

# The Commonwealth of Massachusetts

### Executive Office of Health & Human Services

# Department of Mental Retardation

500 Harrison Avenue Boston, MA 02118

Mitt Romney Gövernor

Kerry Healcy Lieutenant Governor Timothy Murphy Secretary

Gerald J. Morrissey, Jr. Commissioner

Area Code (617) 727-5608 TTY: (617) 624-7590

January 4, 2006

Appeal of

Final Decision
Dear Ms.

Enclosed please find the recommended decision of the hearing officer in the above appeal. She held a fair hearing on the appeal of your client's eligibility determination.

The hearing officer's recommended decision made findings of fact, proposed conclusions of law and a recommended decision. After reviewing the hearing officer's recommended decision, I find that it is in accordance with the law and with DMR regulations and therefore adopt its findings of fact, conclusions of law and reasoning as my own. Your appeal is therefore denied.

You, or any person aggrieved by this decision may appeal to the Superior Court in accordance with G.L. c: 30A. The regulations governing the appeal process are 115 CMR 6.30-6.34 and 801 CMR 1.01-1.04.

Since ely,

Gerald J. Morriss

Commissioner

GJM/ecw

cc:

Deirdre Rosenberg, Hearing Officer
Amanda Chalmers, Regional Director
Marianne Meacham, General Counsel
Veronica Wolfe, Regional Eligibility Manager
Kim LaDue, Assistant General Counsel
Randine Parry, Psychologist
Victor Hernandez, Field Operations Senior Project Manager

## COMMONWEALTH OF MASSACHUSETTS DEPARTMENT OF MENTAL RETARDATION

In Re: Appeal of

This decision is issued pursuant to the regulations of the Department of Mental Retardation ("DMR" or "the Department"), (115CMR 6.30 – 6.34) and M.G.L. c. 30A. A fair hearing was held on September 23, 2005 at the Fernald Development Center in Waltham, Massachusetts. Those present were:

John Mitchell Elame Cockroft Randine Parry, Ph.D. Appellant
Appellant's Mother
Appellant's Father
Attorney for DMR
Attorney for Appellant
DMR Psychologist

The evidence consists of the following documents, and approximately one and one quarter hours of oral testimony:

Curriculum Vita of Randine Parry Exhibit #1 DMR Eligibility Determination Exhibit #2 Public and 2004 IEP Documents. Exhibit #3 Schools 2003 Chapter 766 Re-evaluation of Appellant. Exhibit #4 Public and 2002 Chapter 766 Re-evaluation of Appellant, Exhibit #5 Public and Basic Skills Assessment, Exhibit #6 College Progress Report, Exhibit #7 Exhibit #8 Guardianship Decree

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#### **ISSUE**

Whether the Appellant meets the eligibility for DMR services by reason of mental retardation as defined in 115 CMR 6.03(1).

#### BACKGROUND

Mr.	s a 20 vear old ma	<u>n wh</u> o currently attend	ds the	, which
is a residential scho	of located in	Connecticut. Mr	lhas auto	nded the
sinc	e September, 2000.	The Appellant atten	ded life).	for
two years offer to t	ransferring to his pr	esent school, and atte		lic schools
before that. When	he is not in residenc	eat the	ne lives with	
1101	Massachuse	ns. He has been diag	nosed will pervi	asive live type and
		n deficit hyperactive o	nsoraci, marchi	
dysthymic disorder.	(EXHIDIU##)			

currently receives educational services, including his placement at pursuant to Chapter 766, the Massachusetts Students with Disabilities Act. Under Chapter 766, a child who is deemed to have special needs is entitled to receive educational services that meet his or her needs as a result of his or her disability. Chapter 766 does not provide any services after a special needs student reaches the age of 22.

The Appellant applied for DMR supports in February, 2005. By letter dated March 16, 2005, the Department denied his application mother, requested a formal hearing on March 29, 2005. That hearing was held on September 23, 2005.

### SUMMARY OF THE EMIDENCE

The earliest cognitiv	e testing of the	Appellant in the re	cord before me is a Janua	ary
21, 2000 Intellectual Assess	ment administer	red by Susan Serin	o, MA/CAGS, a school	
psychologist with the	Public Schools	(Exhibit #9).	was 14 and a nail at ii.	ie .
time of this evaluation. The	test administer	ed was the We <mark>chsl</mark>	er Intelligence Scale for	
Children-Third Edition (WI		earned the following	ng scores:	

Verbal IQ

91

Performance IQ 68 Full Scale IO 77

According to his examiner, scores at this time were "drastically" lower than what he had achieved in 1995, when he was about ten years old. At the 1995 testing. Verbal IO was 108, his Performance IO was 98, and his Full Scale IO was 104. Ms. Serino stated that she believed that the 1995 scores "more closely reflect his ability," and that she has serious questions about the validity of the present [2000] scores." She suggested that the change in his performance might be attributed to his medications, noting that he was extremely lethargic, his gait was unsteady, and his speech was slurred and slow.

was again evaluated on 11/8/02 and 11/22/02, when he was 17 years old. The tests (WAIS-III) were administered by Marcel Fajnzylber, Ed.D., Consulting Psychologist for the School District (Exhibit #5). At this time he achieved the following scores:

Verbal IQ 91 Performance IQ 77 Full Scale IQ 84

Mr. Fainzylber reported that these scores may underrepresent his cognitive abilities because the WAIS-III is effort sensitive, and, as in the 2000 evaluation, the Appellant "manifested problems with test demands and the [length] of [the] session because they exceeded his attention span and area of interests." The evaluator also states that demonstrated "limited effort and inadequate self-correcting behaviors."

As part of the 11/8/02, 11/22/02 evaluation, was given selected achievement tests from the Woodcock-Johnson Psycho-Educational Battery-III. These tests were administered by Anne McNeece, M.Ed. In her report, she stated that "when compared to others at his age level, as a scademic skills and his ability to apply them are within the average range." (Exhibit #5).

Other evidence of the Appellant's cognitive/academic abilities is contained in DMR's Eligibility Determination report, prepared by Joel J. Match, Ph.D., (Exhibit #2), in which Dr. Match notes that James has passed the MCAS (Massachusetts Comprehensive Achievement System tests), although his mother testified that it took James seven attempts before he passed that test. Also in evidence was the Appellant's application to College. (Exhibit #6) Among other things, the application contains a writing sample by the Appellant, the quality of which suggests that the writer has substantial cognitive abilities not consistent with a mentally retarded person.

Randine Parry, Ph.D, Clinical Psychologist, testified for the Department regarding cognitive abilities, although she was not the person who made the original eligibility determination. As part of her assessment, she reviewed the 2002 evaluation discussed above. (Exhibit #5) She stated that average range, his performance IQ of 77 was in the low average range, and his full scale IQ score of 84 was in the upper borderline range. Dr. Parry also reviewed the results of Appellant's Woodcock-Johnson testing. She testified that his math scores were in the average range, while he tested in the average to high average range on the reading subtests. She observed that his academic abilities (as measured on the Woodcock-Johnson) appeared to be slightly above his cognitive results.

mother testified about her concerns regarding her son's adaptive skills. Specifically, she is worned about lack of judgment concerning certain life skills. For instance, she stated that he is not able to judge safety issues, and puts himself at risk as a result. In a 2002 report of Exhibit #7), Linda Baade, one of the Appellant's teachers, stated that stated that stated that stated that stated that he can negotiate movement around traffic." Safety issues are also referenced in a letter from Andre Bessette, Ph.D., TLC Psychology Resident, dated 1/12/05, in which he writes that deficient visual-spatial/kinesthetic awareness and poor self-estimation led him to walk out into traffic on several occasions, resulting in his nearly being struck and causing traffic to come to a halt." (Exhibit #10). Dr. Bessette also stated that has accidentally injured himself on several occasions but failed to identify and seek out proper first aid assistance."

also said that her son cannot accurately "read" people, and does not sense those who might want to take advantage of him. In addition, she testified that is indiscreet about financial information. She and her husband have been happy with their son's placement at because of, among other things, the support and structure it provides for

#### FINDINGS AND CONCLUSIONS

After a careful review of all of the evidence, I find that the Appellant has failed to show by a preponderance of the evidence that he meets the DMR eligibility criteria. My specific reasons are as follows:

In order to be eligible for DMR supports, an individual who is 18 years of age or older must meet the three criteria set forth at 115 CMR 6.03:

- a) he must be domiciled in the Commonwealth,
- j) he must be a person with Mental Retardation as defined in 115 CMR 2.01, and

k) he must be in need of specialized supports in three or more of the following seven adaptive skill areas: communication, self-care, home living, community use, health and safety, functional academics, and work.

There is no dispute that the Appellant meets the first criterion and I specifically find that he meets that criterion. However, I find that he is not mentally retarded as that term is defined at 115 CMR 2.01.

By statute, M.G.L. c. 123B, section 1, a mentally retarded person "is a person who, as a result of madequately developed or impaired intelligence, as determined by clinical authorities as described in the regulations of the department, is substantially limited in his ability to learn or adapt, as judged by established standards available for the evaluation of a person's ability to function in the community."

Consistent with its statutory mandate, DMR has adopted the American Association on Mental Retardation (AAMR) standards as the clinical authority to which it refers in determining whether an individual has "inadequately developed or impaired intelligence." The AAMR standards establish a three-prong test: (a) the individual must have significantly sub average intellectual functioning defined as an IQ score of approximately 70 to 75 or below, based on assessments that include one or more individually administered general intelligence tests, (b) related limitations in two or more of the following adaptive skill areas: communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure and work must exist concurrently with sub average intellectual functioning, and the individual must have manifested criteria (a) and (b) before the age of 18.

Applying those standards, I find that Mr. does not have significantly subaverage intellectual function in that all of his IQ scores were above the 70-75 range, which is the IQ range in which it is permissible under DMR standards to conclude that mental retardation exists. Furthermore, all his scores from the 1995 evaluation were in the range of average intelligence. In addition, his performance on the Woodcock-Johnson Psycho-Educational Battery-III in 2002 is not consistent with mental retardation. No contrary evidence was presented by the appellant or his witness. Therefore, I find that the Appellant is not "mentally retarded" as that term is used in statute and regulation for the determination of eligibility for DMR supports.

The Appellant also presented evidence relative to his adaptive functioning. Because the Appellant failed to show that he has significantly sub-average intellectual functioning, it was not necessary for me to consider his adaptive functioning in order to reach my decision.

#### APPEAL

Any person aggrieved by a final decision of the Department may appeal to the Superior Court in accordance with M.G.L.c.30A [115 CMR 6.34(5)].

Date: 1/107 29 2005

Deirdre Rosenberg
Hearing Officer