

## Embedding PLC's Into The School Day

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**School:** Peace Academy School  
**District:** Jefferson County  
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**My Superintendent/Principal is aware of and approved the submission of this "Best Practice".** True

**How many students did this Best Practice impact? School Wide:** 2000

### **School Level/Grade:**

- Preschool, Kindergarten, 1st Grade, 2nd Grade, 3rd Grade, 4th Grade, 5th Grade, 6th Grade, 7th Grade, 8th Grade, 9th Grade, 10th Grade, 11th Grade, 12th Grade, Alternative Program

**Identify and select the standard that relates to the purpose and direction as stated in the Kentucky AdvancED Standards.**

### **Standard 1**

#### **Purpose and Direction**

**The school maintains and communicates a purpose and direction that commit to high expectations for learning as well as shared values and beliefs about teaching and learning.**

#### **(Approach) Describe how the practice aligns to the organization's goals, and how it aligns with students, parents, staff and the community.**

Peace Academy, located inside Our Lady of Peace Hospital (OLOP), Peace is a Jefferson County School with 55 staff (28 teachers and 27 other staff) on site and 26 classrooms throughout the facility. In addition, Peace Academy employs a speech therapist, occupational therapist and has access to other related services necessary for our youth. Being the largest Children's Psychiatric Hospital in the United States, OLOP students come to the hospital from every area of Kentucky as well as from surrounding states. The hospital has 28 social workers on staff and each carries a caseload of students. Teachers, social workers, mental health workers, nurses and parents/guardians comprise the make-up of the Treatment Team. This team works together to help the student improve and return to his/her community.

The combined mission of Peace Academy and OLOP is to help children, while hospitalized, stay current in school. Students enrolled in Peace Academy are often several grade levels behind in both reading and math. The ultimate goal for these students is to help them enhance their skills while they are hospitalized. According to research, Professional Learning Communities (PLC) have successfully been used to enhance student achievement. The purpose of a PLC is to help teachers learn skills and techniques necessary for reaching every child. They acquire these new skills through collaboration with other teachers during the PLC meetings.

Working collaboratively with the Hospital, Peace Academy staff utilizes an alternative schedule approach to set aside time for weekly PLC meetings. Teachers are in the classroom an additional 15 minutes four days each week thereby 'banking' 60 minutes per week which then is used for PLC meetings. The PLC groups meet weekly to discuss student achievement, individual student work, curricula, instructional strategies, assessment and materials necessary to support teaching/learning. The goal of the PLC is to ensure that students stay current with their academic work and, if possible, enhance their basic academic skills.

#### **Describe the current situation before the practice was developed. Note reasons why improvements were needed.**

Students are admitted to a psychiatric hospital for a variety of reasons. Among those are problems manifested primarily in a 'regular' school (e.g. not attending school on a regular basis, severe behavior problems while in school, school phobia, etc). According to our data, a majority of students admitted to the hospital and thus enrolled in our school, were behind with their current school work and also were testing several grade levels below in both reading and math. The prevailing attitude was that very little could be done to alleviate these problems. Hospital staff and the academic staff were not always on the 'same page' with what strategies needed to be used in order to help these children improve. There was no extra time available for teachers to really study data, talk about interventions, or see research based instructional strategies being incorporated in an actual classroom. Being in a hospital environment was difficult because of small rooms and isolation from other staff, when the main focus was treatment issues. Education was seen as secondary. Treatment teams included teachers but often due to a multitude of reasons other staff did not (or could not) attend. Student achievement needed to improve but

specific time was not set aside for teachers to study data and collaborate. With the majority of students testing at four grade levels behind in both basic reading and math skills, something needed to change.

**(Deployment) Describe the process used to develop the solution which became the Best Practice (or promising approach) and describe the implementation process.**

Peace Academy is part of a large entity in the Jefferson County Public School system (JCPS) known as State Agency Children's programs (SAC). The first step in our process of developing PLC's actually occurred when the SAC schools set aside time, after school, every six weeks for 'Quality Team' meetings. These teams were the forerunners for what eventually became PLC groups. Teachers were placed on teams according to content area. As large as these groups were and with many difficulties in establishing a positive culture for change the start-up was slow but it was the first step. During this 'start-up' time (as the Quality Teams were positively evolving) Peace Academy took the second step by establishing one PLC of their own. At Peace there were eight elementary classrooms. This group of classes included two out-patient classrooms, two in-patient FMD classrooms and four other higher functioning in-patient classrooms. Because of the above stated structure of the program these eight teachers and their eight teacher assistants rarely were able to see or speak with each other. They also shared the same age groups of children and similar problems teaching core content material but there was very little time for collaboration. For this reason Peace Academy was able to employ substitute teachers to cover classes while these classroom teachers met to discuss similarities and differences, strategies for improvement, and how to best teach core content. These teachers then developed a close relationship with each other while learning how each classroom actually worked. The eight teachers observed each other, discussed common 'problem areas', recommended interventions, and actually recommended a new literacy program (after watching it in action in other JCPS schools during their PLC time). This initial group met for an entire day during the times we had substitutes available in order to accomplish their goal of improving achievement. The result was improved teaching by all eight teachers as evidenced by student scores in reading and math increasing by two grade levels over each 90 - day period. The next step was to include another group of teachers to see if we could replicate the success of our elementary group. The literacy teachers were chosen as the next group. All teachers of literacy were on the team. Because of the size of the group (12 teachers) it was divided into two with each group consisting of an equal number of teachers who taught literacy only and those who taught in self-contained classrooms. The group members were switched periodically in order to expose each member to a variety of ideas. This group also saw significant change in reading and writing scores for their students.

This year (2012-2013) is seeing the implementation of PLC groups for all areas at Peace Academy. There are four basic PLC groups – elementary, teachers of self-contained classrooms, Innovations teachers (Those who work with students with severe academic/cognitive difficulties) and the basic middle school/high school group housed on our 4th floor. Students are placed in separate middle school/high school classrooms for Common Core standards curriculum and they change classes much the same as 'regular school' students do. Our basic PLC groups include all of our teachers and teacher assistants. The process is teacher driven based on classroom needs. By the above stated method of 'banking minutes', these groups meet every week on Wednesday afternoons during school hours. The system is set up to allow for discussion of student work, viewing of data, sharing of ideas related to student achievement, opportunities for embedded professional development, and for the basic four groups to be reconfigured into a variety of other groups such as all literacy teachers and/or all math teachers, all middle school teachers, and high school teachers (including teachers of self-contained classrooms and innovations classrooms) to meet to discuss initiatives.

This process also has allowed time for hospital staff to join our groups to discuss student progress in school, teach/train our staff about treatment plans and learn from our staff about how school 'works' in both an alternative setting as well as in a 'regular' comprehensive school setting. It also allows for improved transitions. All of our students transition out of the hospital. By establishing our PLC groups as they are, both our teacher and the hospital staff can pass on valuable information to the setting where the student transitions.

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**(Learning): Describe the tangible results achieved, including trends for summative (outcome) and formative (leading) indicators, and the comparative data used to suggest that this is a Best Practice or, promising approach.**

Since children in a hospital setting only average a 30 day stay, it is difficult to report tangible results. Approximately 30% of our students do stay hospitalized for 90 days or more. Of that group 83% have made an average gain of two grade levels in reading and one and a half grade levels in math during that 90 day period. This gain is based on a pre/post STAR Reading and STAR Math assessment. Teacher lesson plans are now more detailed and a wider variety of instructional strategies are being used. Teacher observations show that technology is being applied more often and in more appropriate ways to enhance instruction. Contained in the PLC meeting notes there is a strong indication that teachers are collaborating to design authentic assessments and are analyzing student work. In all PLC groups individual teachers share instructional strategies that are research based and are being successfully implemented in their class. The PLC then discusses the strategy in relation to their specific class needs and adjusts that strategy to fit their class. Each teacher is given an opportunity to lead a PLC meeting. This is accomplished by a set rotation of teachers and teacher assistants so that everyone in the school has the chance to share their knowledge and expertise. With the increase in detailed lesson planning, use of innovative, research – based instructional strategies and time for collaboration student achievement should continue to improve.

**(Integration): Lessons learned and future plans to sustain this best practice.**

The initial design of our PLC program included plans for teachers to be on at least three different PLC groups that would rotate each week. One month into the plan we realized that although there might be a need to split into just Core Content areas and not the basic groups there was not a pressing need to do this as often as we had initially planned. It was decided that the original plan was too confusing and that when/if we needed to meet in content area groups we could do so as necessary. Lesson learned: Too much of a good thing is too much. We also learned that we could use our time, since we meet weekly, to invite experts in to provide professional development. Experts have attended PLC meetings to speak on the following topics: SMART Board strategies,

Behavior management, types of writing, Web-based literacy programs and hospital specific protocol. As we continue to evolve we will set up more of these professional development opportunities.

We learned that, for us, we need to take smaller steps in regard to analyzing student work. This does not need to be done weekly but fits better if done once per six- week grading period. Finally, we now know that we have several 'experts' on our own staff and that we need to allow time for them to share with all of our groups and that we can accomplish this through large group meetings ,such as a whole staff meeting.

**List any training materials/resources that could be shared with other schools and a description of how the materials/resources are being used.**

We used "Learning By Doing" second edition by Richard DuFour, Rebecca DuFour, Robert Eaker and Thomas Many to establish the basis for developing our PLC's. In addition several of our teachers have attended training provided by JCPS and the SAC program. Much of what we have done has been through trial and error in order to meet our program's specific needs. Our staff will be available to help other programs tailor this process to their unique needs.