



**In<sup>3</sup>: Interdisciplinary, Inclusive Intervention:**

**How to work well with others while providing best practice in school settings.**

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**Upon completion of this course, attendees will be able to:**

- Analyze current evidence findings on inclusion practices for physical therapies in the school.
  - Analyze current evidence findings on interdisciplinary practices in the classroom.
  - Compare and contrast the pros and cons of providing inclusion and interdisciplinary PT intervention as compared to more traditional models of school-based therapy intervention.
  - Examine inclusion and interdisciplinary current practices while providing school-based physical therapy services.
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**What do school PTs do?**

- Part B of IDEA
- Promote Independence and Participation
- Support ALL student goals established in the IEP
- Work collaboratively

Ray Laurie. Public Schools of North Carolina. School-Based Physical Therapy. NC-DPI Brochure.  
<https://www.med.unc.edu/ahs/physical/schoolbasedpt/sb-pt-files/nc-sbpt-brochure>. Accessed September 28, 2017.

**Service Delivery Models: The How and Where We Treat<sup>15</sup>**

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- **Individual Pull-out**
  - Location: away from classroom
  - Direct Intervention
  - Pullout only model
  - PT don't see classroom performance.
  - Teachers don't see interventions.
  - Time before and after intervention
- **One-on-One in Classroom**
  - Location: in the classroom
  - Unrelated to current classroom activity
  - Teachers have to keep other children from interrupting
  - Can be distracting to the child or the peers
- **Small Group Pull-out**
  - Location: away from classroom
  - 1-6 peers with special needs
  - Teacher to help schedule group
  - Provide info before & after

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- **Group Activity**

- Location: In the classroom
- All children in the group
- Emphasis on the needs of one or more
- Collaboratively planned activity
- All or some IEPs
- Teacher can:
  - Monitor
  - Participate in group

### Inclusion Intervention

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**Inclusion:** “The action or state of including or of being included within a group or structure.” (OxfordDictionary.com)

- **In education:** Not just for students with special educational needs

**Integrated Intervention:** “The coordination of therapy or consultative special education within the ongoing routine of the classroom.” (www.vanderbiltchildrens.com)

Specialists provide services by:

- Consulting
- Combo of direct, monitor, and consultative services
- “Individualized within routines”
- No Pull-out
- Not isolating the child from the ongoing activity

### Embedded Intervention

**Embed:** “Implant (an idea or feeling) within something else so it becomes an ingrained or essential characteristic of it.” (oxforddictionary.com)

- Intervention
- Curriculum
- Context
- Routine-based
- In the student’s setting
- Planning/collaborating between teachers & service providers

### Are Embedding & Integration the same?

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#### Embedded intervention:

- Child’s self-initiates in a natural environment with contextual interactions<sup>12</sup>
- Adult facilitates the child’s learning
- Clinician-directed therapeutic interventions are NOT used for skill development<sup>25</sup>

#### Integrated therapy:

- Variety of natural settings
- Communication and collaboration increased
- Continuous assessment of student needs
- Miss less instruction time

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### Service Delivery & Generalizability of Skills

The ability to apply what has been learned in one context to other contexts

**\*\*Young children & children with cognitive impairments\*\***

- Unlikely to learn skills 1x30min/week
- Benefit from ongoing intervention from multiple adults
- Natural setting to practice functional skills

### Perspectives on Embedded & Integration

Embedding Intervention & Integrating Therapy – A Team Approach – Partnerships for Inclusion – Frank Porter Graham Child Development Institute – UNC-CH 2009.

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#### Teacher's Perspective

- Aware of interventions & successful strategies
- PT visible
- Therapy room demystified
- Generalization of skills
- Strategies for all students
- Cohesive classroom collaboration

#### Therapist Perspective

- Observation of the natural environment during daily routines
- Whole-student perspective
- Collaboration on challenges
- Sharing of successes
- Increases professional identity
- Grow repertoire of skills

#### Student Perspective

- Supports classroom membership
- Focus on independence and engagement
- Peers as models
- Increase child engagement
- Decrease hallway transition time
- Students get more services!!!
- More intervention and practice
- Intervention occurs between specialist's visits

#### Parent Perspective

- More teamwork
- Reinforcing goals with repetition
- Strategies developed using wealth of expertise and resources
- Doesn't feel like therapy
- Better relationship with the specialists
- Ideas and views are validated

## Research in a Dash

### Inclusion

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#### Participation-based Therapy for Children with Disabilities<sup>20</sup>

- Group promotes participation
- Real-life experiences enable new activity learning
- Develop skills for integrating into society

#### Use of Groups in Pediatric Physical Therapy: Survey of Current Practices<sup>13</sup>

- Positive social interaction
  - Modeling
  - Motivation
- Limitations
  - Reimbursement
  - Lack of individual attention
  - Turn taking down time

### Group vs. Direct Intervention

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- **Effects of Group-Based Versus Individualized-Based Exercise Training on Motor Performance in Children with DCD: A Randomized Controlled Pilot Study<sup>10</sup>**
- **Effects of Group Motor Skill Intervention on 5- to 6-yo Children with DCD<sup>21</sup>**
- **Comparison of Individual and Group/Consultation Treatment Methods for Preschool Children with Developmental Delays<sup>4</sup>**
  - No significant difference between groups
  - Similar gains in motor performance
- **Effect of Group Setting on Gross Motor Performance in Children 3-5 Years Old with Motor Delays<sup>28</sup>**
  - Assessment in a group setting (2-4 peers) and pull-out
  - Significantly higher Peabody item scores in group assessment
    - Competition
    - Motivation
    - Modeling

### Groups of Varying Abilities

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#### Intensive Motor Skills Training Program Combining Group and Individual Sessions for Children with Cerebral Palsy<sup>23</sup>

- High attendance
- High level of goal attainment
- Positive gains on standardized tests
- Positive parent feedback

Individual goal success is possible in groups with children of varying ages, skill levels, and goal areas.

### ***Inclusion Take Home***

Children with motor difficulties may lack:

- Practice opportunities
- Motivation to learn novel skills
- Understanding of what is to be learned
- Further Research is important & necessary

## Pros and Cons of Integrated Inclusion

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### Integrated Inclusion Benefits

- Greater generalization
- Peer modeling
- Built-in motivation
- Routine & structure of a classroom
- Modeling techniques for other specialists and staff → when PT isn't there
- Debunking the therapy room "myth"
- Awareness of all goals, needs and strategies
- Promotes TRUE collaboration
- Progress monitoring across activities
- Related service provider part of the instructional team
- Collaborative consultation
- Therapists and staff exchange ideas and support each other
- Therapists can see carryover of skills by staff
- Student preparation for higher independence
- Members of the interdisciplinary team learn about their colleagues' roles and gain respect for each other's roles and work together more

### Integrated Inclusion Cons

- Time and planning
- Initially resistance from parents, teachers, and colleagues
- Could be less individualized
- Turn taking can lead to down time
- Space constraints
- Billing management

## Playing Well with Others

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### Multi vs. Interdisciplinary

#### Multidisciplinary

- Work in parallel
- Independent goals
- Separates the child's function into domains
- Opportunity cost

#### Interdisciplinary

- *Collaborate* through:
  - Joint planning
  - Decision-making
  - Goal-setting
- Unified treatment around function

## Interdisciplinary Research in a Dash

### Team Collaborative Practices Between Teachers and Occupational Therapists<sup>1</sup>

- Collaboration leads to
  - Student skill improvement
  - Improved perception of therapist effectiveness

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### Collaboration Between Team Members in Inclusive Educational Settings<sup>17</sup>

- Collaboration is mutually beneficial for students and team members
- Implementation is problematic

## Pros and Cons of Collaboration

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### Benefits of Team Collaboration

- Shared knowledge and expertise between specialists and staff
- ↓ Segmenting of the child
- ↑ Holistic approach to child's learning
- Specialists take on shared roles and responsibilities
- Increased opportunities for skill building<sup>26</sup>

### Cons of Team Collaboration

- Time
- Billing
- Scheduling
- Working with "personalities"
- Practice of collaboration is variable and frequently not practiced correctly
- Vagueness of roles<sup>26</sup>

### Facilitating Collaboration<sup>26,27,30</sup>

- Prioritize getting to know your team and individual strengths
- Practice and Support:
  - Inclusion, integration and embedded practices within the school and classroom routine
- Plan with your related service providers in mind and for learning projects or activities
- Ask questions of your team
  - About your students with IEPs
  - About students that are not receiving PT
- Before the IEP meeting, talk . . .
  - Can this goal be integrated?
  - Is the goal educationally relevant?
  - Do all team members find the goal meaningful?
  - Could any team member monitor the goal?
- Lend a hand when possible

## Interdisciplinary Inclusion Intervention in Practice

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### Wiggle Time

- Setting: EC and Inclusion Preschool Classrooms
- Interdisciplinary
- Circle Time/large group structure
- Address the goals of the participating students
- Support the NC Foundations for Early Learning and Development
- Strong repetition of activities
- Progress Monitoring

### **Activity Example**

- Preposition Game: On the Bus
- Literacy Component: "The Seals on the Bus"

### **Initial Set Up**

- Planning time
- IEP mining
- Acquire resources
- Easy to remember/visual cues

### **IEP Mining**

- By the end of the IEP, Sam will participate in 1 classroom song activity with appropriate vocalizations and appropriate body motions with minimal verbal cuing and minimal hand over hand physical prompting for motions.
- By the end of the IEP, Sallie will correctly identify 3 out of 4 primary colors during group activity with minimal distraction.
- By the end of the IEP, Suzie will step up a small (4-6 inch) step with stand by assistance to perform classroom activities, including sign in on white board and wash hands.

\*\*Remember, goals should be measurable and meaningful to all parties

### **Billing**

- Initial unbillable time for planning
- Supplemental therapy time is billable
- When individually facilitating a student's activity, it is billable individually
- Dependent on district policy and IEP service delivery

### Super Circle

- Setting: Multiple disabilities high school setting
- Interdisciplinary
- Circle Time/large group structure
- Address the goals of the participating students
- Allows for monitoring of consultative students
- Strong repetition of activities

### **Initial Set Up**

- Planning time
- IEP mining
- Acquire resources
- Easy to remember/visual cues

**IEP Mining**

Consultation/Related Service Support Description (RSSD):

- Jane walks with a moderately crouched gait, bilateral solid AFOs and has fair to poor dynamic balance on even surfaces. She has a severe cognitive disability. She loves to watch basketball.
- John uses a manual wheelchair in the classroom with decreased speed and endurance but good accuracy to targeted location. He has moderate ataxia and strong upper extremities. He has an aversion to different textures like water and sand. He loves giving hugs to girls.
- Judy navigates her school in a power wheelchair with stand by assistance for redirection and safety. She has a moderate cognitive disability. She loves music and dancing.

**Yoga Group**

- Setting: Regular Elementary school classroom or EC classroom with more support
- 1 – 2 students with IEP in a classroom
- Student becomes model, teacher, or standard yogi
- Kid friendly yoga
  - Breathing
  - Balance
  - Strength
  - Endurance
- Work with teacher/SLP/OT to create a yoga structure within the school day/week

**IEP Mining**

- By the end of the IEP, Kim will stand at the board for 1 minute while using 1 hand for classroom activity without loss of balance and supervision.
- By the end of the IEP, Kaden will hold his cafeteria tray (no milk) independently transitioning from the line to the class table without losing any food.

**Movement Group**

- Setting: Regular Elementary school classroom or EC classroom with support
- # of students with IEP can determine frequency of services
- Location: Within the classroom, out on the playground
- Work with teacher/SLP/OT to create a fun movement “break” within the school day/week
- Teachers love the assistance

**IEP Mining**

- By the end of the IEP, Mikey will follow directions and stay on task for 5 minutes during classroom group activity.
- By the end of the IEP, Mikayla will safely transition from her reverse rolling walker to a classroom chair or cafeteria with supervision and without loss of balance.
- RSSD: Melissa has moderate low tone. She ambulates throughout her school environment wearing bilateral SMOs. She typically will sleep 3 out 5 days a week during the final hour of the school day.



## Activity Breakdown by Domains

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### Activity

- Literacy Component
- Musical Component

### Provider Focus

- Occupational Therapy
- Physical Therapy
- Speech and Language
- Academic
- Student Social-Emotional

## What will you do on Monday?

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### Group Related Benefits<sup>3</sup>

- **Gang** Being with peers breaks isolation and motivates children. Contributes to well-being.
- **Respond** to the needs of a greater number of children. Could help improve service accessibility.
- **Observation** (Specialists) observe other (specialists). Children observe their peers. Facilitates sharing and learning.
- **Utilization** of a service delivery model integrating different intervention methods.
- **Participation** Groups create opportunities for practice and facilitate achievement of objectives relating to social participation.
- **Success** Children develop new skills and perform new tasks. Successes increase their self-esteem.

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