



The New York City Department of Education



Quality Review Report

**Public School 23 Queens
75-59 263rd Street
Queens
NY 11004**

Principal: Phyllis Weinfield

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Reviewer: Jeffery Plumb

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Part 1: The school context

Information about the school

Public School 23 Queens services the needs of 355 students with mental health difficulties from kindergarten through grade 12. It is located on seven sites throughout Queens within day treatment and residential hospital settings. It embraces four different medical models. The vast majority of students are standardized assessment students, but it also serves alternate assessment students. Although the majority of students come from within Queens, it also services students from the Bronx, Manhattan and from Staten Island. The overarching aim is to support students in becoming well enough to be enrolled in a less restrictive learning environment as quickly as possible.

Forty-six per cent of students are Black, 23% White, 22% Hispanic, 6% Asian and 1% other. There are no English language learners. All students have an individual education plan for their mental health needs, but only about 5% are alternate assessment students.

Part 2: Overview

What the school does well

- The principal's leadership is outstanding and she successfully holds teachers to account for their performance.
- Data is used very effectively to build a baseline profile on each student upon enrollment.
- The school has successfully implemented a unified curriculum across seven sites.
- An excellent partnership between clinical and instructional staff benefits students with complex mental health needs.
- The community meeting, where staff and students meet, is excellent because it enables students to express their feelings and involves them in setting their own targets to improve their behavior and academic achievement.
- Common data based assessment systems are used effectively to monitor student academic progress across seven sites.
- Professional development of staff focuses on students needs as identified by data.
- The arts curriculum has a therapeutic component which builds students' academic and social development.
- The school successfully moves a high proportion of students on to a less restrictive environment.
- Students are treated with dignity and respect and they are beginning to engage enthusiastically with learning.

What the school needs to improve

- Continue to work with all four medical teams which service the seven school sites to ensure teachers are informed about changes made to students' medication that may affect their learning.
- Continue to work with Queen's Children's Psychiatric Center to bring the offices of the administration team and clinical staff together under one roof.
- Ensure that the plan to secure a quality book mobile to be shared across seven sites is brought to fruition.

Part 3: Main findings

Overall Evaluation

This is a well-developed school.

This innovative and creative school services the needs of students, many of whom have severe mental health difficulties, very effectively, mainly because the principal and her fellow administrators constantly 'think outside of the box'. Data is used daily to assess and set goals to move students along their journey towards leaving a hospital environment and accessing a less restrictive environment. Therapy is successfully integrated with the academic curriculum to enable students to improve their literacy and mathematical skills at the same time as developing confidence and self-esteem.

The administration has established an excellent partnership with the clinical staff. All work together in imaginative ways to support the general education students in gaining credits quickly. When appropriate, the individual education plans of the alternate students are modified to support them in moving on to the best school when they exit from their program in this school. This is a unique and very successful model.

Relationships between the school and all four medical teams which service the students are very good, but communication with the Queen's team is better than with others. Never complacent in trialing new initiatives in the interest of the students, the principal plans to resource a quality book mobile to be shared by all seven site. Capacity for further improvement as administrators become located in the same building as that used by the clinical staff bodes well for the future.

How well the school meets New York City's evaluation criteria

Quality Statement 1 – Gather Data: School leaders and faculty consistently gather data and use it to understand what each student knows and is able to do and to monitor student progress over time.

This area of the school's work is well developed.

Students are admitted to programs across the seven sites of this school based on data about their clinical needs. Teachers skillfully assess their functional level upon enrollment. They combine the data gathered from their assessments with the test data that accompanies each student upon entry. This enables a baseline profile to be established on each student which takes into consideration the impact of their mental health needs on their cognitive performance at their point of entry. This is excellent practice and provides teachers with a platform from which to track student progress over time. In addition, clinical staff work in an effective partnership with instructional staff to track students' improvement in behavior while together they shape exit plans for each student to access a less restrictive environment. Grade and class data does not fit the model since the composition of a class often changes daily as students are removed by hospital staff due to revised medication programs. In addition the student population is very transient.

Based on ethnicity, data about parental and caregiver attitudes towards mental health issues is very sensitively gathered by the school. This data is used effectively in supporting families of students admitted to the school to address the complex group dynamic issues they encounter. There are no English language learners. Data from individual education

plans is used effectively to shape programs for alternate students. As appropriate, based on data, the principal modifies individual education plans to ensure the shaping of the best exit plan for individual students. Every student in this school is vulnerable and the approach to support and raise achievement in the full sense of the word has to be highly individualized. As students' mental health improves they begin to become more comfortable about being in a classroom setting, attend more regularly and function at a higher level cognitively. The real success is that most return to a far less restrictive learning environment including general education high schools and graduate with very commendable high school diplomas.

Quality Statement 2 – Plan and Set Goals: School leaders and faculty consistently use available data to understand each student's next learning step. Through collaborative planning and student and parent engagement, they set high goals for improving teaching practice and accelerating each student's learning.

This area of the school's work is well developed.

Excellent organizational structures, put in place by the principal, enable clinical and teaching staff to meet regularly to plan and set behavioral and achievement goals for students. There is an exit strategy plan, determined upon entry, for students admitted on a 45 day program. Systems are in place for clinicians and teachers to meet regularly and review and revise goals for these students based on data. Some are moved to a less restrictive environment very quickly. Where data shows that it is in the interest of a student the principal modifies the goals on his or her individual education plan. For all students, including those who stay in programs longer than 45 days, teachers, doctors and therapists meet daily and review behavioral goals to accelerate student learning. The overarching philosophy is that behavior must be the first priority because without modification to behavior the students in this setting will not engage with learning again.

Goals and plans focus on the school as a whole and each student. There is not a traditional class or grade model. The composition of a class can vary on a day to day basis. An additional complexity is that the dynamic of a class group can be affected from one day to the next related to changed medication of a few students. The principal is acutely aware that on occasions challenging behavior of a few boys in a class can upset their learning and the learning of others. Based on data she takes decisive action to change the composition of such a class or she staffs such a class with a positive male role model paraprofessional. Goals and plans focused on data are put in place to improve the quality of academic subjects such as the recently introduced audio system reading program. In this school each student is vulnerable. As such, each student has an individualized plan with behavior and academic goals and these plans are reviewed and revised weekly to accelerate learning and to work towards the long term goal of being equipped to move to a less restrictive environment.

Students say, 'The principal is excellent and helps build our confidence and self-esteem'. The weekly conferencing model of a multi-disciplinary team meeting with a class of students enables each student in the school to express his or her feelings and be involved in re-setting goals to improve behavior and academic achievement. Parents are involved in setting the exit plan goals with clinical staff, but then frequently contact their children's teachers to re-align learning and behavioral goals for their children. Partnership between the school and parents in accelerating student learning is a strong feature. The overarching goal and linked plans which drive the activity of the whole school community is to ensure that each student exits a medical model and enters the best less restrictive learning environment for his or her needs as speedily as possible.

Quality Statement 3 – Align Instruction: The school aligns its instructional activity and resources, and student engagement around its focused plans for accelerating learning for each student.

This area of the school’s work is well developed.

Based on data, the curriculum is planned flexibly to meet students’ needs. There is a strong emphasis on integrated therapy and curriculum. For example, the writer’s model unit develops students writing skills alongside promoting their emotional development. Circle time improves their speaking and listening skills, but also builds their confidence and self-esteem. Analysis of test results is used to shape specific programs, such as the ‘word attack’ program to raise students’ achievement in reading. The school is particularly adept at using data to shape academic intervention service programs, such as Achieve 3000, for special education students.

The principal is very effective at holding teachers accountable. They are issued with robust instructional memos about what is expected of them, and strong words are exchanged if they fail to adhere to them. The assistant principals monitor portfolios and profiles across the different sites, and again have focused discussions with any teachers who cause concern. Evidence shows that teachers consistently use data to differentiate their planning and instruction. Effective use is made of technology to help them differentiate their instruction.

Budgeting, staffing and scheduling decisions based on a data analysis of students needs are strong features of the school. Following a recent analysis of scores of the early childhood literacy assessment system test funding has been targeted on the Foundations program for kindergarten through grade 3 students. Male paraprofessionals are moved around to service the needs of boys with the most challenging behaviors. Facing initial resistance from staff, the principal bravely departmentalized the high school curriculum. This has benefited students very significantly.

Instructional practice is consistently engaging across all seven sites. Therapy is integrated effectively with instructional programs. Students are challenged and behavior is skillfully managed. Given the complexity of their needs they engage well with learning. A significant strength lies in the way in which students are encouraged to evaluate the work of their peers in a constructive, but challenging manner. Students say that they feel safe at school and that they have a trusted adult they can turn to with their troubles. Attendance is very high profile and students understand clearly that if they are going to be re-integrated back into mainstream to graduate with a high school diploma they have to get into the habit of attending school regularly. They really want to graduate, and so they attend regularly. Occasionally, and quite understandably some students are too ill to attend.

Quality Statement 4 - Build and Align Capacity: The development of instructional leadership, staff, and capacity are aligned around the school’s collaboratively established goals for accelerating the learning of each student.

This area of the school’s work is well developed.

The principal is highly respected, by all stakeholders in the school community, as an effective leader who cares passionately about moving students on to a less restrictive environment as soon as possible, along with raising their achievement in this school. She is brave in making decisions, and overcoming initial opposition, in the interests of the students. This school functions very smoothly with consistent procedures across seven

sites. When hiring new teachers they are asked how they would use data to modify curriculum programs to benefit students with mental health difficulties. Professional development is driven by the need to raise achievement based on data analysis. For example, following a scrutiny of student portfolios it became evident that there was a deficiency in writing across the student population. A decision was made by administration to train the literacy coach in the Step-Up To Write program, targeted at students from grades kindergarten to 5. She turn-keyed this through a series of staff meetings across all seven sites and regularly visits classes to model lessons in the program. The principal observes lessons frequently and provides feedback to teachers on how they can improve their instructional practice. She never shies away from giving a hard message in the interest of the students. There is an effective model of peer observation.

Clinical and teaching staff meet weekly (the treatment team meeting) to evaluate students behavior and academic progress based on assessment data. In addition, there is a weekly community meeting. Students attend this meeting and are invited to comment on their own performance during the week. This is a powerful meeting and students participate in the setting of new goals to raise their performance. When students continue to underperform a case conference of all the professionals is called. Very effective partnerships with outside agencies are firmly in place to develop students' academic and social needs. Links with Queens Children's Museum and St. Mary's Hospital enhance students' enjoyment of the arts, including sculpture. Art and dance therapy are used effectively to support students in expressing their moods.

Quality Statement 5 - Monitor and Revise: The school has built-in structures for evaluating each student's progress throughout the year, recognizing weaknesses in its improvement plans and teaching practices, and flexibly adapting plans and practices to meet its goals for accelerated learning.

This area of the school's work is well developed.

The setting of interim goals for students based on frequent diagnostic assessments lies at the heart of this successful school. Daily modifications are made to students' behavior goals. The Comprehensive Education Plan focuses on important goals for improvement and there is stepped and time lined goals along the journey to meet the long-term goals. The tools to measure the success of initiatives enable administrators to evaluate real differences they make with respect to student achievement outcomes. Teachers know the part they have to play in implementing the goals in the Comprehensive Education Plan.

Comparisons, both within and across classrooms, do not really fit the model of this unique school. The range of medical needs and complex behaviors can be very variable within a class and indeed change from one day to the next. Periodic assessments are used effectively to revise plans immediately in English language arts and mathematics. Goals are under constant revision to support students in reaching their ultimate goal to leave a hospital setting for a less restrictive environment. The principal is amazingly flexible and demonstrates agility in planning to effect change often on a daily basis. Such a school as this would not be effective if this flexibility were not integral to its planning.

Part 4: School Quality Criteria Summary

SCHOOL NAME: Public School 23 Queens	∅	✓	+
Quality Score			X

Quality Statement 1 – Gather Data: School leaders and faculty consistently gather data and use it to understand what each student knows and is able to do and to monitor student progress over time.	∅	✓	+
1.1 The school uses available data and generates its own data to provide an objective, constantly updated understanding of the performance and progress of: <ul style="list-style-type: none"> each student, classroom, grade level, 			X
1.2 The school uses available data and generates its own data to provide an objective, constantly updated understanding of the performance and progress of: <ul style="list-style-type: none"> ethnic groups, English language learners, special education students* 			X
1.3 The school uses available data and generates its own data to provide an objective, constantly updated understanding of the performance and progress of: <ul style="list-style-type: none"> all other categories of interest to the school* 			X
1.4 Performance and progress are measured based on comparisons with similar schools, with the school's own past performance, and among students, classrooms, grade levels, academic subject areas, ethnic groups, and other groupings of interest within the school.			X
Overall score for Quality Statement 1			X

* These criteria are partially aspirational as of now because schools do not have routine access to all of this data. The NYC DOE plans to provide schools with enhanced access to the necessary data in 2007.

Quality Statement 2 – Plan and Set Goals: School leaders and faculty consistently use available data to understand each student's next learning step. Through collaborative planning and student and parent engagement, they set high goals for improving teaching practice and accelerating each student's learning.	∅	✓	+
2.1 Using data, school leaders and faculty engage in a collaborative process to set demanding, objectively measurable goals for immediate and long-range improvement, and to develop plans and timeframes for reaching those goals.			X
2.2 Goals and plans focus on the school as a whole and on each student, classroom, grade level, academic subject, and group of students whose performance or progress has been identified by the school as a particular focus area.			X
2.3 Particular attention is given to improving the performance and progress of students in greatest need of improvement.			X
2.4 High expectations are conveyed to students and parents/caregivers. Students and their parents/caregivers are regularly invited to provide information about each student's performance and how to improve. This information is central to setting challenging goals and developing, evaluating, and revising plans.			X
2.5 Goals and plans for improving student performance and progress drive the activity of all members of the school community: leaders, staff, students, parents, and other partners.			X
Overall score for Quality Statement 2			X

Quality Statement 3 – Align Instruction: The school aligns its instructional activity, resources, and student engagement around its focused plans for accelerating learning for each student.	∅	✓	+
3.1 The school selects the curriculum based on how well it aligns with or implements the mandated curriculum and on the curriculum's capacity to generate meaningful interim data about progress towards goals and to support the school's high expectations and improvement plans.			X
3.2 Teachers are accountable for improving instruction and student outcomes. They plan and differentiate their instruction based on the needs revealed by student data and by the focused plan the school has developed to improve each student's and group of students' outcomes.			X
3.3 Budgeting decisions are driven by the needs revealed by student data and by the focused plan the school has developed to improve each student's and group of students' outcomes.			X
3.4 Staffing decisions are driven by the needs revealed by student data and by the focused plan the school has developed to improve each student's and group of students' outcomes.			X
3.5 Scheduling decisions about the use of teacher and student time are guided by the needs that emerge from examining student data and by the focused plan the school develops to improve student outcomes.			X
3.6 Instructional programs actively engage students.			X
3.7 Staff know and respect students and respond to their academic needs, as well as their personal needs that affect academic performance. Each student knows and trusts an adult on the staff who is concerned about him or her.			X
3.8 Student attendance and engagement are high priorities. High rates and patterns of absences trigger immediate intervention.			X
Overall score for Quality Statement 3			X
Quality Statement 4 – Build and Align Capacity: The development of instructional leadership, staff, and capacity are aligned around the school's collaboratively established goals for accelerating the learning of each student.	∅	✓	+
4.1 Leaders, faculty, and staff are selected based on their high expectations for student performance and progress and based on their commitment and capacity to use data, compare outcomes within and across classrooms and schools and develop and revise plans and methods to improve performance and progress.			X
4.2 Professional development decisions are driven by the needs revealed by student data and by the focused plan the school has developed to improve each student's and group of students' outcomes. Professional development is designed to help leaders, faculty, and staff use data, self- and peer-assessments, and collaboration with peers to achieve goals for improved school and student outcomes. Professional development and self- and peer-evaluation are aligned and overlap.			X
4.3 The principal frequently observes classroom teaching and has a considered strategy for improving the quality of each teacher's instruction. Teachers frequently observe and support each other's classroom instruction with the goal of improving student outcomes.			X
4.4 Planning, evaluation of results, and revision of plans takes place in teams. Leaders and faculty inform each other of their goals and results, candidly evaluate themselves and each other, and use what is learned to drive improvement.			X
4.5 The principal is respected and has capacity to effect change.			X
4.6 The school runs smoothly. Procedures are clear, communicated to all, and are generally followed.			X
4.7 The school aligns youth development and support services around stated academic goals. Partnerships with outside bodies are routinely used to achieve academic goals.			X
Overall score for Quality Statement 4			X
Quality Statement 5 – Monitor and Revise: The school has built-in structures for evaluating each student's progress throughout the year, recognizing weaknesses in its improvement plans and teaching practices, and flexibly adapting plans and practices to meet its goals for accelerating learning.	∅	✓	+
5.1 All school plans and other interventions include frequent interim goals and diagnostic assessments of progress designed to reveal in objectively measurable ways whether the plan is being effectively implemented and reaching stated goals.			X
5.2 Comparisons of student progress within and across classrooms and schools are used in making interim diagnostic assessments and measuring the progress of plans and interventions.			X
5.3 Information generated by periodic assessments and diagnostic measures of progress and comparisons is used to revise plans immediately in order to reach stated goals. Interim and final goals are modified when data objectively demonstrate that revision is required.			X
5.4 Each plan's interim and final outcomes drive successive phases of goal setting and improvement planning, and each successive phase is characterized by agile and flexible realignment of practices and resources to improve student academic outcomes.			X
Overall score for Quality Statement 5			X