

## **Inclusive Practices for Speech/Language Pathologists**

This *Considerations Packet* provides information designed to help speech/language pathologists adopt inclusive and collaborative programs as an alternative service delivery model for serving students with communication disorders. For example, inclusive practices will be defined and described along with their benefits. Tools for developing inclusive individualized education programs (IEP) will then be presented, followed by a discussion of the characteristics of successful collaborative teams.

### **What Are Inclusive Practices?**

The American Speech-Language-Hearing Association (ASHA) defines inclusive practices as a type of intervention in which the unique needs of children with communication disorders are met in the least restrictive environment. This involves utilizing the student's natural environment as an intervention context, framing services in a manner that integrates classroom context and curriculum activities, and collaborating with families, educators, and other personnel (ASHA, 1996). ASHA advocates inclusive practices as an appropriate service delivery model in keeping with recent trends in educational reform and special education legislative mandates that entitle children to receive service in the least restrictive environment.

Traditionally, speech/language pathologists (SLP) have used a pull-out model with the majority of the students on their caseloads. In the pull-out model the child is removed from his or her classroom group to the therapy room for individual or small-group therapy sessions. While ASHA recognizes the need for this model for some students, it presents several limitations, including the following:

- The speech therapy room is a more restrictive environment than the general education classroom.
- Generalization of learned communication skills is limited.
- Assessment of the communication disorder is often limited to standardized assessment tools, which yield a narrow perspective of the child's communication disorder.
- Therapy goals tend to be more clinical than educational.
- SLP schedules in this model rarely afford time for communication with classroom teachers or other professionals.

In contrast, integrated speech and language services provide a natural setting that facilitates communicative competence. Communicative competence refers to a child's ability to communicate in an effective, efficient manner. The child demonstrates the ability to understand and use language (Capilouto & Elksnin, 1994). Speech/language pathologists who engage in inclusive practices provide services to children in their classroom environments. Recent studies that surveyed speech pathologists who use inclusive practices reported several advantages, as discussed below.

## Advantages of Inclusive Practices

A report on treatment efficacy conducted by (ASHA, n.d.) revealed the following advantages as identified by speech/language pathologists who use inclusive practices as a part of their service delivery repertoire:

- Therapy services are conducted in the child's classroom setting.
- Carry-over or generalization of learned communication skills is greater.
- Assessment of the child's communication disorder involves classroom observation of functional communication skills and the impact that the communication disorder has on the child's ability to learn the classroom curricula in addition to traditional standardized assessment tools. This provides a more complete description of the communication disorder and its impact on the child.
- Speech therapy goals are written so that they are compatible with the educational curriculum. Therefore, goals are educationally relevant and in compliance with IDEA guidelines.
- SLPs meet regularly with the classroom teachers and other professionals and parents.
- SLPs report increased knowledge of the relationship between language and academics.
- SLPs model intervention techniques and modifications for teachers and staff.
- Children in the classroom who are not identified with a disability experience the benefits of the SLP's expertise.
- Parents see the classroom intervention with less pull-out therapy as having a positive impact on their children.

These findings suggest that inclusive practices are an effective intervention approach for children with communication disorders.

## Models of Inclusive Practices

A variety of models of inclusive practices are described in recent literature. The following illustrates a wide range of possibilities for service delivery available for speech/language pathologists to consider and explore.

- 1. Supportive Teaching** – This model involves a combination of pull-out services and direct teaching in the classroom setting. In this approach the SLP teaches information related to the curriculum while also addressing IEP goals. The SLP first pre-teaches the targeted skill in the therapy room in a pull-out session. The second session occurs in the classroom with the SLP teaching the skill to the entire class with the classroom teacher present. The third session may involve another pull-out session for clarification or test accommodations (ASHA, n.d.). This cycle continues until objectives are learned.
- 2. Complementary Teaching** – The role of the SLP in this model is that of a tutor, with the classroom teacher as the primary instructor. That is, the classroom teacher presents the majority of the curriculum content while the SLP assists students with their work. The SLP floats around the room and intervenes when the children encounter difficulty. The focus may

be on a related skill such as sequencing or paraphrasing the main idea of an assignment (ASHA, n.d.).

- 3. Station Teaching** – In this model the SLP and the classroom teacher divide the instructional content into two parts with each professional teaching one group of students. Once the instruction is completed, the two groups switch adults so that each group receives instruction from the classroom teacher and the SLP (Capilouto & Elksnin, 1994).
- 4. Parallel Teaching** – This collaborative model divides the classroom in half and the SLP and the classroom teacher subsequently each instructs one half of the class on the same instructional material. The classroom teacher may use a standard format for instruction while the SLP may modify the lesson for the group so that the students will be able to master the material. The groups of students may change to accommodate individual strengths and weaknesses (Capilouto & Elksnin, 1994).
- 5. Consultation** – The SLP works outside the classroom to analyze, adapt, modify, or create appropriate instructional materials. Regular, ongoing classroom observations and meetings with teachers take place so as to assist the teacher with planning and monitoring student progress (ASHA, n.d.).
- 6. Team Teaching** – The classroom teacher and the SLP, occupational therapist, physical therapist, or other professional teach a class or lesson together with each professional addressing his or her area of expertise. The classroom teacher may present the curriculum content while the SLP assists with a communication system. Similarly, the occupational therapist may work on handwriting while the physical therapist assists with positioning (ASHA, n.d.).
- 7. Course for Credit** – Using this model, children with communication disorders are placed in one class a day taught by the SLP. The SLP creates the curriculum, plans and teaches the lessons, assesses progress, and grades each student. Students are placed in the class according to grade level or age level. Their IEP goals and objectives drive the curriculum, and students receive course credit for completing the class. This approach requires extensive pre-planning and administrative support. It is highly recommended for adolescents with communication disorders. They receive services in the least restrictive environment while reducing the risk of embarrassment, which frequently occurs when they are pulled out of class for services. Further, this model may also enhance their commitment to therapy as students receive grades and course credit for their efforts (Boley, Lord-Larson, & McKinley, 2003).

SLPs may adopt, adapt, or modify any of the above models and may use combinations of these models as the unique needs of their students change.

### **Goal Writing for Inclusive Individualized Educational Programs**

One major change in the shift to inclusive and collaborative therapy involves goal writing for students' IEP. SLPs need to meet with general education teachers, special education teachers, other related service professionals, and parents, in order to share information related to the student's strengths, weaknesses, and the curriculum in order to develop appropriate goals and

objectives relevant to classroom-based functioning. This is a change for most SLPs who have traditionally written goals and objectives specific to the communication disorder. A special publication entitled *RE DO-IT, Revised Expanded Document Outcomes in Teaching* (Fairfax County Public Schools, 1999) was written to assist SLPs in writing classroom and curriculum-based goals related to the Virginia Standards of Learning.

The types of communication goals suggested in this document relate to the following areas:

- Understanding of language
- Use of language
- Word knowledge and use
- Sound structure of language
- Critical thinking language
- Phonological awareness
- Metalinguistic goals and objectives
- Articulation
- Fluency
- Voice
- Compensatory strategies
- Pre-kindergarten skills
- Pragmatic language
- Feeding/oral motor/articulation
- Hearing Impairment
- Autism

(Fairfax County Public Schools, 1999)

The following illustrates some of the differences between traditional goals and more curriculum-based goals for several areas.

<b>Traditional fluency goal:</b> _____ will use easy onset of speech at the single word level with 80% accuracy in 4 of 5 trials in the classroom setting.	<b>Curriculum-based goal for fluency:</b> _____ will use easy onset of speech during classroom choral activities with 80% accuracy in 4 of 5 trials in the classroom setting.
<b>Traditional voice goal:</b> _____ will produce target vocal behavior outside the therapy setting with 80% accuracy in 4 of 5 trials.	<b>Curriculum based goal for voice:</b> _____ will produce target vocal behaviors when answering questions in the classroom setting with 80% accuracy in 4 of 5 trials
<b>Traditional articulation goal:</b> _____ will correctly produce /f/ in the initial position at the sentence level outside the therapy setting with 80% accuracy in 4 of 5 trials.	<b>Curriculum-based goal for articulation:</b> _____ will correctly produce /f/ in the initial position at the sentence level while reading aloud from an accelerated reader book in the classroom setting with 80% accuracy in 4 of 5 trials.

## Documentation

Documentation is critical not only to monitor student progress but also to assist collaborative teams in their planning. Recognizing the need for tools to assist professionals in goal writing, planning, and documenting the collaborative process, the Maryland State Department of Education developed the Curriculum Planning Matrix (see Table 1) as a way to chart the student's goals and objectives and the student's daily schedule. Frequently, professionals provide duplicated services. Completing this matrix provides information that helps the team decide who should target which specific goals and objectives at what times during the child's day to optimize opportunities for intervention without duplication or gaps in services. Completed curriculum matrices for the elementary level are provided in Table 2, for the middle school level in Table 3, and for the high school level in Table 4 as examples. After team members complete the curriculum matrix, they complete the Student Action Plan (Table 5) during planning meetings to address problems. As illustrated, specific team members are assigned roles and responsibilities within a given time frame. This helps team members stay on track and aids in accountability. Table 6 provides an example of a completed Student Action Plan (Maryland Department of Education, 2003).

**Table 1**  
**IEP/Curriculum Matrix**

<b>Student:</b>	<b>Age-appropriate subjects, schedule, routine</b>															
<b><u>IEP goals</u></b>																

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.

**Table 2**  
**IEP/Curriculum Matrix**  
**Sample #1 – Elementary School Student**

Student: ANGELA MORAN		First Grade, Pleasant View Elementary School									
<u>IEP goals</u>	Morning Meeting	Breakfast	Language Arts	Small groups	Lunch/Recess	Transition Time	Math	Health	Social Studies	Science	Therapy: OT/PT
1. Manipulate/explore objects that are placed in her hand.	X	X	X	X	X	X	X	X	X	X	X
2. Pick up and release objects.	X	X	X	X	X	X	X	X	X	X	X
3. Scribble on paper/chalkboard.	X		X	X		X	X	X	X	X	X
4. Active toys, recorders to play various sounds.					X	X					X
5. Color on paper.	X		X	X		X	X	X	X	X	X
6. Respond to various textures, sounds, scents.	X	X			X			X		X	X
7. Draw lines up and down with hand-over-hand guidance.			X	X			X	X	X	X	X
8. Turn her head in the direction of a voice.	X	X	X	X	X	X	X	X	X	X	X
9. Show more interest in toys/objects.					X	X	X				X
10. Respond to her name more often.	X	X	X	X	X	X	X	X	X	X	X
11. Interact with her peers for 5-10 minutes.	X	X			X	X					X
12. Attend to task for 2-5 minutes.	X	X	X	X	X	X	X	X	X	X	X
13. Transition into and out of seat.	X	X	X	X	X	X	X	X	X	X	
14. Properly sit with head in neutral position for 30 seconds.	X	X	X	X	X	X	X	X	X	X	
15. Manipulate an object placed in her right hand while lying on her left side.	X		X			X					X

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.

**Table 3**  
**IEP/Curriculum Matrix**  
**Sample #2 – Middle School Student**

<b>Student: RAYMOND VITELLI</b>		Monument Middle School, 7 <sup>th</sup> Grade													
<b>IEP goals</b>	Arrival	Homeroom	Language	Reading	Math	Lunch	Social Studies	Science	Spanish	Physical Education	Art	Music	Hallway	Dismissal	Assemblies
1. Add and subtract three digit numbers (column problems).					X			X							
2. Recall and memorize multiplication facts up to ten.					X										
3. Add and subtract numbers using proper regrouping procedures.					X			X							
4. Solve simple addition and subtraction word problems.					X										
5. Divide with remainders.					X			X							
6. Calculate time.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
7. Compute, using money values.					X	X									
8. Write regular-order sentence (subject-predicate) that are consistent with directions.			X	X			X	X	X						
9. Identify subject and predicate in sentences.			X	X			X	X	X						
10. Identify nouns and pronouns and other important parts of speech.			X	X			X	X	X						
11. Use subject/verb agreement correctly.	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
12. Identify and correct compound sentences.			X	X			X	X	X						
13. Write clear directions to complete a task.			X	X	X		X	X	X			X			
14. Spell words with multiple syllables.			X	X	X		X	X	X	X	X	X			
15. Write sentences using spelling words.			X	X	X		X	X	X	X	X	X			
16. When presented with a list of regular/irregular words, the student will read it without error.			X	X	X		X	X	X	X	X	X			
17. Read silently to comprehend.			X	X	X		X	X	X	X	X	X			
18. Use vocabulary related to reading correctly.			X	X	X		X	X	X	X	X	X			

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.



**Table 4**  
**IEP/Curriculum Matrix**  
**Sample #3 – High School Student**

<b>Student: JAMES BARNES</b> Silver Spoon High School, 10 <sup>th</sup> Grade												
<u>IEP goals</u>	Per. 1: Keyboard	Per. 2: Biology	Per. 3: Office Job	Per. 4: Chorus	LUNCH	Per. 5: U.S. History	Per. 6: PE/Health	Per. 7: Nutrition	Per. 8: Ceramics	Halls/Locker	After school Sports	School Store
1. Count out correct number of bills to the dollar over the amount of purchase.					X							X
2. Follow a schedule using pictures and words, independently go to each class/location on time throughout the school day.	X	X	X	X	X	X	X	X	X			
3. Upon arriving in each class, move to correct seat and have correct books/materials for that class ready.	X	X	X	X	X	X	X	X	X			
4. Manipulate copy machine and complete copy work requested on adapted job order form, correctly responding to each of 5 types of job requests.			X									
5. Sign in and out of job station; sign name on class work, printing name with correct letters.			X									
6. Locate 5 items from printed list of school supplies and replenish supplies in school store.			X									
7. Identify 3 concepts and demonstrate understanding of those concepts through a combination of verbal expression and adapted written test.	X	X		X		X		X	X			
8. Identify the definitions of 10 new vocabulary words related to class content in each class.	X	X		X		X		X	X			
9. Participate in classes using appropriate social interactions: raise hand for questions, ask questions related to topic, respond to questions by acknowledging the speaker and giving an answer, request assistance when needed.	X	X		X		X		X	X			
10. Follow 2-step oral directions re: class/activity routines.	X	X		X		X		X	X		X	
11. Engage in conversation with peers with no more than one adult prompt.	X	X		X		X		X	X		X	
12. Identify the main idea of a non-fiction passage and relate it to prior knowledge.		X				X						

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.

**Table 5**  
**Sample Student Action Plan Format**

<b>Student:</b>	<b>School &amp; Grade:</b>	<b>Team Facilitator:</b>	
<b>Areas of Focus:</b>	<b>To do:</b>	<b>By whom:</b>	<b>By when:</b>
<b>Team Collaboration</b>			
<b>Peer Awareness &amp; Positive Interactions</b>			
<b>Home-School Communication</b>			
<b>Assistive Technology</b>			
<b>Physical Arrangements</b>			

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.

**Table 6**  
**Student Action Plan**  
**Sample – Middle School Student**

Student: <b>LAUREN GREEN</b> Monument Middle School, 6 <sup>th</sup> Grade Team Facilitator: Mrs. Manion, Assist Principal			
Area of Focus	To do:	By whom:	By when:
<b>Team Collaboration</b>	Establish regular CORE Team meetings (special ed, 4 academic teachers, AP).	Mrs. Manion	Monthly: Sept., Oct., Nov., (re-evaluate & continue)
	Periodic EXTENDED Team meetings (CORE plus special area teachers).	Mrs. Manion	Fall and spring, more if needed
<b>Accommodations for Everyday Class Assignments</b>	Submit class assignments to the special educator a week in advance.	Core teachers	Weekly
	Identify assignment/lesson accommodations. Identify materials as needed.	Mrs. Robinson (Special Educator)	Weekly
<b>Orientation for Student</b>	Attend open house with family.	Mr. & Mrs. Green	August 2002
	Work through the school with an administrator and meet teachers.	Mrs. Manion	1 <sup>st</sup> week teachers are back
<b>Peer Awareness &amp; Positive Interactions</b>	Present information to Lauren's homeroom class; use open discussion format.	Ms. Chamberlain (homeroom teacher)	2 <sup>nd</sup> day of school
	Present information to the whole school on diversity/disability awareness; talk about why all students with different abilities are included; discuss expectations for positive social interactions.	Mrs. Manion & Mr. Maynard (Speech)	Early Fall assembly
<b>Peer Supports in Class</b>	Family and current teachers give a list of friends to homeroom teacher.	Mr. & Mrs. Green (Classroom Teachers)	By August, share at first team meeting
	Identify students as peer supports in classes.		By end of first quarter
<b>Home-School Communication</b>	Design communication log for daily recording by family and school.	Mrs. Robinson (Special Education Teacher)	By first day of school

Maryland Department of Special Education Division Early Intervention Services. (2003). *All inclusive: News information and best practices for inclusion in Maryland*. Annapolis: Author.

## Characteristics of Successful Inclusive/Collaborative Programs

Inclusive services require collaborative teaming with any number of professionals, parents, and administrators involved. Each brings his or her own belief systems, unique areas of expertise, and differing personality styles. For collaborative efforts to be effective, the team must engage in jointly planned instruction, jointly developed instruction, shared classroom space, and shared group of students. Successful collaboration depends on the ability of all professionals involved to work together. Professionals entering into a collaboration partnership should:

- Be flexible in terms of different teaching styles and different ways to meet goals
- Communicate and cooperate
- Be able to disagree and still work together
- Establish classroom rules/routines
- Develop planning materials
- Be open-minded to new ideas
- Plan and build classroom structure
- Share materials
- Follow through on responsibilities
- Engage in joint decision-making
- Be positive, demonstrate good humor, use common sense and common courtesy
- Debrief daily and praise each other's efforts
- Meet regularly and be prepared for the meetings
- Involve administrators and parents
- Advertise the programs' successes
- Put children first

(Adapted from Mills & Smith, 2004)

Speech pathologists who are successful in using inclusive practices follow a step-by-step process. They start slowly and do not force collaborative efforts onto teachers or other professionals. Instead, they introduce the idea to administrators and staff and educate them about the benefits of inclusion. Further, they listen and provide feedback to staff, administrators, and parents continually throughout the collaborative process so that they can be a vital part of the inclusion program. They also recognize that forming collaborative partnerships takes time and that not all collaborative partnerships work. They continue these efforts because the benefits of inclusion far outweigh the disadvantages.

### Summary

This *Considerations Packet* provided a brief description of inclusive practices for SLPs. The advantages of using an inclusive model as a service delivery option were highlighted along with several different models of inclusive practices. Sources to assist SLPs in writing goals and objectives for inclusive IEPs and for documentation purposes were also presented. Lastly, the characteristics of successful inclusive/collaborative teams were presented. SLPs are encouraged to further investigate the concept of inclusive practices so that they may begin to or expand their use of them in their current service delivery approach.

## References:

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- Mills, M., & Smith, L. (2004, June). *Effective instructional collaboration and co-planning: The keys to successful inclusion*. Presentation to Spotsylvania County Public Schools, Fredericksburg, VA.

## Additional Resources

The following resources on inclusion are available for loan through the T/TAC W&M library. Call 1-800-323-4489 and select the library option to request a material. Visit the website at <http://www.wm.edu/ttac> for a complete listing of materials. Select the library link off the home page and enter *Inclusion* as the subject of your search to find additional materials related to this topic.

<b>Title</b>	<b>Author</b>	<b>Call letters</b>
All Children Are Special: Creating an Inclusive Classroom	Lang, G., & Berberich, C.	IN1.1
Collaborative Practices for Educators	Lee, P.	IN41
Creating an Inclusive School	Villa, R., & Thousand, J.	IN8
How to Manage Your Inclusive Classroom	Holzschuher, C., & Cain, J.	IN116
Inclusive Education: Practical Implementation of the Least Restrictive Environment	Power-deFur, L., & Orelove, F.	IN5
Staff Training Tips: Focusing on Inclusive Education	LRP Publications	IN134.1
Successful Inclusive Teaching, 3 <sup>rd</sup> Edition	Choate, J.	IN33.2

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