

Speech-Language Service Delivery: Educational Model versus Medical Model



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Implementation Guide: A Workload Analysis Approach for Establishing Speech-Language Caseload Standards in Schools

Getting Started

Before documenting and analyzing your workload, it is helpful to:

- ❑ IDENTIFY A COMPREHENSIVE SET OF SPEECH-LANGUAGE PATHOLOGIST (SLP) ROLES AND WORK ACTIVITIES
- ❑ OBTAIN TIME ESTIMATES FOR WORKLOAD ACTIVITIES
- ❑ CONSIDER INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA) MANDATES
- ❑ CONSIDER BEST PRACTICES IN SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGY

IDENTIFY A COMPREHENSIVE SET OF SLP ROLES AND WORK ACTIVITIES

1. *Direct services to students, including instruction, intervention, and evaluations:* These activities encompass what school-based SLPs do in a typical day. Some examples include direct services to students, including screening, assessment, and intervention; implementation of individualized education programs (IEPs) or individualized family service plans (IFSPs); and the counseling of students.
2. *Indirect services that support students' education programs:* In addition to direct services, students with disabilities need multiple support activities from SLPs in order to make progress on IEP/IFSP goals and to generalize these skills to other environments. For example, the design, maintenance, programming, and staff training for augmentative communication systems are vital work activities if students are to learn to communicate across school and other environments.
3. *Indirect activities that support students in the least restrictive environment and in the general education curriculum:* Students with identified disabilities require additional indirect services to ensure that they progress in the least restrictive environment and in the general education curriculum. These activities include meeting and planning with classroom teachers and paraprofessionals to (a) align IEP/IFSP goals with curriculum standards and (b) determine appropriate instructional strategies.
4. *Activities that support compliance with federal, state, and local mandates and activities that result from membership in a community of educators:* A wide range of time-consuming activities in the workload of school-based SLPs are required to comply with an expanding set of education agency mandates. SLPs are also required to participate in building staff meetings and school or district committees, to travel to multiple schools, and to assume other duties expected by education agencies.

OBTAIN TIME ESTIMATES FOR WORKLOAD ACTIVITIES

Each student on the caseload requires time, not only for direct and indirect services and evaluations but also for mandated paperwork, multidisciplinary team conferences, coordination of services that relate to the general curriculum in the least restrictive environment, parent and teacher contact, and other related responsibilities. A common practice among some SLPs is to determine the schedule and type of service delivery to students on their caseload, based on the time available. This may result in a minimal amount and frequency of direct service time (e.g., 20 minutes twice per week for a total of 40 minutes per week) and little or no indirect service time on students' IEPs/IFSPs. Instead, SLPs should consider all of the time that they spend *on behalf of* students and should make

certain that this time is reflected in service plans and IEPs/IFSPs. Listing the array of services (including direct and indirect services as well as compliance-related activities) on service plans will help SLPs document these student-centered workload activities and, as previously noted, help communicate to parents, teachers, and others how much time SLPs devote to students beyond direct face-to-face intervention.

CONSIDER IDEA MANDATES

A number of provisions in the Individuals with Disabilities Education Act (IDEA) affect the workload activities of SLPs in schools. The following examples illustrate IDEA's influence on student services:

- *Placement decisions*: In all cases, placement decisions must be individually determined on the basis of each child's abilities and needs—and not solely on factors such as category of disability, significance of disability, availability of special education and related services, configuration of the service delivery system, availability of space or time, or administrative convenience. Rather, each student's IEP/IFSP forms the basis for the placement decision.
- *Connection to general education curriculum*: In order for general education teachers, special education teachers, and SLPs to implement educationally relevant IEPs, planning time is required to align IEP goals with curriculum standards and to determine appropriate instructional strategies. SLPs must understand the demands of the curriculum at all grade levels and across school, district, and state requirements. Student evaluation data must include information relevant to current classroom-based functioning. SLPs need time to do classroom observations and to collect authentic assessments that reflect the student's performance in the general curriculum and on current IEP goals.
- *Participation in state/district assessments*: SLPs must know the language-learning demands of state and district assessments in order to address student needs, such as identifying accommodations and modifications that allow students to participate.
- *Interprofessional collaboration*: Planning of the evaluation, reviewing the data, recommending placement, designing the IEP, and continuous monitoring are collaborative team tasks and not the sole responsibility of the SLP. If education teachers, special education teachers, psychologists, occupational therapists (OTs), physical therapists (PTs), social workers, speech-language pathologists (SLPs) and other specialized instructional support personnel are expected to operate as a team, they must have regularly scheduled times to meet, plan, and share information.

CONSIDER CURRENT BEST PRACTICES IN SCHOOL-BASED SPEECH-LANGUAGE PATHOLOGY

Meeting the mandates of IDEA and considering current best practices in school speech-language pathology requires that SLPs move away from exclusive use of the traditional clinical model of individual and small-group pullout services and instead engage in collaborative consultation, authentic assessment, curriculum-based intervention programs, and classroom-based services. Using a dynamic service delivery model that varies the location, amount, and frequency of services throughout the year based on the changing needs of the student will optimize outcomes. A variety of service delivery options used successfully by school-based SLPs to meet student needs are presented in Action Strategies for Workload. This ASHA resource provides SLPs with a rich opportunity to benefit from the strength of collaborative team models and to offer students educationally relevant and functional programs. In addition, the use of Response to Intervention (RTI) and/or Multi-Tiered

Systems of Support (MTSS), may be an appropriate way to address a variety of mild communication disorders but should not delay a student's entry into special education.

Questions to Guide SLPs Through a Workload Analysis

A workload analysis process can help SLPs to think through their specific workload issues and to collect and organize their workload data, which they can then share with decision makers. Such documentation can also help communicate to parents, teachers, and others (a) how much time is actually devoted to students beyond direct face-to-face intervention and (b) how many activities SLPs carry out on behalf of students. A workload analysis may be viewed as systematically gathering and organizing information to answer a series of questions:

1. What is the current workload problem?
2. What can be done to address the workload issues and provide appropriate services to students?
3. Who can help resolve the SLP workload issues? What advocacy strategies at the building, district, or state level will have the best chance of positively influencing SLP workload issues?
4. What is a reasonable action plan to address the workload issues?

The specific information needed to answer the workload questions will vary depending on the individual SLP's specific workload issues. It is important to realize that SLPs are not being advised to gather copious amounts of information and to plot all workload activities for every student on the caseload. Instead, SLPs are advised to focus on their specific workload problems and to judiciously gather the most relevant information to share with decision makers.

From this workload analysis viewpoint, the main question might be, *"How can SLPs document what they do, what they need to do (on behalf of students), and what they do not have time to do given their current workload?"* Below are the types of information that can help answer the workload questions, along with examples of how SLPs have used this workload analysis process to address specific workload concerns.

1. What is the current workload problem?

School-based SLPs may encounter many types of workload issues. Here are some examples:

- The SLP wants to improve the quality of speech-language services to students by having time for consulting and collaborating with teachers or by being able to offer students a broad range of services to meet their needs (e.g., offering some individual intervention sessions, if appropriate, rather than offering pullout services to large groups).
- The SLP has too many students and thus encounters challenges in serving them appropriately and meeting their individual needs as required by IDEA.
- The SLP encounters a lack of time for planning, meetings, case management responsibilities, paperwork for third party billing as well as other required paperwork.

SLPs can address this question by carefully considering the complex and interrelated factors that affect workload. For example, the time available for services to students is influenced by the time required to comply with federal, state, and local district mandates.

2. What can be done to address the workload issues and provide appropriate services to students?

An objective assessment of how local and state education agencies might address the workload imbalance is an important part of this process. SLPs—in collaboration with colleagues, supervisors, and decision makers—may consider a wide range of possible solutions to their specific workload issues. Ideally, proposed solutions would focus on the three main premises of a workload approach to setting appropriate caseload standards which allow the SLP to:

- provide quality services that meet the individual needs of students consistent with IDEA;
- ensure compliance with education agency mandates; and
- implement best practices in school-based speech-language pathology.

Some possible ways to address this question can be found in Strategies for Workload.

3. Who can help resolve the SLP workload issues? What advocacy strategies at the building, district, or state level will have the best chance of positively influencing SLP workload issues?

It is usually necessary for SLPs to work in concert with others to influence SLP workload and caseload issues. There are a number of strategies for working with teachers' unions and local and state education agencies to improve working conditions. For example, school-based SLPs can do the following:

- Establish a committee of district-wide SLP and audiology personnel
- Explore the full range of strategies/models that would support quality service delivery (i.e., a 3:1 model, intense services)
- Work with local union representatives to address workload and caseload issues
- Gather local district data to demonstrate how student achievement may be affected by workload conditions, including caseload and intervention group size
- Become familiar with the local teacher contract on class size and caseload policies, mandated ancillary teacher duties (e.g., lunch duty, bus duty), and other contract rights and policies pertaining to working conditions for general education and special education teachers
- Identify state and local decision makers for workload and caseload conditions, and become familiar with the process by which decisions are made
- Advocate for language in the state educational regulations to mandate workload (see, e.g., Ohio's Workload Calculator [PDF])
- Work with the state speech-language-hearing association to advocate for changes at the state level to allow for more flexible documentation of service delivery (e.g., hours per month vs. weekly)

4. What is a reasonable action plan to address the workload issues?

Effective solutions to workload issues must be negotiated. These proposed solutions should lead to a significant improvement in the SLP's current workload—from one that does not allow student needs to be addressed appropriately to a balanced workload that allows full implementation of IDEA, compliance with all mandates, and best practices in school speech-language pathology. When negotiating workload issues with decision makers, it is important to document the services and activities required for full implementation of IDEA that cannot be completed given current workload conditions.

A reasonable action plan may include:

- Clarified expectations for all participants as to how the SLP's available time should be prioritized and allocated across required work activities
- Options to address new or continuing workload problems should they arise
- Opportunities for further discussion and modification of the action plan if necessary

Examples and Worksheets Available from ASHA

These worksheets are designed as a tool for implementing the workload analysis process. They are in PDF format and require Adobe Reader or other PDF reader to be viewed and printed. Go to: <http://www.asha.org/SLP/schools/implementation-guide/>.

- Workload Activity Clusters
- Michael example 1
- Kwame example 2
- Workload Time Survey Form A template
- Workload Time Survey Form A categories
- Workload Time Survey Form B instructions
- Workload Time Survey Form B template
- Workload Time Survey Form B - page 2
- Workload Time Survey Form B - page 3
- Student Service Analysis Worksheet
- Student Service Analysis - template
- Week 1 example
- Week 2 example
- Week 3 example
- Week 4 example
- Overload Action Plan Worksheet example
- Overload Action Plan Worksheet template

	INTEGRATED/EDUCATIONAL MODEL	CLINICAL/MEDICAL MODEL
HOW DOES IT START?	Teacher, parent or other involved person can request, in writing, the IEP team consider the need for evaluation	Referral is started by the doctor based on observation or diagnosis
WHO DECIDES NEED FOR SERVICE?	<ul style="list-style-type: none"> The IEP team decides together with recommendation from licensed OT/PT based on student data (such as, testing and classroom/campus observations) The IEP team only looks at needs associated with special education program/school day 	<ul style="list-style-type: none"> Testing and clinical observation by licensed OT/PT Assessment takes all settings into consideration Often driven by doctor's orders or insurance coverage
WHAT IS THE PURPOSE OF EVALUATION?	<ul style="list-style-type: none"> To give knowledge and data to the IEP team to help with all decisions Helps to find areas of student strengths and needs Helps to guide student goals 	<ul style="list-style-type: none"> To determine need for services Helps to identify areas of strengths and needs Helps to guide goals
WHO DECIDES SCOPE OF SERVICE?	<ul style="list-style-type: none"> IEP team—including parents, student, educators, administrators and school based therapists—decides how much, how often and how long therapy lasts A doctor's order does not drive decisions about related services 	<ul style="list-style-type: none"> Medical team makes all therapy decisions Insurance coverage, doctor's orders and transportation may be determining factors
HOW CAN SERVICES BE CHANGED?	Changes to related services require an IEP meeting (in some cases may be by phone) with parents, educators, administrators and the school based therapist present to discuss and come to consensus	Doctors can alter orders or therapist can change therapy plan, generally discussed with doctor and parents
WHAT IS THE FOCUS OF THERAPY?	<ul style="list-style-type: none"> Therapy addresses special education and school routines/day Works toward student independence and participation Usually works on long-term problems that cause trouble at school 	<ul style="list-style-type: none"> Therapy addresses medical conditions and impairments Works to realize full potential Usually works on short term problems
WHERE DOES THERAPY OCCUR?	<ul style="list-style-type: none"> On school grounds, bus, halls, playground, classroom, lunchroom; whole school environment/campus Also work sites and for preschool students some daycare settings 	In the clinic, hospital or home
HOW IS THERAPY DELIVERED?	Integrated/inclusive therapy, staff training, program development, work with staff, group intervention, direct one-on-one treatments, consultation	Usually, direct one-on-one treatment by appointment to accomplish set goals
WHO PAYS?	No cost to student or family = free and appropriate public education (FAPE)	Fee-for-service payment by family, insurance or government assistance.
HOW ARE SERVICES DOCUMENTED?	Related to IEP with accessible, readable language; guided by state and local policy reflecting best practice	Dictated by insurance requirements and guidelines of the setting; emphasis on medical terms and billing codes

Research Summaries – 3:1 Model

Portland Public Schools (Annett, 2004)

- Implemented 3:1 in 2001 as a pilot program, maintained permanently since 2002
 - Significant reductions in work completed at home
 - Significant increase in Medicaid reimbursement
 - Fewer student service cancellations
 - Increase in collaboration with teachers and parents
 - Better morale
 - Improved ability to integrate SLP goals in classroom curriculum
- Effective tool in recruiting and retaining SLPs
- Anecdotal data indicates strong student benefits
- Limited administrator complaints – “more visible force in the building”

Annett, M. M. (2004, March 02). Service Delivery Success : SLPs in Oregon Schools Tackle Workload, Enhance Recruitment. *The ASHA Leader*.

Kansas City School District (Strong-Van Zandt & Montgomery, 2006)

- Implemented the 3:1 service delivery model for the 2005-2006 school year
 - More direct services to students
 - More time for paperwork completion
 - More time to make up missed sessions
 - SLPs reported a higher rate of job satisfaction with 3:1 than traditional therapy

Strong-Van Zandt, S. & Montgomery, N. (2006). A Comparison of Service Delivery Models: What Practicing Professionals Report. Paper presented at American Speech Language Hearing Association Conference, November 16, 2006.

Additional References

Cirrin, F. M. (2004). Advocating for workload strategies: The Minnesota story. *The ASHA Leader*, 9(12), 1-20.

Schooling, T.L. (2003). Lessons from the national outcomes measurement system (NOMS). *Seminars in Speech-Language*, 24(3), 245-56.

Quick Artic

Using 5 Minute Kids, LLC

A bit of research...

Sue Sexton's research is impressive and shows that kids getting articulation therapy through a 5 minute service delivery (individual sessions multiple times per week based on severity) were being dismissed from speech therapy 8.4 months earlier than kids getting traditional articulation therapy (small group setting 40-60 minutes per week).

Added bonus? Kids missed less class time! See the chart below from her research.

Speech Program	Total # of Months in Therapy	Minutes per Month based on Average	Total # of Minutes in Therapy	Equivalent # of Hours in Therapy
Traditional Therapy¹	18	210	3780	63
5-Minute Program²	9.6	45	432	7
Difference Between Programs	8.4 months	165 minutes	3348 minutes	56 hours

1 Based on average of seven 30-minute sessions per month (IEP written as 4-8 30-minute sessions monthly)

2 Based on average of nine 5-minute sessions per month (IEP written as 5-9 5-minute sessions monthly)

Read the entire research article at:

<http://www.5minutekids.com/ResearchArticle.pdf>

RTI: Response to Intervention for Articulation

- Usually only use this when it is one sound error (two at most)
- 5 minute drill is perfect for this
- Using curriculum words (spelling/vocabulary lists, sight words)
- One of the many benefits of co-teaching: Use the time in the classroom to observe and work a few minutes
- No need for a special education IEP for one or two articulation errors
- Our skill set is still valuable to these students
- Data collection is very important!
- Saves time
- Not the same as RTI for language concerns

Why Not?	Solutions

Creativity and Flexibility in Scheduling

- ✓ Use whole or partial days to integrate into preschool, life skills (mild/moderate classrooms), or kindergarten.
- ✓ Use lunch, recess and specials time to their full potential.
- ✓ Use quick artic (5 Minute Kids) drill - schedule grade level time rather than individual students.
- ✓ Provide services in classrooms, hallways, back of library, empty rooms (saves time and makes you more visible, observable, and available).
- ✓ Use social skills group, daily morning groups, lunch bunch to meet IEP minutes.
- ✓ Offer to co-teach or do whole group instruction.
- ✓ Make the provisions notes in the IEP one of the wordiest areas of the whole document!
- ✓ Ask for most/all of your articulation students to be assigned to one classroom with language/artic and other students in in another.

Creative Grouping

Ask administration to group speech students in their grade level classrooms based on their needs and the amount of time you need to see them.

- ✓ Quicker turn-around time between students if working in one classroom (e.g. Quick Artic)
- ✓ More familiar with teachers and classrooms if fewer of them to learn about
- ✓ Stronger relationships with teachers and whole classes
- ✓ Grouping and using the curriculum is easier in the same classes
- ✓ More time to co-teach
- ✓ Integrate for longer periods of time if there are fewer classrooms to get to

Tips from Christina Bradburn & Ellen Pritchard Dodge (Shelly's Session Notes from ASHA Connect 2017)

General

- ✓ Change your mindset, not your skill set.
- ✓ Think of it as typical speech-language therapy on a bigger scale.
- ✓ You are a part of *their* day/schedule; they are not a part of yours.
- ✓ Clinical services = insurance pays to remediate skills. Educational services = you are paid to help kids derive benefit from their education, regardless of reimbursement.
- ✓ First Steps: Start with Quick Artic. Then start adding "support week" language to IEPs. Establish speech and language 'pods.' Save co-teaching for last.
- ✓ In the Future... caseloads will consist of moderate to severe kids, non-verbal students, and students on the autism spectrum.

Goal Writing

- ✓ 'Instruction' is class stuff; 'Intervention' is therapy stuff. Goals must reflect setting.
- ✓ Ask "What skills need 'specialized instruction' as opposed to classroom intervention and supports?"
- ✓ Tailor student goals to the activity instead of tailoring the activity to the goal; Tailor your materials to your services instead of your services to your materials.
- ✓ We want to write 'clinical' goals; that's what we were trained to do. It's just a shift in mindset. Work backwards... 'by the end of the year... what?' One goal for everything.
- ✓ Kids can't access their education if they are always in trouble. It's ok to target this first.

Quick Artic

- ✓ Work 'smaller.' Practice fewer target words. Drill targets for 5-7 minutes one-on-one at desk, in the hallway, or other designated classroom area.
- ✓ In 5 minutes, student can name 117 pictures, repeat 157 words, repeat 125 phrases, or create 35 sentences.
- ✓ Use or combine targets/drill with sight words, spelling words or vocabulary from weekly curriculum and assigned books/reading.
- ✓ Articulation Station App – Test Center: lots of flexible uses, e.g. just /r/ or just vowels, screeners, full test, record speech samples, data collection.
- ✓ Also check out 'Speedy Speech,' 'Pocket Pairs,' and 'ArticPix.' And NAED apraxia app at bluewhale.com.
- ✓ During therapy time, track the supports needed. Ensure all sound productions are correct (90-100%) with the appropriate supports.
- ✓ Reduce negative practice. Build in self-monitoring and self-correction. Reserve +/- tracking for data collection times only (every three weeks).
- ✓ In the upper grades, make them track each other's productions
- ✓ Pros: individualized, builds trust, get to know teachers, flexibility; it's only 5-10 minutes, the same time it takes to sharpen a pencil or recover from a meltdown. Cons: organization, drill is boring.
- ✓ Start with an accomplished skill. Teach/Review new skills. Finish with successful drill.
- ✓ You are now super visible (in the hall) and teachers may want to stop and talk to you during therapy. Create a system (post-its) to accommodate them without interrupting services.

In-Classroom Services

- ✓ Develop a ritual for the first 2-3 minutes of every session. This demonstrates/models the repetition needed by SPED students.
- ✓ Functional! Functional! Functional! Leave something behind every time.
- ✓ Pragmatics and social skills are necessary targets. Create regular, authentic opportunities for generalizing skills (e.g. Lunch Bunch, Sensory Room).
- ✓ Use 'Incremental Rehearsal Training' (IRT): Teaching smaller chunks of information and allowing time for the student to assimilate works better.

Preschool Services

- ✓ Spend a whole day in preschool; get all their time in for the week. Come back for a group lesson another day, if parents are concerned about you being there only one day.
- ✓ Develop a ritual for the first 2-3 minutes of every session. This demonstrates/models the repetition needed by SPED students.
- ✓ Embed a speech goal into overall classroom targets and themes every week, as well as adding specific

goals for speech kids.

- ✓ Show teachers how to use snack time to practice certain skills.

Data Collection

- ✓ Are you testing or teaching? When you take data you're testing. You can't teach if you're testing. (e.g. spelling tests)
- ✓ Take data every 3 weeks. You'll see growth more clearly; less up and down.
- ✓ Keep track of the supports needed to get good responses, e.g. visual cues, exaggerated models, tactile cues, verbal cues, physical prompts
- ✓ Rubrics are a good idea for classroom-based goals.
- ✓ Get photo/video permission at the beginning of the year; Use as data to share with parents and teachers.

Technology

- ✓ Use Google Docs to communicate with teachers.
- ✓ Use your phone's camera as a mirror.
- ✓ Take photos or video as needed to capture performance, progress, problems, etc.
- ✓ Use photos/videos as data with teachers and parents.
- ✓ Language Apps: Cognition, Grammar Up, Bag Game, Story Maker, Sock Puppets.
- ✓ Autism Apps: Touch and Say, Talking Train, My Monster Voice, Sono Flex Lite, Model Me Kids, Find Me, Fireworks 123, Choice Board Creator, Easy Board
- ✓ iMovie: Use with older students.
- ✓ Life Skills Apps: Time Timer, Speech Buttons, Letter School-Writing
 - Verbal Me App: Share with nurse for non-verbal students. "Where does it hurt? It hurts here."
 - Dial Safe Pro App: Practice 911. Allows student to practice talking to an operator. Functional.
- ✓ Preschool Apps: Petting Zoo, Play Lab Shapes, My Play Home, Image Spinner, Stack It Up, Peekaboo Barn
- ✓ Curriculum Supports Apps: Phonics Tic Tac Toe, Popplet Visual, Word Lists, Fry Words Lists, Bug Brained, Educreations
 - Use Magnetic ABC App to blend articulation drill with sight word practice. Also to administer spelling tests for kids who struggle with writing. Screen shot and send to teacher.

Kimochis = Feelings

- ✓ Kimochis is the Japanese word for "feelings."
- ✓ Fun, fast activity (simulated "commercial") with staff to promote using them in classrooms.
- ✓ Write as many feeling words as you can think of in one minute. Discuss with a neighbor. Cross off emotions you have in common? What are your leftover words...?
- ✓ Then ask... "Did you know that boys are born more emotive than baby girls? And by 2nd grade, boys have 50% fewer 'feeling' words."
- ✓ Pause. "I work with some of your students who are on my caseload. I'd like, and I've got the principal's ok, to come into your classrooms once in a while to do just quick, 3-5 minute commercials, just little sound-bites of information that might help you with all of your students, not just the ones we share. [Leave some info] Think about it. Bye-bye."
- ✓ "Oh. That's what you do! I just thought you had lots of meetings." Later, in the teacher's lounge, say "You have a word walls in your classrooms, right? Why not create a "feelings" word wall and, whenever you can, start to encourage the use of "feeling" words. Most are tier 2 vocabulary that help build literate language."

Commercial: Feeling-Behavior Link (in the staff room)

- ✓ "What are some of the student behaviors that get in the way of the learning?" Shy. "What do kids do when they're shy in your class that doesn't help their learning? I want you to describe it." They withdraw. They don't ask questions.
- ✓ "Right. Feelings fuel behavior. When I'm shy, I either do something or don't do something... it either helps or it doesn't help. These two responses didn't help.
- ✓ Imagine if we could give them a tool that, even though they are shy, they raise their hand? They're still shy, but they get to practice 'the communication tool' of raising their hand. The tool is to put their 'brave,' their 'courage' right in front of their 'shy.'
- ✓ Think of something that happens on the playground that comes into the classroom and takes away teaching time. Tell me something that happens almost every day with your grade/group." They fight.
- ✓ "Feelings fuel the fighting. Like 'left out.' Let's name 4 more feelings that could be happening on the

playground that cause fighting." Frustrated. Jealous. Confused. Lonely.

- ✓ The teachers will begin to get that 'feelings are communication... behaviors are communication.' We often water down our role as communication specialists by not highlighting the bigger umbrella of communication for teachers.

How to Create Communication Commercials

- ✓ Write down one thing that you teach in therapy that all children would benefit from. Think: practical, relevant. Be yourself. Practice with a teacher-friend first. Get comfortable.
- ✓ Listen respectfully. Try your hardest. Inferencing. There are three commercials.
- ✓ Problem-solving: It's important to make mistakes. Everybody makes mistakes. We need to make mistakes fun. Fixed or Growth mindset. You can teach 'Growth' mindset.
- ✓ The intention of these commercials is not to teach 'inferencing' in 3-5 minutes, but to...
 - First, create common language.
 - Second, to increase my sphere of influence – showcase one thing I'm doing with a kid in your class, so you know more about what I do and also provide a little carryover...
 - Third intention: I want all the kids to know what I do (maybe reduce pullout stigma) and for my kids to see that what we work on is something everyone needs to learn about.
 - Fourth: It's totally refreshing and fun.

Kimochis: 5 Keys to Communication

For teachers/kids 3-6 years (2 more Keys for ages 6+)

1. Get someone's attention: joint attention, eye contact is super important. Do you have a routine for getting attention?
 2. Use a talking voice: tone of voice is 30% of how we come across. We do better with coaching volume - 'inside voice' - than we do with coaching 'tone.' Instead we use fluffy words like 'be respectful.' Kids don't get that word. 'Respectful' is a tone. Can I come in and teach your class common language for tone? There are three tones: talking, fighting, and serious. Sometimes you should turn up the 'seriousness' not the 'meanness.' Teachers will also start to examine their own tone.
 3. Use a talking face and body: nonverbals, 60% of how we come across. We miscommunicate constantly because of nonverbals. Words and body language have to match. Some people are really unaware of what their body language communicates. Some have control, some don't. It is influenced by culture, by gender, by trauma, influenced neurologically... Meta: Think about how we could be misunderstanding kids.
 4. Choose helpful words: words do matter, anything on vocabulary, some words help and some words hurt, talk to students about predictable situations, give them scripts (social stories too?), many character education programs are too verbal, sometimes just 'bounce'... teach them to move on, you won't always be included, practice 'bouncing' from person to person.
 5. Redo hurtful moments: When we have feelings that are hard to have, I can make mistakes. Say it when you do, own up... I interrupted you, that was rude of me. "Sorry" involves hard feelings sometimes, a lot of times. Train it, coach it.
- ✓ The 'communication tools' you leave behind for teachers & students are these 5 Keys.
 - ✓ Don't schedule your commercials. We're not effective when we cancel all the time. Take the pressure off yourself having to be somewhere at a certain time.
 - ✓ Use 5-10 minute spaces when you can. Or chunk out blocks of time on one day. You could do the whole 5th grade, 5-6 classrooms, in an hour.

Meaningful Therapy for Life Skills

INTEGRATE INTO THEIR DAY!

What are LIFE SKILLS?

- Safety
- Understanding environmental signs and symbols
- Social skills, manners, and conversation
- Community involvement
- Waiting (your turn, in line, to eat, to go outside)
- Self-advocacy

Focus on FUNCTIONAL Standards...

- Approaches to learning
- Interpersonal skills
- Manages emotions
- Solves problems
- Responsibility
- Sense of self and others

After these (or at the same time), we can work on....

- Vocabulary
- Grammar
- Articulation
- Oral-motor skills

Join the day...

- Support students and teachers during greetings, lunch choices, unloading backpacks, calendar time, and lessons.
- Remind paras about the need for extra processing time, simplified directions, and respect.
- Accompany students and model how to communicate and how to modify work for their individual skill levels.
- Coordinate services with OT/PT. Learn how to provide sensory input and position students for best performance during communication.
- Ask the life skills teacher to notify you of special trips, events, or activities so that you can plan to be there.

Therapy in the Cafeteria

WARNING!

It will be loud.

You will feel like it's not worth it.

Some days it won't be worth it.

Did I say it will be loud!?

Not a time for data collection.

BUT...

Cafeteria workers...

- will watch you.
- will ask you a lot of questions.
- will try when you are not there.
- are great therapists!

AND...

- Food is a great motivator.
- Manners matter.
- It's a great opportunity for inclusion
- Who will teach them if you don't?

HINTS....

- Create a life skills (moderate) lunch group.
- Eat lunch *with* them.
- Practice what they will say in line before entering.
- Practice manners before entering.
- Invite parents to join you.
- Work on them asking peers to sit with them.

Therapy on the Playground

Up and down
Wait your turn
Climb up
Slide down
Fast
Slow
Again, again
/s/lide
/s/tep
/s/lick

Push me
Higher
Help me
/s/wing
One-on-one
Time to stop
Stay back
Your turn
Ask for a turn
/s/ky

Teamwork
Resolve fights
Rejection
Rule changes
No structure
Decisions
I'm open
My turn
Not fair
Social skills

Mark each item above as **A** for articulation, **L** for language, **S** for social skills.

Hopefully they will all have more than one letter.

Therapy on the playground allows for great observation of students in natural settings and opportunities for them to see your suggestions really work for them!

If one of my students makes grammatical errors at times but makes a friend, I am satisfied.

Great to do during Support/Compliance week or as make-up therapy or when another class is unavailable.

Use every second of the school day.

LANGUAGE

Speaking & Listening

- Form and content for social and personal uses
- Phonemic awareness
- Lexical retrieval
- Auditory memory
- Articulation
- Fluency
- Voice

Literate Language

- Academic and metalinguistic uses
- Abstract and figurative content
- Decontextualized and formal forms
- Print concepts
- Formal oral contexts
- Print contexts

LITERACY

Reading & Writing

- Letter knowledge
- Word reading
- Spelling
- Punctuation
- Reading fluency
- Reading comprehension
- Writing composition

SLP

TEACHER