

R E P O R T R E S U M E S

ED 011 720

EC 000 181

SPECIAL EDUCATION PROGRAMS. SPECIAL REPORT.
MONTGOMERY COUNTY PUBLIC SCHOOLS, ROCKVILLE, MD.

EDRS PRICE MF-\$0.09 HC-\$1.48 37P.

PUB DATE SEP 63

DESCRIPTORS- *SPECIAL EDUCATION, *PROGRAM GUIDES, *PHYSICAL FACILITIES, *BUILDING DESIGN, *POPULATION DISTRIBUTION, HOMEBOUND CHILDREN, HOSPITALIZED CHILDREN, STATE AID, PHYSICALLY HANDICAPPED, SPEECH HANDICAPPED, VISUALLY HANDICAPPED, AURALLY HANDICAPPED, TRAINABLE MENTALLY HANDICAPPED, EDUCABLE MENTALLY HANDICAPPED, LEARNING DIFFICULTIES, MONTGOMERY COUNTY, ROCKVILLE

PROGRAMS FOR HANDICAPPED CHILDREN AND THE NEED FOR FACILITIES ARE OUTLINED. CHARTS AND MAPS PRESENT COUNTY GEOGRAPHIC DISTRIBUTION FOR EACH HANDICAP. SPACE AND DESIGN RECOMMENDATIONS FOR PROJECTED FACILITIES AND MODIFICATION OF EXISTING PHYSICAL FACILITIES ARE INCLUDED. (MY)

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE
PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS
STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION
POSITION OR POLICY.

Special Report

SPECIAL EDUCATION PROGRAMS

September 1963

Montgomery County Public Schools
Rockville, Maryland
C. Taylor Whittier, Superintendent of Schools

ED011720

EC 000 181

Table of Contents

Introduction	1
Programs for Pupils Who Have Auditory Handicaps	13
Population Distribution	15
Programs for Pupils With Intellectual Disabilities	16
Trainable Program	16
Population Distribution	21
Educable Program	22
Population Distribution	24
Specific Learning Disabilities Program	25
Population Distribution	27
Programs for Pupils Who Are Crippled or Who Have Disabling Chronic Health Problems	28
Population Distribution	32
Summary	33

INTRODUCTION

Special education or the education of exceptional children has had a long history in the United States, both in public and private endeavors. It has been designed and operated under various titles, different philosophical bases, and different methods of classification. Since the end of World War II, the increase in the quality and quantity of public day school programs for exceptional children has been dramatic. To say that the growth is at a peak would imply that the growth will diminish. This is not the case. We continue to become more able to identify individual differences in physical, intellectual, emotional, and social development of children. More effort is being directed to the development of specialized teaching techniques for dealing with exceptionality. Pressures to provide sufficient day school programs continue to increase from parents and from interested community groups. Society is more aware of the problems of the handicapped. Also, parents have been most concerned that to have an educational program for their youngsters, it is very often necessary to place the youngsters out of the home and at a long distance so that regular visiting is almost impossible.

Leading authorities in all fields of work with the handicapped continue to push for the expansion of day school programs and the development of small residential facilities as opposed to the expansion of large residential facilities.

The purpose of this report is to bring together that basic information concerning the need for facilities for exceptional children in the Montgomery County Public Schools. Since the education of exceptional children is a diversified and complex area and since the programs in Montgomery County are varied, proposals for specific facilities are included in sections of this report for each handicapping condition.

A few years ago, our goal for facilities might have been a single large facility into which we could have put every youngster who was different. We have come to know that difference alone is not the reason for moving a youngster away from his learning peers. The primary goal of all of our programs for exceptional youngsters is habilitation or rehabilitation. We are advised by experts in many fields that habilitation or rehabilitation is facilitated if it is not necessary to remove the individual from the society into which he is going to have to be ultimately placed. Therefore, it has become apparent that if a youngster can be educated in a normal educational program, it should be done as close as possible to that of the normal program.

It is important for the purposes of this report to define the exceptional child about whom this report deals. An exceptional child is one who deviates intellectually, physically, socially, or emotionally from what is considered normal in growth and development so that to receive maximum benefit from his education, he must be placed in a special class program or receive supplementary instruction and services. It has become rather common throughout the United States to refer to the education of the exceptional child as special education. If one looks at various programs throughout the country, one would find that there are several different ways of accomplishing special education.

One method is using itinerant personnel. The youngsters are based in the regular classes and receive specialized help from traveling professional specialists. Special classes organized within the regular schools are appropriate for other pupils. Resource rooms are located in regular schools with the handicapped pupils brought to those schools. They are assigned to regular classes and receive additional intensive

help from a specialist. Another method is the special day school where the youngsters have their education at the special school. The residential school where the youngsters receive their total care and total education in that particular setting is another level of program. Somewhat similar to the residential school is the hospital school. The hospital schools are for those pupils who are so physically, mentally, or emotionally disabled that they must be based in a medically oriented environment rather than an educationally oriented environment.

In Montgomery County, there are itinerant programs, resource rooms, special classes, and special schools. We do not have within the county, under county direction, public residential or hospital schools of any type.

In 1958, a pamphlet was issued by the State Department of Education for the Superintendent's Committee on Curriculum and Supervision entitled, "Planning for Effective Learning, Children with Special Needs." The committee addressed itself to children needing special services because of rapid and superior mental development, mental retardation, deviation in physical growth or formation, or emotional disturbance and social maladjustment.

The philosophical introduction of the committee report read, "The public school system of Maryland is open to all the children of all the people. It follows, therefore, that it is the task of the school to provide not only for children who are average in growth and development but also for those who deviate from this general pattern mentally, physically, emotionally, and socially. Individual differences require different programs in order that each child may begin at his own level, progress at a rate commensurate with his capacity, and endeavor to reach his maximum total development. This growth toward maximum development is a goal common to all children. It can only be attained by each child in a way which recognizes his unique individuality as well as his membership in society.

"Democracy has a need and a place for all its members. It thrives in proportion to its awareness of and services for the abilities and handicaps of each of its members. It becomes imperative, then, for the good of children as well as for the welfare of the country, that schools provide every opportunity to develop children to the extent of their capacities.

"The philosophy of the parent, teacher, staff, and community is very important and basic to the recognition and acceptance of marked deviation in rate, level and expectancy of growth development among the members of the human family. It must be recognized first that each human is born into the human group and does not have to attain this entrance; he is born into the group because of all living creatures he has those characteristics and qualities which make him a member of the human family. In this way all humans--children and adults--are alike. Each member of the human family, however, is an individual in his own right, uniquely different from every other and with a body and a capacity and a personality through which he will make his individual contribution. It is important, therefore, that the educator (1) respect likenesses, while neither fearing nor worshipping differences and that he (2) provide for both phases in the growth and development of children."

All education is dynamic. Educational programs change to meet the expanding needs of an increasing population. They change to meet the diverse needs within that population. Study and research reveal new knowledge about the ways in which children grow and develop. Experimentation gives us a better understanding of effective means for deal-

ing with exceptionality in growth and development. A growing educational program makes use of the findings of study, research, and experimentation as it seeks to achieve the optimum development for every child in those knowledges, skills, and attitudes which our present culture deems necessary for successful living.

In some states, legislation for making provision for handicapped youngsters is mandatory. In Maryland, most of the legislation is permissive to a degree.

By action of the Senate of Maryland, Act #104, became effective June 1, 1962, as Article 77, Section 239 of the Public School Laws. The Act reads: "It shall be the duty of the local boards of education of the several counties and Baltimore City to furnish to their respective health departments any information they may receive as to handicapped children living within the boundaries of their school district. The local health departments shall recommend which such children need additional diagnostic or treatment services and shall refer such children to local boards of education for evaluation. The local boards of education shall be responsible for the identification of such handicapped children in need of special education services, and shall provide or arrange for appropriate educational facilities and services. Section 2. And be it further enacted. That this Act shall take effect June 1, 1962."

The words "handicapped children" are defined in Article 77, Section 244 of the Public School Laws, as follows: "All children between the ages of six and eighteen years, inclusive, who, because of mental or physical handicap, are incapable of receiving proper benefit from ordinary public school instruction and who, for their own or the social welfare, need special public school instruction or training."

The Standards, Rules and Regulations Governing the Provision of Special Programs for Handicapped Children of School Age Who Are Residents of Maryland which were first adopted by the Maryland State Board of Education on May 30, 1956, and later adopted as revised on May 27, 1959, follow:

I. General

- A. It is the responsibility of the board of education to plan an adequate educational program for each school-age handicapped child residing within its boundaries. This plan may involve public school attendance, home teaching, special aid, transportation, and/or institutionalization.
- B. Those responsible for educating handicapped children (who give promise of being employable) should plan with rehabilitation counselors at the appropriate time in order to develop a total program for each child.
- C. A handicapped child should be studied with a view to determining his primary disability. When such a determination has been made and when his needs are understood, an educational plan should be formulated.
- D. In studying handicapped children and in planning programs, the local department of education should have available the services of a person qualified to administer and interpret individual psychological tests.
- E. Plans for parent and teacher counseling should be included by the local department of education as part of each special facility developed for handicapped children.

II. Specific Programs

A. Home and Hospital Instruction

1. Any handicapped child of school age who is a resident of the State of Maryland is eligible for home and hospital instruction. The local superintendent of schools is responsible for determining the need and for providing the instruction.
2. Home instruction is an educational program for homebound children (those unable due to physical condition to attend school regularly). Any mentally retarded or emotionally disturbed child for whom there is no school program and whose prognosis indicates that he can benefit substantially from home instruction may be considered.
3. Applications for home instruction are to be signed either by a medical doctor, or if the disability is mental or emotional, by the appropriate specialist. This signature indicates that the child should not attend school because of his condition. Forms are provided by the State and are filed in the office of the local superintendent of schools.
4. Only those children who are likely to be out of school for an extended period of time and have therefore been withdrawn from school or have not been enrolled are to be considered for this instruction.
5. State aid is available in a special fund to pay the salary and travel expenses of home and hospital teachers. Effective as of July 1, 1956, the State salary reimbursement allowed is three dollars for each hour of instruction, whether there be one or more children taught. Each elementary pupil may receive three hours of instruction a week. The maximum spent on salary for teaching any one child for an entire year is thus \$324.00 and this amount will be less if the child is part of a group. Secondary pupils may receive up to six hours per week of instruction with the total annual cost per pupil limited to \$600.00. Travel reimbursement is allowed for the teacher.
6. In situations where group instruction is feasible and desirable, a combination of individual and group instruction is recommended.
7. If children require special transportation to a public school, the cost of such transportation may be charged to the general transportation fund.
8. Classroom-to-home telephone service may be utilized for children beginning at the third- or fourth-grade level and be included as part of the cost of home teaching. In every case, the county shall provide a teacher who visits the home periodically to assist the child.
9. Reimbursement of money spent in accordance with the foregoing regulations shall be requested from the State on forms provided by the Division of Administration and Finance.

B. Granting Financial Assistance to Handicapped Children for Whom There Is No Program in Their Own Schools.

1. Applications for State Aid are to be submitted to the State Department of Education by the local superintendent of schools.
2. Applications should be filed in the State office within thirty days after the beginning of the school term for which application is made.
3. Applications will be approved for educating children either within the State or outside the State only in schools approved by either the State Department of Education concerned, another appropriate State agency, or, in lieu of these, an evaluation by the Maryland State Department of Education.
4. Before an application can be considered, there should be evidence that the child has been enrolled or will be accepted in the school for which application is made.
5. Application for State Aid will be approved for educating a child only in an institution providing a program to care for the specific need which prevents the child from being successfully educated in public school.
6. Evidence must be shown that something more than a mere custodial program will be provided by the school for the child.
7. Approval is granted for only one year. Application is to be filed for each child every year.
8. Each initial application is to be supported by reports from medical doctors, psychologists, psychiatrists, and/or other specialists qualified to examine the child. Such reports are to contain factual information concerning the child's disability and an interpretation of the child's present condition and probable potential. Case histories, Binet interpretations, psychiatric studies, and specific medical data are necessary in most cases. These should be attached to the two-page application form. For renewals a summary of pertinent data is necessary.
9. Each application is to be submitted in duplicate with the signature of the local superintendent of schools. This signature certifies that there is no educational program appropriate for the child within the local public school system.
10. State Aid is granted only to those who have been bona fide residents of Maryland for at least one year.

C. Providing Facilities for Handicapped Children in Public Schools

1. Children with orthopedic disabilities and other weakening conditions.

- a. Any child who has a crippling condition which does not interfere with his attendance at a public school but which does make ambulation or customary travel difficult may upon the recommendation of a qualified physician be transported to classes in a public school by special means arranged through the local board of education, just as other school transportation is arranged.
- b. The local department of education may provide a special facility within the public school system for any child whose orthopedic or physical disability is so severe that he cannot benefit from attendance in the regular classroom.
 - (1) The local superintendent of schools shall consider a child for admission to such a special facility when a qualified physician states that the child's physical condition and readiness for group activity warrant such placement.
 - (2) Each case may be presented to an advisory group at the local level for advice concerning admission and retention. This advisory group shall consist of persons appointed by the local superintendent of schools such as: a psychiatrist, the school nurse, the local supervisor in charge of special services, and medical specialist such as a neurologist, and vocational rehabilitation counselor. Its duties shall be advisory to the superintendent.
 - (3) A class may be formed with one teacher for a minimum of seven children. Whenever a class numbers more than seven children, an additional teacher, therapist, or attendant may be employed; for every additional seven children thereafter one teacher or therapist (physical, occupational, or speech) may be employed.

2. Children with speech, vision, and hearing defects

- a. The program of speech therapy should be considered a part of the regular instructional program.
 - (1) Adequate diagnosis should be made for each child who is to receive therapy.
 - (2) The normal load of a speech therapist is from 70 to 100 children, the number depending upon:
 - (a) The severity of the disabilities
 - (b) The feasibility of group instruction
 - (c) The number of schools involved
 - (3) Each child should receive therapy for at least two periods of 20 to 30 minutes each week.
 - (4) Parent-teacher conference time should be allotted.

b. Programs for visually handicapped children include both special class organization and itinerant service.

(1) In areas where only one or two children have severe sight defects, special materials may be provided in the regular classroom to facilitate the learning process, an itinerant teacher being employed to serve from 10 to 20 partially-sighted children or 5 to 7 blind children.

(2) In areas where from 7 to 12 children with severe sight defects can be brought together, a teacher of visually handicapped may be employed in one school, these children reporting to the teacher for special help only.

(3) The blind child may be enrolled in the regular class provided that:

- (a) He has no other handicapping condition
- (b) No more than one such child is enrolled in any one class
- (c) A teacher of Braille is available

(4) Partially-sighted children should be enrolled in a regular classroom and, upon the recommendation of a qualified ophthalmologist, shall be eligible for special service.

c. A hearing program may be provided for children evidencing varying degrees of hearing loss as diagnosed by a qualified specialist.

(1) Whenever 7 children with little or no residual hearing are brought together in a school, a teacher who is qualified to work with such children should be provided.

(2) Whenever 7 or more children with moderate to severe hearing disability can be brought together, a qualified teacher should be provided.

(3) Children with mild to moderate hearing loss should be enrolled in the regular classroom. Wherever the special services of an itinerant speech and/or hearing therapist are needed, such should be provided.

3. Children with varying degrees of mental retardation

a. These children may be given a trial period in the regular school if the judgment of the parents and the school officials warrants. Adjustments may then be made on the basis of medical and/or psychological advice and in the light of school procedures and facilities.

b. Children who are commonly known as the educable mentally retarded should be cared for in the public school. In order to provide appropriate programs for these children, the school shall consider all factors listed below. Each case shall be decided individually.

- (1) Mental age of at least 4
- (2) Mental retardation below the lower limit of normal intelligence as obtained by a qualified examiner on an individual psychological examination (approximately 55-75), with limits flexible to meet individual cases
- (3) Evidence of retardation in social adjustment, performance, and achievement
- (4) A medical report regarding the physical status and general health of the child
- (5) A thorough qualitative or descriptive report on the behavior of the child in social and educational situations and of his personal relations with family, teacher, and other children
- (6) Objective results of any group tests of intelligence and achievement that are available.

This group of children may be cared for in a special class of approximately 10 to 20 children, the size of the class depending upon the nature and degree of the handicap and the chronological age range of the class. If there are not enough children to justify a class, a special program should be arranged for them in a regular classroom.

c. Whenever 7 or more children, who are classified as severely mentally retarded on the basis of an individual psychological examination (approximately 55 and below) and clinical findings, can be brought together, a special center may be organized.

- (1) If such children are able to participate in group activities with profit to themselves and without injury to the group
- (2) If such children are able to learn to care for their personal routines independently
- (3) If such children are sufficiently controlled emotionally to respond to a teacher-pupil class relationship
- (4) If such children have trainable motor skills
- (5) If the school system has facilities adequate for their educational needs

It is desirable that such special centers be composed of children able to function as a reasonably homogeneous group. The continued school attendance of any such child shall be dependent upon a consideration of (1) his status and needs and (2) available school facilities with at least an annual re-evaluation of his entire case. The final decision shall be the result of a conference including at least the teacher, principal, and supervisor and wherever possible a clinical psychologist.

- d. Any child who is severely mentally retarded who cannot attend a public school in his own area because no appropriate facility has been provided for him shall be considered for either home teaching, special State assistance, or institution care. In every case, an educational plan shall be developed and offered to the parents for their consideration.
4. Children with varying types of specific learning disorders
 - a. The local department of education may provide a special program within the public school system for any child whose specific learning disorder results in such impairment or dysfunction of the intellectual processes that he cannot benefit from the instructional program usually found appropriate for most children. Specific learning disorders include, for example, problems in reception, formulation, and expression of language; problems in visual perception and integration; and a specific reading disability such as strephosymbolia.
 - b. Wherever 7 or these children who have similar learning disorders can be found, a special class may be formed and a qualified teacher may be employed.

The Montgomery County program for exceptional children is multi-level. Special education programs are provided for handicapped pupils in special classes, in regular classes, or at home and in hospitals depending upon the severity of the handicap.

Classes for handicapped children (pupils) have been established for individuals whose limitations are so severe that they cannot function in or profit from a placement in a regular classroom. Placement in special classes is made when classroom achievement, individual psychological studies and medical diagnoses indicate the need.

The classifications of disabilities for which Montgomery County has classes are:

1. Severe auditory handicap
2. Specific learning disability
3. Physical handicap
4. Mental retardation
 - a. Moderate (educable mental handicap)
 - b. Severe (trainable mental deficiency)

Due to the nature and multiplicity of the handicaps, class size is limited. Dependent on the make-up of the group, the chronological age, the age span, the achievement levels, and the complexity of the handicap(s), classes range from seven to twenty pupils. In an effort to obtain a degree of homogeneity and because special classes are scattered throughout Montgomery County, pupils are transported by special buses to schools in which appropriate classes are located.

Exceptional children must first be recognized as individuals--individuals who possess the same basic needs and drives as other individuals. It follows then, that the general educational goals are the same, namely, the objectives of:

1. Self-realization
2. Human relationship
3. Economic efficiency
4. Civic responsibility

These general educational goals must then be translated in terms of the individual abilities and limitations of handicapped children.

When possible, the handicapped pupil is placed in the regular classroom and provided with appropriate specialized services to minimize the total effect of the handicap, thus allowing him to function in the "normal" environment. Three of these services are part of the special education program.

These special education services are for pupils who have a:

1. Moderate auditory handicap
2. Speech and/or mild hearing handicap
3. Visual handicap

When necessary, pupils are instructed at home or in the hospital. The primary purpose of this program is to minimize the effects of absence from school. Any handicapped child of school age who is a resident of the State of Maryland and confined within the limits of Montgomery County is eligible for this service through the Montgomery County Public Schools.

Considerable criticism has been laid at the door of the public schools for not having provided a long range program for meeting the needs of exceptional pupils. Before casting the projections of a long range program, it would seem wise to take a backward glance at the development of the program over the last few years. In a report of the committee appointed by the Maryland State Board of Education entitled, "Special Education of Atypical Children in Maryland, 1956," it reads pertaining to Montgomery County as follows: "Montgomery County employs a supervisor of special education who works cooperatively with the Department of Pupil Personnel, three psychologists, one hearing consultant, three speech therapists, one sight consultant, one occupational therapist, and one physical therapist work in testing, planning with teachers and principals and giving corrective help wherever needed. These services in 1954-55 consisted of 14 special classes for 187 mentally retarded children on the elementary level, 2 special classes for 30 mentally retarded children on the high school level, 1 special class for 9 emotionally disturbed children on the high school level, 2 special classes for 26 physically handicapped children, home instruction under the direction of a full time home teacher for 77 children, speech therapy for 244 children, and screening all children in grades two and three for hearing defects."

Tables showing the (1) geographic distribution of pupils enrolled in special class programs during the school year 1962-63, (2) program distribution of pupils enrolled in special class programs since the school year 1959-60, and (3) comparison of annual increase in the total public school enrollment and the special class enrollment since the school year 1959-60 are on the following pages.

Geographic Distribution of Pupils Enrolled
In Special Class Programs, 1962-63

	<u>Educable Ment. Ret.</u>	<u>Trainable Ment. Ret.</u>	<u>Specific Lrng. Disab.</u>	<u>Crippled & Health Prob.</u>	<u>Auditory Hand.</u>	<u>Total</u>
Western Suburban	33	30	46	7	3	119
Kensington-Wheaton	63	30	61	14	9	177
Eastern Suburban	66	31	83	18	10	208
Rockville	41	16	33	9	2	101
Up-County	<u>249</u>	<u>35</u>	<u>40</u>	<u>7</u>	<u>1</u>	<u>332</u>
	452	142	263	55	25	937

Program Distribution of Pupils Enrolled
In Special Class Programs

<u>Programs</u>	<u>59-60</u>	<u>60-61</u>	<u>Years 61-62</u>	<u>62-63</u>	<u>63-64*</u>
Intellectual Disability					
Educable Mentally Retarded	302	405	425	452	470
Trainable Mentally Retarded	59	81	103	142	155
Specific Learning Disability	141	198	208	263	300
Physical Disability					
Crippled and Health Problems	50	48	71	55	63
Auditorily Handicapped	19	21	36	25	23
Emotional Disability					
Emotionally Handicapped	-	-	-	-	15
Total	571	753	843	937	1026

*Estimated

Comparison of Annual Increase in Enrollment Since 1959 Between the Total Montgomery County Public School Enrollment and the Special Class Enrollment

	59-60		60-61		61-62		62-63		63-64	
Total Public School Enrollment	74,523	///	80,557	8.1%	86,177	7.0%	92,258	7.1%	98,040	6.3%
Special Class Enrollment	571	///	753	31.9%	843	12.0%	937	11.2%	1,026	9.5%
Percentage of Total Enrollment	0.77%		0.93%		0.98%		1.02%		1.05%	

As has been stated, there are numerous educational plans for providing for exceptional children. These have been described in this report. Some are older than others but each has its place and function in a total program for meeting the needs of exceptional children. These plans include:

1. The residential or boarding school
2. The special class
3. The special school in a local community
4. The resource room
5. The itinerant teacher or consultant
6. Home and hospital teaching

Each of these types of programs is essential to a comprehensive plan for the education of handicapped children and youth. It is not a matter of one being right and the other wrong; each has its advantages and is appropriate for some youngsters with certain kinds and degrees of disabilities. The remaining pages of this report will include the staff suggestions for providing facilities for the exceptional pupils of the Montgomery County Public Schools.

PROGRAMS FOR PUPILS WHO HAVE AUDITORY HANDICAPS

Pupils who have auditory handicaps have a disability in the hearing process. An auditory handicap may be based in the end organ so that there is disability in the reception of auditory stimuli, or in the nerve fibre so that there is a disability in the transmission of the sound from the end organ to the central system. Also there are pupils whose auditory disability is in the integration of sound in the central nervous system. While it is sometimes difficult to diagnose, it is generally possible to distinguish in which area an individual is disabled. However, some have a combination of areas of auditory disability.

Moderate Auditory Handicap

Pupils who have a moderate hearing loss in the end organ may be compensated by a hearing aid. Most of these youngsters, we have learned, may be served educationally in a regular classroom if they receive the intensive support of a therapist. The important factor is that the youngster should be placed in an hearing educational environment with other speaking youngsters. In the Montgomery County Public Schools, there is one resource room program at Glenmont Elementary serving a total of ten youngsters. It is quite common for a hearing disabled child to have a concomitant speech defect, therefore, the school based therapist who works with the youngsters provides speech therapy and auditory training. Also, in an hearing environment such as the regular classroom much of the learning stimuli are auditory in nature. Therefore, it is often necessary for the specialized teacher to provide tutorial service particularly in the skill subjects of reading and arithmetic. Since these youngsters are seen individually or in very small groups, it is only necessary to have a small room available for this specialized teacher. In the situation we are currently operating, we are using a conference room for this instructional activity. Since there is not a significant number of pupils waiting for placement in this program and since a room other than a classroom may be used, such as a conference room, it is suggested that, at this time, no additional special facilities be provided for this program.

Severe Auditory Handicaps

Pupils who have severe auditory handicaps usually have a profound end organ loss, a nerve deafness, or a severe central nervous system involvement that is sometimes referred to as childhood aphasia. Pupils who have severe auditory handicaps are placed in special classes primarily because they have little or no speech. The cause for this lack of communication is usually due to deficiencies of the hearing mechanism. There are two categories, however, which do not exactly fit this description. One category includes individuals who are unable to use or understand very much speech but whose disabilities cannot be accounted for by hearing mechanism disorders, limited intelligence, or emotional problems. It is assumed that there is some central nervous dysfunction which interferes with the language processes. Another category includes individuals for whom there is no clear medical diagnosis. It has not been determined whether they are profoundly hard-of-hearing or if there is some disorder of the neural mechanism connected with the language functions.

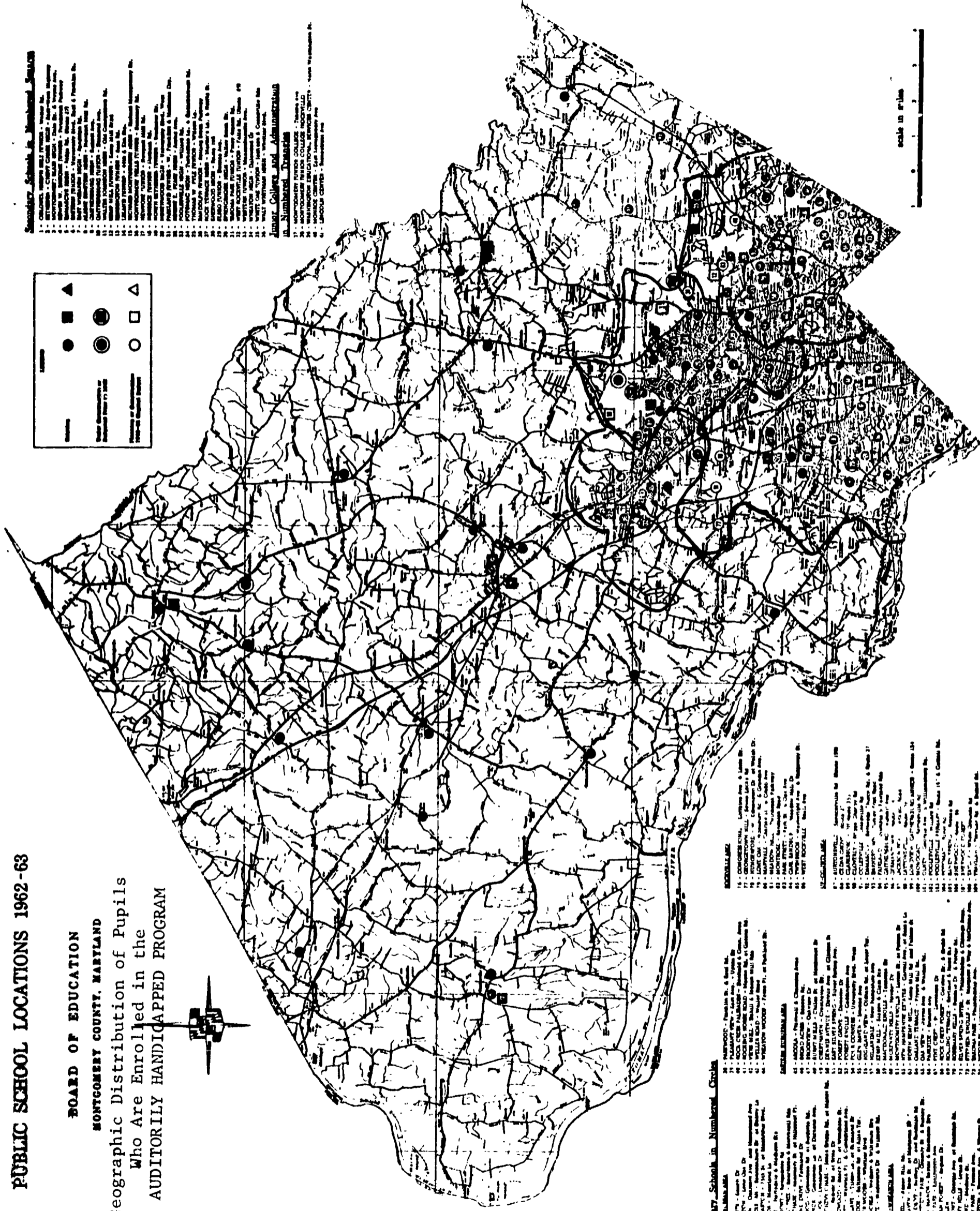
The special classes for the severely auditorily handicapped are organized for youngsters in the Montgomery County Public Schools who have the two conditions just described. These pupils are served in three classes at one elementary school. The classes in operation should continue to be based at a regular school so that, depending upon the youngster's individual competencies, gradual integration in regular classroom programs is effected when indicated. However, when continued special class placement is necessary, some pupils will be promoted to a secondary class at junior high level. The primary goal of this program is for the pupils to use and understand speech to the

limits of their abilities. For some pupils this means that they will eventually enter the regular class program. Others may enter a different type of special class such as those provided for pupils who have specific learning disabilities. Other pupils may be directed toward a residential program such as is offered at the Maryland School for the Deaf in Frederick. The staff suggests that our efforts connected with this program for pupils with severe auditory handicaps be directed toward improved diagnosis, curriculum development, and evaluation of program rather than expansion at this time. Therefore, no additional facilities are needed now.

It should be kept in mind that during 1961-62 there were 26 pupils from Montgomery County enrolled at Frederick; during 1962-63, twenty-eight pupils were enrolled.

PUBLIC SCHOOL LOCATIONS 1962-63

BOARD OF EDUCATION
MONTGOMERY COUNTY, MARYLAND
Geographic Distribution of Pupils
Who Are Enrolled in the
AUDITORIALLY HANDICAPPED PROGRAM



- Secondary Schools in Numbered Circles**
1. CROFTON
 2. CROFTON
 3. CROFTON
 4. CROFTON
 5. CROFTON
 6. CROFTON
 7. CROFTON
 8. CROFTON
 9. CROFTON
 10. CROFTON
 11. CROFTON
 12. CROFTON
 13. CROFTON
 14. CROFTON
 15. CROFTON
 16. CROFTON
 17. CROFTON
 18. CROFTON
 19. CROFTON
 20. CROFTON
 21. CROFTON
 22. CROFTON
 23. CROFTON
 24. CROFTON
 25. CROFTON
 26. CROFTON
 27. CROFTON
 28. CROFTON
 29. CROFTON
 30. CROFTON
 31. CROFTON
 32. CROFTON
 33. CROFTON
 34. CROFTON
 35. CROFTON
 36. CROFTON
 37. CROFTON
 38. CROFTON
 39. CROFTON
 40. CROFTON
 41. CROFTON
 42. CROFTON
 43. CROFTON
 44. CROFTON
 45. CROFTON
 46. CROFTON
 47. CROFTON
 48. CROFTON
 49. CROFTON
 50. CROFTON
 51. CROFTON
 52. CROFTON
 53. CROFTON
 54. CROFTON
 55. CROFTON
 56. CROFTON
 57. CROFTON
 58. CROFTON
 59. CROFTON
 60. CROFTON
 61. CROFTON
 62. CROFTON
 63. CROFTON
 64. CROFTON
 65. CROFTON
 66. CROFTON
 67. CROFTON
 68. CROFTON
 69. CROFTON
 70. CROFTON
 71. CROFTON
 72. CROFTON
 73. CROFTON
 74. CROFTON
 75. CROFTON
 76. CROFTON
 77. CROFTON
 78. CROFTON
 79. CROFTON
 80. CROFTON
 81. CROFTON
 82. CROFTON
 83. CROFTON
 84. CROFTON
 85. CROFTON
 86. CROFTON
 87. CROFTON
 88. CROFTON
 89. CROFTON
 90. CROFTON
 91. CROFTON
 92. CROFTON
 93. CROFTON
 94. CROFTON
 95. CROFTON
 96. CROFTON
 97. CROFTON
 98. CROFTON
 99. CROFTON
 100. CROFTON

Legend

- Public Schools in Numbered Circles
- Public Schools in Numbered Squares
- ▲ Public Schools in Numbered Triangles
- Public Schools in Numbered Rectangles

- Elementary Schools in Numbered Circles**
- WESTGATE/BRANDYBANK**
1. WESTGATE
 2. BRANDYBANK
 3. WESTGATE
 4. BRANDYBANK
 5. WESTGATE
 6. BRANDYBANK
 7. WESTGATE
 8. BRANDYBANK
 9. WESTGATE
 10. BRANDYBANK
 11. WESTGATE
 12. BRANDYBANK
 13. WESTGATE
 14. BRANDYBANK
 15. WESTGATE
 16. BRANDYBANK
 17. WESTGATE
 18. BRANDYBANK
 19. WESTGATE
 20. BRANDYBANK
 21. WESTGATE
 22. BRANDYBANK
 23. WESTGATE
 24. BRANDYBANK
 25. WESTGATE
 26. BRANDYBANK
 27. WESTGATE
 28. BRANDYBANK
 29. WESTGATE
 30. BRANDYBANK
 31. WESTGATE
 32. BRANDYBANK
 33. WESTGATE
 34. BRANDYBANK
 35. WESTGATE
 36. BRANDYBANK
 37. WESTGATE
 38. BRANDYBANK
 39. WESTGATE
 40. BRANDYBANK
 41. WESTGATE
 42. BRANDYBANK
 43. WESTGATE
 44. BRANDYBANK
 45. WESTGATE
 46. BRANDYBANK
 47. WESTGATE
 48. BRANDYBANK
 49. WESTGATE
 50. BRANDYBANK
 51. WESTGATE
 52. BRANDYBANK
 53. WESTGATE
 54. BRANDYBANK
 55. WESTGATE
 56. BRANDYBANK
 57. WESTGATE
 58. BRANDYBANK
 59. WESTGATE
 60. BRANDYBANK
 61. WESTGATE
 62. BRANDYBANK
 63. WESTGATE
 64. BRANDYBANK
 65. WESTGATE
 66. BRANDYBANK
 67. WESTGATE
 68. BRANDYBANK
 69. WESTGATE
 70. BRANDYBANK
 71. WESTGATE
 72. BRANDYBANK
 73. WESTGATE
 74. BRANDYBANK
 75. WESTGATE
 76. BRANDYBANK
 77. WESTGATE
 78. BRANDYBANK
 79. WESTGATE
 80. BRANDYBANK
 81. WESTGATE
 82. BRANDYBANK
 83. WESTGATE
 84. BRANDYBANK
 85. WESTGATE
 86. BRANDYBANK
 87. WESTGATE
 88. BRANDYBANK
 89. WESTGATE
 90. BRANDYBANK
 91. WESTGATE
 92. BRANDYBANK
 93. WESTGATE
 94. BRANDYBANK
 95. WESTGATE
 96. BRANDYBANK
 97. WESTGATE
 98. BRANDYBANK
 99. WESTGATE
 100. BRANDYBANK
- FACETS/STURMANS AREA**
1. FACETS
 2. STURMANS AREA
 3. FACETS
 4. STURMANS AREA
 5. FACETS
 6. STURMANS AREA
 7. FACETS
 8. STURMANS AREA
 9. FACETS
 10. STURMANS AREA
 11. FACETS
 12. STURMANS AREA
 13. FACETS
 14. STURMANS AREA
 15. FACETS
 16. STURMANS AREA
 17. FACETS
 18. STURMANS AREA
 19. FACETS
 20. STURMANS AREA
 21. FACETS
 22. STURMANS AREA
 23. FACETS
 24. STURMANS AREA
 25. FACETS
 26. STURMANS AREA
 27. FACETS
 28. STURMANS AREA
 29. FACETS
 30. STURMANS AREA
 31. FACETS
 32. STURMANS AREA
 33. FACETS
 34. STURMANS AREA
 35. FACETS
 36. STURMANS AREA
 37. FACETS
 38. STURMANS AREA
 39. FACETS
 40. STURMANS AREA
 41. FACETS
 42. STURMANS AREA
 43. FACETS
 44. STURMANS AREA
 45. FACETS
 46. STURMANS AREA
 47. FACETS
 48. STURMANS AREA
 49. FACETS
 50. STURMANS AREA
 51. FACETS
 52. STURMANS AREA
 53. FACETS
 54. STURMANS AREA
 55. FACETS
 56. STURMANS AREA
 57. FACETS
 58. STURMANS AREA
 59. FACETS
 60. STURMANS AREA
 61. FACETS
 62. STURMANS AREA
 63. FACETS
 64. STURMANS AREA
 65. FACETS
 66. STURMANS AREA
 67. FACETS
 68. STURMANS AREA
 69. FACETS
 70. STURMANS AREA
 71. FACETS
 72. STURMANS AREA
 73. FACETS
 74. STURMANS AREA
 75. FACETS
 76. STURMANS AREA
 77. FACETS
 78. STURMANS AREA
 79. FACETS
 80. STURMANS AREA
 81. FACETS
 82. STURMANS AREA
 83. FACETS
 84. STURMANS AREA
 85. FACETS
 86. STURMANS AREA
 87. FACETS
 88. STURMANS AREA
 89. FACETS
 90. STURMANS AREA
 91. FACETS
 92. STURMANS AREA
 93. FACETS
 94. STURMANS AREA
 95. FACETS
 96. STURMANS AREA
 97. FACETS
 98. STURMANS AREA
 99. FACETS
 100. STURMANS AREA
- ROCKVILLE**
1. ROCKVILLE
 2. ROCKVILLE
 3. ROCKVILLE
 4. ROCKVILLE
 5. ROCKVILLE
 6. ROCKVILLE
 7. ROCKVILLE
 8. ROCKVILLE
 9. ROCKVILLE
 10. ROCKVILLE
 11. ROCKVILLE
 12. ROCKVILLE
 13. ROCKVILLE
 14. ROCKVILLE
 15. ROCKVILLE
 16. ROCKVILLE
 17. ROCKVILLE
 18. ROCKVILLE
 19. ROCKVILLE
 20. ROCKVILLE
 21. ROCKVILLE
 22. ROCKVILLE
 23. ROCKVILLE
 24. ROCKVILLE
 25. ROCKVILLE
 26. ROCKVILLE
 27. ROCKVILLE
 28. ROCKVILLE
 29. ROCKVILLE
 30. ROCKVILLE
 31. ROCKVILLE
 32. ROCKVILLE
 33. ROCKVILLE
 34. ROCKVILLE
 35. ROCKVILLE
 36. ROCKVILLE
 37. ROCKVILLE
 38. ROCKVILLE
 39. ROCKVILLE
 40. ROCKVILLE
 41. ROCKVILLE
 42. ROCKVILLE
 43. ROCKVILLE
 44. ROCKVILLE
 45. ROCKVILLE
 46. ROCKVILLE
 47. ROCKVILLE
 48. ROCKVILLE
 49. ROCKVILLE
 50. ROCKVILLE
 51. ROCKVILLE
 52. ROCKVILLE
 53. ROCKVILLE
 54. ROCKVILLE
 55. ROCKVILLE
 56. ROCKVILLE
 57. ROCKVILLE
 58. ROCKVILLE
 59. ROCKVILLE
 60. ROCKVILLE
 61. ROCKVILLE
 62. ROCKVILLE
 63. ROCKVILLE
 64. ROCKVILLE
 65. ROCKVILLE
 66. ROCKVILLE
 67. ROCKVILLE
 68. ROCKVILLE
 69. ROCKVILLE
 70. ROCKVILLE
 71. ROCKVILLE
 72. ROCKVILLE
 73. ROCKVILLE
 74. ROCKVILLE
 75. ROCKVILLE
 76. ROCKVILLE
 77. ROCKVILLE
 78. ROCKVILLE
 79. ROCKVILLE
 80. ROCKVILLE
 81. ROCKVILLE
 82. ROCKVILLE
 83. ROCKVILLE
 84. ROCKVILLE
 85. ROCKVILLE
 86. ROCKVILLE
 87. ROCKVILLE
 88. ROCKVILLE
 89. ROCKVILLE
 90. ROCKVILLE
 91. ROCKVILLE
 92. ROCKVILLE
 93. ROCKVILLE
 94. ROCKVILLE
 95. ROCKVILLE
 96. ROCKVILLE
 97. ROCKVILLE
 98. ROCKVILLE
 99. ROCKVILLE
 100. ROCKVILLE
- WHEELERSVILLE**
1. WHEELERSVILLE
 2. WHEELERSVILLE
 3. WHEELERSVILLE
 4. WHEELERSVILLE
 5. WHEELERSVILLE
 6. WHEELERSVILLE
 7. WHEELERSVILLE
 8. WHEELERSVILLE
 9. WHEELERSVILLE
 10. WHEELERSVILLE
 11. WHEELERSVILLE
 12. WHEELERSVILLE
 13. WHEELERSVILLE
 14. WHEELERSVILLE
 15. WHEELERSVILLE
 16. WHEELERSVILLE
 17. WHEELERSVILLE
 18. WHEELERSVILLE
 19. WHEELERSVILLE
 20. WHEELERSVILLE
 21. WHEELERSVILLE
 22. WHEELERSVILLE
 23. WHEELERSVILLE
 24. WHEELERSVILLE
 25. WHEELERSVILLE
 26. WHEELERSVILLE
 27. WHEELERSVILLE
 28. WHEELERSVILLE
 29. WHEELERSVILLE
 30. WHEELERSVILLE
 31. WHEELERSVILLE
 32. WHEELERSVILLE
 33. WHEELERSVILLE
 34. WHEELERSVILLE
 35. WHEELERSVILLE
 36. WHEELERSVILLE
 37. WHEELERSVILLE
 38. WHEELERSVILLE
 39. WHEELERSVILLE
 40. WHEELERSVILLE
 41. WHEELERSVILLE
 42. WHEELERSVILLE
 43. WHEELERSVILLE
 44. WHEELERSVILLE
 45. WHEELERSVILLE
 46. WHEELERSVILLE
 47. WHEELERSVILLE
 48. WHEELERSVILLE
 49. WHEELERSVILLE
 50. WHEELERSVILLE
 51. WHEELERSVILLE
 52. WHEELERSVILLE
 53. WHEELERSVILLE
 54. WHEELERSVILLE
 55. WHEELERSVILLE
 56. WHEELERSVILLE
 57. WHEELERSVILLE
 58. WHEELERSVILLE
 59. WHEELERSVILLE
 60. WHEELERSVILLE
 61. WHEELERSVILLE
 62. WHEELERSVILLE
 63. WHEELERSVILLE
 64. WHEELERSVILLE
 65. WHEELERSVILLE
 66. WHEELERSVILLE
 67. WHEELERSVILLE
 68. WHEELERSVILLE
 69. WHEELERSVILLE
 70. WHEELERSVILLE
 71. WHEELERSVILLE
 72. WHEELERSVILLE
 73. WHEELERSVILLE
 74. WHEELERSVILLE
 75. WHEELERSVILLE
 76. WHEELERSVILLE
 77. WHEELERSVILLE
 78. WHEELERSVILLE
 79. WHEELERSVILLE
 80. WHEELERSVILLE
 81. WHEELERSVILLE
 82. WHEELERSVILLE
 83. WHEELERSVILLE
 84. WHEELERSVILLE
 85. WHEELERSVILLE
 86. WHEELERSVILLE
 87. WHEELERSVILLE
 88. WHEELERSVILLE
 89. WHEELERSVILLE
 90. WHEELERSVILLE
 91. WHEELERSVILLE
 92. WHEELERSVILLE
 93. WHEELERSVILLE
 94. WHEELERSVILLE
 95. WHEELERSVILLE
 96. WHEELERSVILLE
 97. WHEELERSVILLE
 98. WHEELERSVILLE
 99. WHEELERSVILLE
 100. WHEELERSVILLE

PROGRAMS FOR PUPILS WITH INTELLECTUAL DISABILITIES

A. Trainable Program

A severely retarded child is one whose intellectual development is grossly defective or delayed. He may possess several severe learning disabilities. His intellectual quotient seldom exceeds fifty percent.

The intelligence quotient does not tell, however, the areas of intellectual development which are higher or which ones are lower. We must understand each functional task that the test or tests require, and know the way in which the child succeeded or failed the task. We must know the level at which each task was passed or failed. The school program begins then for each child at the level of his highest success in each function. The teacher must provide the experiences, the motivation, and the direction for his learning. The teacher must try to determine why the low areas are there, how the child learns, and how he progresses. The teachers of the trainable program try to provide developmental experiences at the level, the rate, and in the manner in which each child can use them. The severely retarded children develop ideas and learn how to express them. They learn about the things in their environment and how to use them. They learn to take care of their personal needs and how to ask for and use help when it is needed. They learn how to play, to sing, to dance, to help with simple chores and how to amuse themselves. They learn to trust adults and to share experiences and belongings with friends. They learn how to follow simple directions. They learn what society expects of them and what to expect of it. They learn to be content and useful in a sheltered world.

Multiple handicaps are more frequent and more intense in the severe mental retardate than in any other type of exceptional child. This results in more severe speech, hearing, and visual motor disabilities and inability to abstract, judge, and develop acceptable behavior. Due to the severity of their limitations, pupils usually remain with one teacher in a self-contained classroom. A functional program will, in varying degrees, prepare the severe mental retardate to care for self, and become a participating member of his home. Some will be able to maintain a job under noncompetitive conditions on a sheltered level. The major focus of educational effort with the severely retarded is toward the development of self help skills, socially acceptable conduct, control of impulsive behavior, and adjustment to the demands of the culture within the limits of their mental ability.

Prevalence

The prevalence of children in need for programs is extremely difficult to predict. One of the major difficulties is in the use of terminology as it applies to exceptional children. Dr. Samuel Kirk in his book, Educating Exceptional Children, reviews the number of trainable children in 1,000 school age population as indicated in studies in Illinois, Michigan, and New York.

A summary of the placements of these children in the three named states follows:

<u>Study</u>	Number of Trainable Children in 1,000 School-Age Population		<u>Total</u>
	<u>In</u> <u>Community</u>	<u>In</u> <u>Institution</u>	
Illinois	1.49	.85	2.34
Michigan	1.70	1.60	3.40
New York	1.10	1.70	2.80

During 1962-63 school year, there were approximately 115,000 children attending both public and private schools in Montgomery County. During this same period, there were 142 severely retarded youngsters enrolled in the trainable program. There were 226 pupils in private placements whose major disability is mental retardation. Many of the children in this distribution have multiple handicaps so that the gross figure is an indication of major disability in relation to placement. For example, many of the children in this category of mentally retarded are also emotionally disturbed and/or brain damaged. According to the United States Office of Education figures, approximately one percent of the school-age population would fall into the classification accepted within Maryland for the trainable program.

In 1960-61 school year, there were 81 pupils enrolled in trainable classes in Montgomery County. In 1961-62, there were 103 pupils enrolled in trainable classes. The 1962-63 figure was 142 pupils. The enrollment for 1963-64 will be between 155 and 160 pupils. Therefore, there has been a gain, over the last three years, of 75-80 pupils who are in need of the trainable program. The distribution of severely retarded pupils by chronological age range follows.

Distribution of Severely Retarded Pupils by Chronological Age Range*

Chronological Age Range	Number of Pupils in Special Classes
6.0 - 6.11	10
7.0 - 7.11	16
8.0 - 8.11	14
9.0 - 9.11	15
10.0 - 10.11	14
11.0 - 11.11	14
12.0 - 12.11	14
13.0 - 13.11	8
14.0 - 14.11	10
15.0 - 15.11	11
16.0 - 16.11	13
17.0 - 17.11	8
18.0 - 18.11	3
19.0 - 19.11	2
20.0 - 20.11	0
21.0 - 21.11	0

155

*Based on the September 1, 1963 age.

Program

An activity centered program is essential to the education of severely retarded pupils. They must be taught through real life experiences to perform the daily skills which normal children learn quickly and/or incidentally.

The primary objective of the trainable program, as for all educational programs, is the optimal development of the individual. This term would indicate that the children involved in the program would operate at different developmental levels and mature to varying levels determined by their individual mental, physical, social, and emotional potentials. Included in optimal personal development are self-care, communication, socialization, motor development, sensory development, useful home and community living, occupational usefulness, and functional academic skills. These pupils must be helped to reach these educational goals through consistent practice of concrete experiences, many of which involve motor activity and large equipment.

Facilities

If we are to continue to meet the needs of the severely retarded pupils, then it will be necessary to provide appropriate facilities.

The staff suggests that three facilities for the trainable program should be adequate to meet the projected need until 1970. Each facility would be intended for 125 pupils.

The requirements for each of these facilities follow:

1. BASIC INSTRUCTION AREAS

- | | |
|---|------------------|
| a. Three teaching areas for youngsters ranging in chronological age from 6 to 11. Twenty-five pupils assigned to each area. | 3600 square feet |
| b. Two teaching areas for youngsters ranging in chronological age from 12 to 17. Twenty-five pupils assigned to each area. | 3200 square feet |

The basic program of instruction will be provided for each pupil in the area to which he is assigned. All of the educational activities except physical development and specific therapies would be provided in the basic instruction area. The basic instruction would include language development, speech activities, art, music, nature study, manipulation of tools, industrial arts, construction, and eating. Included in each basic instruction area should be a cooperative that would provide facilities for personal hygiene (lavatories) and grooming, storage space for equipment and supplies, closets for pupils' apparel, and observation rooms. The basic instruction areas for the three younger groups should have two folding partitions each and the basic instruction areas for the older groups should have one folding partition each.

2. **HOME ARTS AREA:** A small group of pupils, not exceeding eight, would be assigned to this area for one semester. During that time, they would be conditioned to a regular routine of household duties. The floor plan should duplicate that of a typical home. There should be included a living room, which would be the instructional center for this program, a dining room, kitchen, one bedroom, bathroom, laundry and storage room, and a sewing room. 1400 square feet
3. **INDUSTRIAL ARTS AREA:** Such an area will provide an opportunity for the more advanced teenage pupils to practice the various manual skills which have been developed during previous drill experiences. The area must have ample space to accommodate bulky operations and the design must allow for flexibility. Storage space for lumber, supplies, and equipment is included in the total square footage. 2400 square feet
4. **PHYSICAL DEVELOPMENT AREA:** All groups will use this area and would be scheduled daily for a physical development program. A small locker and shower room should be located adjacent to the facility and convenient to the outdoor play area. This area should also include a small stage for assembly programs. All of these provisions are included in the total square footage. 3400 square feet
5. **TREATMENT AREAS**
 - a. **PHYSICAL THERAPY** 800 square feet
 - b. **OCCUPATIONAL THERAPY** 800 square feet
 - c. **SPEECH THERAPY:** The incidence of speech and hearing defects among multi-handicapped children is much greater than in the normal population. Therefore, it will be necessary to provide two speech therapy rooms. 288 square feet
6. **KITCHEN AREA:** Food would be prepared in this area as in other school kitchens. Advanced pupils would participate in the preparation and serving and cleaning up as training for future placement. Meals would be distributed from this area to groups in family style rather than in individual servings. This will give the pupils an opportunity to learn table setting, food serving, table manners, and clean up, all of which would be accomplished in the basic instructional areas. The total square footage indicated covers all facilities related to the kitchen including storage. 800 square feet

7. **INTERCOMMUNICATION SYSTEM:** An intercommunication system should be installed. Call switches at each station should be installed to make possible two-way conversations as well as direct voice call to the main unit.

8. **GENERAL FACILITIES**

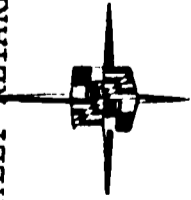
a. PRINCIPAL'S OFFICE	200 square feet
b. GENERAL OFFICE	300 square feet
c. GENERAL OFFICE WORKROOM	100 square feet
d. GENERAL STORAGE	200 square feet
e. CONFERENCE ROOM	300 square feet
f. TEACHERS' ROOM	350 square feet
g. HEALTH ROOM	400 square feet
h. OUTSIDE STORAGE	80 square feet
i. OBSERVATION BOOTHS	

The projected costs for each of these facilities, including land, would be \$515,000 (computed at \$18.00 per square foot).

Approximate location for each of these facilities has been carefully considered by the staff. Review of the geographical distribution of the pupils currently enrolled in the program and study of the areas of expected population growth, point to the need to locate one of the centers in the North Bethesda-South Rockville Area, one in the North Silver Spring-East Wheaton Area, and one in the Gaithersburg Area.

PUBLIC SCHOOL LOCATIONS 1962-63

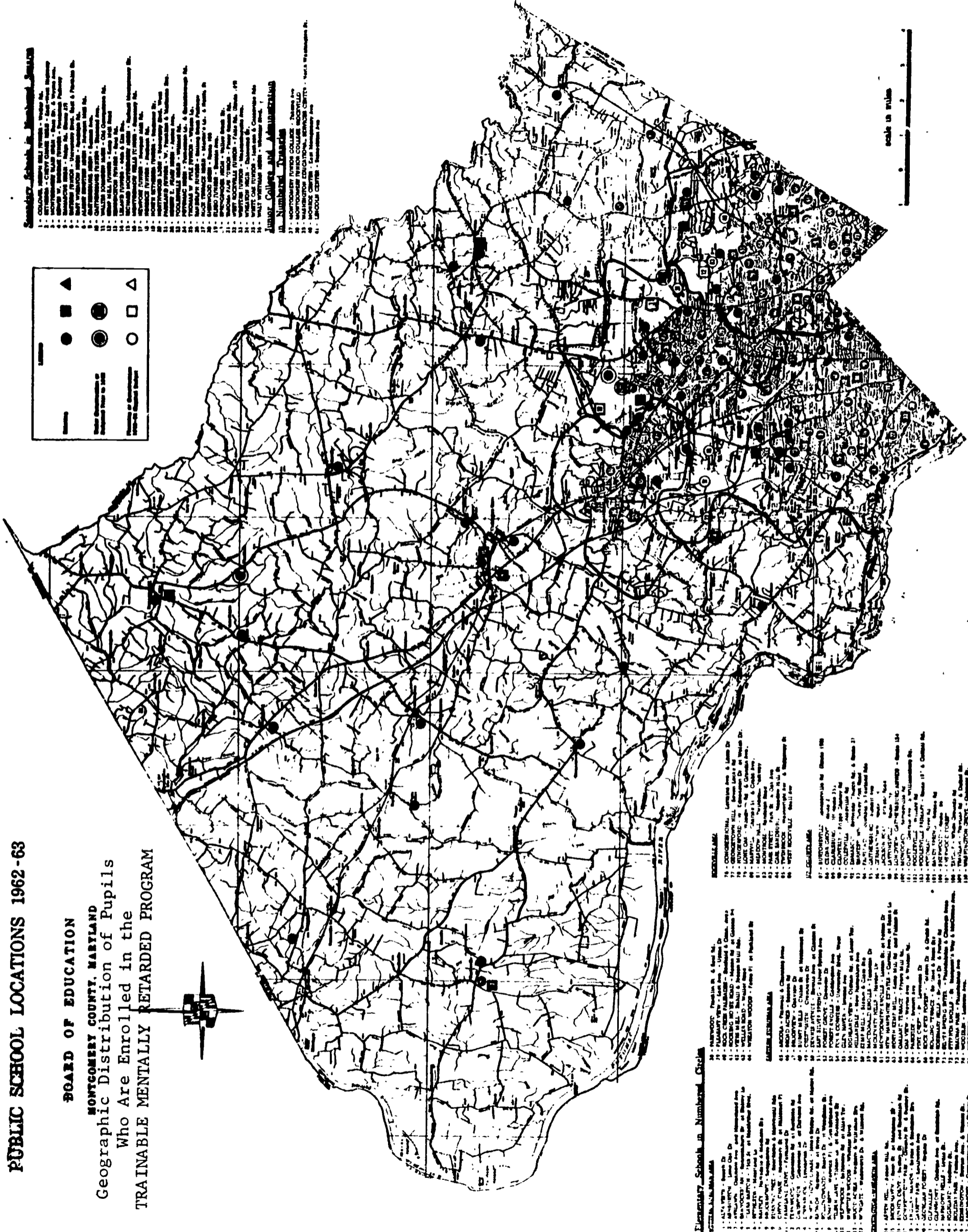
BOARD OF EDUCATION
 MONTGOMERY COUNTY, MARYLAND
 Geographic Distribution of Pupils
 Who Are Enrolled in the
 TRAINABLE MENTALLY RETARDED PROGRAM



LEGEND

- Public Schools
- Public Schools in the District of Columbia
- Public Schools in the State of Maryland
- Public Schools in the District of Columbia
- Public Schools in the State of Maryland

- Secondary Schools in Maryland**
1. COLLEGE PARK
 2. CROFTON
 3. GAITHERSBURG
 4. GREENBELT
 5. HYATTSVILLE
 6. JESSUP
 7. LAUREL
 8. LITTLE ROCK
 9. MOUNTAIN VIEW
 10. NANTUCKET
 11. ROCKVILLE
 12. SILVER SPRING
 13. WASHINGTON
 14. WOODBRIDGE
 15. WYOMING
 16. ZENESBURG
- Junior College and Administrative**
17. MONTGOMERY JUNIOR COLLEGE
 18. MONTGOMERY STATE COLLEGE
 19. MONTGOMERY STATE COLLEGE
 20. MONTGOMERY STATE COLLEGE
 21. MONTGOMERY STATE COLLEGE
 22. MONTGOMERY STATE COLLEGE
 23. MONTGOMERY STATE COLLEGE
 24. MONTGOMERY STATE COLLEGE
 25. MONTGOMERY STATE COLLEGE
 26. MONTGOMERY STATE COLLEGE
 27. MONTGOMERY STATE COLLEGE
 28. MONTGOMERY STATE COLLEGE
 29. MONTGOMERY STATE COLLEGE
 30. MONTGOMERY STATE COLLEGE
 31. MONTGOMERY STATE COLLEGE
 32. MONTGOMERY STATE COLLEGE
 33. MONTGOMERY STATE COLLEGE
 34. MONTGOMERY STATE COLLEGE
 35. MONTGOMERY STATE COLLEGE
 36. MONTGOMERY STATE COLLEGE
 37. MONTGOMERY STATE COLLEGE
 38. MONTGOMERY STATE COLLEGE
 39. MONTGOMERY STATE COLLEGE
 40. MONTGOMERY STATE COLLEGE
 41. MONTGOMERY STATE COLLEGE
 42. MONTGOMERY STATE COLLEGE
 43. MONTGOMERY STATE COLLEGE
 44. MONTGOMERY STATE COLLEGE
 45. MONTGOMERY STATE COLLEGE
 46. MONTGOMERY STATE COLLEGE
 47. MONTGOMERY STATE COLLEGE
 48. MONTGOMERY STATE COLLEGE
 49. MONTGOMERY STATE COLLEGE
 50. MONTGOMERY STATE COLLEGE
 51. MONTGOMERY STATE COLLEGE
 52. MONTGOMERY STATE COLLEGE
 53. MONTGOMERY STATE COLLEGE
 54. MONTGOMERY STATE COLLEGE
 55. MONTGOMERY STATE COLLEGE
 56. MONTGOMERY STATE COLLEGE
 57. MONTGOMERY STATE COLLEGE
 58. MONTGOMERY STATE COLLEGE
 59. MONTGOMERY STATE COLLEGE
 60. MONTGOMERY STATE COLLEGE
 61. MONTGOMERY STATE COLLEGE
 62. MONTGOMERY STATE COLLEGE
 63. MONTGOMERY STATE COLLEGE
 64. MONTGOMERY STATE COLLEGE
 65. MONTGOMERY STATE COLLEGE
 66. MONTGOMERY STATE COLLEGE
 67. MONTGOMERY STATE COLLEGE
 68. MONTGOMERY STATE COLLEGE
 69. MONTGOMERY STATE COLLEGE
 70. MONTGOMERY STATE COLLEGE
 71. MONTGOMERY STATE COLLEGE
 72. MONTGOMERY STATE COLLEGE
 73. MONTGOMERY STATE COLLEGE
 74. MONTGOMERY STATE COLLEGE
 75. MONTGOMERY STATE COLLEGE
 76. MONTGOMERY STATE COLLEGE
 77. MONTGOMERY STATE COLLEGE
 78. MONTGOMERY STATE COLLEGE
 79. MONTGOMERY STATE COLLEGE
 80. MONTGOMERY STATE COLLEGE
 81. MONTGOMERY STATE COLLEGE
 82. MONTGOMERY STATE COLLEGE
 83. MONTGOMERY STATE COLLEGE
 84. MONTGOMERY STATE COLLEGE
 85. MONTGOMERY STATE COLLEGE
 86. MONTGOMERY STATE COLLEGE
 87. MONTGOMERY STATE COLLEGE
 88. MONTGOMERY STATE COLLEGE
 89. MONTGOMERY STATE COLLEGE
 90. MONTGOMERY STATE COLLEGE
 91. MONTGOMERY STATE COLLEGE
 92. MONTGOMERY STATE COLLEGE
 93. MONTGOMERY STATE COLLEGE
 94. MONTGOMERY STATE COLLEGE
 95. MONTGOMERY STATE COLLEGE
 96. MONTGOMERY STATE COLLEGE
 97. MONTGOMERY STATE COLLEGE
 98. MONTGOMERY STATE COLLEGE
 99. MONTGOMERY STATE COLLEGE
 100. MONTGOMERY STATE COLLEGE



- Elementary Schools in Numbered Circles**
1. ALVA
 2. ANNE ARUNDEL
 3. ANNAPOLIS
 4. ARDMORE
 5. ARDMORE
 6. ARDMORE
 7. ARDMORE
 8. ARDMORE
 9. ARDMORE
 10. ARDMORE
 11. ARDMORE
 12. ARDMORE
 13. ARDMORE
 14. ARDMORE
 15. ARDMORE
 16. ARDMORE
 17. ARDMORE
 18. ARDMORE
 19. ARDMORE
 20. ARDMORE
 21. ARDMORE
 22. ARDMORE
 23. ARDMORE
 24. ARDMORE
 25. ARDMORE
 26. ARDMORE
 27. ARDMORE
 28. ARDMORE
 29. ARDMORE
 30. ARDMORE
 31. ARDMORE
 32. ARDMORE
 33. ARDMORE
 34. ARDMORE
 35. ARDMORE
 36. ARDMORE
 37. ARDMORE
 38. ARDMORE
 39. ARDMORE
 40. ARDMORE
 41. ARDMORE
 42. ARDMORE
 43. ARDMORE
 44. ARDMORE
 45. ARDMORE
 46. ARDMORE
 47. ARDMORE
 48. ARDMORE
 49. ARDMORE
 50. ARDMORE
 51. ARDMORE
 52. ARDMORE
 53. ARDMORE
 54. ARDMORE
 55. ARDMORE
 56. ARDMORE
 57. ARDMORE
 58. ARDMORE
 59. ARDMORE
 60. ARDMORE
 61. ARDMORE
 62. ARDMORE
 63. ARDMORE
 64. ARDMORE
 65. ARDMORE
 66. ARDMORE
 67. ARDMORE
 68. ARDMORE
 69. ARDMORE
 70. ARDMORE
 71. ARDMORE
 72. ARDMORE
 73. ARDMORE
 74. ARDMORE
 75. ARDMORE
 76. ARDMORE
 77. ARDMORE
 78. ARDMORE
 79. ARDMORE
 80. ARDMORE
 81. ARDMORE
 82. ARDMORE
 83. ARDMORE
 84. ARDMORE
 85. ARDMORE
 86. ARDMORE
 87. ARDMORE
 88. ARDMORE
 89. ARDMORE
 90. ARDMORE
 91. ARDMORE
 92. ARDMORE
 93. ARDMORE
 94. ARDMORE
 95. ARDMORE
 96. ARDMORE
 97. ARDMORE
 98. ARDMORE
 99. ARDMORE
 100. ARDMORE

Scale in miles

B. Educable Program

The rate of learning in the moderately retarded pupil varies from approximately one-half to three-fourths that of the average learning rate. Multiple handicaps are frequently present due to neurological dysfunction or other physical anomalies which are sometimes overlaid by emotional disturbance. Some characteristics of these limitations which may exist in combinations of two or more are evidenced in the individual's limited ability to conceptualize, generalize, control behavior, adjust to new or changing situations, evaluate and develop motor coordination and emotional stability.

Program

The pupil who is moderately mentally retarded will be in need of special class placement throughout his school life. However, he will profit by assignment to the regular physical education program and in individual cases, may enroll in such courses as home arts, typing, shop, cosmetology, auto maintenance and driver education. Adequate educational programming will prepare the moderate mental retardates to become independent members of a family and the community and to maintain work on a semi-skilled or unskilled level. The development of social and occupational adequacy are the underlying goals of the program. The program embraces the basic concepts and skills employed in daily living and develops in a broadening spiral throughout the school years. These concepts and skills must be developed through first-hand, concrete experiences. Reading and arithmetic instruction must be closely correlated to these life situations and provided on the individual level of the pupil. The central themes which run through these teaching situations are self-care, social acceptance and participation, home arts and home repairs, and preparation for securing and maintaining a job. Correlated with these themes are communication, health, and safety.

Special Classes in Regular Schools

The program for those pupils handicapped by moderate mental retardation commonly referred to as the educable mental retardate should be provided throughout the county at both the elementary and secondary levels in all schools having enough youngsters who need such a program. Where the population in need is not great enough to justify a program then the retarded pupils of two, three, or four schools should be combined to make up a class. We have learned that it is better to house at least two classes in the same facility so that the chronological age range in a class can be limited to three or four years.

While national figures would indicate a prevalence of two percent, our experience in Montgomery County has shown that we have between three-fourths of one percent and one percent of the school age population in need of this program.

To provide for the anticipated growth in the class programs for moderately mentally retarded pupils, it is suggested that as new buildings are planned the need for classroom space for the educable program be evaluated.

Special School

Some of the youngsters who have been in the elementary educable program need to continue in a program based in the regular junior high school and senior high school. Others are not ready to enter into the complex environment of our secondary schools. They have concomitant social and emotional disabilities. Thus, a centralized

facility such as Rock Terrace offers an excellent program for providing a simpler more sheltered program for those who should be eventually prepared to enter society as self-supporting citizens.

The Rock Terrace School was originally designed and constructed to house regular classes of children of elementary school age. In some aspects it is inadequate for housing children of secondary school age with learning disabilities that stem from mental, emotional, and physical handicaps.

To provide an occupational training program and to give the staff adequate space within which to work, the following described additions to Rock Terrace should be considered:

1. Occupational Training Shop: This area would include a reproduction area for duplicating, folding and collating; a wood working area for basic carpentry; a furniture repair and refinishing area; a home maintenance area; an auto-service area for including services usually given at commercial gasoline stations. 3000 square feet
2. Office Area: Inasmuch as the present office space is both insufficient and inadequate in meeting the activity needs of the principal, counselor, work-study coordinator, and secretary, it is recommended that the general office be enlarged. There is an acute need for a conference room as part of the office complex. 400 square feet
3. Faculty Room: This area should include toilet facilities for the teachers. 400 square feet

The cost of this addition would be approximately \$61,000.00.

C. Specific Learning Disabilities Program

Brain-injured and hyperactive children are frequently classified as children with "special learning disabilities." While it is quite true that youngsters who have experienced damage or disease of the brain and central nervous system frequently exhibit a wide variety of specific learning disabilities, it is equally true that some do not.

It should also be pointed out that in each of the major classifications previously discussed there are large numbers of children who, in addition to the generalized handicapping conditions also suffer from specific learning disabilities. For example: the inability to perceive abstract forms in their true shapes, positions or relationships is a specific learning disability which exists in many children who have 20/20 vision. That is, a child may have perfectly normal sight and yet have serious visual perception difficulty. Many children with good motor ability are unable to make their hands do what their eyes should direct them to do. When this condition persists beyond the age level at which the child is intellectually able to write it is correct to say such children have a specific learning disability in eye-hand coordination.

Many youngsters with specific learning disabilities in visual perceptual functioning and eye-hand coordination also demonstrate on the behavioral level an inability to control their motor activity. They appear to be, and are in perpetual motion. Even when seated at their desk a foot is swinging, hands tapping or an object being twirled. These youngsters are aware of everything about them, but are unable to concentrate on anything. Joy, anger, fear, hostility, anxiety and gay excitement follow no predictable pattern and the mood swings from one to another without any apparent reason. Such youngsters are said to suffer from hyperactivity, poor impulse control and disorganized learning behavior.

Youngsters with the kinds of specific learning disabilities described above are found in regular classrooms where they are frequently described as "under-achieving" or "emotionally handicapped" or both. They exist in large numbers among the major categories of exceptionality including the orthopedically handicapped, mentally retarded, brain-injured, deaf and hard-of-hearing.

Specific goals for pupils with handicapping conditions further complicated by specific learning disabilities are:

- a. to diagnose and identify the individual learning disabilities in order to establish the techniques and educational program which will be most beneficial,
- b. to determine the developmental gaps and to provide the educational program necessary to fill them,
- c. to help the pupil integrate the learning experience and use knowledge gained,
- d. to assist the pupil to learn how to assume more responsibility for his own behavior while working toward increasing his ability to function in a classroom atmosphere similar to that of a regular classroom, and
- e. to be able to function in his social environment in spite of the disabilities which are present.

Program

The content of the curriculum used in the specific learning disabilities classes is similar to that of the regular classroom, but different procedures and techniques are used.

A classroom is chosen which is as free from distraction as possible, located away from a play area or other outside distractions, and painted in a neutral color. The room is equipped with individual cupboards with doors for each pupil to store daily work, out of sight and out of reach. In the beginning phases of the program, walls, window ledges and any open cupboards are kept bare. Extraneous visual and auditory stimuli of all kinds are kept to a minimum. Consistent routines, disciplines, and ways of working are maintained to establish processes which need to be learned by the pupil. The teacher must be skilled in providing appropriate materials to fill in the developmental gaps and counteract learning disabilities. The teacher plans individual work in all areas for each pupil--about 8 to 12 pieces of individual work per pupil per day. In so doing, the teacher makes assets of some of the pupil's liabilities. Many manipulative materials are used because of the pupil's hyperactivity. Concrete materials are extensively used as the pupils have difficulty in thinking in abstract terms. Every piece of work given to the pupil during the school year is evaluated as to its effectiveness in meeting the pupil's needs.

Care is taken to assist the pupil to integrate and use the information gained in the school program, to learn how to become an acceptable member of society, and to assume more and more responsibility for total behavior as rapidly as possible. As the pupils become more capable of coping with the demands made on them by society, the teacher works toward evolving a classroom atmosphere and structure similar to that of a regular classroom. Pupils who have learned how to function in this kind of setting are gradually worked into a regular school program whenever possible.

Facilities

The specific learning disabilities classes should be located in the regular school buildings throughout the county. Through experience we have learned that it is best to house at least two or preferably three at one center so that chronological age and instructional level spans can be limited.

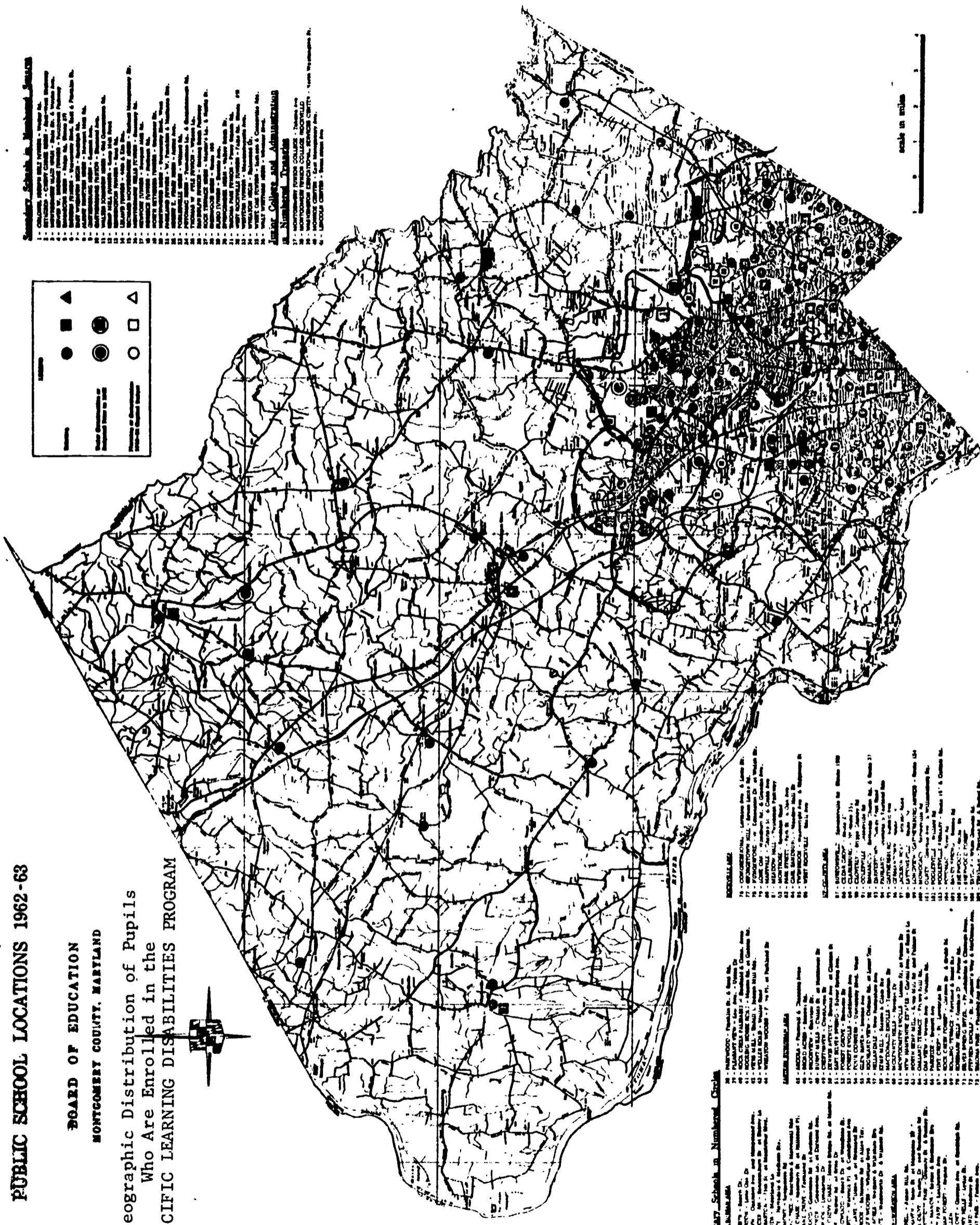
The prevalence of children in need for this program is difficult to predict because so many children do not demonstrate the disabilities until they are subjected to formal academic training. From the number of pupils now enrolled in this program, a review of the growth of the program over the last five years and a realization of the number of referrals coming in, it is safe to estimate that between one-fourth and one-half of one percent of the public school population is in need of a special class program because of their specific learning disabilities.

If the specific learning disabilities program is to continue as it is now functioning and is extended to meet continuing need, then classrooms of approximately four hundred square feet should be included in appropriately located future construction. It is desirable to have two to four classes located at a school.

PUBLIC SCHOOL LOCATIONS 1962-63

BOARD OF EDUCATION
MONTGOMERY COUNTY, MARYLAND

Geographic Distribution of Pupils
Who Are Enrolled in the
SPECIFIC LEARNING DISABILITIES PROGRAM



- Secondary Schools in Numbered Districts**
- 1 - CANTON
 - 2 - CLARK
 - 3 - CLAY
 - 4 - CLAYTON
 - 5 - CLAYTON
 - 6 - CLAYTON
 - 7 - CLAYTON
 - 8 - CLAYTON
 - 9 - CLAYTON
 - 10 - CLAYTON
 - 11 - CLAYTON
 - 12 - CLAYTON
 - 13 - CLAYTON
 - 14 - CLAYTON
 - 15 - CLAYTON
 - 16 - CLAYTON
 - 17 - CLAYTON
 - 18 - CLAYTON
 - 19 - CLAYTON
 - 20 - CLAYTON
 - 21 - CLAYTON
 - 22 - CLAYTON
 - 23 - CLAYTON
 - 24 - CLAYTON
 - 25 - CLAYTON
 - 26 - CLAYTON
 - 27 - CLAYTON
 - 28 - CLAYTON
 - 29 - CLAYTON
 - 30 - CLAYTON
 - 31 - CLAYTON
 - 32 - CLAYTON
 - 33 - CLAYTON
 - 34 - CLAYTON
 - 35 - CLAYTON
 - 36 - CLAYTON
 - 37 - CLAYTON
 - 38 - CLAYTON
 - 39 - CLAYTON
 - 40 - CLAYTON
- Junior College and Administration in Numbered Districts**
- 1 - MONTGOMERY JUNIOR COLLEGE
 - 2 - MONTGOMERY JUNIOR COLLEGE
 - 3 - MONTGOMERY JUNIOR COLLEGE
 - 4 - MONTGOMERY JUNIOR COLLEGE
 - 5 - MONTGOMERY JUNIOR COLLEGE
 - 6 - MONTGOMERY JUNIOR COLLEGE
 - 7 - MONTGOMERY JUNIOR COLLEGE
 - 8 - MONTGOMERY JUNIOR COLLEGE
 - 9 - MONTGOMERY JUNIOR COLLEGE
 - 10 - MONTGOMERY JUNIOR COLLEGE
 - 11 - MONTGOMERY JUNIOR COLLEGE
 - 12 - MONTGOMERY JUNIOR COLLEGE
 - 13 - MONTGOMERY JUNIOR COLLEGE
 - 14 - MONTGOMERY JUNIOR COLLEGE
 - 15 - MONTGOMERY JUNIOR COLLEGE
 - 16 - MONTGOMERY JUNIOR COLLEGE
 - 17 - MONTGOMERY JUNIOR COLLEGE
 - 18 - MONTGOMERY JUNIOR COLLEGE
 - 19 - MONTGOMERY JUNIOR COLLEGE
 - 20 - MONTGOMERY JUNIOR COLLEGE
 - 21 - MONTGOMERY JUNIOR COLLEGE
 - 22 - MONTGOMERY JUNIOR COLLEGE
 - 23 - MONTGOMERY JUNIOR COLLEGE
 - 24 - MONTGOMERY JUNIOR COLLEGE
 - 25 - MONTGOMERY JUNIOR COLLEGE
 - 26 - MONTGOMERY JUNIOR COLLEGE
 - 27 - MONTGOMERY JUNIOR COLLEGE
 - 28 - MONTGOMERY JUNIOR COLLEGE
 - 29 - MONTGOMERY JUNIOR COLLEGE
 - 30 - MONTGOMERY JUNIOR COLLEGE
 - 31 - MONTGOMERY JUNIOR COLLEGE
 - 32 - MONTGOMERY JUNIOR COLLEGE
 - 33 - MONTGOMERY JUNIOR COLLEGE
 - 34 - MONTGOMERY JUNIOR COLLEGE
 - 35 - MONTGOMERY JUNIOR COLLEGE
 - 36 - MONTGOMERY JUNIOR COLLEGE
 - 37 - MONTGOMERY JUNIOR COLLEGE
 - 38 - MONTGOMERY JUNIOR COLLEGE
 - 39 - MONTGOMERY JUNIOR COLLEGE
 - 40 - MONTGOMERY JUNIOR COLLEGE

- Elementary Schools in Numbered Districts**
- 1 - ALVA
 - 2 - ANNE ARUNDEL
 - 3 - ANNE ARUNDEL
 - 4 - ANNE ARUNDEL
 - 5 - ANNE ARUNDEL
 - 6 - ANNE ARUNDEL
 - 7 - ANNE ARUNDEL
 - 8 - ANNE ARUNDEL
 - 9 - ANNE ARUNDEL
 - 10 - ANNE ARUNDEL
 - 11 - ANNE ARUNDEL
 - 12 - ANNE ARUNDEL
 - 13 - ANNE ARUNDEL
 - 14 - ANNE ARUNDEL
 - 15 - ANNE ARUNDEL
 - 16 - ANNE ARUNDEL
 - 17 - ANNE ARUNDEL
 - 18 - ANNE ARUNDEL
 - 19 - ANNE ARUNDEL
 - 20 - ANNE ARUNDEL
 - 21 - ANNE ARUNDEL
 - 22 - ANNE ARUNDEL
 - 23 - ANNE ARUNDEL
 - 24 - ANNE ARUNDEL
 - 25 - ANNE ARUNDEL
 - 26 - ANNE ARUNDEL
 - 27 - ANNE ARUNDEL
 - 28 - ANNE ARUNDEL
 - 29 - ANNE ARUNDEL
 - 30 - ANNE ARUNDEL
 - 31 - ANNE ARUNDEL
 - 32 - ANNE ARUNDEL
 - 33 - ANNE ARUNDEL
 - 34 - ANNE ARUNDEL
 - 35 - ANNE ARUNDEL
 - 36 - ANNE ARUNDEL
 - 37 - ANNE ARUNDEL
 - 38 - ANNE ARUNDEL
 - 39 - ANNE ARUNDEL
 - 40 - ANNE ARUNDEL
- Middle Schools in Numbered Districts**
- 1 - ANNE ARUNDEL
 - 2 - ANNE ARUNDEL
 - 3 - ANNE ARUNDEL
 - 4 - ANNE ARUNDEL
 - 5 - ANNE ARUNDEL
 - 6 - ANNE ARUNDEL
 - 7 - ANNE ARUNDEL
 - 8 - ANNE ARUNDEL
 - 9 - ANNE ARUNDEL
 - 10 - ANNE ARUNDEL
 - 11 - ANNE ARUNDEL
 - 12 - ANNE ARUNDEL
 - 13 - ANNE ARUNDEL
 - 14 - ANNE ARUNDEL
 - 15 - ANNE ARUNDEL
 - 16 - ANNE ARUNDEL
 - 17 - ANNE ARUNDEL
 - 18 - ANNE ARUNDEL
 - 19 - ANNE ARUNDEL
 - 20 - ANNE ARUNDEL
 - 21 - ANNE ARUNDEL
 - 22 - ANNE ARUNDEL
 - 23 - ANNE ARUNDEL
 - 24 - ANNE ARUNDEL
 - 25 - ANNE ARUNDEL
 - 26 - ANNE ARUNDEL
 - 27 - ANNE ARUNDEL
 - 28 - ANNE ARUNDEL
 - 29 - ANNE ARUNDEL
 - 30 - ANNE ARUNDEL
 - 31 - ANNE ARUNDEL
 - 32 - ANNE ARUNDEL
 - 33 - ANNE ARUNDEL
 - 34 - ANNE ARUNDEL
 - 35 - ANNE ARUNDEL
 - 36 - ANNE ARUNDEL
 - 37 - ANNE ARUNDEL
 - 38 - ANNE ARUNDEL
 - 39 - ANNE ARUNDEL
 - 40 - ANNE ARUNDEL
- High Schools in Numbered Districts**
- 1 - ANNE ARUNDEL
 - 2 - ANNE ARUNDEL
 - 3 - ANNE ARUNDEL
 - 4 - ANNE ARUNDEL
 - 5 - ANNE ARUNDEL
 - 6 - ANNE ARUNDEL
 - 7 - ANNE ARUNDEL
 - 8 - ANNE ARUNDEL
 - 9 - ANNE ARUNDEL
 - 10 - ANNE ARUNDEL
 - 11 - ANNE ARUNDEL
 - 12 - ANNE ARUNDEL
 - 13 - ANNE ARUNDEL
 - 14 - ANNE ARUNDEL
 - 15 - ANNE ARUNDEL
 - 16 - ANNE ARUNDEL
 - 17 - ANNE ARUNDEL
 - 18 - ANNE ARUNDEL
 - 19 - ANNE ARUNDEL
 - 20 - ANNE ARUNDEL
 - 21 - ANNE ARUNDEL
 - 22 - ANNE ARUNDEL
 - 23 - ANNE ARUNDEL
 - 24 - ANNE ARUNDEL
 - 25 - ANNE ARUNDEL
 - 26 - ANNE ARUNDEL
 - 27 - ANNE ARUNDEL
 - 28 - ANNE ARUNDEL
 - 29 - ANNE ARUNDEL
 - 30 - ANNE ARUNDEL
 - 31 - ANNE ARUNDEL
 - 32 - ANNE ARUNDEL
 - 33 - ANNE ARUNDEL
 - 34 - ANNE ARUNDEL
 - 35 - ANNE ARUNDEL
 - 36 - ANNE ARUNDEL
 - 37 - ANNE ARUNDEL
 - 38 - ANNE ARUNDEL
 - 39 - ANNE ARUNDEL
 - 40 - ANNE ARUNDEL

PROGRAMS FOR PUPILS WHO ARE CRIPPLED OR WHO HAVE DISABLING CHRONIC HEALTH PROBLEMS

Some children have been crippled during the prenatal period or during the birth process, others as the result of accident, others as the aftermath of an illness. Cerebral palsy, muscular dystrophy, post-polio, cardiac dysfunction, spina bifida, spinal meningitis, Fredericks ataxia, TB Spine, and Perthes hip are some of the disabilities encountered in the classes for pupils with crippling conditions.

Today the majority of our children with orthopedic handicaps are cerebral palsied. A cerebral palsied child's condition results from damage to the brain before, during, or after birth. The injury may be caused by Rh incompatibility or various virus caused conditions during pregnancy. The cerebral palsied child is deficient in varying degrees in his ability to control motor activity or to coordinate muscular movements. His intellectual capacity may or may not be affected. There is considerable controversy over the distribution of intelligence among cerebral palsy cases. Studies accomplished in England have been quite pessimistic showing seventy-five percent of cerebral palsied cases as intellectually disabled. The studies conducted in the United States during the Fifties indicated that about one-half of the cases reviewed were also mentally handicapped.

There were during the school year 1962-63, fifty-five physically disabled pupils at Forest Knolls Elementary School, of whom thirty-six are cerebral palsied, two have Fredericks ataxia, two--spina bifida, five--muscular dystrophy, two--arthrogryposis, two--brain tumor, two--cardiac dysfunction, one--spinal meningitis, and three--orthopedic disabilities caused by polio. Of the fifty-five physically disabled pupils, thirty are intellectually disabled, while twenty-five have normal to above average intellectual ability. Of the thirty-six cerebral palsied pupils, twenty-three are intellectually handicapped.

Program

Social competencies, self realization, and occupational efficiency are the program goals which must be met by considering the limitations and abilities of individual pupils who have physical handicaps. Some pupils will require a college preparatory program, some an occupational preparatory program and others a program designed to prepare them for life in a sheltered environment.

Dependent on the individual abilities and needs of the pupil, the program at Forest Knolls Elementary School runs the gamut in an effort to make these goals a reality. An academic program is provided for pupils whose intellectual potential is average or above. Pupils who are capable of doing so are gradually integrated into regular classes. Provision is made for home arts and manual arts activities for pupils who require functional learning situations. Physical, occupational, speech and hearing therapies are an essential part of the program at Forest Knolls Elementary School.

Physical therapy aids the improvement of posture, muscle tone and control, and motor activity in learning to walk and to maintain balance. Occupational therapy is provided to teach pupils self-help skills and to help the individual use his hands and arms more effectively. Muscle control needed for speech production is developed through speech therapy.

Facilities

Many children who are moderately orthopedically handicapped do not require special class placement and the services of the physical and occupational therapists. Thus, they attend regular classes in their neighborhood schools. However, other children who are crippled or who have chronic health problems are so severely disabled that they need to be educated in an appropriately designed facility.

Forest Knolls Elementary School is such a special facility. It is reasonable to expect that the Forest Knolls facility could provide an elementary school program for eighty physically handicapped youngsters. With the construction of appropriate secondary facilities, the Forest Knolls unit should adequately handle the elementary school population in need until 1968. This prediction should be reviewed by June 1965.

On the secondary level, there are no facilities for the physically disabled who need specially designed buildings. Because crippled children span the intellectual spectrum, it is necessary to provide two secondary "tracks."

To provide an appropriate program for secondary age exceptional children who are crippled or who have severe chronic health problems and who are mentally retarded we could modify and add to Rock Terrace School. Instructionally, these pupils would be integrated with their learning peers. They would not be segregated in a class because of their physical handicaps.

The following described facilities could be added to Rock Terrace:

1. TREATMENT AREAS
 - a. PHYSICAL THERAPY 800 square feet
 - b. OCCUPATIONAL THERAPY 800 square feet
 - c. SPEECH THERAPY 144 square feet
2. HEALTH ROOM: Physically handicapped pupils have greater need for health services than do pupils in the regular school population. The health room should include areas for examinations, rest, reception, storage, and necessary toilets and one shower. The health room should be located adjacent to the physical therapy room. 400 square feet
3. ATTENDANT CALL SYSTEM: An electric communication system with buttons in each classroom and a central desk, like the one at Forest Knolls, should be installed. The central board should be located in the health center.
4. ARCHITECTURAL ADAPTATIONS: Ramps should be constructed at the main entrance and to the addition if it is necessary to construct it on a different level from the existing building. Hand rails should be provided in different areas and next to blackboards.

5. **ADDITIONAL STORAGE AREA:** Rock Terrace is without adequate storage space, therefore, area to serve this purpose should be included in the addition. 200 square feet
6. **LAVATORIES:** It will be necessary to provide at least two lavatories (one for girls, one for boys) large enough for youngsters to negotiate wheel chairs within them--grab bars must be placed adjacent to each water closet. Each lavatory should include two water closets and one sink. 172 square feet

The cost for these modifications and additions would be approximately \$83,400.

Specialized structural provisions and additional facilities at a regular junior high school are necessary to provide an appropriate education program for secondary age exceptional children who are crippled or who have severe chronic health problems and who are not mentally retarded.

The following described facilities should accommodate up to thirty pupils:

1. **SPECIAL CLASSROOM:** Equipped with independent study areas, two doors to the hall, and a folding partition that would make it possible to divide it into two smaller classrooms. 800 square feet
2. **TREATMENT AREAS**
 - a. **PHYSICAL THERAPY:** The size of the physical therapy unit is predicated on the maximum number of pupils to be enrolled in the school, the types of disabilities, and the frequency of treatments which would be needed. A physical therapy unit of this size would allow for one therapist to see approximately half of the children three times a week and the other half twice a week. 700 square feet
 - b. **OCCUPATIONAL THERAPY:** The occupational therapy program would include both the functional and diversional therapeutic activities with the greatest emphasis on the development of self help activities, especially those involving the upper extremities. Self help activities would include management of personal clothing, eating, typing, and the manipulation of hand tools and devices used in daily living. The diversional activities would include the arts and crafts. Adjacent to the occupational therapy room should be a small special dining room for pupils who need further training in feeding themselves. 900 square feet
 - c. **SPEECH THERAPY:** Therapy is provided individually or in small groups. The room should be sound treated to eliminate as much interference as possible from outside noises. 144 square feet

3. **SPECIAL LAVATORIES:** It will be necessary to provide at least two lavatories (one for girls, one for boys) large enough for youngsters to negotiate wheel chairs within them. Grab bars must be placed adjacent to each water closet. Each lavatory should include two water closets and one sink. 172 square feet

4. **ARCHITECTURAL ADAPTATIONS:** Ramps should be provided at the entrances to the building, cafeteria, and gymnasium. Hand rails would be most helpful for some youngsters at points in the building at which traffic will be particularly heavy and in classrooms where blackboards will be used to a great extent.

The cost for these modifications and additions would be approximately \$99,100.

When the pupils are ready to begin a senior high school program, they should be placed at their home schools. It might be necessary to construct elevators in some existing or new structures.

SUMMARY

The program in Montgomery County for exceptional pupils is multi-level in approach. Specific programs have been described in this report with suggestions for providing facilities. Each has its place in a total program for all children.