



2022 Candidate Questionnaire Special Education Dan Newberger

Overall / Funding Priorities

1. From your research and knowledge thus far, what do you believe are the most pressing current issues in HCPSS special education?

Our special education students were especially impacted by school closures, virtual learning, and the pandemic. Their stress translates directly to the educators who support them. At the same time, staff shortages and lack of resources have had a dramatic impact on the county's special education services. We need more special educators and related service providers to support the individualized needs of every Howard County child.

We also need more funding for positions dedicated to casework staff at all levels—school-based as well as in the central office—in order to reduce paperwork for special educators and increase their ability to provide direct support for students. Additionally, we must provide better training and increase pay for our paraeducators and students assistants who work closely with our special needs students.

Additionally, I strongly believe that we must end our current practices of seclusion and restraint. It is critical that we explore and implement alternative interventions in our schools in order to avoid the trauma and serious harm that can be caused by outdated crisis management techniques.

We also need to ensure that HCPSS's transition to embracing the Science of Reading in our schools is successful, by providing our educators with the supports and resources they need to make this major change. This is critical for helping every student in the district to develop the ability to read, but is especially vital for our students with dyslexia and other learning challenges.

Finally, we must explore ways to fundamentally change the adversarial nature of the IEP process. Our current system leaves too many of our parents and special educators alike feeling exhausted and demoralized. Instead of an institutional focus on achieving the least expensive path to meeting minimum requirements while minimizing risk of legal exposure, our schools need to be partnering with parents of students with IEPs in focusing on how to provide every student with the services they need to be independent and successful.

2. What experience do you have as parents, professionals or advocates working on behalf of students with disabilities? What sets you apart from other candidates with regards to advocacy for students with disabilities?

The primary personal experience I have working on behalf of students with disabilities is as a parent advocating for the needs of my own two children in IEP and 504 meetings in multiple schools over the years. While I'd rather not share the details of my own children's challenges publicly, I can say that these experiences have given me tremendous empathy for every Howard County parent who must advocate for their own students with disabilities.

I am wholeheartedly committed to doing whatever I can to fundamentally change the adversarial nature of the IEP process. Our current system leaves too many of our parents and special educators alike feeling exhausted and demoralized, and our current "failure model" can be a brutal and dispiriting process for too many students. Instead of what can feel like an institutional focus on achieving the least expensive path to meeting minimum requirements while minimizing risk of legal exposure, our schools need to be partnering with parents of students with IEPs in focusing on how to provide every student with the services they need to be independent and successful. It is not right or just for families to have to spend tens of thousands of dollars to hire advocates and attorneys in order to secure the services their children desperately need. I am interested in exploring options for establishing an HCPSS "Office of Family Advocacy" that lives outside of the Department of Special Education and provides advocates and caseworkers to help families of students with disabilities navigate the IEP process and help secure the services their children need.

Since so many of the challenges facing special education in HCPSS are caused by, or exacerbated by, insufficient funding, one aspect of my advocacy experience that I want to highlight is my work advocating to the County Executive and County Council. HCPSS desperately needs more funding from the state and county, and the Board of Education needs to be the strongest advocates applying pressure to make this happen. The Board of Education must be a strong and unwavering advocate for HCPSS's needs and concerns to the County Executive and County Council, and to the county's state delegation, particularly during the budget cycle. To make this happen, healthy working relationships between members of the Board of Education and the county's elected officials and their staff are essential to the successful operation of our county's schools. My experience as a community advocate has prepared me to be very effective in this aspect of the Board of Education's responsibilities. As a co-founder and leader of the Living Wage Howard County coalition, I strategized and worked with members of the County Council and their staff to increase the county's minimum wage to \$15/hour—including vigorous engagement with council members of both political parties—which culminated in the successful passage of CB82-2021, establishing the first-ever minimum wage in Howard County, which will increase wages for over 40,000 Howard County workers. I will bring the same commitment to my advocacy as a member of the Board of Education on behalf of increasing the special education funding available for students with disabilities.

3. Across the board, teachers are leaving the profession, and it's particularly acute for special education staff. How can we successfully hire and retain sufficient staff in special education?

HCPSS, like districts across the state and the nation, is facing a looming staffing crisis, both for educators (general education and special education) as well as the critical support staff our schools need: psychologists, school counselors, paraeducators, cafeteria workers, even bus drivers. To solve this immediate crisis and to ensure that Howard County's legacy of excellence is sustained into the future, we must become an employer of choice for educators and staff. This means paying competitive salaries to attract the best talent, and then developing, empowering, and retaining those talented educators by providing the top-tier resources, supports, and professional development they need to develop and hone their craft.

I'm particularly worried about, and will be focused on, our ability to retain our mid-level and senior-most general and special educators. These experienced teachers and staff are so critical—in so many ways, they are the glue that holds together our classrooms and schools. Here, I believe we need to be willing to adapt policies and solutions that have proven to be successful in retaining workforce talent in other districts, and in other industries outside of education. For example, why don't we offer seasoned educators the opportunity to take a sabbatical year, to re-charge their batteries away from the classroom by pursuing their own opportunities for personal and professional growth? Why don't we have programs for educators to rotate out of the school building and into the central office for a one- or two-year assignment where they can apply their fresh classroom experience to overhaul policies or run special projects? These are the types of programs and opportunities that can make Howard County a place where educators want to teach, and where they want to stay.

4. The COVID19 Pandemic left lingering mental health issues across the student body, especially among the special education population. How do you plan to monitor and address student mental health?

We can't afford to underestimate the mental health impacts of the trauma suffered by our children throughout the pandemic. Even before COVID-19 upended almost every aspect of their lives, alarming numbers of our children and teenagers were coping with depression, anxiety, suicidal thoughts, and behavioral disorders. The adversity, disruption, stress, and loss brought about by the pandemic has greatly intensified these trends. The situation is so dire that last October, a coalition of pediatric health experts, including the American Academy of Pediatrics, declared a "National Emergency in Child and Adolescent Mental Health." If left unaddressed, the mental health challenges our children's generation are suffering now will become lifelong afflictions, with dire consequences for individuals, families, and society as a whole.

There are no shortcuts or low-budget options to solve this rising crisis. It will take real commitment and significant investment of resources at the federal, state, and local levels to ensure that high-quality, trauma-informed, and culturally competent mental health care is made available to every child in every school. In an environment of already strained budgets, this is a daunting prospect. However, if we fail to properly address this mental health crisis, our children will pay a heavy price for decades to come. We also need to build more partnerships with community mental health providers, in order to leverage all of the resources and expertise that reside in Howard County.

In addition to increasing the quantity and availability of mental health services and providers in the schools, we need to help our students develop the resiliency and tools needed to navigate the stresses and challenges they face. Here, Social-Emotional Learning (SEL) is essential. SEL is an integral part of education, learning, and human development. It's the process by which all children and young adults learn and apply the skills, knowledge, and attitudes that are necessary to develop healthy identities, manage their emotions, build and maintain supportive relationships, make responsible decisions, and achieve their goals. Developing SEL skills (which include self-awareness, relationship skills, self-management, responsible decision-making, and social awareness) provides our children with the foundation they need to learn, grow, and achieve in our schools and in the world beyond.

Hundreds of research studies have shown that SEL leads to improved academic performance, improved behavioral outcomes, and improved school environments. Additionally, recent research has found that some SEL interventions can reduce symptoms of depression and anxiety in young people, in addition to enhancing their social and emotional skills. (Implementing SEL is even a smart financial decision for school districts, as research published in 2015 found that every dollar invested in SEL programs returns \$11 worth of benefits!) If you believe in listening to experts who are backed by comprehensive scientific and academic research, as I do, it's clear that we need SEL in HCPSS, both for our students' academic success and for their mental health. I am committed to ensuring that HCPSS continues the systemic implementation of SEL at every school across the district.

Compliance

- 5. Many families have not yet received pandemic-related compensatory education services to which they are entitled. What should HCPSS be doing to speed up and ensure that special education students receive appropriate pandemic-related compensatory education services?**

I haven't seen the data, but the anecdotal evidence I've seen and heard is depressingly convincing that far too many HCPSS families have not received the pandemic-related compensatory education services which they are entitled to receive. Because of the scale, criticality, and uniqueness of this problem, HCPSS's standard processes for processing compensatory service decisions are not up to the task, and the amount of resources in the buildings are not sufficient to deliver the necessary services. Upon students' return to in-

person learning, the district should have established special teams to supplement and augment the school-based IEP teams in reviewing student data and making compensatory service decisions. At this point in time, I believe that the problem is large enough and serious enough to warrant a special compensatory education services audit of the entire community of special education students, in order to comprehensively identify the unmet needs. With this data in hand, HCPSS leadership, with oversight from the Board, can begin to make the necessary resource decisions for how to provide the appropriate services.

- 6. According to the procedural safeguards, parents for whom English is not their primary language are entitled to have a translator at IEP meetings who understands the IEP/educational process and who speaks both English and their language. We are hearing from parents that this is a barrier to their participation in IEP meetings. As a board member, how would you ensure that all parents are able to meaningfully participate in their children's IEP meetings?**

As I mentioned in an earlier answer above, I am wholeheartedly committed to doing whatever I can to fundamentally change the IEP process to make it less adversarial and challenging for parents to navigate. One of the first steps here is to absolutely ensure that capable translators are available for IEP meetings whenever a parent needs one. To ensure this is happening, the Board should insist on comprehensive surveys of parents of students with disabilities, to monitor their experiences throughout the IEP process. Additionally, we need to shift the perceived IEP institutional focus on achieving the least expensive path to meeting minimum requirements while minimizing risk of legal exposure, to a true partnership of school staff with parents of students with IEPs in focusing on how to provide every student with the services they need to be independent and successful. It is not right or just for families to have to spend tens of thousands of dollars to hire advocates and attorneys in order to secure the services their children desperately need. I am interested in exploring options for establishing an HCPSS "Office of Family Advocacy" that lives outside of the Department of Special Education and provides advocates and caseworkers to help families of students with disabilities navigate the IEP process and help secure the services their children need.

Inclusion

- 7. Howard County is known in the state of Maryland for being the most inclusive school system when it comes to educating students with disabilities alongside their peers in their home schools. Research has shown that inclusion of students with disabilities benefits ALL students—those with disabilities and those without – when it is implemented appropriately and when the necessary supports and services are in place. Please share your view on inclusive education—whether you support it or believe it is challenged in Howard County—and any personal experience you may have with inclusion of students with disabilities in the classroom. As a board member, would you support inclusive education and, if so, how might you strengthen inclusive education?**

I fully support inclusive education as the research has shown how it benefits both students with disabilities and those without. For example, a Massachusetts study found that students with disabilities taught in fully inclusive environments were five times more likely to graduate on time, compared to other students with disabilities, and 11 percentage points more likely to be employed. As with so many aspects of the district, our educators are key to successful inclusive education – not just special education specialists, but our general educators as well. Too often our conversations around special education do not include the gen ed teachers, but they play an absolutely essential role. Inclusive education succeeds when we provide our students with disabilities with the necessary supports and services, and provide their classroom teachers with the necessary knowledge, training, coaching, and support. I don't have all the answers for what specific types of support would most benefit our general educators in strengthening inclusive education, but as a board member I will be committed to listening to, and seeking out the answers from, those who do know best – our committed HCPSS educators and the parents of our students with disabilities.

8. Recent test scores and reports indicate that the achievement gap for those receiving special education services is not improving. What specific changes could be made to improve achievement for special education students?

Closing the achievement gap for students with IEPs is a very challenging problem, and I don't pretend to know the answers. However, I am deeply committed to listening to the subject matter experts (both in our own classrooms, in academia, and in state and local government) and pushing HCPSS to do everything it can to improve the achievement of our special education students. One promising approach I've recently read about suggests that we need to think more holistically across school- and county-based programs to advance a layered, blended, and comprehensive strategy, rather than the traditional approach of considering each funding stream and planning requirement in isolation. A tighter alignment between federal, state, and local funded programs will strengthen the coherence and effectiveness of the services and programs we provide to our students with disabilities. In this way, we can plan, fund, and execute a seamless spectrum of services provided to families, from the birth-to-age-3 Individualized Family Service Plan (IFSP), to the Extended IFSP in ages 3-4, to the IEP process in elementary, middle, and high school, with minimal disruptions and service loss at the various transition points. This approach requires committed and steady funding streams from our county government, early identification of student need, and closer partnerships between HCPSS, state and county government agencies, and private pre-K programs. Above all, improving achievement for our special education students will only be possible with a Board of Education that is truly committed to making it happen.

Discipline / behavior

9. What alternatives to physical restraint and seclusion should HCPSS be training its staff to employ, particularly now that HB1255 has banned seclusion and requires reporting and corrective action plans for overuse of restraint?

HCPSS absolutely needs to stop the use of physical restraint and seclusion. As a district, we need to tap into the tremendous increase over the past half-century in understanding the connections between the brain, nervous system, human development, and behavior. Researchers have given us a profoundly different understanding around the role that toxic stress and trauma play on the developing brains and brain functioning of young people. This includes such topics as bottom-up vs. top-down learning and control, the polyvagal theory, and state-dependent functioning. In place of the old restraint and seclusion practices, HCPSS needs to train our educators to shift to approaches that are relationship-based, trauma-informed, neuroscience-aligned, developmentally appropriate, individualized, biologically respectful, and collaborative. I am not an expert in the field, but there are a wide range of alternative approaches to restraint and seclusion that we can and should be training our staff in, including Applied Education Neuroscience programs, collaborative problem solving approaches, low arousal approaches, the Neurosequential Model approaches, and Ukeru. We need to combine this training with an overhauled data collection mechanism, to ensure that we are tracking and evaluating the effectiveness of these new alternative approaches, as well as maintain compliance with state laws.

10. Students with disabilities are disproportionately disciplined, suspended, and physically restrained. The school system is increasing restorative practices to address this. Do you believe this is the correct course of action? If so, why; if not, what would you do differently?

I believe that restorative practices, properly applied in our schools, will reduce the disproportionate discipline that our students with disabilities currently experience. I am a strong supporter of fully funding restorative practices in all our schools. I have seen restorative practice in action at Swansfield Elementary School, where my younger child is a student. The power of restorative practice is this – it teaches children to take charge of the growth and care of their community. And when that community suffers a breach, they learn how to heal it. Incidents of bullying, racism, fighting, and intolerance are an unfortunate part of youth. But restorative practice empowers students and educators to turn these incidents into moments of growing and learning. Every student in every school deserves the opportunity to learn and use these strategies from pre-K through graduation.

I believe that restorative practices—combined with the need I describe in the answer above for HCPSS to train our educators to shift to approaches that are relationship-based, trauma-informed, neuroscience-aligned, developmentally appropriate, individualized, biologically respectful, and collaborative—will result in better outcomes for all students but especially for our students with disabilities. However, it's essential that HCPSS supports these changes through the rigorous collection and analysis of discipline data in every building in the district. Tracking discipline data, above and beyond the state's mandates for reporting, will allow HCPSS to monitor how successful each individual administrator and school is in adapting to these new approaches in discipline, and to allocate additional resources as

necessary to assist schools where these transitions are not resulting in better outcomes for all students, but especially the most vulnerable, including our students with disabilities.

11. Lack of appropriate behavioral supports and accommodations can be a major barrier for students with disabilities to access the general education classroom. What suggestions do you have to better support these students in general education?

As I discussed in an earlier question above, I believe that it's essential that we not leave our general education teachers out of the special education conversation. Our gen ed teachers and staff play an absolutely essential role in special education, but their success depends on our providing students with the appropriate behavioral supports and accommodations they need. Another critical step is ensuring that we provide the general education classroom teachers with the necessary knowledge, training, coaching, and support. I don't have all the answers for what specific types of support would most benefit our students with disabilities to be successful in general education classrooms, but as a board member I will be committed to listening to, and seeking out the answers from, those who do know best – our committed HCPSS educators and the parents of our students with disabilities.

12. What provisions should be included in our MOU with HCPD to ensure the safety of special education students, including students who are nonspeaking and/or may behave in ways that police officers could misinterpret?

As I discussed in the restraint and seclusion question above, I believe that the educators who work with our special education students need to embrace approaches that are relationship-based, trauma-informed, neuroscience-aligned, developmentally appropriate, individualized, biologically respectful, and collaborative. I believe that it is essential for the HCPD officers who work in our schools to embrace these approaches as well, since their work inevitably brings them into contact with students with disabilities. I therefore believe that HCPSS's MOU with HCPD must include provisions requiring SROs to be trained in such approaches as Applied Education Neuroscience programs, collaborative problem solving approaches, low arousal approaches, the Neurosequential Model approaches, and Ukeru. The shift to these techniques and approaches are critical to ensuring that our special education students remain safe, even if or when they behave in ways that police officers could misinterpret.

Special Education Programs and Issues

13. Reading is the foundation of educational success; students who struggle to read will not be successful in other academic areas. Roughly 63% of students without disabilities and 91% of students with disabilities are not meeting grade level standards on the 2021 3rd grade ELA MCAP. As a Board member, how can you work to improve reading outcomes for all students, particularly those with disabilities?

HCPSS, like districts across the country, has long struggled with helping our students meet grade level standards in reading, and learning loss from the pandemic has only exacerbated the problem. The solution, I believe, lies in the Science of Reading. I believe that (a) HCPSS needs to fully commit to embracing the Science of Reading across the district; (b) the district has not even begun to sufficiently think through what it will mean to make this transition successful; and (c) successfully making this transition will take time, money, and a great deal of commitment from district leaders. First and foremost, the Board needs to ensure that HCPSS leadership is committing the resources and attention to ensure that our elementary school educators have the training, tools, guidance, support, and coaching they need to transition to the new pedagogy. This emphatically does not mean just throwing online training modules at our educators and sending them on their way. Instead, the Board needs to understand and empathize with the monumental scale of this change for our educators and insist that both the budget and HCPSS leaders provide everything our educators need to fully understand and master the new methods. I think an important first step for the Board would be to create a task force to plan, observe, and evaluate the district's transition to the Science of Reading, comprised of educators, parents, administrators, outside subject matter experts, representatives from the community of parents of children with dyslexia and other disabilities, and HCEA leaders. There are few things more fundamental to our children's educational success than the ability to read, and the Board needs to acknowledge this reality by insisting that HCPSS leaders are focused on, and held accountable for, tackling this issue.

14. The Ready to Read Act has regulated that the school board set the schedule for screening students for reading skill deficits. It is best practice and the recommendation of the DIBELS screener to screen all students 3 x year. What would be your plan to ensure the efficient screening of all elementary students K-5?

HCPSS absolutely needs to follow best practices and screen all elementary students three times per year using the DIBELS assessment. DIBELS is a critical tool in helping our educators and schools determine how our students are progressing on developing the five "Big Ideas" that are foundational for early literacy: phonemic awareness, phonics, reading fluency, vocabulary, and reading comprehension. Rigorous DIBELS screening will help our educators identify children at risk for reading difficulties early and will allow those students to start receiving the substantial additional instructional interventions they need as early as possible. I would like HPCSS to explore utilizing a team assessment approach across our elementary schools, as opposed to simply making DIBELS administration another in the seemingly endless list of responsibilities we hand off to our elementary classroom educators. Dedicated, specialized teams of reading specialists rotating through the district conducting school-wide assessments—if executed with care and oversight—can ensure reliable, consistent, efficient administration of the DIBELS screener. This approach will also allow our classroom educators to focus more on the critical work that must come after the DIBELS screening: using their students' scores to guide and adapt their classroom instruction to help every student become an established reader.

15. Many students are experiencing busing issues, but they often affect the special education community more acutely because students with disabilities who are provided specialized transportation often have longer bus rides, are more sensitive to changes in routines, and may be nonspeaking. (From the calls I receive, the concern is less about a child being left—I'm not sure I have ever heard of a child being dropped off without an adult visibly "receiving" them. The concerns are: delays in pickup, and a nonspeaking child being hurt on the bus and not being able to communicate that. What should HCPSS be doing to ensure safe and reliable transport for its most vulnerable students?)

We need to take a hard look at every aspect of transportation in HCPSS. All too often, transportation issues are dismissed as secondary to the "real" education issues – there's an attitude that transportation is "just logistics" or "just overhead." In my view, the transportation of our students to and from school is a foundational piece of the school day; it almost doesn't matter how good our classrooms are, if we can't get our students there on time and ready to learn, without having to experience overly long bus rides, or traumatic experiences while on the bus at the hands of fellow students or even the drivers themselves. All of the problems we've experienced in the past few years with driver shortages and excessive delays in pickup and drop-off illustrate how difficult it is for HCPSS to manage the performance of these contracted bus services. We need to do a much better job writing and enforcing the terms of these bus contracts to ensure that all of our students, but especially those in the special education community, are having the transportation experiences they need and deserve. If this proves to be unworkable, then I believe we need to seriously consider bringing the bus drivers back "in house" as HCPSS employees, where they can be properly vetted, trained, supervised, and (when necessary) disciplined and dismissed. I'm not talking here about HCPSS owning the actual buses—I think contracting out bus maintenance, storage, and repair makes sense—but the bus drivers themselves play a critical role in the daily educational lives of our children, as well as in their safety and wellbeing, and I believe that people who play those roles should be HCPSS employees.