions used to improve the overall climate of a school through the establishment of a clear purpose and expectation, as well as methods to encourage compliance and discourage violations of rules (Cohen, Kincaid, & Childs, 2007). Case Manager 4 stated, “Students are very much aware of what constitutes something that is not behaviorally acceptable.” Case Manager 5 believed that behavioral-reward systems used schoolwide extend into the classroom. Many respondents also mentioned the use of point sheets as a means of helping students self-regulate. Case Manager 7 stated, schools “use Positive Behavior Interventions and Supports (PBIS), and they are very consistent with using the prompting system and the point sheets.” Case Manager 4 explained,

schools “use the point system for students to identify the [behaviors] they can be working on.”

***Social-skills training.*** When asked about the use of SST as a behavioral support, three case managers stated that SST is used in the private special-education schools they monitor. Case Manager 6 reported, school staff “usually do that as part of the group setting. It fosters better SST because you have to take turns, be respectful, and listen to be a part of the small group community.” Case Manager 1 reported, “It’s on an as needed basis. It’s embedded into the programming usually with the counseling piece.” Case Manager 5 agreed that SST is embedded in these programs. In contrast, the remaining four case managers noted the inconsistent use of social training and the lack of access to SST for students with ED receiving services in private special-education schools. Case Manager 7 shared that SST is not ongoing for students with ED. Likewise, Case Manager 3 indicated that few schools offer SST as part of their curriculum. Case Manager 4 stated, “For the ED programs that I work with, we don’t have social skills training.” Case Manager 2 concurred with Case Manager 4.

***Counseling.*** Case managers were asked to share their thoughts on counseling as a behavioral-modification intervention. Overall, case managers’ perceptions of counseling indicated that counseling is a critical component of programming in private special-education schools and believed that students benefit from receiving counseling. Case Manager 4 explained that outstanding social workers and counselors help students make progress in these settings. Case Manager 5 stated, counselors “are key in supporting students and teaching self-management techniques. They are very instrumental in the success or the growth of the student.” Case Manager 2 explained that counselors are

helpful to students by addressing their concerns and personal problems as well as serving as a link between home and school. Two case managers indicated that counseling is only effective if the counselor and student have a good relationship; therefore, using counseling and a behavior system in conjunction is a more effective way to improve student behavior.

***Data collection and use.*** Case managers discussed data collection and use in the development and implementation of behavior interventions and programs. Specifically, I asked case managers to discuss data collection and usage in addressing behavioral concerns. According to the case managers, data collection and use practices varied by school. Case Manager 6 stated, “I had one school that did an excellent job of collecting data. In some schools, it’s questionable.” Case Manager 2 explained, “I find that schools that have a behavior specialist on board do a great job of collecting data.” All but one case manager reported problems with private special-education schools and data collection. Case Manager 4 stated, “Collection only seems to be done when the school system requests data.” Case Manager 3 described IEP teams’ reactions when asked for baseline data by stating, “They look at me like I have three heads.” Case Managers 4, 5, and 7 indicated that some level of data collection exists, but the use of data is lacking.

Data collection and use is an essential component in conducting functional behavioral assessments (FBA) and developing behavior intervention plans (BIP), both of which are required by IDEA for students with behavioral needs. An FBA is a data-collection process aimed at determining the cause and maintaining factors that contribute to an identified behavior. Educators must complete an FBA prior to developing a BIP (Killu, 2008). BIPs are plans that “outline strategies and tactics for dealing with the

problem behavior along with the role that educators must play in improving student learning and behavior” (Killu, 2008, p. 140). Despite concerns regarding the challenges with data collection and use, all case managers indicated that private special-education schools develop and implement BIPs for students. Case Manager 6 stated, schools “do try to implement the plans. If it’s not working, they will try to come up with some other idea.” In contrast, two case managers voiced concerns regarding schools’ ongoing implementation of BIPs. Case Manager 2 stated, “As far as implementation of the plans, I do not think schools are fully and consistently implementing BIPs on a daily basis.” Case Manager 4 stated, “I don’t believe they go back to revisit [BIPs]. Sometimes it’s almost like some of the people which should be working with the behavior plans don’t know what is in the plan.”

**Staffing.** While answering questions about instruction, academic interventions, and behavior management, case managers gave their general impressions on staffing. Therefore, the fourth theme that emerged was staffing at private special-education schools. Generally, case managers’ perceptions of staffing centered on the ratio of educators to students, rapport with students, turnover, and novice teachers.

**Ratio and rapport.** All case managers spoke highly of the staff-to-student ratio and staff interactions with students. Case Manager 5 stated, “When you go in to observe a classroom, you notice quite quickly that you have a number of adults as part of the classroom environment.” According to case managers, the classroom staff typically consists of a teacher, a teacher’s assistant or program aide, and one-to-one aides, based on student needs. Additionally, a therapist or counselor works in the classroom. When asked about staff–student interactions, most case managers reported positive



relationships. Case Managers 2 and 3 saw great rapport and mutual respect between staff and students. Case Manager 4 explained, “I see the small student-to-teacher ratio as being one strength, and also the fact that students are able to build a rapport with their teachers because they are going to see the same teachers in many different settings.”

**Turnover.** Although no interview questions directly addressed staff mobility, this topic emerged when case managers discussed instruction, behavior, vocational offerings, indicators of effectiveness, and areas of improvement for private special-education schools. All case managers expressed concern with the turnover of staff at private special-education schools and the impact of such changes. Case Manager 5 stated, “The private separate day schools struggle with having staff turnover.” Case Manager 3 stated, “I don’t know if it’s due to a high staff turnover or if it’s due to a changing administration, schools have gone downhill.” The high staff turnover may account for some the inconsistency case managers perceived. When referring to the lack of implementation of BIPs, Case Manager 4 stated,

Because we have a lot of turnover within private special-education schools, the team that develops it is not necessarily the ones that implement it for the school year. Those persons [the new team] don’t take ownership of it, or just don’t really try to see what strategies they should be using.”

Other case managers indicated that the high turnover impacts the rigor of academic programming as well as behavior management.

**Novice teachers.** Many case managers noted concerns with the number of novice educators employed at private special-education schools. This subtheme emerged from questions regarding classroom observations, behavior management, academic

interventions, and areas that need improvement. Case Manager 3 stated, “I’ve noticed that the educators are both extremely young and new to the educational field, or they are older individuals that have other experiences and got involved in the education field later in life.” At least one case manager questioned the qualifications and certifications of these teachers. In addition, Case Manager 2 stated, “I’m not sure about the time they have had as far as being instructional teachers, and their experiences of teaching and providing rigor in their academic programs.” Last, case managers discussed the impact of employing novice teachers. Case Manager 7 stated, “I find that the less experienced teachers have a lot less rigor.” Likewise, when discussing the lack of rigor in these programs, Case Manager 3 stated,

I think it may have to do with the fact that a lot of [teachers] may not have a whole lot of instruction in special education or in the content area because they are brand spanking new, or they may have come from another field.”

**Environment.** Throughout the interviews and specifically when asked to identify the strengths of the private special-education school programs, case managers referenced environmental features including the size of student enrollment and culture. All case managers viewed the small supportive environments at private special-education schools as a major determinant in students’ success. Case Manager 5 stated, “The fact that [schools] are smaller environments really makes a difference.” Case Manager 7 shared that smaller class sizes benefit everyone. When discussing behavior, Case Manager 4 explained, “It’s hard to walk the halls in a small setting, a small classroom, and a small building where you only have a total of 7–8 classes.” Case Manager 1 affirmed, “I do

think because of the counseling and the small class/school environment, I think that really helps with behaviors.”

All case managers agreed that the small classes allow for easier implementation of accommodations and modifications as well as the appropriate pacing of instruction. Case Manager 7 explained, schools “can tailor the instruction to whatever the student’s need is.” Case Manager 4 stated, “The students that thought they could not get a high school diploma have been able to earn it because they’ve had the attention that they needed.” According to four case managers, another positive aspect is that these schools take and support some of the most challenging students in the school district. Case Manager 3 explained, “We do know some schools that take some of our most challenging students.” Case Manager 2 stated,

They are willing to accept and work with students with severe disabilities; specifically students with ED. They make a good effort to educate them and work on modifying their behaviors as well as helping them to adjust and fit in socially.

However, case managers expressed concerns regarding the environment that included the lack of positive peer role models, limited access to a variety of courses, and multiple subjects taught by a single teacher.

**Student outcomes.** Throughout the interviews, case managers discussed student outcomes, such as test scores and grade promotions, and factors that influence student outcomes. In general, case managers perceived that students with ED placed in private special-education schools are making academic progress and graduating. Case Manager 5 explained, “Once [students] get in a place where the behavior issues are being addressed, some students who came and appeared very limited are able to get their behavior in place

[under control] and soar academically.” Case Manager 6 shared that students are passing the high school assessments and earning a diploma due to the scaffolding and slower pace of instruction provided at private special-education schools. Case Manager 7 shared that these schools are able to tailor instruction to what students need, including helping students remain in high school beyond the typical 4 years. According to Case Manager 7, this allows students to work on behavior, self-advocacy, and academics. Case Manager 2 stated, “I’m glad these programs are available. If not, most of these students would be dropouts because the public schools are not adequate for these students.” Case Manager 1 attributed student success to the holistic approach employed by these schools. Case Manager 1 explained, “I think that [schools] take a holistic approach and look at the whole student, look at family life, and [school staff] become very involved.”

**Indicators of effectiveness.** I asked case managers to identify what they consider key indicators of an effective private special-education school. The most frequently identified indicators were (a) academic gains (test scores and graduation), (b) a behavioral component implemented with fidelity, (c) a low truancy rate, (d) students who return to public school. Other indicators included, (e) a low suspension rate, (f) a strong transition program, (g) a high level of student engagement, (h) evidence of differentiated instruction, (i) stable staff, and (j) certified and experienced staff members. Case managers viewed all these areas as critical to determining the effectiveness of a private special-education school.

**School system’s role.** In response to questions about academic interventions, data collections, and the impact of placement on students, case managers discussed the role of the school system. Some case managers shared that the lack of appropriate public school

programs fuels the need to place students in private special-education schools. Case Manager 3 stated,

A lot of this starts with the local school system, and what we are doing to try to keep these kids in our own public schools rather than sending them out to private special-education schools that are not necessarily doing a better job than what we did.

Case Manager 2 echoed the need to develop and create public school programs to serve students with ED. Other case managers discussed the role of the school system in setting expectations for private special-education schools and monitoring. Case Manager 4 indicated that the request and expectations of the local school system drive data collection in private special-education schools. In regard to monitoring, when discussing interventions, Case Manager 3 stated, “Maybe ... we don’t necessarily ask [for use/types of interventions] on a regular basis, but it’s something that we need to be aware of.”

### **Discussion**

In the preceding section of this chapter, I presented the results of the survey and interviews. In the remaining sections of this chapter, I discuss and analyze these results. The chapter includes contributions of the results to policy and implications of the results. Finally, the chapter incorporates limitations of the study and recommendations for practice.

### **Overview of Private Schools for Students with ED**

In this section, I summarize key characteristics of private schools for students with ED, taken from the survey of administrators and interviews with case managers. This section also includes the perceptions of public school case managers on

programming at private special-education schools. I also compare and contrast administrators' and case managers' characteristics and perceptions with previous research.

### **Instructional Practices**

Although small class sizes and low student populations have advantages, these features may also negatively impact the quality of instruction. According to COMAR 13A 09 10. 17 (Maryland Division of State Documents. 2016), “the average class size may not exceed six students with disabilities per full-time certified teacher. If an aide is present in each class, the average class size may not exceed nine students with disabilities per full-time certified teacher.” Applying this legal requirement to the largest high school population in this study—approximately 80 students—would mean eight to nine teacher would be responsible for providing the instructional content for the 21 required diploma-track courses. Notwithstanding teacher qualifications and credentials, this may be feasible. In contrast, applying the requirement to the smallest high school population in this study—12 students—would mean one teacher is responsible for all courses. Neither situation is ideal. This high course caseload is unrealistic due to the amount of time it would take to prepare for individual subject areas and the likelihood that teachers would not be content experts for all courses. This discrepancy further confirms previous research that indicated teachers in these setting often feel overwhelmed in planning for multiple subject and grade levels, which could lead to poor instruction and a lack of rigor (Zetlin & Weinberg, 2006).

**Accommodations and modifications.** Case managers reported that students in these settings receive accommodations and modifications to access the curriculum.

However, they proffered concerns regarding the overuse of modification. The over-employment of modifications results in students not receiving challenging assignments and rigorous instruction. DeSouza and Sivewright (1993) also found that students in private special-education programs did not receive challenging assignments. The over application of modifications also prevents students from building academic stamina to complete longer assignments and may not allow students to be fully exposed to the entire course curriculum. These issues lessen the likelihood that students will be able to return to a less restrictive environment.

**Academic interventions.** Case managers reported that access to academic interventions is limited or nonexistent for high school students with ED served in private special-education schools. Because academic interventions focus on improving skill deficits, the lack of access means students will continue to perform poorly when asked to demonstrate basic skills independently. This notion reinforces the Anderson et al. (2001) findings that students in full-time special-education programs continue to perform poorly over time. This concept also highlights the need for educators to use proven academic interventions for students with ED (Bradley et al., 2008). Last, the lack of academic interventions could be due to the focus on behavioral management rather than academics (Grizenko et al., 1993; Levy & Chard, 2001; Wagner et al, 2005; Wehby et al., 2003).

### **Curriculum Offerings**

Results indicated that private special-education schools are able to provide the basic courses needed to meet graduation requirements. However, variation in the frequency and sequence of courses offered depends heavily on the student population, which could negatively impact students. For example, results of the survey indicated that

one school did not offer Algebra II—one of the mathematics courses required for graduation—during the 2015–2016 school year. If the school system had placed a student in this school and they had previously been enrolled in Algebra II, at a minimum, that student would have only received partial credit for their Algebra II class. At worst, the student would not receive any credit and would need to retake the course. This could add frustration for the student and family, additional time to the student’s high school career, and extra cost to the school system.

**Vocational options.** School administrators and case managers indicated limited vocational options for students with ED who are enrolled in private special-education schools. Very few schools offered vocational courses that lead to a certification. Although schools are more likely to offer some form of work experience to help students develop employability skills, the structure and execution of the work-experience options seem to be inadequate. The lack of access to quality vocational options is especially disheartening given the well-documented poor postsecondary outcomes for students with ED (Bradley et al., 2008; Lane et al., 2008; Nelson et al., 2004; Wagner, 1995; Wehby et al., 2003). Researchers showed that students with ED are less likely to enroll in postsecondary schools than their nondisabled peers (Wagner, 1995). Wagner (1995) also found that students with ED who have been exposed to vocational courses are more likely to gain competitive employment and earn higher wages. Therefore, it is imperative that high schools offer vocational options to these students.

### **Behavior Management**

Private special-education schools use a variety of behavior interventions and supports ranging from verbal deescalation to seclusion. According to data collected in



this study, schools frequently use a schoolwide behavioral-level system that seems to be effective with students with ED. The aforementioned interventions, in conjunction with counseling, are congruent with research on best practices for educating students with ED (Kutash et al., 2002; Puddy et al., 2008; Simpson et al., 2010; Slade et al., 2009).

However, the development and implementation of individual behavior plans were reported to be inconsistent. This facet of behavior planning is disappointing because these schools are perceived to be experts in managing and improving student behaviors (Carran et al., 2005; Osher et al., 2003; Slade et al., 2009).

**Counseling.** Group and individual counseling were the most frequently reported counseling services offered in private special-education schools. Participants identified counseling as a critical method used to help students learn self-management. Participants viewed counselors as the bridge of communication and support between home and school. Overall, participants identified counseling as a positive feature of private special-education schools that is often lacking in the public schools (Slade et al., 2009). This outcome suggests that one means to help students remain in a public school would be to offer more access to counseling services.

**Social-skills training.** Although respondents reported SST as the second most frequently offered support to students, case managers indicated SST is not prevalent in private special-education schools that serve high school students with ED. Furthermore, case managers reported that when SST is available, educators do not teach skills in a systematic fashion. One would think that SST would be a priority in these setting because the lack of appropriate social interactions is a key characteristic of an ED and is often viewed as the major barrier to educating students with disabilities (Gresham, 2015; Lane,

2007). The literature did not support this lackluster approach to SST. Researchers identified SST as a critical component of programming for students with ED (Cook et al., 2008; Gresham, 2015; Gresham et al., 2004; Lane, 2007).

### **Staffing**

The amount of staff available to assist students in these settings, in many cases, outnumbers the amount of adult supports in public school programs. Case managers believed this level of adult support allows students to gain the individualized attention they need, academically and emotionally. However, the continuous staff turnover negatively impacts the consistency of programming. Furthermore, researchers documented the adverse effects of teacher turnover on student achievement (Ronfeldt, Loeb, & Wyckoff, 2013).

Due to the high rate of teacher mobility and the general shortage of special-education teachers, private special-education schools continue to hire inexperienced teachers with little or no educational preparation (Zetlin & Weinberg, 2006). Even the practice of hiring career changers, who are perceived as experts in content knowledge, negatively impacts students. Boyd et al. (2011) found that career-switchers are less effective at improving student achievement, particularly in the area of mathematics. Also, schools reported not having a board-certified behavioral analyst on staff. This could mean novice teachers may not get the supports needed to understand and manage behaviors, which is one of the greatest challenges of working with students with ED (Zetlin & Weinberg, 2006).

## **Environment and Student Outcomes**

As suggested in the literature and found in this study, the small environment provided in these schools allow students to have structure and supports that may not be available in a typical high school (Carran et al., 2005; Slade et al., 2009). The small environment, counseling, and behavior supports help students learn self-regulation, which could lead to better student outcomes (Coleman & Vaughn, 2000). However, the negative aspects of the environment such as the lack of positive peer models, limited access to academic interventions, limited number of vocational courses, and lack of rigor may negate the positive aspects of placing students in these settings.

Despite the documented concerns, case managers reported positive student outcomes. Carran et al. (2005) indicated that students with ED graduate from private special-education schools at high rates. Although this study did not include graduation rates, case managers reported that students with ED enrolled in private special-education schools are passing the high school assessments and earning a diploma. Findings from this study suggested that these students may not have graduated with a diploma if they were being educated in a public school.

Findings from this study suggested a continued need to place students in these schools due to the lack of adequate programs and supports in the public school system. This finding is congruent with research on special-education placement (Carran et al., 2005; Slade et al., 2009). Also, the economic advantages of placing students in these restrictive settings could fuel the lack of program development for students with disabilities in the public school system furthering the ongoing need for these placements (ASHA, 2007; NAPSEC, 2012; Parrish et al, 2002).

## **Indicators of Effectiveness**

Although the third research question focused on case managers' perceptions, central to the perceptions are what case managers consider effective. In fact, findings from this study showed a disconnect among case managers' perceptions. As previously mentioned, case managers perceived low academic rigor, few interventions, lack of access to higher level academic courses, very limited vocational options, and inconsistent implementation of behavior-management tools. Yet, case managers believed students are making progress. This disconnect appears to exist because case managers are using one component—students graduating—to characterize success. Although graduation is the ultimate goal, graduation does not necessarily equate to students being prepared for life after school. In this instance, graduating means that the students have received the appropriate accommodations to pass the high school assessments. Graduation does not gauge a school's ability to address student behaviors and academic deficits. In other words, findings from this study do not suggest these schools are better at educating students with ED. Rather, evidence shows that schools are able to maintain students in school and provide accommodations.

To fully understand case managers' perceptions, I asked case managers to identify key indicators they perceived to represent an effective private special-education school. Beyond graduating students, case managers identified nine other important indicators to consider. Academic gains (students experiencing academic success), high levels of student engagement, and differentiated instruction are critical components of an effective program for students with ED. Bost and Riccomini (2006) also identified these attributes as comprising effective instruction for students. Second, case managers identified having

behavioral components and the fidelity of implementation, low suspension rates, and returning students to public school programs as markers of an effective program. These indicators suggest that students improving in self-regulation and problem solving is important (Mooney et al., 2005).

Participants also identified providing a strong transition program focused on postsecondary outcomes and having a low truancy rate as key indicators. These indicators are necessary to help reshape the dismal outcomes that are well documented in the literature for students with ED (Lane et al., 2008; Nelson et al., 2004; Wagner, 1995). Last, case managers identified having stable, certified, and experienced staff members as key indicators of effectiveness. These indicators align with the research on the adverse impact of teacher turnover and the call for qualified and committed staff for students with ED (Ronfeldt et al., 2013; Simpson et al., 2010). These results are particularly important to local school systems that place students with ED in these settings. These results can be used to improve partnerships between public school systems and private special-education schools focused on providing services to students with disabilities.

### **Implications and Recommendations**

Despite limited research on private special-education schools, findings from this study contribute to and affirms previous research results. The findings provide a profile of the academic, vocational, and behavioral supports and services provided in private special-education schools in a large suburban area and illustrate some strengths and challenges of these programs. Results confirmed that students with ED are more likely to remain in school and exit with a high school diploma when enrolled in these private special-education programs than when enrolled in public schools. Unfortunately, this

study also indicates that the challenges of providing rigorous academic instruction and maintaining experienced staff have persisted over time in these settings. Additionally, results identified the small environment, schoolwide behavior-level system, and counseling services as major contributors to the relative success of students in private special-education schools. In contrast, the small school environment also adversely impacts the quality of instruction as teachers must plan and deliver instruction for multiple subjects and grade levels. Finally, findings indicated that students in these settings had limited access to academic courses and interventions, electives, and vocational options.

These findings are relevant to public school systems and private special-education schools. For school systems, information on the positive features of private-school programs should be considered when improving or developing new programs in the public school system. Educators could use these findings to improve or support quality in private special-education schools. This could mean that public school systems might begin to offer opportunities for teachers in private special-education schools to participate in training. For private special-education schools, this information suggests that continuing program evaluation would further identify problems that continue to fuel these issues and lead to the development of possible solutions.

One recommendation would be for public school systems to provide more professional development for public school special educators, general educators, and counselors around behavioral supports. Furthermore, public school systems must develop more programs dedicated to addressing the needs of students with ED. Building capacity in the school system to address the needs of students with behavioral problems should

reduce the need to place students in private special-education schools. Reducing the need to place students in these settings will help alleviate the financial burdens associated with using private special-education schools.

Because some students will have needs that exceed the supports offered in a public school, a second recommendation is for public school systems and private special-education schools to develop Type II programs. State regulations define a Type II program as follows:

In a Type II educational program, instruction shall be provided by a nonpublic (private special-education) school and public school either on the grounds of the nonpublic (private special-education) school and the grounds of the public school, or solely on the grounds of the public school, with the primary goal of integrating students into the public school instructional program to the greatest extent appropriate (COMAR 13A.09.10.19; Maryland Division of State Documents. 2016).

A Type II program located in a public high school would offer students with ED access to classes and extracurricular activities in that high school, as appropriate. However, the private special-education school staff would continue to provide behavioral support and smaller classes, as needed. Through the use of shared resources, this model could also defer some of the costs associated with placing students in private special-education schools.

Another recommendation is for public school systems to develop an accountability tool that can be used by local school systems to drive continued partnerships, develop new partnerships and programs, and discontinue ineffective public–

private partnerships. Developing the indicators of effectiveness identified by case managers and best practices found in the literature into a tool that guides the evidence-based data collection process and drives improvement is paramount. Developing an accountability tool would help in communicating expectations, monitoring, and providing constructive feedback and actionable items. Currently, in the absence of a measuring tool that includes multiple measures, the local school system cannot have an objective conversation about the unique advantages and disadvantages of placing students at individual private special-education schools.

Beyond developing an accountability tool, public school systems should develop an evaluation model and protocol. Given the current state of private special-education schools, public school systems should utilize a growth-model approach to evaluating these schools. Using a growth-model evaluation system allows the examiners to capture a school's performance based on a set of defined criteria (the developed accountability tool) over two or more points of time (Castellano & Ho, 2013). This approach will give schools credit for improvement over time as well as help school leaders identify strategies that may have influenced progress. With this in mind, public school systems will need to develop an evaluation cycle to facilitate the collection of data, reporting of results, and corrective action monitoring, if needed.

### **Limitations**

This study included several limitations. One limitation of the study is the small sample size. The survey data were limited to nine private special-education schools in a suburban area. Although the research provided characteristics of nonresponders, this small sample size may not adequately represent the characteristics and quality of private



special-education schools regionally or nationally. Likewise, interview participants were from one school district. Therefore, the generalizability of results is not likely. Future studies should increase the number of participating schools, by possibly recruiting schools from around the nation. To collect the perceptions of case managers and sample case managers from districts throughout the nation, a brief open-ended electronic questionnaire may garner a multitude of responses.

Another limitation is the survey instrument used. I neglected to ask private special-education school administrators to identify academic interventions at the schools. Without this information, I had to rely solely on the information reported by case managers. Future research should focus on the academic interventions available in these settings and the frequency in which students access them. Second, I did not collection enough contextual information to fully describe private special-education schools. Information such as student–staff ratio, student gender, average class size, the number of teachers (certified and uncertified), the number of counselors, and professional-development opportunities are a few additional characteristics that would have enhanced this study. Future research should take a case-study approach. This will provide more context about individual private special-education schools and allow researchers to explore factors that contribute to high staff turnover and inconsistencies in program implementation.

### **Summary**

This study provided an overview of the course offerings, services, and supports available to high school students with ED enrolled in private special-education schools. This study also provided perceptions of the quality of services delivered to high students

with ED from the viewpoint of public school case managers. The investigation revealed that students in these setting have limited access to a variety of academic courses, academic interventions, and vocational options. Although the data indicated that these schools provide a small environment with behavioral supports, inconsistency in the implementation of programming led to negative perceptions of the quality of private special-education schools. Despite documented concerns with these schools, students with ED, who would not have been successful in the public school setting, are graduating with a high school diploma. According to the findings, the success of these students is largely accredited to the small class size and therapeutic counseling available to students in private special-education schools.

Evidence from this study and from the literature indicated school systems will continue to place students in private special-education schools due to the costs and lack of supports in public schools (ASHA, 2007; Carran et al., 2005; NAPSEC, 2012; Parrish et al., 2002; Slade et al., 2009). As a result, school systems and private special-education schools must work to improve the quality of instruction and provide access to more holistic course offerings for students enrolled in these programs. Results from this study may have policy implications in developing and restructuring public–private partnerships and public programs, and in providing accountability.

# Appendices

# Appendix A: Private Special-Education Schools Survey:

## 2015–2016 Course Offerings and Behavioral Supports

### SECTION 1: SCHOOL AND STUDENT DEMOGRAPHIC INFORMATION

School Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name for person completing this form: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Webpage Address: \_\_\_\_\_

#### School Census

1. What was the school’s census as of January 1, 2016? \_\_\_\_\_

2. Which percentage best represent the number of high school students currently enrolled in your school? *(Please circle your answer)*      25%    50%    75%    100%

3. Please check all disability categories you are approved by Maryland State Department of Education (MSDE) to serve.

- |  |   |
|--|---|
| <input type="checkbox"/> Autism<br><input type="checkbox"/> Deaf-Blindness<br><input type="checkbox"/> Emotional Disability<br><input type="checkbox"/> Hearing Impairment<br><input type="checkbox"/> Intellectual Disability<br><input type="checkbox"/> Multiple Disabilities | <input type="checkbox"/> Other Health Impairment<br><input type="checkbox"/> Specific Learning Disability<br><input type="checkbox"/> Speech-Language Impairment<br><input type="checkbox"/> Traumatic Brain Injury<br><input type="checkbox"/> Visual Impairment<br><input type="checkbox"/> Orthopedic Impairment |
|--|---|

4. Which percentage best represent the number of high school students currently enrolled in your school with a primary disability of emotional disability? *(Please circle your answer)*      25%    50%    75%    100%

5. Is your school approved by MSDE to offer the Maryland High School Diploma courses?  
*(Please circle your answer)*

Yes No

6. Which percentage best represent the number of high school students currently enrolled in your school and pursuing the Maryland High School Diploma? *(Please circle your answer)*

25% 50% 75% 100%

**SECTION II: COURSES**

**Academic:** Please check the core academic courses currently offered in your school.

- |   |   |  |  |
|---|---|--|--|
| <ul style="list-style-type: none"> <li>• English 9</li> <li>• English 10</li> <li>• English 11</li> <li>• English 12</li> </ul> | <ul style="list-style-type: none"> <li>• Algebra I</li> <li>• Algebra II</li> <li>• Geometry</li> <li>• Pre-calculus</li> <li>• Calculus</li> <li>• Integrated Math</li> <li>• Linear Algebra</li> <li>• Trigonometry</li> <li>• Probability and Statics</li> </ul> | <ul style="list-style-type: none"> <li>• Biology</li> <li>• Chemistry</li> <li>• Environmental Science</li> <li>• Integrated Science</li> <li>• Physics</li> <li>• Physical Science</li> </ul> | <ul style="list-style-type: none"> <li>• U.S. History</li> <li>• Government</li> <li>• World History</li> <li>• Geography</li> <li>• Psychology</li> </ul> |
|---|---|--|--|

**Vocational:** Please check the vocational courses currently offered in your school.

- |   |  |   |  |
|---|--|---|--|
| <ul style="list-style-type: none"> <li>• Auto Mechanics</li> <li>• Computer Networking</li> <li>• Cosmetology</li> <li>• Nursing</li> </ul> | <ul style="list-style-type: none"> <li>• Culinary Arts</li> <li>• Graphic Design</li> <li>• Child Development</li> </ul> | <ul style="list-style-type: none"> <li>• Carpentry</li> <li>• Brick Masonry</li> <li>• Business Education</li> <li>• Work Experience</li> </ul> | <ul style="list-style-type: none"> <li>• Horticulture</li> <li>• Other: _____</li> </ul> |
|---|--|---|--|

**Employability Skill Development:** Please check all opportunities for work/job training that are currently offered in your schools.

- On-campus training (unpaid)
- On-campus work (unpaid)
- On-campus training (paid)
- On-campus work (paid)
- Off-campus training (unpaid)
- Off-campus work (unpaid)
- Off-campus training (paid)
- Off-campus work (paid)

**SECTION III: STUDENT SUPPORTS**

**Counseling Services: Please check all services offered at your school.**

- After Care/Transition to LRE
- Board Certified Behavior Analyst
- Family Counseling
- Group Counseling
- Individual Counseling
- Mentoring
- Social Skills Training
- Substance Abuse Counseling

**Behavior Management Protocol: Please check the behavior management protocol currently implemented in your school.**

- Comprehensive Crisis Management
- Crisis Wave
- Handle with Care
- MANDT
- Nonviolent Physical Crisis Intervention (CPI)
- Professional Crisis Management (PCM)
- Right Response
- Other: \_\_\_\_\_

**In this section, please check all behavior interventions used in the school program**

- Verbal de-escalation
- Timeout – classroom
- Timeout – separate space\*
- Seclusion – open door\*\*
- Seclusion-closed door\*\*
- Delayed dismissal
- Saturday school
- In-school suspension
- Out-of-suspension
- Positive reinforcements
- Behavioral Contracts
- Physical Restraint
- Positive Behavior Intervention & Supports (PBIS)
- Behavioral Level System

*\* Time out means assisting a student to regain control by removing the student from his immediate environment to a different open location until the student is calm or the problem behavior has subsided.*

*\*\*Seclusion means the confinement of a student alone in a room from which the student is physically prevented from leaving.*

## Appendix B: Interview Guide

### I. DEMOGRAPHICS

Please check the answer choices that best describe you. Some items may require more than one answer.

1. Years of employment in the Nonpublic Office:
  - a. 0 up to 3 years
  - b. more than 3 years, up to 5 years
  - c. more than 5 years, up to 10 years
  - d. more than 10 years, up to 15 years
  - e. more than 15 years
  
2. Number of years in education:
  - a. 0 up to 10 years
  - b. More than 10 years, less than 15-year
  - c. 15 years or more
  
3. Current educational certification (check all that apply):
  - a. Early Childhood Education (Prek-3)
  - b. Elementary Education (Grades 1-6)
  - c. Middle School Area(s): \_\_\_\_\_
  - d. General Secondary (Grades 7-12) Content Area(s): \_\_\_\_\_
  - e. Special-Education Area(s): \_\_\_\_\_
  - f. Specialty Areas (Prek-12): \_\_\_\_\_
  - g. Administration I
  - h. Administration II
  
4. Previous position (s) held in education (please check all that apply):
  - a. teacher
  - b. department chair
  - c. assistant principal
  - d. principal
  - e. other: \_\_\_\_\_
  
5. How often do you visit private special-education schools?
  - a.  Daily
  - b. Weekly
  - c. Monthly
  
6. Do you conduct classroom observations at private special-education schools?  
**YES or NO**

## Questions

1. Describe your experience as an observer of classroom instruction in private special-education schools.
  - 1a. How would you describe instruction in regards to rigor, accommodations, and modifications?
  - 1b. How would you describe classroom management techniques?
  - 1c. How would you describe staff interactions with students?
2. What is your view on the use of academic interventions in these schools?
  - 2a. Describe the types of reading intervention being used.
  - 2b. Describe the types of math interventions being used.
  - 2c. Describe the types of writing interventions being used.
  - 2d. What is your perception of the implementation of academic interventions?
3. How would you describe course offerings at private special-education schools for high school students?
  - 3a. What is your view of academic course options?
  - 3b. What is your view of vocational course options?
  - 3c. What is your view of work based experiences options?
4. What is your view of the behavioral approaches used in these setting?
  - 4a. What is your view of the development and implementation of BIPs for students in these environments?
  - 4b. From your perspective, do private special-education school collect and utilize data to address behavioral concerns?
  - 4c. What is your view of counseling as a behavior modification tool?
  - 4d. Describe the use of social skill training in these schools.
5. What impact do you believe placement in private special-education schools has had on students with ED?
  - 5a. Academically
  - 5b. Socially
6. In your opinion, what are the strengths of private special-education schools that serve high school students with ED?
7. In your opinion, what areas need improvement?
8. If you were asked to evaluate these schools, what would be the top 3 key indicators of effectiveness?



## Glossary

Continuum of services—the range of educational placement options for educating a student with a disability.

Emotional disability (ED)—

Emotional disability means a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a child’s educational performance

(A) An inability to learn that cannot be explained by intellectual, sensory, or health factors;

(B) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers;

(C) Inappropriate types of behavior or feelings under normal circumstances;

(D) A general pervasive mood of unhappiness or depression; or

(E) A tendency to develop physical symptoms or fears associated with personal or school problems.

(ii) Emotional disturbance includes schizophrenia. The term does not apply to children who are socially maladjusted unless it is determined that they have an emotional disturbance. (U.S. Department of Education, n.d.)

Individualized education program (IEP)—means a written description of the educational program for a student with a disability that is developed, reviewed, and revised in accordance with state special-education regulations. The document describes the individual needs of the child and what services are necessary to help the student access education.

Least restrictive environment (LRE)—to the maximum extent appropriate, school districts must educate students with disabilities in the regular classroom with appropriate aids and supports.

Private special-education schools—private nonresidential schools that provide services exclusively to students with disabilities, often at the expense of the local school system.

Student with a disability—a student has been evaluated by the local school system in accordance with the state laws and identified as having one or more to the following:

(a) autism, (b) deaf-blindness, (c) emotional disability, (d) hearing impairment, including deafness, (e) intellectual disability; (f) multiple disability, (g) orthopedic impairment, (h) other health impairment, (i) specific learning disability, (j) speech or language impairment, (k) traumatic brain injury, or (l) visual impairment, including blindness.

Special education—means specially designed instruction, at no cost to the parents, to meet the unique needs of a student with a disability, including instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings.

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