



Preschool Network

Network News



<http://cdd.unm.edu/ecspd/psn>

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Integrated Therapy Model of Service for Preschool Children with Special Needs

by Betty Lansdowne

What is Integrated Therapy?

Related service providers can support preschool youngsters receiving special education following a continuum of models ranging from individual pull-out therapy to collaborative consultation. One of these service models is called integrated therapy, which is defined as “the coordination of therapy or consultative special education within the ongoing routines of the classroom” (Integrated Therapy, www.vanderbiltchildrens.com). As the therapist(s) works with a child in the classroom setting alongside the classroom staff, the staff members observe and learn to follow those same strategies with the child when the therapist is not present. This allows the interventions to be embedded into the daily routines and activities of the child and to become a part of a well-coordinated program.

In guidance from the NM Public Education Department, Special Education Bureau, concerning the role of related service providers, a memorandum dated August 22, 2002 from Sam Howarth, State Director of Special Education at that time, recommends that “IEP teams expand their thinking about the role of related service providers in working collaboratively with educators and their students to structure the supports, interventions, and services that will help students with disabilities attain their educational and life goals. As such, we are recommending that the entire school context and all those within it be considered when within it be considered when designing the supports and interventions.” (S. Howarth, August 22, 2002, Memorandum: Role of Related Service Providers). He writes that all too often it is automatically decided that related service providers work in segregated settings using one-on-one, direct instruction/interventions, and that thinking needs

to be expanded to consider other options such as integrated therapy.

When districts use this model of service provision, it is understood that these related service providers become a part of the instructional team, using their specific expertise in designing tasks that focus on the student’s strengths, needs, learning styles, etc. Their participation requires time to regularly collaborate with the other team members.

McWilliam, R. A. (1995). Integration of therapy and consultative special education: A continuum in early intervention. *Infants and Young Children*, 7(4), 29-38.

Integrated Therapy Works!

Statements from Staff

Thanks to Rio Rancho Schools, Shining Stars Preschool staff Angela McMillan, Occupational Therapist and Linda Stam, Developmental Preschool Classroom Teacher; Bloomfield Schools Early Childhood Center staff Deb Latta, principal, and Karen Smith, assistant principal; and Moriarty Schools staff Laura Salem, Occupational Therapist, for their contributions to this newsletter article.

An OT’s Perspective on Integrated Therapy

Angela McMillan ♦ Rio Rancho Schools ♦ Shining Stars Preschool

As an occupational therapist (OT) at Shining Stars Preschool, I have the opportunity to experience integrated therapy first hand. The OTs, SLPs, and PTs often work in the classroom, which allows teachers and educational assistants to see how we work with our students. This helps the teachers implement the same therapeutic techniques into the rest of the school week, so the students receive daily support, rather than just when the therapist is in the room. This type of team work allows the children to benefit from interventions that will help them learn to the best of their abilities.

Another key component to integrated therapy on this campus is collaborative consultation. Therapists and staff exchange ideas that we feel are working with each student specifically. When therapists spend time in the students’ classrooms, we are able to see the carryover of skills we are teaching the students. When pull out therapy is the only model used, the teachers do not benefit from seeing the interventions we use, and the therapists do not benefit from seeing how the student performs in the classroom. Integrated therapy brings a good balance to our campus and prepares students for higher independence in the future.

The Preschool Network is funded by
The New Mexico Public Education Department, Special Education Bureau

A Teacher's View

Linda Stam ♦ Rio Rancho Schools ♦ Shining Stars Preschool

In an interview with Linda, a teacher in a class comprised of preschool youngsters with autism, she expressed great enthusiasm for having therapists work alongside her in the classroom. She feels her knowledge and comfort in working with her youngsters has increased tremendously, in large part because she can learn new techniques and practice them with the therapists' support, and maintain a consistent program for her youngsters.

When she talks with families, she noted that she feels more competent than ever before in her abilities to explain to them the programs created for their children and why techniques that are being used were chosen. Her knowledge has given her an ability to more easily respond to their questions, as well.

Although it is a challenge to learn how to work as a team, Linda finds the opportunity to have "other eyes" view and interpret a situation can be very beneficial in problem-solving strategies. Through discussions at team meetings, she has become familiar with what therapists in the different fields look for in determining needs of children and in creating programs for them. She has found that the members of the cross-disciplinary team gain respect for each other's roles as they work together and enjoy sharing the responsibilities in the classroom from changing diapers to helping youngsters with their backpacks and coats.

Even though Linda is a proponent of integrated therapy, she also understands the importance of offering other service models such as pull out therapy to meet some youngsters' needs.

Thinking Outside the Box When Using Integrated Therapy

Laura Salem ♦ Moriarty Schools ♦ Edgewood Elementary

When I use the integrated therapy model of service in my school, I have ongoing conversations with everyone who comes into contact with that child throughout the day, including the teacher, other therapists with whom the child works, cafeteria staff, bus drivers, school secretary, principal, etc. and involve them in the child's "therapy." This is especially important when supporting youngsters who are very bothered by outside stimuli like sounds, visual distractions, and oral sensitivity. Children with these sensory issues work tremendously hard to respond appropriately to stimuli throughout their day and need to be supported in a variety of settings. In my therapy with children with sensory integration needs, I teach them to use the words "challenging or easy" to describe events that they feel can affect them. I use these words rather than "good or bad" as these youngsters already know they interact with the world differently, and they don't need judgment words like that associated with their sensitivities.

One youngster, with whom I work, finds food textures particularly challenging, so we review the cafeteria menu ahead of time and he chooses the lunches he is willing to try.

I have coached the student to ask for the foods he wants and have advised the kitchen staff that he will choose food he wants, and will inform them how he wants it placed on his tray (so foods are not touching one another). Initially, it was harder for the kitchen staff NOT to serve him the green beans than it was for him to boldly say "no thank you!" At this point in the school year, he is able to recognize events that can seem to be challenging initially. These events become easy when he is helped to break down their components and encouraged to tackle them one at a time. At home, his mother says he incorporates this technique when trying a challenging pizza topping.

Integrated therapy is a great way to inform school staff about the OT role in supporting them and their students, and to teach them more about the diverse needs of their students.

Administrators' Perspectives

Karen Smith and Deb Latta

Bloomfield Schools ♦ Bloomfield Early Childhood Center

Karen Smith and Deb Latta have been administrators at the Early Childhood Center (which contains most of the district's developmental preschool programs) for several years, and have encouraged the use of the integrated therapy model. Karen explained that she saw many advantages to providing services in the following ways: therapy activities for youngsters are age appropriate, in part because of the team planning; there is peer support for youngsters receiving therapy; materials used in therapy-related projects are from the classroom and are available every day; and the activities used in therapy become center projects, and thus are open to all children.

The administrators noted for some therapists, working with children in the classroom on therapy goals makes them uncomfortable. They have found, however, that these same staff members typically become advocates of integrated therapy when they notice the progress youngsters typically make when they can practice the strategies used in therapy throughout the whole day. Classroom staff realize the value, too, of working with smaller groups of children when the therapist is working in the room. It was mentioned that it does take the support of the administration to make this integrated therapy model work effectively, as it requires extra time for staff to collaborate.

Web Review

by Betty Lansdowne

<http://www.vanderbiltchildrens.com>



Monroe Carell Jr. Children's Hospital at Vanderbilt
Topic: The National Individualizing Preschool Inclusion Project Model

This website contains a number of tools to assist professionals in implementing the integrated therapy service model. The *Consultation Checklist* is comprised of 13 points which the therapist and the teacher can include in their conversations during collaboration meetings. Examples of these points are queries about which service delivery model to use in addressing particular goals (e.g., group activity or individual within routines), and clarifying the use of interventions/techniques included in a child's program. The *Specialist Documentation Form* contains a description of each model of service along with a space for the therapist to check off which model was used. There is also an extensive resource list of journal articles and books, many of which may be found in the Center for Development and Disability LINC library. <http://cdd.unm.edu/linc/>

EARLY CHILDHOOD OUTCOMES: MEASURING THE GROWTH OF CHILDREN

TRAINING OPPORTUNITY

Presented by: The Preschool Network at the UNM Center for Development and Disability

Part A for New Staff

This 4-hour workshop will offer a comprehensive introduction to Outcomes: the process, purpose, and reporting. Participants will receive information and participate in activities that facilitate an understanding of how to develop and implement an assessment and documentation process to monitor children's development.

Part B for Staff Already Familiar With Outcomes

For those familiar with Outcomes and have already attended the introduction, this 4-hour workshop will expand their knowledge on next steps to maximize benefits the Outcomes process provides to preschool programs and services. This will be an interactive workshop.

This training is intended for local preschool educational interdisciplinary teams including:

- ◆ Early Childhood Special Education Teachers
- ◆ Early Childhood Ancillary Service Staff: therapists, evaluators, etc.
- ◆ Head Start Teachers
- ◆ Childcare providers serving young children with special needs
- ◆ Parents
- ◆ Administrators

STATEWIDE TRAININGS OFFERED

LOCATION	DATE
Roswell	August 13, 2008
Deming	August 15, 2008
Farmington	August 20, 2008
Las Vegas	August 22, 2008
Albuquerque	August 27, 2008

TIME*: 8:00am – 12:00pm (Part A)

TIME*: 1:00pm – 5:00pm (Part B)

*All locations have the same time schedule

Space is limited, so please register early.

To register, call or email

Dawn Giegerich (505) 272-3459

dgiegerich@salud.unm.edu

Preschool Network Welcomes You!

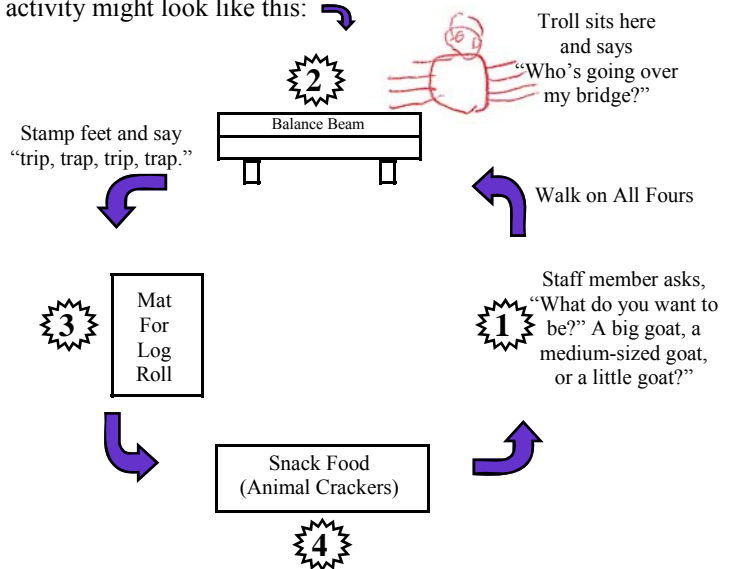


Classroom Activity

by Betty Lansdowne

An obstacle course is a fun and simple way to incorporate motor, language, and educational goals into a classroom activity. It also is an easy way to begin the collaborative teaming process as each therapist identifies skills he/she wishes to include and the teacher participates by selecting the theme. The theme oftentimes uses a familiar, favorite book's character and storyline, such as *Brown Bear, Brown Bear, What Do You See* by Eric Carle or *The Three Billy Goats Gruff* by Paul Galdone. It is, however, important when using a book theme that the children are very familiar with the storyline. If there are phrases repeated throughout the story like "Who's walking on my bridge?" in *The Three Billy Goats Gruff*, these can be incorporated into the activity.

If *The Three Billy Goats Gruff* were used, the plans for the activity might look like this:



- Language goals include: answering questions, responding in a sentence, practicing words using articulation goals like "trip, trap."
- Motor goals include: walking across the balance beam (forward, sidewise, etc. to meet individual child's needs), log roll, oral motor needs (snack treat that is used could be crunchy, gelatinous, etc.), or sensory input (walking on all fours, impact of the log roll).
- Education goals include: understanding the sequence of the course, understanding directions, taking a role in a story.
- Obstacle courses can be the first activity of the day so that the set up can be done before the children arrive. It is a good activity to arouse youngsters whose systems need waking up, as well as to calm those children needing that.
- It is important that staff members are present at each station around the course to support the skill level needs.
- Youngsters with significant motor needs can be included by playing a part such as the troll or by completing a modified course that is planned for in advance.

Professional Development Opportunities

EPICS 5th Annual Leadership Institute — June 12-13, 2008, Farmington. The conference targets those parents who would like to enhance their knowledge and skills in the special education process under the IDEA 2004 – Part B, and who will serve as a support and advocate for other parents in their respective communities. Contact: jeanettet@epicsproject.org or telephone (505) 867-3396.

The Division for Early Childhood 2008 Conference: 24th Annual International Conference on Young Children With Special Needs & Their Families — October 26-29, 2008. Minneapolis, Minnesota. For more information, go to: http://www.decsped.org/conference/about_the_conference.html

EARLY CHILDHOOD OUTCOMES: MEASURING THE GROWTH OF CHILDREN



TRAINING OPPORTUNITY

Presented by: The Preschool Network at the UNM Center for Development and Disability



See page 3 of this newsletter for training locations and dates.

Summer Fun

Visit the following websites for Preschool Activities and Crafts
http://www.first-school.ws/theme/seasons_summer.htm
<http://www.makingfriends.com/>

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Do you or your staff need NM Early Childhood Outcomes Training, or training on the use of the Child Outcome Summary Form? If so, please call Dawn Giegerich at (505) 272-3459 to schedule a training date.



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