

New York

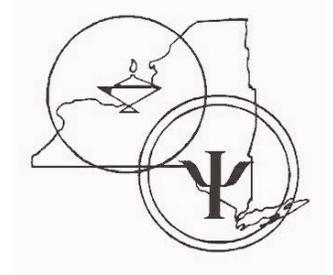
Spring 2004, Volume XXII number 3

SCHOOL PSYCHOLOGIST

A publication of the New York Association of School Psychologists

Serving children, their families, and the school community

An affiliate of NASP



This Issue of the NY School Psychologist focuses on assessment. What is assessment? In schools, assessment is often synonymous with testing. However, as we broaden our roles as school psychologists, so too do we broaden the definition of assessment. This issue brings us different approaches to assessing children, environments, and systems. The NYASP conference 2003 brought many renowned speakers to Albany. Several of these speakers' keynotes and workshops are summarized in this issue, further emphasizing our extended roles within the context of assessment and working in school environments.

As always, included are our regular columns - a message from president Nancy Evangelista, Tom's Tech Talk, a legislative update courtesy of Pamela Madeiros, and news from our NASP delegate Lynne Thies. Our features include ways to improve your child study team courtesy of Ned Engel, as well as a continuing dialogue on the TSA 2.0 from Kevin Duffy. In addition, we bring you interviews and conference 2003 workshop coverage from notable speakers Alan Kaufman, Dan Miller, and Stephen Phelps.

I hope you find this issue helpful in broadening your view and applying new ideas and techniques to your daily assessment practices.

Sincerely,

Kelly A. Caci

kcaci@newburgh.k12.ny.us

499 Lake Rd.

New Windsor, NY 12553

Submission Guidelines

Preferred document size is 750 words (review) or 1500 words (article).

Submissions are accepted via email attachment or on 3 1/2" disk with revisions and corrections already made. Please include a short bio about the author.

Photos, cartoons, and drawings should be submitted as a .tiff file when possible. We will make every attempt to return hard copy submissions of art and photography.

MEMBER PROFILE: We would love to share the following information about our members: Name, contact info, training/credentials, position, favorite tool, biggest challenge, greatest success, and any other interesting information. Pictures (digital or hard copy) are encouraged, but not mandatory.

CORRESPONDENCE: Unless specifically noted by the sender, we will assume consent to publish correspondence addressed to either editor. Letters and e-mail addressed to NYASP Executive Board members, along with response, may be published with the consent of both parties.

FEATURES

Spread the Word! Expand your Role by Writing Columns for Your School Newsletter Written by Ned Engel, EdD, PhD, ABPP	5
TSA 2.0: Considerations for Practitioners Written by Kevin Duffy, PsyD	6
Moving your Child Study Team away from Admiring the Problem To Creating Solution-Focused Interventions Written by Ned Engel, EdD, PhD, ABPP	8
Ethical Standards in School Psychology Best Practices in Assessment Written by Betsy C. Grier, PhD, NCSP	9
An Interview with Dr. Alan Kaufman Written by Elizabeth Zhe	11
Keynote Address with NASP President Dan Miller Written by Naazneen Allabux	12
Anxiety in School-Aged Children Written by Annette Stead	13
WNYSIPA Conference 2003 Written by Kitty Voos	14
Early Intervention Conference Written by Lacy Rezek	16
AASP Statement on Comprehensive Evaluation for Learning Disabilities	17

IN EVERY ISSUE

From the Editor	i
President's Message	2
3T: Tom's Tech Talk	3
Legislative Update	4
NASP Notes	20
Chapter Rep/Executive Board Directory	22
Membership Application	25

Nancy Evangelista

Who can remember the NASP 1997 convention, which was held in Anaheim? I did not attend, but I recall the clever marketing logo with a jaunty bicyclist who was cycling towards the future under the program theme of *Health Care Providers Preparing for Tomorrow, Today*. At the time I recall that my image of school psychologists as health care providers was pretty fuzzy - far removed from the day to day business of seeing kids for evaluations, meeting with parents and teachers, and doing some individual counseling or groups, all under the auspices of the local school budget. My myopic vision is ironic, given that I had left a school setting to work as an employee of a collaborative early childhood center. My program was funded by a hospital and the Developmental Services Office to provide developmental evaluations, family support services, and consultation with schools, day-care centers, and early intervention programs. I saw myself as a school psychologist working in a healthcare setting, and I was having a difficult time envisioning my colleagues in school settings fitting into the picture of healthcare providers.

But things have changed, as the NASP convention theme predicted. Health care is clearly influencing educational systems, as evidenced by the following practices. First, school psychologists in New York and many other states now routinely bill Medicaid, a major provider of health care services, for evaluation and counseling services to children with disabilities. Next, the Health Department is the lead agency designated by IDEA with providing early intervention (EI) services to infants and toddlers with disabilities in New York State. Under NYS Health Department regulations, families with health insurance are billed for covered services provided through the EI program. And lastly, the New York State Regents has designated development of school-based health clinics as a major initiative for the 2003-2004 school year. These initiatives are examples of the increasing interweaving of health and mental health services within education.

How does school psychology service delivery fit within these health care models? Recent data compiled on school psychologists' roles and functions (Thomas, 2000) reveals that the average school psychologist in New York State completed 70 evaluations in 1999 (compare to the national average of 105). In 2002, Hosp and Reschly found that school psychologists in the Northeast spent 55.7% of their time (national average 60%) in eligibility activities. This large chunk of our professional day closely resembles a medical model, where testing, diagnosis, and prescriptions for treatment occur.

Yet the medical model of diagnosis and treatment isn't the only model for health care providers. The alternative is a public health model, which shifts the focus from treatment of illness, disability, and disorder to health promotion, disease prevention, and access to services (Wrobel & Krieg, 2000). Public health initiatives over the past decades have been responsible for massive



changes in the health of our nation, including programs such as universal immunizations, screening programs (e.g. newborns PKU screening, mammograms), and the institution of health and safety standards in food handling facilities and workplaces.

How does the public health model translate into school-based mental health services? Recent years have seen an explosion of research-based programs to **promote emotional well-being** and build adaptive skills in kids of all ages - whether promoting conflict resolution, violence prevention, or pro-social skills. The Positive Behavioral Interventions and Supports initiative (PBIS) promotes development of a culture of emotional well-being and expectations for positive behaviors that is shared by everyone in the school: from teachers and students to administrators and bus drivers. Under the umbrella of **prevention of disorders**, a public health model promotes screening programs to determine which children are most

in need of early intervention, and then provision of appropriate services. This means that kindergarten screening must move from a focus on waiting for readiness to determining which entering children

are lacking in social, adaptive, and early literacy skills, and then meeting those needs through intensive programs to develop skills, not to delay school entry (Carlton & Winsler, 1999; Lennon & Slesinski, 1999). The SOS suicide prevention program produced by NASP is another example of a public health prevention approach to informing, screening and providing services for adolescents with depression. Around the state numerous schools are also working towards **greater access to services**. These can include innovative partnerships with community agencies providing drug and alcohol prevention, or school-based parenting education centers staffed by libraries, Cooperative Extension Agents, or Even Start family literacy programs.

These are but a few of the ways that schools have adopted the proactive, comprehensive, public health model for bettering our student's academic and mental health. In each of the programs above, psychologists play key roles in assessing school needs, researching proven practices, and helping to implement programs which help our children to thrive in today's complex world. I have listed a few references and web-based resources to help you and your school continue to move from the model of ill-

A Public Health Model of School Psychology

continued on p. 20

written by Tom Kulaga

(recommended reading for everyone who uses a computer to communicate, gather information, or carry out other daily life functions - and for the three of you who don't yet, but have signed up for the training)

See your school from space.

Did you ever wonder what your school looks like from outer space? Well, there's a good chance that you can see what your school looks like from space without even leaving your home or office. As long as you have an online connection, you can visit the TerraServer USA web site. TerraServer USA is one of the world's largest online databases. It provides free public access to a vast data store of maps and aerial photographs of the United States.

You can search for your school by clicking on a map or typing its street address. Depending on the location, it may be possible to see details as small as one meter. After taking a look at your school from space, you might want to visit some (other) famous places. By navigating to the famous places section of the site, you can see landmarks such as Alcatraz, Central Park, Niagara Falls, and the Grand Canyon. The TerraServer USA web site is located online at <http://terraserver-usa.com>.

Teach PowerPoint or Office to you students.

Want to teach your students or yourself how to use Microsoft products such as Internet Explorer, PowerPoint, Front Page, or Office? Online at actDEN, you can find in-depth and easy-to-read information presented by cartoon characters. Each den has a different section to provide you with all the basics you need for the selected skill. The actDEN web site is located at <http://www.actden.com>.

Get rid of "Spyware".

By now, all of us should be running antivirus software and updating the virus definitions regularly. But even if you are adequately armed with antivirus protection, you may still be vulnerable to spyware. Spyware, which is also known as "adware", is usually the result of obtaining some free software that comes bundled with little bits of code that sneak into your computer and collect information about your activity that can be passed on to another source - sometimes without your knowledge or permission.

Adware can be legitimate. For example, you might knowingly download a free program that tells you right up front in their licensing agreement that they will be tracking your activity to provide you with opportunities to see selected advertisements. If that is the case then all is well. Unfortunately, many people unknowingly download spyware. So, if you would like to check and see if your system is infected with spyware or adware,

read on. Additionally, we should note that the removal of adware can cause some free programs to stop working.

Fortunately, one of the best spyware removal tools is available at no cost for personal use. Ad-aware by Lavasoft is highly effective at checking and removing spy ware from your system. Ad-aware scans your computer's memory, registry, and hard drives for invasive software and allows you to easily remove offenders. Files to be removed are first quarantined, so that they can be replaced if needed. Like virus software, Ad-aware needs to be updated regularly to be effective. Details about Ad-aware, and the free program download can be found at <http://www.lavasoft-usa.com>.

Organize your photos.

If you have folders of digital photos scattered all over your hard drive than you might want to take a look at Photoshop Album 2.0 Starter Addition. The starter addition is a light version of the full Photoshop Album 2.0, which costs about \$50. Even though the starter addition is really an ad for the full program, it has enough features to make it worthwhile. Here's how it works. You begin organizing your photos with the "Get Photos" feature. The program will search your entire hard drive, camera, card reader, or individual folders for all your images. After your pictures have been pulled into the program, you can make new folders or use the default folders (People, Places, Events, etc.) to store your treasured images. Photos are associated with folders so that when you double-click on a folder only the pictures associated with the folder will appear. For example, if you want to see all your people pictures, you would double-click on the People folder. There is also a timeline feature that makes it easy to find a photo, or group of photos, by the date they were taken. You can also create a photo slide show and save it to your desktop. The program also has features to help you print photos efficiently, and makes it easy to format photos to be e-mailed to friends and family.

Get a discount.

Just a quick reminder that, as educators, we may be entitled to significant discounts when purchasing equipment or software. Many college bookstores provide discounts to students and staff, and a number of online stores offer academic discounts. To get an idea of typical discounts you might check out the Academic Superstore at <http://www.academicssuperstore.com>. Ψ

E-mail your tips or questions to Tom Kulaga:
3T@nyasp.org

Making an Impact Through Lobby Day

Written by Pamela A. Madeiros

Spring holds no charm for us here in Albany. There is no promise of rebirth or revitalization; only the constant reminder that there is no State Budget and little suggestion of when one might be expected.

As most of us are aware, the Court of Appeals' ruling in the Campaign for Fiscal Equity (CFE) lawsuit directed the State to ensure a "sound basic education" for New York City students. The Governor and Legislature intend to "seize the historic opportunity" presented by the ruling to simplify school financing, in general, and to establish new measures to help improve accountability and performance. After reviewing countless reports and proposals for change, the Legislature and Governor have yet to identify the resources necessary to fund the new financing system, or, for that matter, how much such system would cost. As a result, most discussions surrounding development of a State fiscal plan, or Budget, have been suspended pending resolution of the CFE matter.

However, even in the absence of a State Budget, there are sufficient issues of concern and interest to School Psychologists to warrant our attention.

Most recently, on May 4th, a small group of Association members, headed by Nancy Evangelista, took Albany by storm on our targeted Lobby Day. Policymakers in the State Education Department, the Legislature and the Governor's office were asked to view school psychologists as an important resource in the

development and refinement of the State's mental health, as well as educational, public policies. Our objective was to re-familiarize policymakers with the value of our profession and the support we provide, and our success was measured by the engaged response we received from each policymaker with whom we met. We have taken an important step towards educating key policymakers about the contribution school psychologists can, and, with renewed enthusiasm, are making to the larger dialogues around the integration of mental health services into school settings, professional accountability and changes to New York's education finance system.

Reflective of that renewed enthusiasm for involvement in the policymaking process, we have developed a memorandum in support of the State Education Department's request for fiscal support to effectively implement enforcement of recently enacted laws governing the unlicensed practice of a profession. We have also provided formal statements to the Governor's Commission on Education Reform relating to the CFE decision previously mentioned.

With each such effort, we enhance the profile of the Association and forge new partnerships with key decision-makers. We are re-vitalized in our new strategy and encouraged by the discussions and dialogues in which have been included to date.

So perhaps Spring does hold for us some charm after all!

Ψ

School Psychologist's Survival Handbook – a living document – begins its evolution

In a field as fluid as school psychology, it is difficult for any published material to keep pace with best practices, legal issues, and state-of-the-art tricks and tools. This recent (fall 2002) NYASP publication is beginning to prove its flexibility with updates available at www.nyasp.org.

Editors Ruth Steegmann and Judy Harwood continue to combine their own knowledge and experience with that of their colleagues – and with input from NYASP members and owners of the *Handbook* – to augment and improve upon information current at the time of original publication.

The *Handbook's* scope is broad, with theoretical infor-

mation and practical examples concerning:

- ✓ Background on meaning of our certification
- ✓ Review of current legislative initiatives
- ✓ Organizational aides
- ✓ Assessment
- ✓ Report writing
- ✓ Prevention/intervention
- ✓ Legal, ethical issues
- ✓ Supervision
- ✓ Image issues
- ✓ Continuing professional development
- ✓ Resources

For more information or to order the *School Psychologist's Survival Handbook*, contact Publications Chair and co-editor Ruth Steegmann: rsteeg@adelphia.net.

Spread the Word! Expand your Role by Writing Columns for your School Newsletter

Written by Ned Engel, EdD, PhD, ABPP

Home-school collaboration is an important component in today's schools. One of the easiest ways for school psychologists to foster such collaboration is to write a regular column for parents in the school newsletter. No time to write a column? No problem! Starting with this issue of New York School Psychologist, we will print articles written by school psychologists for their school newsletters. We encourage you to use them in your own newsletter. This particular article generated a lot of positive comments at my elementary school. In fact the parents in my family communication group loved singing the songs during our evening meetings. You'll be amazed at how many parents tell you they look forward to your columns and even have them hanging on their refrigerator. You can use your name in the byline, but credit must be given at the end of the column. The credit line should read: "This article was adapted with permission from material supplied by New York School Psychologist, a publication of the New York Association of School Psychologists." And, if you write something original and are willing to share it with your colleagues, send it to me at nedengel@bestweb.net and it will be considered for publication.

Mistake Making: You Feel what You Think!

By (Your name)

Very often parents share with me that they feel their children are too hard on themselves. Bernard & Joyce, authors of *Rational-Emotive Psychotherapy with Children and Adolescents* (John Wiley & Sons, 1984; ASIN #: 0471875430), recommend instructing kids on how to create sensible thoughts. They suggest that parents share with their children how everyone makes mistakes sometimes. This does not mean they will always make mistakes. Mistakes are not bad; mistakes are just mistakes.

To help your children find their sensible thoughts, start by having them think about a time they made a mistake. Ask them to tell you about it or have them draw a picture. They may benefit from closing their eyes and visualizing the event. You can ask them how they felt about making this mistake and what happened to them. Did anything terrible or horrible happen? Was it a catastrophe? Next, you can discuss what they learned from their mistake. Ask them what they could do differently next time.

Here are some examples of "sensible thoughts" for your kids to remember: "I just made a mistake." "I learn from my mistakes." "I can stand this." "I can try." "This is not so bad." "I feel disappointed." "I wish things were different." "This is not the worst thing that can happen to me."

Dr. Albert Ellis, the psychologist who developed rational-emotive therapy, believes you feel what you think. He has theorized that it is our thoughts about an event that lead to an emotional consequence. For example, where is it written that you should not make mistakes? Ellis coined the term "can't-stand-it-itis" to refer to how people create their own knots by catastrophizing about what happens to them and simultaneously commanding themselves or others that this should/must be different.

In 1997, Dr. Ellis addressed the New York Association of School Psychologists. During his presentation, he distributed a collection of humorous songs he wrote to enable adults to hear their thinking. He asked the people in the audience to sing along with him. Initially there was some hesitation among the several

hundred psychologists present. However, soon almost everyone joined in and the room was filled with laughter. Here is one of his songs printed with gracious permission from the publisher, the Albert Ellis Institute.

Perfect Rationality (Sing loudly to the tune of Funiculi, Funicula by Denza)

Some think the world must have a right direction,
And so do I – and so do I!

Some think that with the slightest imperfection
They can't get by – and so do I!

For I, I have to prove I'm superhuman,
And better far than people are!

To show I have miraculous acumen –
And always rate among the Great!

Perfect, perfect rationality

Is, of course, the only thing for me!

How can I ever think of being

If I must live fallibly?

Rationality must be a perfect thing for me!

Keep in mind there are no quick fixes; it will take a lot of practice for your children to internalize rational self-statements. Thus, you may want to start with yourself. We all have a "sensible me" within us. Good luck!

The Albert Ellis Institute publishes a songbook with music called *A Garland of Rational Songs*. The Institute also publishes many excellent and affordable books, such as *Rational Stories for Children*, by Virginia Waters. This book contains amusing stories dealing with the themes of anger, fears, anxieties, self-acceptance, and problem solving; it also includes parent's guides on each theme. Children find these stories fun and engaging. And, they become encouraged to try on new behaviors. For their catalog, call (800) 323-4738, or write to them at Albert Ellis Institute, 45 East 65th Street, New York, NY 10021. Ψ

Ned Engel, Ed.D., Ph.D., ABPP, was a practicing school psychologist for more than 30 years, and regularly wrote a column for his school's newsletter. He serves on the NYASP Board as the Research Chair.

Written by Kevin Duffy, PsyD

To conserve time and space, I will not address many of the points made in my original critique of TSA 2.0 (Duffy, 2002) nor will I respond to every point made by Jim Wright in his defense of TSA 2.0 (Wright, 2002). Reviewing these other articles will make this particular piece much easier to follow though. I also want to make clear that it is not my intention to paint interventioncentral.org in a less than desirable light. This is a cutting edge resource that is wonderfully managed to provide practicing school psychologists with easy access to vast amounts of useful information. TSA 2.0 is just one of literally hundreds of links available at interventioncentral.org. Mr. Wright has clearly been the pioneer in NYS in making these resources available to practitioners (myself included!).

Some might wonder why this response has been so long in coming. I guess I've had very mixed feelings about the article. On the one hand, I really didn't want to be argumentative. However, it was also clear to me that, after reading Mr. Wright's response to my original article, many practitioners were left with the impression that the flaws I'd found in TSA 2.0 were purely typographical. That is not the case. Further, in the past year or so, there were many rumors circulating that discrepancy analysis would become a thing of the past with the reauthorization of IDEA. So, I thought, what would be the point in belaboring the issue? It now appears that IDEA will prohibit only the requirement that districts use a discrepancy model but will stop short of outlawing the approach altogether. In the end, I decided to write a response. The piece is primarily focused on the questions I have received most frequently from my colleagues and from my students at RIT regarding TSA 2.0. I also discuss briefly my opinion of the implications for practice due to the flaws in TSA 2.0.

How Can Two Research Articles Come to Such Different Conclusions?

My students at RIT asked this question a number of times. Strangely, a puzzled colleague of mine asked this same question of me at a staffing meeting. The answer is simple. These articles about TSA 2.0 are not research. New York School Psychologist is not a refereed journal and doesn't present itself that way. If one takes to heart the message from the editors in the Spring 2003 issue, New York School Psychologist is a publication meant to facilitate communication between school psychologists in New York State. So, it might be better to view these TSA 2.0 articles as opinion pieces that will (hopefully) provide professional school psychologists with some useful information. The ultimate decision as to what constitutes ethical practice resides, as it always does, with the individual practitioner.

Does TSA 2.0 Represent “Best Practice”

It is clear to me that the answer to this question has to be

“no.” True, the equations that TSA 2.0 uses for discrepancy determination (referred to as the LD Work Group in Wright, 2002) did represent a “Best Practice” approach in the mid-1980's. However, the real question practitioners must ask is whether this approach represents “Best Practice” in the field of School Psychology in the year 2004. The information I have gathered from well-published experts in the field of discrepancy analysis, specifically Larry Evans and Ron Dumont, leads me to conclude that the TSA 2.0 software should not be used at this time.

I would also ask practitioners to note that Larry Evans' (1990) article is cited by Mr. Wright (Wright, 2002) as setting the standard for acceptable test score analysis in TSA 2.0: “The LD Work Group's recommendations for acceptable test-score analysis remain the *de facto* standard in school psychology to this day (e.g. Evans, 1990).”

Considering that Larry Evans was cited in my original article (Duffy, 2002) and in Wright's (2002) response, I decided that it would make good sense to contact him again. Dr. Evans was kind enough to lend his expertise a second time. His comments follow:

“Mr. Wright's arguments and equations would be valid if nothing had changed since Cecil Reynolds' (1983) report. However, Reynolds' group issued at least one set of corrected equations to their 1983 report. I also had a correction article published in the Journal of Special Education (1995), the same journal the original report was published. Some minor additional refinements have been made since 1995. Wright's response indicates a lack of knowledge of the shortcomings of the initial equations and the regression model's development since 1983. The results from the original model are incorrect, as you and others have discovered. *These erroneous results stem not from just typos in TSA 2.0, but from inappropriate equations.*” (emphasis added)

What Do You Mean By Calculation Errors?

As I pointed out in my first article (Duffy, 2002), Step 3 in TSA 2.0 is flawed. Several people have asked me to clarify this point. The description of Step 3 in TSA 2.0 calls for psychologists to determine whether the difference between an IQ and achievement standard score is statistically significant before later calculations determine whether the score is severely discrepant. Simply, if statistical significance is not achieved in this step, the analysis should stop since chance factors alone cannot be ruled out when the difference between the IQ and achievement scores is considered. I would also point out to practitioners that this step has been *eliminated* in modern approaches (Woodcock-Johnson-Third Edition; Standard Score Regression Comparison 3.1) to discrepancy determination.

In any case, for those still wondering about my specific concerns, let's walk through a concrete example. Consider the fol-

lowing scores: a WISC-III Full Scale IQ of 72 and a WIAT Mathematics Composite score of 64. Following the steps from the interventioncentral.org site, and specifically using the formula found on the site, we first convert the IQ and achievement standard scores to z scores. We do this by plugging our values to the formula below:

So, we get:

$$\text{WISC-III FSIQ: } z_x = 72 - 100 / 15 = -1.867$$

$$\text{WIAT Mathematics Composite } z_y = 64 - 100 / 15 = -2.400$$

Next, according to the site, we conduct a significance test of the IQ : achievement score gap. The following formula is used:

This formula requires that we subtract the z_x score obtained for the IQ test from the z_y score obtained for the achievement test and then divide that number by the square root of the internal reliability coefficient for the IQ (r_{xx}) test minus the internal reliability coefficient of the achievement (r_{yy}) test. Plugging our numbers in to the formula provided we get:

$$z = -1.867 - (-2.4) / (2 - (.96) - (.92))^{1/2}$$
$$z = 1.54$$

In the computational example provided on the interventioncentral.org web site, Wright states:

“The computational formula used here is taken from Reynolds, 1985 (p.459). To be conservative, we are running the significance test as a two-tailed test. We set a confidence level of .95, which in a one-tailed test corresponds to a cut-off value (in z-score units) of 1.65 (Reynolds, 1985, p.459). If the value that we get from the IQ/Achievement significance formula *exceeds* this critical cut-off, we continue with the discrepancy analysis. If it does not, we stop our analysis here.”

Let’s be precise here. Whether we use a more conservative cut off value of 1.96 (which would be the z critical value for a two tailed significance test) or the more liberal cut off value of 1.65, (which would be the z critical value for a one-tailed significance test), TSA 2.0 should flag the results from my example as non-significant. The following printout is generated by TSA 2.0 when using the values in my example:

Test Score Comparison Table:

Comparison of: Wechsler Intelligence Scale for Children-III-Full Scale (IQ Measure) & Wechsler Individual Achievement Test-Mathematics Composite (Achievement Measure)

IQ Test Score 72

Achievement Test Score 64

Discrepancy Status SEVERELY DISCREPANT

Clearly, something is amiss.

Reauthorization of IDEA (2004): What Are the Implications for LD Determination

Judging from the most recent guidance on the reauthorization of the Individuals With Disabilities Education Act (IDEA), it does not appear that the final version of this legislation will do away with discrepancy analysis altogether. The information that follows, which can be found in Senate Report 108-185, reflects the most recent provisions of S 1248 (the reauthorization of the IDEA). Senate report 108-185 can be found on the United States Senate’s web site:

[Senate Report 108-185 Language Related to Learning Disability Eligibility Determination](#)

“The committee believes that the IQ-achievement discrepancy formula, which considers whether a child has a severe discrepancy between achievement and intellectual ability, should not be a requirement for determining eligibility under the IDEA. There is no evidence that the IQ-achievement discrepancy formula can be applied in a consistent and educationally meaningful (i.e., reliable and valid) manner. In addition, this approach has been found to be particularly problematic for students living in poverty or culturally and linguistically different backgrounds, who may be erroneously viewed as having intrinsic intellectual limitations when their difficulties on such tests really reflect lack of experience or educational opportunity. The committee has heard from many experts about innovations and advances in the methodologies used to determine the existence of specific learning disabilities. In response to this growing base of knowledge, the bill clarifies that, in determining whether or not a student has a specific learning disability, a local educational agency is not required to take into account a severe discrepancy between IQ and achievement. This would not prohibit the use of this model, however, if an LEA chooses to base its decisions on the discrepancy formula.”

“Section 614(b)(3)(A)(iii) will require that all procedures, including alternate procedures, be valid and reliable for the purpose for which they are used; the committee expects that new methodologies adopted for use by local educational agencies also will be based on sound research findings.”

Recommendations for Practice

My opinion is that, until it reflects the advances made in discrepancy determination over the past two decades, TSA 2.0 should not be used as a component in LD eligibility decisions. If I take to heart the statement made in Senate report 108-185 regarding reliability and validity (“Section 614(b)(3)(A)(iii) will require that all procedures, including alternate procedures, be valid and reliable for the purpose for which they are used”), TSA 2.0 does not meet the minimum standard. I would argue that the software cannot be a valid approach to LD eligibility determination for one important reason: the formulae do not represent current acceptable practice. The fact is, there are at least two published sets of corrected equations (Reynolds’ own group and Evans’ 1995 article) to the LD Work Group’s recommendations that are not reflected in TSA 2.0. Again, until these fundamental issues are addressed, practitioners would be wise to find other discrepancy software to use in LD eligibility decisions. Ψ

Kevin Duffy, PsyD, is a school psychologist in the Buffalo Public Schools and a professor at Rochester Institute of Technology.

continued on p. 20

Moving your child study team away from

admiring the problem

to creating solution-focused interventions

Written By Ned Engel, Jenelle Bellinger, Keira Cox,
Sherrie Hauenstein, Matt Lingle, AnnMarie Robertson, Niagara University

Is your child study team (CST) mired in “admiring the problem?” Well you are not alone. In my conversations with fellow practitioners over the years we have frequently shared this lament. At various times I have attempted in-services to rectify this common dilemma. Now, after 30 years as a school psychologist starting a second career in academia, I have an incentive to think about what research could tell us and what still needs to be studied.

How do your teachers feel when they leave the CST?

Are your teachers satisfied with their conferences with the specialists? Do they leave more frustrated than they entered? Are their expectations being met? Are your colleagues asking about what types of levels of support are needed so that the referred student can function successfully? Are your meetings family friendly? If you believe as I do that “student performance is a result of the interaction between the learner’s characteristics and the instructional environment” how do you enable teachers to accept this? Although most teachers recognize they must meet the student where they are, that does not mean switching from “problem-talk” to “change talk” will be easy.

What new ways of viewing the referral are required?

Has your CST kept up with the times? IDEA revisions and No Child Left Behind require a switch in focus from diagnosis and automatic special education placement to figuring out interventions which enable students to be successful in their regular education program.

Part of the solution path has to do with moving away from a deficit model. Durrant (1995) noted that to the extent that children are viewed as having deficits that necessitates interventions to fix the problem. Viewing children as having deficits automatically presupposes psychopathology which would then require analysis and subsequent treatment interventions to fix the problem. How would you like to be the object of such an investigation?

Another issue has to do with the inherent weakness of a multidisciplinary model in which each person operates on the child and then reports back to the group. As Gargiulo (2003) has noted the concept of a multidisciplinary team was originally mandated in PL 94-142. This approach utilizes the expertise of professionals from several disciplines who perform their own separate assessments. Since the skills and resources of many different disciplines are needed to develop useful interventions for kids - perhaps the specialist could combine their efforts and work with

kids at the same time? This could certainly enhance the coordination of services. Giangreco, York & Rainforth (1989) compared multidisciplinary, interdisciplinary and transdisciplinary team models and found that cooperation increased when team members collectively develop the instructional recommendations and the student’s program even though they performed their evaluations independently. They also found when specialists conducted their evaluations in the presence of each other they developed more effective interventions. Perhaps a multidisciplinary team could become more collaborative if they practiced working together in different ways. Iverson (2003) has suggested that a key ingredient is looking at the process skills that clinical team members have. She also recommends psychologists take a lead role in helping their colleagues develop or enhance their group process skills.

Part of the solution path has to do with moving away from a deficit model

Slonski-Fowler & Truscott (2004) found that teachers’ acceptance of pre-referral interventions could be enhanced by: teachers being included on the team, teachers using a referral form to guide discussions and their teammates valuing their input and then developing clear interventions with the group members accepting accountability for implementation and outcomes. Successful teams take time, effort, and commitment to forge (Ito, 2002). MDTs are very complex and incorporate many different variables that contribute to the team’s effectiveness. They also require teams to pay specific attention to key elements like communication, hopefulness, team goals, team roles, outcomes and interventions.

Bonding is a method that can be used to ensure that team members will commit their time, knowledge, skills, and energy to the team and its goals. It is supposed to generate more enthusiasm and increase loyalty to the school and team (Oswald, 1996). Your classroom teachers will probably appreciate a clear direct process, especially if it results in useful interventions. You might want to graph the percentage of time spent on a typical discussion.

Organization is another method used to increase effectiveness by determining team roles. This can be accomplished via outlining responsibilities; determining team composition; identifying deadlines; gaining expected outcomes; and assigning a recorder, facilitator, and process observer (Oswald, 1996).

Taking Small Steps

Perhaps the easiest way to start is to keep track of how much time your team spends attempting to figure out what’s wrong as opposed to designing an intervention. Psychologists could also inform their principal as well as teachers that a request for assessment is not necessary to get them into the classroom.

Ethical Standards in School Psychology:

Best Practices in Assessment

Written by Betsy C. Grier, PhD, NCSP

Adapted from South Carolina Association of School Psychologists' School Psych Scene Vol XXXVII, No. 4

The year 2003 introduced several revised tests that are commonly used by school psychologists for assessment of students' cognitive abilities including the Stanford-Binet Intelligence Scales: 5th Edition (SB-V) in February of 2003 and the Wechsler Intelligence Scale for Children: 4th Edition (WISC-IV) in the summer of 2003. Also fairly recent, in the spring of 2002 the Wechsler Preschool and Primary Scale of Intelligence (WPPSI-III) was released. These revised assessment tools create several important ethical and legal issues that are important for school psychologists to consider.

As trained professionals, we know the utility and significance of using the most recent tests to adequately and appropriately assess a child's cognitive abilities. All of our professional organizations include these mandates in their ethical standards. The National Association of School Psychologists (NASP) code of ethics entitled Principles for Professional Ethics (2000) maintains this directive: "School psychologists... [choose] instruments and techniques ... that have up-to-date standardization data and are applicable and appropriate for the benefit of the child."

Often, school budgets seem to dictate when school psychologists are able to obtain these new testing materials. However, school psychologists are bound to practice ethically and legally when evaluating students. If schools do not provide these instruments in a suitable amount of time to allow for training, then the agency will be violating the standards outlined by the Regulations from the Individuals with Disabilities Education Act (IDEA), which clearly state that "the public agency uses technically sound instruments" (Jacob & Hartshorne, 2003, p. 86). The use of old versions of tests using outdated normative data is not considered appropriate. So, "how long" do school agencies and/or school psychologists have to purchase the new testing materials and to receive appropriate training to administer these tests?

Dombrowski (2003) reported that there is limited guidance about "how long" school psychologists have to transition to using the new instruments. However, a proposed standard is offered that states "Psychologists should adopt and use the most recent version of an intellectual assessment instrument within one year of its publication" (p. 12). A one-year timeline is proposed in order to allow for good training to use the tool, to provide additional time to research the technical adequacy of the tool, and to allow for psychologists and school districts to budget the money to purchase the instrument. Thus, all agencies should be using the WPPSI-III at this time considering that it has been available for almost 2 years. Psychologists should be using the SB-V by February of this year and the WISC-IV by the summer. This time

allotment is considered appropriate and the best practice in incorporating these newly revised tests into a psychologists' assessment practices.

As a practicing school psychologist, I see many children who have had previous psychological evaluations that I review as part of my assessment. From time to time, I come across reports that have been completed by psychologists recently using very old versions of the WISC (i.e., WISC-Revised) and/or SB. When discussing this finding among my colleagues, they have had similar experiences. When I spoke with a representative on the Board of Examiners in Psychology through the South Carolina Department of Labor, Licensing, and Regulation about this issue, I was informed that this problem (i.e., finding that a report was completed using outdated assessment tools) should be reported as soon as possible by sending a copy of the report, with all identifying information removed or blacked out, to the Board as soon as possible through mail or fax (803-896-4687). The complaint would be investigated so that this unethical practice could be ceased. It will be important for us, as professionals, to work together to make sure that the children and students we serve are being assessed in an ethical manner to ensure that their individual needs are met appropriately.

Please feel free to contact me via email (grierb@cdd.sc.edu) if you have questions, comments, or concerns about any of the issues presented within this article. I especially welcome comments and additional questions about assessment issues and/or other topic areas that present possible ethical dilemmas so that we might be able to learn from each other to best help the children with whom we work. I will look forward to hearing from you and collaborating with you to promote best practices in following our professional standards and ethics as we practice school psychology. Ψ

References

- Dombrowski, S.C. (2003). Ethical standards and best practices in using new revised tests. *Communicare*, 32 (1), 12-13.
- Jacob, S., & Hartshorne, T.S. (2003). *Ethics and law for school psychologists* (4th ed.). New York: John Wiley & Sons, Inc.
- National Association of School Psychologists. (2000). *Principles for professional ethics*. Bethesda, MD: Author.

Betsy is a licensed and certified school psychologist and Assistant Professor in Clinical Pediatrics at USC School of Medicine

*Congratulations to the NYASP Conference 2003
Award Recipients*

School Practitioner

Kathleen Nye

Leadership Award

Vincent Alphonso

Legislative Award

Sheldon Silver
NYS Assembly Speaker

Joseph Bruno
NYS Senate Majority Leader
& President Pro Tem

Ted Bernstein Awards

Lauren Reisinger - Queens College
Susan Witkoski - SUNY Buffalo
Nekedria Clark - Pace University
Stacy Zgaljardic - Touro College
Julie Mayring - Fordham University
Amanda Lannie - Syracuse University
Nancy Workman - New York University

Lenny Caltabiano - St. John's University
Maria Lombardo - Hofstra University
Patricia Cooney - Alfred University
Barbara Kent - Brooklyn College
Renata Carey - SUNY Oswego
Christopher Newell - RIT
Meredith Tindall - Roberts Wesleyan

At the Conference...

The 2003 Conference brought renowned speakers to Albany!

An Interview with Dr. Alan Kaufman

Written by Elizabeth Zhe

Alan S. Kaufman, PhD, was welcomed as a presenter at this year's annual NYASP convention. Dr. Kaufman spoke in an opening address entitled, "The Role of Standardized Cognitive Assessment in the New IDEA Guidelines." He also then presented in a breakout session regarding his revision of the Kaufman Assessment Battery for Children (K-ABC), "The Kaufman Assessment Battery for Children-Second Edition (KABC-II)."

Dr. Kaufman is a Professor of Psychology at the Yale University School of Medicine, Child Study Center. He is married to Nadeen L. Kaufman, Ed.D., a Lecturer at the Yale University School of Medicine, Child Study Center. Together the Kaufmans have published the *Kaufman Assessment Battery for Children (K-ABC)*, the *Kaufman Test of Educational Achievement (K-TEA)*, the *Kaufman Brief Intelligence Test (K-BIT)*, the *Kaufman Adolescent and Adult Intelligence Test (KAIT)*; the revised editions of the *K-ABC* and the *K-TEA* are due to be released in Spring 2004. In addition to these psycho-educational assessments Dr. Kaufman has also authored fourteen books and has been published in over 200 articles.

Dr. Kaufman studied as an undergraduate at the University of Pennsylvania. He then went on to graduate study at Columbia University where he received an M.A. in Educational Psychology, and a Ph.D. in Psychological Measurement, Research, and Evaluation, under Robert L. Thorndike. Dr. Kaufman began working for the Psychological Corporation upon graduation and began collaborating with David Wechsler. Dr. Kaufman praises Wechsler as his primary mentor. He furthermore noted that the accomplishment he is most proud of is his book, "Intelligence Testing with the WISC-R." Most notably because he feels it had the biggest impact on the field of assessment to that date, and that it changed how people thought about test scores.

Dr. Kaufman's notion of intelligence plays a large role in the development of his psycho-educational assessments, and the validity to the role he believes intelligence testing plays in the school setting. In his own words Dr. Kaufman describes intelligence as, "Closest to fluid intelligence...an ability to reason but also the ability to face real life circumstances and come up with solutions." He further describes intelligence as, "Broader than tasks we test, intelligence is also social awareness and dealing effectively with interpersonal relations." Dr. Kaufman views the movement toward more emphasis on intervention and less empha-

sis on discrepancy theory as a good and much needed move. He noted that school psychologists need to be more involved in individualized interventions for children; individualized interventions he believes can be devised better when a well-developed cognitive battery along with a well-developed achievement battery are used to learn specific information about how an individual child learns. Dr. Kaufman argues that the continuation of intelligence testing is important, and that while intelligence testing should not be the only testing used neither should the alternatives; he argues finding a connection between all methods is important to finding where there are process disorders and integrities.

The revisions to the *K-ABC* and *K-TEA* reflect his notion of intelligence and the movement toward intervention. The *KABC-II* will broaden the range of processes originally measured by the *K-ABC*, adding higher level reasoning tasks and the measuring of variability. An important aspect of the *KABC-II* that Dr. Kaufman noted was that it will continue to maintain its fairness to ethnic minorities. The *KTEA-II* will introduce novel measurements of written expression, along with measures of oral expression and listening comprehension. Error analysis for most subtests that translates directly to intervention will also be introduced.

When questioned about the advice he would give to individuals entering the field of school psychology Dr. Kaufman's main advice was to, "Be flexible. Don't be dominated by one or two professors. Expose yourself to a diversity of opinions, and this will allow you to find your own framework of what works best."

Where should we look for Dr. Kaufman next? Dr. Kaufman noted that his main project is currently collaboration with Dawn Flanagan; the two will be revising the Kaufman interpretation method to reflect a more contemporary approach and are co-authoring the "Essentials of *WISC-IV* Assessment," which is due to be published in the Summer/Fall of 2004 (New York: Wiley). In addition to this, following the NYASP convention both Dr. Kaufman and his wife Nadeen were on their way to France where they were working on a project to develop a computerized screening test for French speaking individuals and countries. Ψ

Good-luck Dr. Kaufman!

Elizabeth Zhe, MS, is a School Psychology Doctoral Student at the University at Albany, State University of New York

Written by Naazneen Allabux

Dr. Dan Miller is the current President of the National Association of School Psychologists (NASP). Originally from Ohio he has over 23 years of experience as a school psychologist. He has resided in Dallas since 1990 where he is the Director of the School Psychology Graduate Training Programs at Texas Woman's University. He received his Doctorate from Ohio State University in 1989 and his specialization includes school-neuropsychology, early childhood assessment, and professional issues. He has served in a number of leadership positions within NASP since 1997 and he was the founding President of the Texas Association of School Psychologists in 1993.

At the keynote address for the 2003 NYASP conference in Albany, Dr. Miller, provided us with current news about IDEA reauthorization and introduced the NASP theme of the year, "Mind Matters: All Children Can Learn". He gave an update on NASP activities involving minority recruitment initiatives, legislative issues and training issues. After the speech, Dr. Miller took time to answer some questions and discuss issues relevant to today's school psychologist. Following the keynote address he instructed a workshop in which participants learned about the historical context of neurological practice with children and adolescents, the state-of-the-art of school neuropsychology practice, current assessment approaches to working with school-aged children, and a review of empirically based interventions.

According to Dr. Miller, some of the most critical issues and challenges facing school psychologists today involve role expansion. Most school psychologists today are bound by a "Refer, Test, & Place" model. They spend their entire professional lives just doing assessments, which is a waste of their professional skills. They were taught to be consultants, do counseling, solve problems and apply interventions to instructional design, yet they are grossly under-utilizing their skills. He understood that there are roadblocks preventing school psychologists from using these skills. However, one has to figure out ways to help move people from the boundaries of the "Refer, Test, & Place" model. This is an ideal time to reevaluate what we have been doing historically as school psychologists and where we need to be focusing our efforts. The consensus is that we need to contribute more towards early intervention and prevention activities. Just testing and placing kids does not get into the underlying reasons as to why they are experiencing academic difficulties to begin with. If we can develop early interventions for reading, it will have implications with respect to other evaluations. For example, if a child is able to read by 4th grade, that greatly reduces their chances of being evaluated as emotionally disturbed or learning disabled. We have to provide children services as soon as we see symptoms of difficulty with reading, writing, or arithmetic. This will change how psychologists conceptualize their role and function, allowing

them to use their problem solving and consultation skills and play a role in pre-referral intervention team meetings.

Dr. Miller is also concerned about the shortage of school psychologists across the country. As a trainer he is concerned that higher education funding has been cut severely over the last few years. It is difficult to find people to become trainers of school psychologists, which exacerbates the problem. It reduces the level of competency too, because academia spins out school psychologists by the dozen without training them effectively. Students then graduate and find themselves unable to clear national or even state level exams, not to mention their sense of loss with respect to time, money, and difficulty getting a job.

From his speech at the Keynote address, Dr. Miller hoped that students and practitioners took away the message that NASP is an active and dynamic professional organization. In his opinion, practitioners think of NASP as this big building in Washington D.C. with hundreds of employees. Once someone called up the office and asked to speak to someone from the legal department. The 27 staff members that represent NASP, chuckled and said, "What legal department?" NASP is comprised of a very small group of approachable people, who have been able to make phenomenal achievements with a combination of volunteer leadership and paid staff. One's membership into the NASP organization provides you with the Communiqué, a high quality publication that you get 8 times a year, and a journal, The School Psychology Review, which members receive 2 times a year. They also provide legislative representation in Washington on critical issues such as IDEA reauthorization and advocacy for loan forgiveness (http://capwiz.com/naspweb/home/nasp_advocacy). Changes in technology are making it easier for NASP to publish information. There are all kinds of printed materials on the web, which make it easier for us to function as practitioners. Dr. Miller felt that people need to make use of the resources available at the NASP website, the Career Center, Mental Health Center, and the Computer Based Training (CBT) programs.

The workshop on "Integrating School Neuropsychological Principles in the Practice of School Psychology" addressed that there is still a major role to be played for assessment within our profession (as opposed to the opinion that Curriculum Based Measurement is the cure all and end all of our profession). It is not enough to simply give IQ tests and obtain an IQ score or give an achievement test. The neuropsychological aspects and principles can give you more insight into how children can actually learn, which may be translated into instructional strategies. School Psychologists as consultants need to address error analysis, pattern analysis and instructional design and technique. For example, when a child gets a score of 80 in reading it shows that they are low but why are they low? In his opinion there is also going to be a place for the process assessment approach to

continued on p. 21

Written by Annette C. Stead

Anxiety is a common emotion that can become a disorder when stress, apprehension and worry worsen to the point of impaired life functioning. Anxiety can occur at any age and have many causes. At the NYASP conference in Albany this year, Stephen Phelps, Psy.D., presented an applied, interactive, engaging lecture on the nature of anxiety in childhood and current trends in intervention and treatment. Dr. Phelps is a veteran school psychologist who currently works in both the school setting and in private clinical practice. He brings with him a wealth of knowledge and personal experience with regard to childhood anxiety. The following will summarize Dr. Phelps' professional insights into anxiety in school-age children.

Dr. Phelps' interest in childhood anxiety is due in large measure to a perceived increase of anxiety-related referrals in recent years. Underscoring this increase may be a rise in anxiety-provoking societal stressors, changing family dynamics and heightened parental and educational expectations. Phelps further suggested that increasing pressures for children to act older (in dress, speech and behavior) might create internal dissonance that manifests as anxiety. The source of a child's anxiety may be specific or vague, and the resulting effect on the child will vary depending on his or her support system, coping mechanisms and strength of resilience.

Anxiety can manifest itself in a variety of ways in the classroom setting. Young people are sometimes ineffective in expressing their worries and fears. Some children translate their emotions into something else and project them outward, while others internalize. Children who externalize their emotions are more easily identified because they are quickly referred for displaying angry, aggressive and disruptive behavior. On the opposite end of the spectrum, children who internalize and display inattentive, unmotivated behaviors do not readily gain the attention of school personnel and are sometimes sadly overlooked. Further complicating the issue, Phelps suggested that anxiety is often masked by other conditions, perhaps most relevantly, by ADHD. In Dr. Phelps' experience, students with ADHD often demonstrate more of an angry attitude triggered by sensory overload that dissipates within a short time. Anxious children, on the other hand, often demonstrate off-task behaviors triggered by internal dissonance and discord. With the attention being focused on those who demonstrate externalizing behaviors, a large segment of the anxious population of children is being misdiagnosed or even entirely overlooked.

So how do we accurately assess anxiety? School psychologists should be well versed in formal and informal assessments of cognitive, social-emotional, and behavioral factors. A thorough clinical interview is key for in obtaining relevant and reliable information, according to Phelps. The clinician must listen attentively and ask relevant, probing questions. School psy-

chologists should also be skilled in selecting and using behavior rating scales and checklists. Behavioral checklists help to identify the area of concern, define a student's strengths and deficiencies, and act as a method for evaluating student progress with intervention programs. Assessment tools specifically designed to ascertain the presence of anxiety in the child are incredibly useful (e.g., the BASC, the Conners' Rating Scales, the Multidimensional Anxiety Scale for Children, and the Children's Manifest Anxiety Scale- Revised). The information obtained from the interview and rating scales, used in conjunction with other assessment results, should create a meaningful picture of the anxious child.

Once the problem has been identified, appropriate interventions should be used to stabilize the anxiety level so that daily functioning is not impaired. Phelps suggested that when working with an anxious child, try to exhaust all interventions before formal classification. A number of interventions were suggested as effective methods of working with children with anxiety. While treatment for anxious children is sometimes misunderstood to be a pure counseling issue, Phelps emphasized the importance of the school in the treatment process, especially the child's classroom teacher. The teacher should work to develop a positive, supportive relationship with the anxious child. Classroom management and classroom meetings to address worries and concerns are successful. Additionally, bibliotherapy was strongly suggested, especially for anxious younger children. Bibliotherapy can be easily incorporated into classroom reading curriculum, facilitates discussions, and provides an opportunity for the school psychologist to be seen in the general education classroom. School librarians are an excellent resource for relevant books.

Cognitive Behavioral therapy can be used in school as an effective method of exploring the distorted cognitive messages that provoke the anxiety response. CBT helps the child to make cognitive connections between what is bothering him or her and what can be done to combat it. This type of behavioral therapy does not need to be clinical, involved or charted, but rather can be broken up and used to address pertinent issues. CBT is sometimes used in conjunction with medication. According to Phelps, anxiety medications are often given once a day before school. Considering this, school personnel are sometimes unaware that a child is even on medication. This lack of knowledge may have implications for accurate assessment and the implementation of successful in-school treatment programs. Further, school psychologists should be adept at stress management and relaxation training techniques to manage the physical sensations that accompany anxiety. Deficits in self-monitoring, lack of exercise, and irregular sleep patterns negatively impact one's ability to effectively cope. Interventions to address these issues should also be instituted. Ψ

Ecological Assessment & Positive Behavior Supports Detention. Suspension. Expulsion. These are the three strategies that most school principals report as the current 'behavior plan' in place in their schools. In fact, according to Dr. Rob March, who was the presenter at the annual conference of the Western New York School Psychologists Association on September 26, 2003, reactive strategies are by far the most common responses to behavior problems in our schools today. His presentation at the University Inn & Conference Center in Buffalo, entitled Ecological Assessment and Positive Behavior Supports, addressed problems with reactive behavior strategies; assessment of the current state of a school ecology; and alternative, positive support strategies for behavior management. He began with an overview of the behavior management situation currently facing many of us in the schools we serve.

Dr. March proposed that in addition to the academic curriculum, there is another, 'hidden' curriculum of social competence and self-management expectancies that is in place in our schools. Teachers and administrators expect children to be able to follow school rules, get along with their peers and teachers, and have appropriate self-management strategies, yet children enter school with a wide range of skills, both academic and social. The small percentage of children who enter school with social skills deficits or motivation deficits account for the overwhelming majority of the behavior problems, yet the current reactive environment rarely addresses this skill or motivation deficit by explicitly teaching social competence skills proactively. Instead, in most cases the rule of thumb is to wait for a problem to arise and then to deal with it reactively, usually with punishment and possibly exclusion, laying the responsibility for both the problem and the solution exclusively on the student.

There are a number of problems inherent in this approach. On the individual level punishment doesn't work - research findings suggest that punishment alone (that is, without a parallel proactive support system) is associated with increases in aggression, vandalism, truancy, and dropping out. In addition, the reactive approach assumes that the individual being punished knows what is expected, how to perform the appropriate behavior, and is motivated to do so. Again, research suggests that without explicit teaching of behavioral expectations, along with the prerequisite social skills and motivational strategies to achieve these expectations, some children will simply continue behaving inappropriately, regardless of punishment. Finally, some forms of punishment may actually reward and maintain problem behaviors. Indeed, if a child is acting out because of a desire to avoid or escape from a particularly difficult task, being removed from the classroom will certainly increase the likelihood of the same behavior being repeated in the future.

On the systems level, research shows that schools that are the least effective in supporting students who exhibit problem behaviors are those that have unclear and or negative behavior

expectations; inconsistent implementation of consequences; those that lack agreement among staff regarding expectations and consequences; and those that fail to accommodate individual student differences. In contrast, research supports the effectiveness of school-wide behavior management plans that emphasize predictable, positive expectations; clearly defined and implemented consequences along a continuum of severity; a team approach and a multi-level agenda with strong staff support; and systematic acknowledgement of individual students for appropriate behavior as well as structured responses for inappropriate behavior. So we know what works and what doesn't, but what steps can we, as school psychologists, take to change our current school environments and begin to create a positive school climate? Dr. March recommends that we take a leadership role in implementing a multi-tiered approach that includes a continuum of behavior supports on the school-wide, group, and individual level; a focus on the behavior of the adults in the system; systematic teaching for behavioral competence within the system; and methodical implementation of school wide positive behavior supports.

Behavior supports begin proactively at the school-wide and classroom levels with an emphasis on primary or universal prevention. The vast majority of students (80 – 90%) enter school without serious behavior problems, and the initial focus should be supporting these students through universal interventions designed to explicitly teach all students clear behavioral expectations. In essence we must move from the 'hidden' curriculum to a behavioral curriculum that is clearly defined and endorsed as a school-wide priority. The next tier of behavior supports should address those students in the at-risk category. The 5 to 15% of students who enter school with academic or social skills deficits can be supported through specialized group interventions that address social competence instruction and target the academic skill deficits that may lead to inappropriate behavior. For the 1 to 7% of students who exhibit chronic, intense problem behavior patterns, intervention should take place on the level of the individual student with targeted treatments derived from functional assessment of the problem situation(s).

Along with a system-wide change toward universal, preventative strategies there is a corresponding change in the assignment of responsibility for both appropriate and problem behavior. Dr. March suggests that in order to create a positive school climate the focus must be shifted from the students' behaviors to the behavior of the adults in the system. Problem behavior can be defined as the difference between what is expected and what occurs. However, in many of our schools there is no clear, consistent set of expectations among teachers and staff as to what constitutes appropriate behavior. The disparity among teachers' behavioral expectations is often the cause of student referrals – students with social competence deficits simply cannot adapt to multiple sets of expectations. As school psychologists we can facilitate consistency within our school environment by working

Behavior supports begin proactively at the school-wide and classroom levels...

with teachers and administrators to define school-wide behavioral expectations. Dr. March suggests that the expectations should be few in number (three to five), positively stated, and tied to areas of interpersonal interaction that are crucial for lifelong success.

Intertwined with the idea of changing the behavior of the adults in the school is the necessity of teaching behavioral competence to those same adults. Just as we can explicitly teach behavior expectations to our students through universal, specialized and targeted interventions, we can teach staff members to be more culturally sensitive, to attend to and reward appropriate behavior, and to become more effective classroom managers through in-service training. Dr. March emphasized the power of teacher attention to foster appropriate behavior and recommended easily implemented ideas such as rewarding good behavior within the first 15 minutes of class, or using 'caught being good' stickers to reinforce appropriate behavior in the hall, in the cafeteria, or on the playground. In addition, he noted that by applying simple management techniques such as moving through and visually scanning the environment when teaching or supervising, and interacting briefly with many students throughout the course of an activity, teachers and staff can greatly reduce problem behaviors.

The process of implementing the ideas discussed above in order to create a positive school climate must be systematic and data based. According to Dr. March, the following five steps are keys to the successful establishment of a positive behavior management plan:

-Establish a behavior leadership team. As school psychologists we can take the lead in recruiting staff, parents, and community leaders to work together to improve our school environment.

-Secure school-wide support. The most effective way to secure staff agreement and support is to conduct a needs assessment. Without support from the stakeholder, implementation integrity is unlikely.

-Establish a data based action plan. Review archival records to

determine what areas, times, and staff generate the most office referrals. In essence, take the behavioral pulse of the system in order to inform both systems level changes and individual interventions. These data also serve as a baseline against which to judge intervention effectiveness.

-Arrange for high fidelity implementation. Active administration and support as well as staff development activities are keys to implementation integrity.

-Conduct formative data-based monitoring. Make sure office referral documents yield useful information (the who, what, when and where of behavior problems). Track information systematically in order to monitor and adjust system, classroom, and individual support strategies.

Of course, every school and school system is different, and just as we must address the needs of each student individually, we must also tailor a positive behavior support plan to the needs of our own school environment. A smaller school with just a few problem behavior issues may only need interventions targeted to specific areas such as the playground or cafeteria, whereas a large, urban school may be starting at the ground floor to implement a system-wide proactive approach to behavior management. As school psychologists, we can assume a leadership role in our schools by educating the teachers, staff, parents and students in our school about the research-proven success of school-wide positive behavior supports; by launching a team effort to establish and implement clear school-wide behavior expectation; and, finally, by utilizing our specialized knowledge of measurement to assist the team in monitoring and adjusting the implementation of the behavior support plan. Ψ

Many thanks to Mark Mecca, WNYSPA Conference 2003 chair and committee members Anita Dombrowski, Mac Barnett, Kristine Augustiniak, Ruth Steegman and Kitty Voos. The conference was a great success thanks to their hard work.

Nomination forms for the
School Practitioner of the Year Award
and
The Leadership in School Psychology Award

will be available on the NYASP website this year

www.NYASP.org

Early Intervention Conference

Written by Lacy Rezek

This past spring I had the pleasure of attending a conference in New York City, which was co-sponsored by NYASP and the New York Association of Early Childhood Intervention Psychologists, hosted by Los Ninos at Fordam's Lincoln Center campus. Topics included working with families, confirming appointments, early intervention regulations, and autism spectrum disorders, among others.

For myself, I found it to be a review of early intervention procedures. I think it would have been most helpful for school psychologists or others new to working with the youngest age group. However, most of the people attending seemed to be experienced practitioners. The discussions were helpful, in that we learned that we all have the same types of problems and frustrations, whether urban or rural providers. The regulations, or the interpretation of the regulations, can be difficult, as they vary with the county and/or agency.

I learned that in some areas, only licensed psychologists are employed to do early intervention evaluations. Other areas rarely have a licensed psychologist as part of the evaluation team. In these areas, a Masters/Specialist level school psychologist is employed when a psychologist is needed.

In some areas, mostly urban, most all children referred for an early intervention evaluation have a psychological as part

of the evaluation. This is almost never the case in my rural area. It is rare for us to have the psychologist involved at all, but rather, most early intervention evaluations are conducted by a special education teacher and a speech pathologist, occupational therapist, or physical therapist.

Other than networking, the high point of the one day conference was acquiring the book, *A Practical Guide to Early Childhood Assessment: Conducting Developmental and Psychological Evaluations in the Early Intervention Program* by Scott Mesh and Joanne Loeb. This book includes some of the same topics as the conference, and included issues such as: understanding early childhood delays and disorders, developing rapport with families, formal and informal tests and procedures, and writing early intervention reports. Also discussed are the regulations relating to early childhood services and autism spectrum disorders. This book can be ordered from Los Ninos Press at www.losninoservices.com or (212) 787-9700. I think it would be a valuable resource, especially for those new to early childhood services. Ψ

Lacy Rezek is the NYASP Early Childhood Committee Chairperson, and the Chapter B Alternate representative.

Recruit a New NYASP Member...

The NYASP membership committee has launched a membership incentive program this year. A \$10.00 member discount is being offered. Each new member recruited by a current NYASP member simply lists the name of the recruiting member on the NYASP application form. The recruiting member will be eligible for the discount when their NYASP membership is renewed next year.

In addition to the benefits of receiving the quarterly newsletter, *The New York School Psychologist*, access to the NYASP website and listservs, and the far reaching benefits of NYASP legislative and lobbying efforts, membership can enhance your professional affiliation in many other ways. Members have an increased sense of professional identity and tend to be "in the know" regarding statewide programs and changes. Each year the NYASP Conference offers the opportunity to keep current on changes in our field by providing the most up-to-date and interesting speakers in school psychology.

The next time you join your colleagues at a meeting, training, or social gathering, bring along some new member forms, and remind them of the many benefits of NYASP membership. You can enjoy a discount for your successes in membership recruitment! New member forms are found in every issue of *The New York School Psychologist*, or can be downloaded from www.nyasp.org. For additional information about membership, contact Nancy Foreman at nforeman@wnyric.hornell.org or Susan Markel at smarkel1@twcny.rr.com.

From the American Academy of School Psychology

Statement on Comprehensive Evaluation for Learning Disabilities

The American Academy of School Psychology (AASP) is committed to the development and maintenance of school psychology practice at the highest level. Fellows of the AASP are all holders of the Diplomate in School Psychology that is awarded by the American Board of Professional Psychology (ABPP). The AASP represents a group of broadly trained and experienced school psychologists who are dedicated to the application of the science and profession of psychology to issues related to the protection and promotion of children and youth. One aspect of school psychology practice is the provision of comprehensive psychological and psychoeducational evaluations for students with suspected exceptional educational needs.

The AASP is concerned with certain language in H.B. 1350 and S.B. 1248 that appears to allow an alternative “response-to-intervention” model for determining whether a child has a specific learning disability (LD). The language suggests that a local educational agency may use a process that determines if the child responds to scientific, research-based intervention. Fellows of the AASP caution that this alternative should not be interpreted by federal regulators, state guidance document writers, and/or local practitioners to mean that a comprehensive evaluation need not be conducted for any student suspected of having a specific learning disability.

AASP Survey

Recently, AASP Fellows were surveyed about the proposed IDEA changes for the evaluation of individuals with suspected learning disabilities. Five statements were posited to ascertain levels of agreement or disagreement about whether the new IDEA law should contain a standard procedure for diagnosing LD; whether the response-to-intervention model should be used as a sole criterion to diagnose LD; whether practitioners should include other alternatives to diagnosing LD; and whether the new law should require comprehensive evaluations in suspected LD cases. Survey items were scaled on a 4-point Likert scale (1 = strongly agree, 2 = agree, 3 = disagree, 4 = strongly disagree). There was a 51% response rate. Results of the survey are found in Table 1. Responses to two of the questions are particularly noteworthy: Fellows of the AASP strongly agreed that any proposed criteria for diagnosing LD should require a comprehensive evaluation of the child. Further, the AASP Fellows contend that using a response-to-intervention model as a sole criterion for diagnosing LD would not be an improvement in practice.

Need for Comprehensive Evaluation

As professional psychologists, AASP Fellows believe that a comprehensive evaluation, which includes psychometrically sound, norm-referenced measures of cognitive ability and academic achievement, is an important part of an LD diagnosis. A comprehensive evaluation includes objective, valid, and reliable measures of both ability and disability to provide documentation of any limitations in cognitive processing that may be required for legal protections and/or the provision of special services or accommodations.

A comprehensive evaluation includes multiple sources of information, including standardized, norm-referenced tests; interviews; observations; curriculum-based assessments; and informed clinical judgment. A student’s response to scientific, research-based interventions can be a part of a comprehensive evaluation, but a response-to-intervention process should not be viewed as a sole criterion for diagnosing LD. The core procedure of a comprehensive evaluation of LD is an objective, norm-referenced assessment of the presence and severity of any strengths and weaknesses among the cognitive processes related to learning in the academic area. These cognitive processes include (but are not limited to): knowledge, storage and retrieval, phonological awareness, reasoning, working memory, executive functioning, and processing speed.

Table 1. Mean and Standard Deviation Results for the Five Survey Items

<i>Question</i>	M	SD
1. The new law needs to contain a standard procedure and criteria for diagnosing LD.	1.76	1.0
2. Using the response-to-intervention model as a sole criterion to diagnose LD would be an improvement in practice.	3.40	.8
3. The new law should retain the alternative response-to-intervention criteria but include other alternatives for diagnosing LD.	2.31	1.0
4. The new law should not contain the response-to-intervention criteria, and instead define different procedures for diagnosing LD.	2.23	1.1
5. The proposed criteria for diagnosing LD should require a “comprehensive evaluation” of the child.	1.18	.4

Key. 1 = strongly agree; 2 = agree; 3 = disagree; 4 = strongly disagree.

Creating Solution-Focused Interventions

Continued from p. 8

First, you could provide in-class observations and ongoing consultation. There are great resources to develop interventions. For example, N. Rathvon's *Effective School Interventions* is an excellent collection of empirically based academic and behavioral treatments.

Useful Questions to Change the Conversation toward a Solution-Focus

The most basic question is: What would you like to have happen? Several writers have suggested various uses of the Miracle Question (deShazer, 1985; Durrant, 1995). "If you woke up tomorrow and the problem was solved, what would be different?" It is most useful to locate exceptions to problems – what was different about the times when things are better? If things were better, what would people notice? What's different about those times? What could we do to encourage this to happen more often?

In the process of designing interventions, multidisciplinary members mistakenly focus all their attention on the problem and the diagnosis of the child. This traditional problem-focused approach has five basic steps: Defining the problem, locating the source, generating alternatives, implementing the solution, and evaluating the outcome. This approach limits the focus to what is wrong instead of what is right and what seems to be working for the child. Educational problems are very complex, but this approach tries to identify and narrow the focus to a single cause. In contrast to this, the solution-focused approach concentrates on the absence of the problem and how it can be utilized and amplified. Solution-focused work is said to be more useful for teams who provide comprehensive services to students (Watkins & Kurtz, 2001; Engel et al, 2000). Watkins and Kurtz (2001) concluded that the solution-focused approach to intervention is a valuable tool for teams working with children that leads to rapid change. Team members identify the student's problem, but they quickly shift to finding solutions by recognizing and building on the student's strengths.

Please let us know what you think and tell us what happened with your MDT.

References

Birdsall, B.A. & Miller, L. D. (2002). *Brief Counseling in the Schools: A Solution-Focused Approach for School Counselors, Counseling and Human Development*, vol. 35, no. 2, 1-10. deShazer, S. (1985). *Keys to Solution in Brief Therapy*. New York, NY: Norton.

Durrant, M. (1995). *Creative Strategies for School Problems – Solutions for Psychologists and Teachers*. New York, NY: Norton.

Elliott, S. N. & Sheridan, S.M. (1992). Consultation and Teaming: Problem Solving Among Educators, Parents and Support Personnel. *The Elementary School Journal*, vol. 92, no. 3, 315-337.

Engel, N., Parker, K., DeCato, P., Currie, A., Caci, K., & Faustino, P. How Psychologists can Reduce Testing through Solution-focused Teacher In-Services. *Communiqué*, vol. 29, no. 1, Sept. 2000.

Gargiulo, R. M. (2003). *Special Education in Contemporary Society: An Introduction to Exceptionality*. Belmont, CA: Wadsworth/Thomson Learning.

Giangreco, M., York, J., & Rainforth, B. (1989). Providing Related Services to Learners with Severe Handicaps in Educational Settings: Pursuing the Least Restrictive

Option. *Pediatric Physical Therapy*, 1 (2), 55-63; cited in *Special Education in Contemporary Society*.

Huebner, E. S. & Gould Kelly. (1991). Multidisciplinary Teams Revisited: Current Perceptions of, *School Psychology Review*, vol. 20, no. 3, 428-434.

Ito, C. (2002). Collaboration. Retrieved Oct. 13, 2003, from T/TAC: Training and

Technical Assistance Center at the College of William and Mary.

Iverson, A. M. (2003). Best Practices in Problem-Solving Team Structure and

Process. *Best Practices in School Psychology IV*, vol. 1, 657-669.

Oswald, L. J. (1996). *Work Teams in Schools*. ERIC Clearinghouse on Educational Management. College of Education, University of Oregon.

Rathvon, N. (1999). *Effective School Interventions*. New York, NY: Guilford.

Slonski-Fowler, K. & Truscott, S. D. (2004). General Education Teachers' Perceptions of the Prereferral Process. *Journal of Educational and Psychological Consultation*.

Watkins, A. M. & Kurtz, P.D. (2001). Using Solution-focused Intervention to Address African American Male Over-Representation in Special Education: A

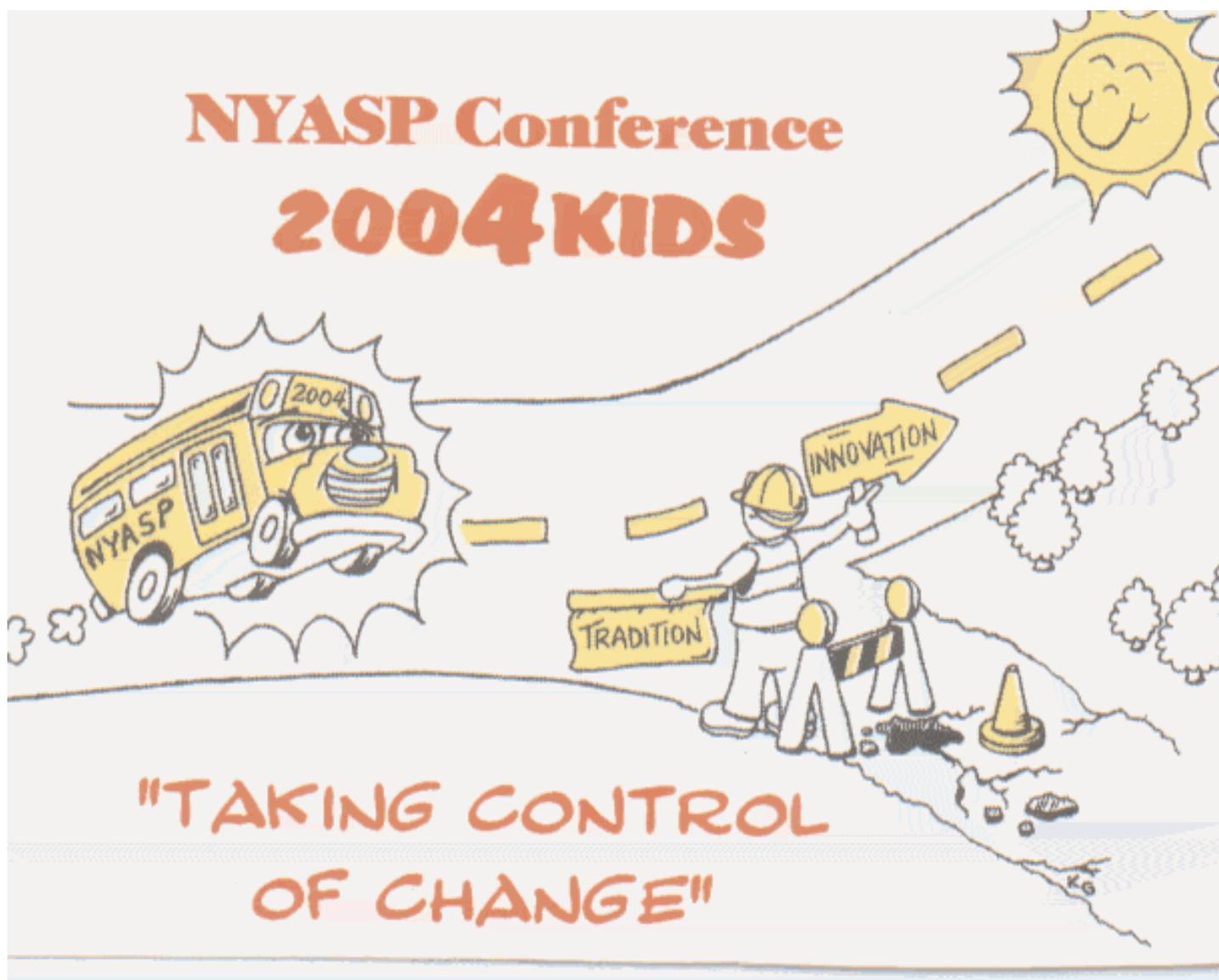
Case Study, *Children and School*. vol. 23, no. 4, 233-235. Welch, M. (1999). The Decide Strategy for Decision Making and Problem Solving: A Workshop Template for Preparing

Professionals for Educational Partnerships. *Journal of Educational and Psychological Consultation*, vol. 10, no. 4, 363-376. Ψ

Ned L. Engel, Ed.D., Ph.D., ABPP is a psychologist in private practice. He can be reached at nedengel@bestweb.net. Jenelle Bellinger, Keira Cox, Sherrie Hauenstein, Matt Lingle & AnnMarie Robinson were his graduate students at Niagara University.

Shuffle Off to Buffalo

October 14 - 16



Free CD of conference presentations to every registered participant!
Chinese auction for dinners, professional tools, hotel gift certificates, and more!

Featured Speakers

Roland Good – "Changing the World through an Outcomes Driven Model" and DIBELS Big Ideas

Carolyn Magyar – "Autism: Where we've been, where we are, and where we are going"

Jim Wright – Effective intervention strategies. Jim is sometimes known as the "intervention central.org guy"

Dr. Randy Kamphaus – "Making the Case for Well-Child Behavioral Health Care in Schools" and a presentation on the BASC

Bruce Goldstein, Esq. – "Updates on Special Education Law"

Although I am the newly elected delegate to NASP and just recently attended the first Delegate Assembly meeting, I have been involved with the NASP leadership for the last three years as a member of the NASP Government and Professional Relations Committee. As such, I will briefly report on the key issues and items that are in the limelight on both the general NASP front and the legislative front.

On the general front, I am excited to announce that the 2007 NASP convention will be held in New York City!! The last time that the NASP convention was in NY was 1978, and I remember attending as a graduate student at NYU. For those of you who have never attended a NASP convention, mark your calendars NOW for March 27–31, 2007. NASP conventions always provide an incredible wealth of information about state of the art research and practices in the fields of education and psychology. As the date gets closer, there will be more information about opportunities for NY residents to help with aspects of the convention in exchange for free or reduced admission fees. I will keep you posted through this column.

Another professional development opportunity that will be happening this coming summer is the NASP/AHI summer institute in Atlantic City from August 9-11. To obtain specific information about this training, go to the AHI website: www.ahi-online.com and click the hyperlink for “school psychologists”.

Another significant general issue is the projected (and real in some locations already) shortage of school psychologists throughout the country and what NASP can do to deal with this problem. One strategy that NASP is working on is the development of a joint APA/NASP statement on the concept of respecialization. There will be more to follow on this in future columns.

On the legislative front, the reauthorization of IDEA and along with it, the standards for identification of learning disabilities are still up in the air since Congress has not yet passed the modified legislation. What is known is that the portion of IDEA dealing with the identification of a learning disability will make the use of a “severe discrepancy” model optional and will include the option of using a “response to intervention” procedure. For more information about this, go to the “advocacy” section of the NASP website (www.nasponline.org) and follow the links to “IDEA information”.

I will be attending the summer Delegate Assembly in July and will report on any new happenings in a future newsletter. Ψ

President’s Message

continued from p. 2

ness and disorder to one of public health.

Carlton, M. P., & Winsler, A. (1999). School readiness: The need for a paradigm shift? *School Psychology Review, 28*, 338-352.

Hosp, J. L., & Reschly, D. J. (2002). Regional differences in school psychology practice. *School Psychology Review, 31*, 11-29.

Lennon, J. E., & Slesinski, C. (1999). Early intervention in reading: Results of a screening and Intervention program for kindergarten students.

Thomas, A. (2000). School psychology 2000: What is average? *Communique, 28* (8), 34.

Wrobel, G., & Krieg, F. J. (2000). Health care and school psychology: Building the bridges. *Communique, 28* (7).

Ψ

TSA2

continued from p. 7

References

Dumont, R., Willis, J., and McBride, G. (2001). Yes, Virginia, there is a severe discrepancy clause, but is it too much ado about something? *The School Psychologist, Winter*, 1-15.

Dumont & Farr (1997). *Severe discrepancy determination using normal curve equivalents*. Information presented at NYASP annual conference.

Evans, L.D. (1990). A conceptual overview of the regression discrepancy model for evaluating severe discrepancy between IQ and achievement scores. *Journal of Learning Disabilities, 23*, 406-412.

Reynolds, C.R. (1985). Critical measurement issues in learning disabilities. *Journal of Special Education, 18*, 451-476.

Wright, J (1997). *Best practices in calculating severe discrepancies between expected and actual academic achievement scores: A step by step tutorial*. InterventionCentral.org web site. <http://www.interventioncentral.org/htmldocs/tools/tsa/tsamanual/testExpl/testexpl.shtml>

Wright, J (2002). Keeping Score: Questions and Answers about Online Discrepancy Analysis. *New York School Psychologist, 21*(3) 13-14. Ψ

evaluations. This is a new era where we must reevaluate individual differences in learning and tailor the profile of individual differences to instructional strategies. We need to take it a step further and teach teachers how to teach, based upon the instructional strategies that we are assessing. Cognitive Ability tests which are theoretically based and psychometrically sound should be included in the toolbox of every school psychologist. There should be tests for memory and learning, to follow up on kids if they do not do well on that initial psycho-educational evaluation. And lastly there should be supplemental measures for executive function and visual-motor processing. Trainers can help you learn about which assessment techniques are needed and help you purchase instruments that meet those needs.

Dr. Miller stated that the goal of his NASP presidency is to influence legislative change. He is focused on IDEA reauthorization and the bill for loan forgiveness for school psychologists. He would also like to see our profession use technology efficiently. Considering the expanse of our country, it is expensive and time consuming for people to connect even at a state level. Use of technologies like teleconferencing, video conferencing, emails, etc. will make interactions cost effective and thereby popular. Another one of his goals is to recruit minorities, by reaching out to professionals in major metropolitan areas. He is interested in understanding why people do not join professional associations. He wonders if people feel alienated and feel as if their voice is not been heard. It is his purpose to break down these barriers to get people involved by bringing NASP to them.

What frustrates him the most are some of the ways in which students or practitioners are trained. As opposed to a passive model, he would prefer a competency based, CEU type of module. After you go to a basic workshop, you come back six months later with actual protocols of tests that you have administered. Then you discuss how to clinically interpret your results, with some real life examples. There is a need for on-going supervision and interpretive types of workshops, which our field lacks. Secondly, he advises students to strengthen their knowledge of the biological basis of behavior. Lastly he cautions against assumptions that completion of a specialist level of training, is the end of one's learning. For a school psychologist, learning is a life long quest. Ψ

Slides to Dr. Miller's keynote address as well as the workshop may be accessed online at the following URLs:

<http://homepage.mac.com/danmiller1/web/biostatment.html>

<http://homepage.mac.com/danmiller1/web/keynote.pdf>

Final Regulations, Guidelines, and Procedures Can Be Influenced

Although the requirement for a comprehensive evaluation is clearly outlined in both the House and Senate bills, AASP Fellows are concerned that the need for a comprehensive assessment may be eclipsed by any forthcoming procedural guidance suggesting a response-to-intervention model as an alternative. We believe that a sole reliance on the response-to-intervention model will hinder the effective application of a comprehensive, scientifically sound approach to identifying individuals with disabilities.

The final federal regulations, state guidelines, and school district procedures will have the greatest impact on the identification, assessment, eligibility, and provision of services for students with LD. School psychologists should act to influence these regulations, guidelines, and procedures with a strong statement reinforcing the necessity for a comprehensive evaluation for LD. Fellows of the AASP believe that it is important that the need for a comprehensive evaluation not be diminished in any attempt to redesign the process for determining LD eligibility. We urge school psychologists to become active at the federal, state, and district policy-making level to influence the forthcoming regulations, guidelines, and provisions for services for students with LD.

February 21, 2004

American Academy of School Psychology Ad Hoc Committee on Comprehensive Evaluation for Learning Disabilities

Fredrick A. Schrank, PhD, ABPP Olympia, WA

Irna L. Wolf, PhD, ABPP Scottsdale, AZ

Rosemary Flanagan, PhD, ABPP Rockville Centre, NY

Cecil R. Reynolds, PhD, ABPN, ABPP College Station, TX

Linda C. Caterino, PhD, ABPP Phoenix, AZ

Irwin A. Hyman, EdD, ABPP Philadelphia, PA

Jeffrey A. Miller, PhD, ABPP Pittsburgh, PA

Mark E. Swerdlik, PhD, NCSP, ABPP Normal, IL Ψ

CHAPTER REPS



Chapter representatives are elected officials that, with the executive committee, comprise the voting members of the NYASP board. Chapter reps serve for a two-year term and attend three to four meetings per year. Alternates for each chapter are selected by the chapter representative and appointed by the president. They attend meetings and arrange chapter functions when the elected representative is not available. Chapter reps are encouraged to hold regional meetings to forward the practice of school psychology.

Any member who is interested in service as a chapter representative should contact

Robin Raphael, President-Elect
 robinmr@att.net
 85 Foxcroft Ln.
 Williamsville NY 14221
 716-632-1755 h
 716-250-1457 w

for information and assistance. Ψ

A Jefferson, Lewis, & St. Lawrence
 EBAN SHOR • rivershor@yahoo.com
 1 Pt Comfort Rd, Morristown NY 13664
 315-375-8628 h

(A Alternate OPEN)

B Clinton, Essex, & Franklin
 MARIAN DESNYDER • desnyderm@westelcom.com
 27 Trafalgar Dr, Plattsburg, NY 12901
 518-562-0875 h / 518-565-5800x5734 w

Alt: LACY REZEK • preshrink2@yahoo.com
 1304 Pine St, Saranac Lake NY 12983
 518-891-2548 h / 518-359-7518 x108 w

C Erie, Genessee, Niagara, Orleans, & Wyoming
 MARK MECCA • mmecca@yahoo.com
 24A Foxberry Dr S, Getzville NY 14086
 716-689-7857 h / 716-937-9116 x4237 w

Alt: RUTH STEEGMANN • rsteeeg@adelphia.net
 5218 Pendale Ct, N Tonawanda NY 14120
 716-694-0719 h / 716-645-2484 x1063 w

D Monroe, Ontario, Seneca, & Wayne
 BETH CURTIS • beth.curtis@greece.k12.ny.us
 16 Carter Dr, Hilton NY 14468
 585-392-0384 h / 585-225-3030 w

Alt: ANNA HOIER • ahoier@earthlink.net
 4828 Lakeville Rd, PO Box 356
 Geneseo NY 14454
 585-243-9341 h / 585-243-2394 w

E Cayuga, Cortland, Madison, Oneida, Onondaga, & Oswego
 SUSAN MARKEL • smarkel1@twcny.it.com
 190 Robineau Rd, Syracuse NY 13207
 315-422-3585 h / 315-488-5422 w

Alt: MARY GORTON

F Fulton, Hamilton, Herkimer, Montgomery, Saratoga, Warren, & Washington
 GINNY LAZZARA • glazzara@nycap.it.com

G Allegany, Cattaraugus, & Chautauqua
 SHARON DANNA • sdanna@frkl.wnyric.org
 5225 Oakridge Dr, Hamburg NY 14075
 716-646-6536 h / 716-676-8000 x2106 w

Alt: KEVIN EAGAN
 6066 Somerville Valley Rd, Ellicottville NY 14731
 716-699-5381 h / 716-699-2318 w

H Chemung, Livingston, Schuyler, Steuben, & Yates
 TIM INGALLS • tingalls@hornell.wnyric.org
 6565 Beecher Dr, Hornell NY 14843
 607-324-6004 h / 607-324-3703 w

AND NANCY FOREMAN • nforeman@hornell.wnyric.org
 113 Genesee St, Hornell NY 14843
 607-324-7834 h / 607-324-3703 w

“Chapter representatives serve to communicate the needs and interests of their chapter members. . .

. . . and to advocate best practices strategies in their geographical region.”

(NYASP Operations Handbook, 1996)

I Broome, Chenango, Delaware, Otsego, Tioga, & Tompkins

MAGGIE NUGENT • nugent_margaret@hotmail.com
809 Elliot St, Endicott NY 13760-2101
607-748-6232 h / 607-648-7589 w

Alt: LINDA LOGALLO • llogallo@stny.rr.com
8 Whiting Way, Conklin, NY 13748
607-775-1634 h / 607-655-8247 w

J Albany, Columbia, Schenectady, Schoharie, & Rensselaer

AUDREY DOUGLAS • DouglasA@greenville.k12.ny.us
844 Mercer St, Albany NY 12208
518-482-8734 h / 518-966-5070 x322 w

AND KIRSTEN EIDLE-BARKMAN
eidlebarkmank@cs.com
20 Fairlawn Ave, Albany NY 12203
518-453-1243 h / 518-869-0293 w

K Dutchess, Greene, Orange, Sullivan, & Ulster

JOHN PISACANO • johnpsyc@optonline.net
826 Oak Ridge Rd, Ellenville, NY 12428
845-532-7374 h / 845-292-7900x131 w

Alt: JEFF FRIEDMAN • friedman@frontiernet.net
3 Janice Dr, Highland Mills, NY 10930
845-928-6180 h / 845-782-8139 w

L Putnam, Rockland, & Westchester

JEANNE GOLD • jdgold@att.net
21 Shaw Ln, Irvington NY 10533
914-591-8634 h / 914-248-2382 w

Alt: KRISTIN CONDON • klparker@optonline.net
70 Barker St #509, Mt. Kisko, NY 10549
914-241-8662 h

N1 Bronx

ELZBIETA BLACK • emilylizriverdale@yahoo.com
5414 Arlington Ave Apt J31, Bronx NY 10471
718-549-2714 h / 718-584-4324 w /
718-584-5807 w

(N1 Alternate OPEN)

N2 Manhattan

ROBERT EVANS • revansny@earthlink.net
620 W 171st St #3E, New York NY 10032
212-781-2758 h / 212-281-9625 w

(N2 Alternate OPEN)

N3 Queens

RICHARD GAMES • gamesrgg@aol.com
47-14 217 St Apt 2D, Bayside NY 11361
718-225-3231 h / 718-628-1083 x248 w

(N3 Alternate OPEN)

N4 Brooklyn

DAVID BORG • davidborg@yahoo.com
355 Cumberland St #3, Brooklyn, NY 11238
718-636-9539 h / 212-947-7111 x115 w

(N4 Alternate OPEN)

N5 Staten Island

DOMINICK BORTONE • Dombortone@aol.com
63-18 75th Pl, Middle Village NY 11379
718-894-5478 h / 718-720-8260 w

(N5 Alternate OPEN)

O Nassau

CHERYL MENDELSON • cherylm714@aol.com
59 Eastwood Ave, Deerpark, NY 11729
631-243-0349 h / 631-243-0349 w

(O Alternate OPEN)

P Suffolk

JOHN KELLY • jkelly@commack.k12.ny.us
65 Middle Rd, Blue Point, NY 11715
631-912-2122

(P Alternate OPEN)

Student Reps

STEPHANIE CHEZAR METZGER • schezar@aol.com
37 Woodmere Blvd #4E, Woodmere, NY 11598
516-569-8499 h

NYASP EXECUTIVE BOARD DIRECTORY

Executive Committee (2002-2004)

President

Nancy Evangelista
fevangel@alfred.edu
31 Pine Hill Dr, Alfred NY 14802
607-587-9533 h / 607-871-2649 w

Treasurer

Mistie Eltrich
DrMistie@aol.com
21 Roaring Brook Rd, Chappaqua, NY 10514
212-924-5960 x232 w / 212-831-3667 x29 w

Secretary

Mac Barnett
mmandj@yahoo.com
21 Sara Ct, Lewiston NY 14092-1153
716-754-2406 h / 716-807-3855 w

President-Elect

Robin Raphael
robinmr@att.net
85 Foxcroft Ln, Williamsville NY 14221
716-632-1755 h / 716-250-1457 w

Treasurer-Elect

Eban Shor
rivershor@yahoo.com
1 Pt Comfort Rd, Morristown NY 13664
315-375-8628 h

Newsletter Editor

Kelly Caci
kcaci@newburgh.k12.ny.us
kellyc@warwick.net
499 Lake Rd, New Windsor NY 12553
845-567-4815 h / 845-563-3700

Past-President

Tom Kulaga
kulaga@earthlink.net
383 Milton Tpke, Milton NY 12547-5246
845/795-5844 h / 845/236-5830 w

Fiscal Advisor

Marlene Anderson-Butler
marleneandersonbutler@yahoo.com
263 Potter Hill Rd, Saugerties NY 12477
845-383-3857 h / 845-339-8722

NASP Delegate

Lynne Thies
lynthies@juno.com
41 Shore Park Rd, Great Neck NY 11023
516-466-5477 h / 516-379-3394 w

Committee Chairpersons

Awards

Judy Harwood
jhar2@aol.com
24 Parkview Ct, Lancaster NY 14086
716-684-1097 h

Children's Issues

John Pisacano
Chapter K Rep

Conference 2004

Audrey Douglas
Chapter J Rep

Kirsten Eidle-Barkman

Chapter J Rep

Conference 2004

Sharon Danna
Chapter G Rep

Mark Mecca

Chapter C Rep

Job Information Network

Mac Barnett
Secretary

Continuing Professional Development

Kathy Peterson
kpeterson@shs.k12.ny.us
299 S Grove St, East Aurora NY 14052
716-652-9547 h / 716-250-1529 w

Ethics & Professional Practices

Merryl Bushansky
spmerryl@msn.com
3530 Henry Hudson Pkwy 8A
Riverdale NY 10463
718-548-2366 h / 914-576-4415 W

Dominick Bortone

Chapter N5 Rep

Legislative

Lynne Thies
lynthies@juno.com
41 Shore Park Rd, Great Neck NY 11023
516-466-5477 h / 516-379-3394 w

John Kelly

Chapter P Rep

Listserve

Kelly Caci
Newsletter Editor

John Kelly

Chapter P Rep

Membership

Dorothy Klink
dkncsp@hotmail.com
42 Vita Ave, Cheektowaga NY 14227
716-681-5628 h / 716-209-6314 w

Membership Recruitment

Nancy Foreman
Chapter H Rep

Susan Markel

Chapter E Rep

Multicultural/Diversity Issues

Annette Lopez-Culver
aopezculv@aol.com
309 Ridgeview Rd, Kerhonkson, NY 12446
845-626-3120 h / 845-482-5936 w

Kimya Ligon

keem4034@aol.com
139 Woodlawn Ave, Albany, NY 12208
518-489-4247

Early Childhood

Lacy Rezek
Chapter B Alt

Public Relations

Susan Hildebrandt
shildebr@nycap.rr.com
23 Sierra St, Glens Falls NY 12801
518-761-0703 h

Publications

Ruth Steegmann
Chapter C Alt

Research

Ned Engel
nedengel@bestweb.net
171 Highland Rd, Cold Spring NY 10516
845-265-2795 h / 914-941-8301 x316 w

Web Site

Tom Kulaga
Past-President

Liaisons & Affiliates

Archivist

Patricia Collins-Martin
pcm07@hotmail.com
6 Stanford Pl, Binghamton NY 13905
607-770-1995 h / 607-786-8271 w

ISPA Liaison

Maggie Nugent
Chapter I Rep

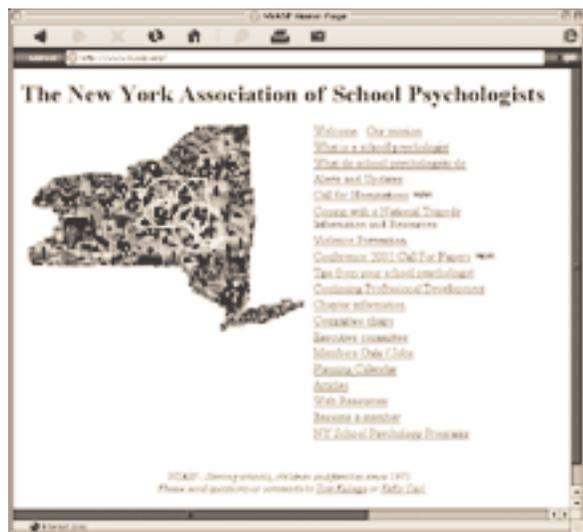
NYASP to NYSCEA

Susan Hildebrandt
Public Relations

SPECNYS to NYASP

Nancy Evangelista
President

WE'RE ON THE WEB!



www.nyasp.org

Check It Out

NEWSLETTER STAFF

Editor Kelly Caci
kcaci@newburgh.k12.ny.us

Review Editor Mark Mecca

Publications Chair Ruth Steegmann

Staff	Ned Engel	Peter Faustino
	Jeff Friedman	Tom Kulaga
	Kristin Condon	Steve Rappleyea
	Valerie Schott	

New York School Psychologist is published four times per year by the New York Association of School Psychologists for its members. Views expressed in the magazine do not necessarily reflect the position of NYASP's Executive Board. **Editorial policy:** All articles and reports of factual information may be edited to conform to space and format specifications and to improve clarity, with permission of writers. Expressions of opinion as in editorials and letters to the editor may be edited only with the writer's consent. All writers will be given credit via byline. Material used with permission from other sources will identify and credit the source. **Submission guidelines:** Preferred document size is approximately 750 words (review) or 1500 words (article). Submissions are accepted via email attachment or on 3 1/2" disk with revisions and corrections already made. Photos, cartoons, and drawings should be submitted as a .tiff file when possible. We will make every attempt to return hard copy submissions of art and photography.

REPRINT AUTHORIZATION: Editors of state school psychology association newsletters, NASP publications and other psychology organization newsletters are authorized to reproduce only uncopied articles in the NYASP newsletter provided the author and newsletter are credited. State editors please note: If you modify or condense a reprinted article, please note that to your readers. Permission to reprint copyrighted articles must be obtained directly from the copyright holder.

New York SCHOOL PSYCHOLOGIST

NEW YORK ASSOCIATION OF
SCHOOL PSYCHOLOGISTS
PO Box 178
Hornell, NY 14843

Non-Profit Organization
US Postage
PAID
Newburgh, NY 12550
Permit No 8604