

Cambridge Public Schools
Administrative Guidelines on the Observation of Educational Programs
by Parents/Guardians/Caregivers and their Designees for Evaluation Purposes

I. Introduction

The Cambridge Public Schools seeks to insure, consistent with the provisions of federal and state laws and regulations, including the provisions of M.G.L.c. 71B, §3, that parents/guardians/caregivers can participate fully and effectively within school personnel in consideration and development of appropriate educational programs for their child. The following administrative guidelines set forth the process to be followed when a parent/guardian/caregiver requests timely access to parent/guardian/caregiver and parent/guardian/caregiver designated independent evaluators and educational consultants for observations of a child's current program or any proposed program for the child, including both academic and non-academic components of any such program.

II. Process for Requesting and Scheduling an Observation of an Educational Program

1. Parents/Guardians/Caregivers seeking to observe their child(ren), current program or a potential placement must make such a request at least five (5) days in advance. Such request should be directed to the attention of the Assistant Superintendent for the Office of Student Services or designee, Special Education Director and/or the school principal/head of upper school.
2. The Assistant Superintendent for the Office of Student Services or designee shall contact the parent/guardian/caregiver for an initial scheduling conversation within five (5) days of receipt of the parent/guardian/caregiver's request.
3. The Assistant Superintendent for the Office of Student Services or designee will work with the school principal/head of upper school, classroom teacher(s) and/or specialist(s) and the observer to set up the specifics of the observation, including but not limited to, scheduling and placement of the observer in the classroom. Observations generally will not be scheduled during the first or last week of school or when MCAS or district-wide assessments are being administered within the classroom that is to be observed.
4. The number, frequency and duration of observation periods will be determined on an individual student basis in accordance with law and regulation. The start and end time of observation periods and a schedule of observation periods will be stated in advance. In order to minimize classroom or student disruption, the length of individual observation periods may be limited. As noted in the Massachusetts Elementary and Secondary Education Technical Assistance Advisory SPED 2009-2, "[t]he

complexities of the child's need, as well as the program or programs to be observed, should determine what the observation will entail and what amount of time is needed to complete it."

5. If the observer is not the parent/guardian/caregiver of the student, the parent/guardian/caregiver must sign a release for the individual to observe and to review the student's student record information if that is to be part of the observation. The attached Observation Release Form should be used for this purpose.
6. The number of observers at any one time may be limited.
7. The observer will be informed that they are not to interfere with the educational environment of the classroom. If the observer's presence presents a problem, they will be asked to leave. This notice is particularly important, since the presence of parents/guardians/caregivers or other unknown individuals in a classroom can influence both the performance of children and others.
8. The observer also will be informed that they are there to evaluate the appropriateness of a special education program to meet the needs of an individual child. They are not there to evaluate a teacher's ability to perform their contractual job duties.
9. The observer will be instructed regarding the disclosure of confidential or personally identifiable information relating to other children. Staff must be mindful of removing materials which may be part of students' records from plain view. All observers will be asked to sign a Non-Disclosure Agreement Relating to Student Record Information During Observation or Evaluation of Student. A copy of this form also is attached to these administrative guidelines.
10. A school administrator or designee will accompany the observer at all times and will also observe and take notes of what is observed, paying particular attention to note anything that is non-typical concerning the observation period. This observation summary will be placed in the student's file and provided to the parents/guardians/caregivers prior to any follow-up team meeting.
11. Notwithstanding the foregoing, the Cambridge Public Schools, consistent with law and regulation may condition or restrict program observations when necessary to protect the safety of children in the program during the observation and/or the integrity of the program during the observation.

Last Updated: May 15, 2018

To be translated into the student's home language
OBSERVATION RELEASE FORM

I authorize _____ of
Name of Independent Evaluators or Educational Consultants

Business Address of Independent Evaluators or Educational Consultants

to observe my child's current program or any proposed program for my child, including both academic and non-academic components of any such program, and I further authorize the Cambridge Public Schools to provide the above identified independent evaluator or educational consultant with access to my child's current program or proposed program for my child for purposes of this observation. I hereby further authorize the Cambridge Public Schools to release a copy of my child's complete student record and/or information regarding my child's complete student record to the above identified independent evaluator or educational consultant. I further represent that I have authorized to the above identified independent evaluator or educational consultant to receive a copy of the complete student record and/or student record information.

By signing this Authorization for Release of Student Records and granting permission as stated herein, I am releasing the City of Cambridge, the Cambridge School Committee, the Cambridge Public Schools and its individual schools and their respective officers, directors, members, agents and/or employees from and against all claims arising out of the observation of my child's current program or any proposed program for my child by the above identified independent evaluator or educational consultant and the release of my child's student records and/or student record information and any subsequent use of this information by the above identified independent evaluator or educational consultant and their respective officers, directors, agents and/or employees.

I have read this Observation Release Form and understand its terms. I sign it voluntarily and with full knowledge of its significance.

Student Name

Grade

Date of Birth

Parent/Guardian/Caregiver Signature

Date

Student Signature (if over 16)

Date

**Non-Disclosure Agreement Relating to Student Record Information
During Observation or Evaluation of Student**

I, _____, a parent/guardian/caregiver designated independent evaluator and/or educational consultant for _____, the parents/guardians/caregivers of the student, _____, acknowledge and agree that I shall fully comply with the provisions of 603 C.M.R. 23.00 et seq., the state's student record regulations, and fully protect the confidentiality of any personally identifiable or confidential information that I obtain during an evaluation or observation of the above referenced student. I further acknowledge and agree that in the event that I obtain personally identifiable or confidential information during an evaluation and/or observation of the above-referenced student that I will not disclose such information to any other party except when such personally identifiable or confidential information is regarding the above-identified student and then I shall only use and disclose such information in a manner consistent with the authority and direction that I receive from the student's parent/guardian/caregiver.

I have read this Non-Disclosure Agreement Relating to Student Record Information During Observation or Evaluation of Student and understand its terms. I sign it voluntarily and with full knowledge of its significance.

Dated: _____