

**Current Range of  
Out-of-District Placements for  
Elementary Through Age 22  
Students with Significant  
Special Needs**

Currently, there are 109 students who require an out-of-district placement due to their complex special needs. These students are placed in either day or residential schools. This section of the report provides a description of day and residential programs currently utilized by Lexington students. The costs, which are listed, are approximate numbers due to differences in transportation costs, summer programming, individual aides, and related services. In addition, the programs below do not include pending legal disputes.

## **A. Day School Programs:**

There are seven general categories of disabilities/needs that can lead to an out of district placement:

### **1. Cognitive Disabilities:**

- a. LABBB: \$32,000 to \$80,000** - Students with impaired cognitive/physical disabilities within our district are for the most part educated through our **LABBB Collaborative**. We are fortunate to have access to this specialized program housed at Lexington High School. There are also smaller high school programs located in Belmont and Bedford. Middle school LABBB programs are located in Arlington, Bedford and Burlington. Elementary LABBB programs are located in Arlington, Bedford and Belmont. Many parents do not realize that LABBB is an outside placement and that we pay for these placements. The cost for LABBB varies depending on the intensity of the disability. Some students who attend LABBB have profound physical disabilities and attend the Intensive Life Skills Program. Other students who are much higher functioning attend vocational programs. The continuum of programming explains the wide range of costs for the LABBB tuition. (35 students)
- b. Learning Prep: \$28,000** - Every year, we have one or two students who attend Learning Prep. The school defines itself as focusing more on academics and not “giving up” on students with cognitive disabilities. However, students often wind up transitioning to LABBB from this program, which has more extensive vocational and life skill training. (1 or 2 students)
- c. Cotting School: \$60,000** - Cotting School is located in Lexington and provides educational services and very limited vocational training for physically and cognitively disabled students. (2 students)
- d. Kennedy Day School: \$44,000** - Kennedy Day School is located in Brighton on the grounds of Franciscan Hospital, and provides a range of academic and support services for multiply handicapped students.

### **2. Learning Disabilities: \$45,000**

These schools provide remediation and strategy building for students with learning disabilities who need a slower paced level of instruction. The Lexington schools should examine what programming could be developed to meet this student population. For example, the development of the ILP at the high school has enabled three students to return to the high school from: Melmark, Arlington School, Murphy and Dwyer. These moves have saved the district approximately \$230,000.

- a. Landmark School: (6 students)
- b. Carroll School: (2 students)
- c. Clearway: (1 student)

3. **Autism Spectrum Disorders: \$76,000 to \$90,000** - This disability requires a very structured day with highly trained instructors, aides, and related service providers.
  - a. Melmark: (1 student)
  - b. Crossroads: (3 students)
  - c. Nashoba Learning Center: (2 students)
  
4. **Social/Emotional: Range from \$35,000-\$50,000**: These students are experiencing a variety of interpersonal and academic struggles that are impacting their ability to make progress. Some students have Autism Spectrum Disorder. Several of these students could stay in district if we are able to expand district programming.
  - a. Beacon High School: (3 students)
  - b. Corwin Russell: (3 students)
  - c. Gifford School: (6 students)
  - d. Willow Hill: (1 student)
  
5. **Psychiatric: \$60,000**  
 These students have psychiatric disorders that are chronic in nature and need a specialized educational staff and access to larger hospital supports with psychiatric oversight:
  - a. Arlington School: (2 students)
  - b. Waltham House: (1 student)
  
6. **Behavioral Disorders: \$50,000-\$55,000**
  - a) Students with significant behavioral disorders are sometimes referred to an outside placement. These behaviors include: escalating physical altercations, an inability to regulate anger, and threatening behaviors that are intimidating. These specialized programs have the ability to contain behavioral dyscontrol and promote self-awareness and personal responsibility.
    - a. Dearborn Academy (3 students)
  
  - b) In response to sections of the federal statutes of IDEA, certain students who have been temporarily excluded from their educational placements require educational services to be provided by their school district. These students are referred for short (45 day) or year long alternative programming. Typically, these students have often violated the schools discipline code.
  
7. **Family/Complicated Clinical Issues: \$ 50,000**  
 At the high school level, there are students who may find themselves in an intense emotional/situational crisis. These students may be unable to attend classes regularly, leave the campus without permission, demonstrate impulsive/risky behaviors and exercise poor judgment. These students typically are involved with extensive out-patient support personnel and are on medication. Some have a history of short-term psychiatric hospitalizations or placements at intensive residential treatment facilities such as the ART on the grounds of McLean Hospital. These students are in need of a supportive, self-paced environment that provides a program to develop psychological strength and alternatives to acting out or self-injurious behaviors. The family is typically in crisis and in need of intensive family therapy and supports.
  - a. Victor School: (6 students.)

## **B. Residential Programs: \$95,000 to \$232,000 (circuit breaker not included)**

Students who are placed in residential schools typically come from six paths:

1. Students in day placements who have greater needs than the day program can provide.
2. Students in psychiatric hospitals who are recommended for residential placements due to concerns related to self-harm.
3. Students in a psychiatric crisis who have had several short-term hospitalizations in order to stabilize their behavior but are unable to resume the previous level of functioning. These students continue to deteriorate over the course of the school year.
4. DSS places the students due to issues or concerns within the home and we are obligated to cost share.
5. Students with severe physical needs that require nursing care.
6. Students with cognitive disabilities that do not have independent living skills and are approaching their 22<sup>nd</sup> birthday.

Typically, students who are referred for residential placements are in need of very intensive services. It may be difficult to identify students at-risk for residential placement. Students may not be demonstrating any lack of progress or emotional struggles within the school day. However, problems may be occurring after school, parents may feel unable to manage their child's risky, impulsive behavior, or a student may have a psychotic episode and be hospitalized "out of the blue". Sometimes these students have not been previously identified as special education students. Parents may request the district to immediately place their child into the most restrictive setting without engaging in the state mandated process for eligibility and placement determination. The cost of a residential facility can vary greatly depending on the specialized services that are required by the particular student. Programs that provide medical care in a school environment are extremely expensive and only the most physically disabled students are referred to such programs.

We have approximately 30 students in residential facilities.

- a) **Cardinal Cushing: \$95,370:** Residential facility for students with cognitive disabilities that have demonstrated a limited ability to comprehend issues related to personal safety and decision-making. These students require a very structured day with intensive life-skills and vocational training. (2 students)
- b) **Perkins School for the Blind: \$232,951** - Intensive life skills and vocational program for blind and disabled students.
- c) **Other:**  
Presently the district has approximately eight out of district student cases that are pending legal decisions and assignment of financial responsibility.

### **Additional Information:**

**Factors that have contributed to an increase in out-of-district placements, referrals and costs:**

- a. **Reduction in state funding for mental health services.** The expectation from agencies and hospitals is that these mental health services are the responsibility of the school district.

- b. **A vast reduction in school district's access to Department of Mental Health Intensive Residential Treatment Facilities (IRTP):** Within the past 10 years, access to state mental health facilities has become quite limited. In the past, children who were experiencing a more long-term mental health crisis would be transferred from an acute hospital setting to more long-term stabilization programs before treatment recommendations were made. These stabilization programs, called Intensive Residential Treatment Programs (IRTP), would provide treatment and assist with transition planning. At this point, referrals to these facilities are almost non-existent. Hospitalized children need to be deemed "committable" by a Department of Mental Health team. This almost never occurs now because the psychiatrist on the hospital unit has to determine the student is committable. This makes the hospital responsible for the patient until there is an opening at an IRTP. Given that determining a student in need of an IRTP obligates the hospital to keep the student in place until an appropriate opening occurs, it is quite rare an occurrence. This information is relevant to Lexington's out of district placements because we are being asked to place students who are in need of intensive supervision and treatment in an educational facility when the student may still be in an acute psychiatric crisis.
- c. **An increase in the number of students with psychiatric disabilities at the middle and high school level** (some psychiatric disorders evolve as students become older). The early childhood behavioral manifestation of these disorders may guide the team to provide one type of support (such as resource room for slow processing). In adolescence this "slow processing" can blossom into a more life long psychiatric disorder (such as schizophrenia). This type of psychotic disorder would be difficult to identify in elementary school. Meaning: students that have made progress in our elementary and middle schools may deteriorate when they reach high school age.
- d. **Students are prematurely returned to their school districts after short-term hospitalizations, which were driven by insurance coverage.**
- e. **An increase in the number of students diagnosed with autism.** Intensive services are required at a young age for the student's entire school career. The supports needed for this population increase tremendously at the high school level when students are faced with issues of adolescence and families face transition to post-secondary settings.
- f. **Minimal state programs and financial support for autism spectrum disorders.** Even though students have met the graduation requirements, this population often does not possess the necessary life-skills development and problem-solving ability required to attend college. The burden of finding an appropriate "next step" for this population falls upon school districts since there are limited state resources available.
- g. **Lack of adequate summer programming for students has led to out-of-district supplemental programming costs.** Our disabled students need yearlong programming. The district needs to develop in-house programming for the ASD and psychiatric population, especially at the high school level.
- h. **Transportation** costs have increased over the years. Some students who are placed in residential facilities also have transportation costs that the district is responsible for paying.
- i. **Individual student aides or nurses** are required for some of our students in day and residential facilities. These costs may be in addition to the cost of the day or residential facility.

**SUMMER:**

Due to insufficient summer supports for students with social/emotional disabilities and with autism, the district has had to fund specialized programs over the course of the summer. Last summer, we had 18 students at a total cost of approximately \$48,000. Two students from summer placements have not returned to school and parents are requesting the district to continue these placements. Supplemental summer programming has now developed into a request for funding for two out-of-district placements in unapproved out of state schools. Once a student has attended another summer program it can be difficult for the student to change programming again and return to their home schools.

With additional district-wide supports in the summer of 2007, such as summer programming for ASD and social emotional populations; specialized programming for students pre and post hospitalization at the middle and high school levels; and development of specialized instructional support/programs for the learning disabled, many of these placements can be avoided in the future. The district needs to determine and prioritize what programs should be administered within our own schools and which ones should not. The district is currently reviewing the scope of in-house programs to determine educational and cost-effectiveness.

## **HIGH PRIORITY PROGRAM DEVELOPMENT (2007-2010)**

In order to reduce the number of students placed in out-of-district schools, we are recommending five new or expanded programs next year and, potentially, five new or expanded programs starting in FY 09 or FY 10 (see list below). These programs will increase our capacity to educate more students within the Lexington Public Schools, thus eliminating some new out-of-district costs. These programs will reduce the overall cost of special education by making it possible to bring some students back from outside placements and keep more students in-district.

A full explanation of each new/expanded program is described in the accompanying Power Point presentation.

### **Programs Recommended for FY 08**

#### **BUDGET PRIORITY 1**

1. District-wide Intensive Learning Program (ILP) @ Clarke Middle School (Expanded Program)
2. Intensive Learning Program (ILP) @ Lexington High School (Expanded Program)
3. Multidisciplinary Support Team (MST) expansion at Lexington High School (Expanded Program)

#### **BUDGET PRIORITY 2**

4. Development Learning Program (DLP) @ Clarke Middle School (New Program)
5. Language Learning Program (LLP) @ Lexington High School (Expanded Program)

### **Potential Programs for FY 09**

1. Elementary Language Learning Program (LLP), K-1 (Expanded Program)
2. Development Learning Program (DLP) @ Lexington High School (New Program)
3. Transition Program @ Lexington High School (Expanded Program)

### **Potential Programs for FY 10**

1. Multidisciplinary Support Program (MST) @ middle school level (New Program)
2. Language Learning Program (LLP) into Grade 5 (Expanded Program)