Inclusive Speech-Language Services in the Schools
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October 4, 2016

Inclusive services may include:
- Providing services in the student's everyday environment (i.e., classroom)
- Keeping students with peers
- Providing direct support by "pushing in"
- Providing indirect support by collaborating with teachers
- Supporting all students (not just those with speech/language services)

Why provide inclusive services?
- Least Restrictive Environment (LRE)
- Free Appropriate Public Education (FAPE)
- SLP is immersed in curriculum, knows what students need to know
- SLP knows what non-identified students are doing. What's "normal?"
- Services are functional and meaningful

Support from the literature:
With limited evidence available, we must consider all three branches of evidence based practice!

What service delivery model is best?	What works in school-based language intervention?	What are SLPs doing?
Limited evidence to support any one service delivery model **Cirrin et al., 2010** Systematic review of different service delivery models for elementary school-age children. Authors found: No studies comparing classroom based and pull-out services met criteria for the study Some evidence suggests that classroom-based services are *at least as effective* as pull out intervention for some language goals Classroom-based services may promote generalization SLPs must use all branches of EBP SLPs must continue to collect data and monitor the effectiveness of intervention for each student	**Throneburg, Calvert, Sturm, Paramboukas, & Paul, 2000** A service delivery model that included language intervention within an elementary classroom setting was effective in teaching vocabulary. **Gillam, Gillam, & Reece, 2012** An early efficacy study suggested that Contextualized Language Intervention led to greater gains than those resulting from Decontextualized Language Intervention **Gillam, Olsezewski, Fargo, & Gillam, 2014** Classroom-based vocabulary instruction by the SLP led to improved vocabulary gains **Wallach, 2014** Clinical practice at school-age levels should focus on: 1. Knowledge based intervention goals that help students connect known and new information 2. Balancing content knowledge and awareness of text structure in functional, authentic tasks that are applicable across grades and subjects 3. Language goals that connect to the classroom curriculum	**Brandel & Loeb, 2011** SLP survey investigated program intensity and service delivery models in the schools: Group outside the classroom was the most common setting for all grade levels and severities except for preschool-most severe (individual outside the classroom) and high school-most severe (self-contained classroom). 2-3 times a week for 20-30 minutes in groups outside the classroom was most common, without clear rationale Findings highlight the need for efficacy studies to evaluate program intensity and service delivery models.

Types of Inclusive Services

Borrowed from co-teaching models typically used for special education and regular education teacher teams (Friend, Reising, & Cook, 1993).

Model	Description	Benefits	Challenges
Lead and support	Teacher leads SLP supports	Limited co-planning Good for small number of students	Depends on ability of SLP and teacher to work collaboratively
Station teaching	Teacher and SLP each work with small group on a different activity (students rotate)	Meet small group ratio Work with all students Limited co-planning	Harder to get full session time Limited amount of time with students on caseload
Parallel teaching	Teacher and SLP split group in half, teach same lesson	SLP can modify instruction Smaller group instruction for all students	Group may be larger than small-group ratio SLP may lack content knowledge
Alternative teaching	SLP takes a small group of students to teach the same lesson	Stay within raio Individualized instruction Tailor instruction to S/L goals	SLP may lack content knowledge Requires joint planning Students in SLP group separated from peers
Team teaching	SLP and teacher provide coordinated instruction	S/L work embedded into classroom instruction Supports all students	Requires highest level of joint planning SLP must be comfortable with content May limit time spent on S/L goals Likely would not meet group size ratio

Pitfalls of Inclusive Services
- Not enough time to collaborate
- Poor teacher-SLP working relationship
- SLP hesitant to "jump in" (or teacher annoyed by it)
- SLP assumes role of TA

What works?
- School level supports:
  - Clustering
  - Block scheduling
  - Tutorial, Study Hall
  - Team planning/collaboration time in schedule
- Begin conversation before writing the IEP
- Technology

Building the Collaborative Relationship
- Divide tasks/labor
- Assign self to area of expertise
- Showcase your value
- Ask, "How can I help you?"
- Speak up!

What should I put in the IEP?
- Be as specific as possible
- Consider location (classroom)
- Provide clear service delivery recommendations.

Example: *Therapy should be provided using a push-in model in Student's academic classes. Therapy may include the following collaborative teaching models: Lead and Support (SLP supports the student during classroom activities), Station Teaching (SLP works with student in a small group, students rotate through groups), Parallel Teaching (SLP works with a group of students in the classroom), and Team Teaching (SLP and teacher provide coordinated instruction).*

Documentation & Regulations - Common Concerns
Is it a related service?
Am I meeting student ratios?
Did I work with that student for the allotted amount of time?
Does it match what the IEP says?
Is it Medicaid eligible?

"When a related service is provided to a number of students at the same time, the number of students in the group shall not exceed five students per teacher or specialist." -NYSED Regulations of the Commissioner of Education, Parts 200 and 201 / Section 200.1

Is it a related service? (ratio)	
Yes, student:provider ratio is met	**No, group size exceeds ratio**
✓ parallel teaching with special education teacher; total students = 10 ✓ alternative teaching with teacher; total students = 25; SLP group = 5 ✓ lead and support; total students = 12; SLP supports 4 students ✓ team teaching with special education teach; total students = 10	✗ parallel teaching with regular education teacher; total students = 25 ✗ lead and support; total students = 12; SLP supports 6 students ✗ team teaching with special education teacher; total students = 11

Is it a related service? (duration, station teaching)	
Yes, provider spent adequate amount of time with each student	**No, provider did not spend enough time with each student (per IEP, assuming 30 minute sessions)**
✓ SLP works with a group of 5 students for at least 30 minutes ✓ SLP follows group of 5 students to each station (3 stations x 10 minutes each)	✗ SLP works with multiple groups of 5 students for less than 30 minutes

Medicaid eligibility - Proceed with caution!

From: NYSED Medicaid in Education School Supportive Health Services Program Questions and Answers (2010, updated 2015)

http://www.oms.nysed.gov/medicaid/q_and_a/q_and_a_combined_7_21_15.pdf

Q. Are integrated (push-in) speech therapy services reimbursable by Medicaid?

A. Therapy provided in this setting may only be billed to Medicaid if the servicing provider can document the occurrence of appropriate one-on-one or group (sized up to five students*) services provided and meet all other Medicaid billing documentation requirements. *Classroom instruction is not a Medicaid reimbursable service, regardless of the amount of time spent instructing the Medicaid eligible student.*

References

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Friend, M., Reising, M., & Cook, L. (1993). Co-teaching: An overview of the past, a glimpse at the present, and considerations for the future. *Preventing School Failure, 37*(4), 6-10.

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    service delivery models: Effects on curricular vocabulary skills in the school setting. American Journal of Speech-Language Pathology, 9, 10–20.

Wallach, G. P. (2014). Improving clinical practice: A school-age and school-based perspective. *Language, Speech, and Hearing Services in Schools, 45,* 127-136.

Helpful Links:

Evidence Based Practice:
http://www.asha.org/Research/EBP/

NYSED Medicaid in Education:
http://www.oms.nysed.gov/medicaid/

Regulations of the Commisioner of Education - Parts 200 and 201:
http://www.p12.nysed.gov/specialed/lawsregs/part200.htm