Interdisciplinary Collaboration: An Opinion Piece

Monica Puente, M.A., CCC-SLP, Owner BE HEARD LLC

Several years ago I decided to make a leap of faith and leave my position as a staff speech language pathologist at a major hospital to start a small private practice. I love the independence and space I have created for myself to blossom as a professional. I work with a small group of intelligent, specialized, and thoughtful therapists and graduate students who support each other, and are dedicated to our clients and their families. That being said, there are also times when I miss the opportunity to rub shoulders with my colleagues, and friends, in other disciplines.

In the fast paced world of pediatric rehabilitation, the unscheduled office drop-ins, coffee breaks, and lunches were a gold mine of interdisciplinary collaboration. Whether I was learning to correct a W sit from a physical therapist, how many times to spin a child in a swing in one direction from an occupational therapist, or simply gaining a better understanding of challenges a family was facing from a physician or mental health professional, my colleagues’ knowledge and experience with OUR patients helped me become a better clinician and provide more informed care to each child.

cont.
While I do not currently have the option of chatting with a wheelchair seating specialist at the Keurig, I am beyond grateful for the providers who have made phone calls, exchanged emails, and set up meetings to collaborate on our shared clients. In particular, when children have challenging behaviors, it has been helpful to know their experiences with setting up the environment and structure for success, or the details of a behavior plan to ensure we have consistent expectations for a child across environments.

I believe as clinicians we should be as proud of our judgment and decision-making, in knowing when to reach out to additional expertise, for the betterment of our treatment plan and patient, as we are of our own scope and skill set. I know that our goals are more achievable, the prognosis is more reliable, and the treatment strategies reflective of the latest techniques in our evidence-base, as a result.

On behalf of myself, my staff, and the families we serve, I want to send a huge “thank you” to all our physical therapists, occupational therapists, BCBAs, physicians, and mental health professionals for the time you take to collaborate!
Let’s Be Proactive
Contributed by Barbara Brish, Psy, SP, NCSP, Education Specialist, AAoM

There are many avenues for getting ahead of potentially dangerous environments and situations. Schools districts are charged with having teams of professionals, caring parents and a multitude of researched frameworks and strategies that are readily available to support teachers and programs so that children are safe and able to grow academically, and social/emotionally.

Let’s review some key questions that may help one begin to investigate strategies for being proactive, and then renew our efforts to support students, parents and educators as we strive to provide an effective education experience for ALL students.

Preparation:
• Did the teacher in the classroom have a student teaching/classroom experience that was developmentally and educationally sufficient to give them adequate knowledge and skills for the classroom situation to which they are assigned?
• Was the teacher’s learning experience conducted in a manner that provided the instructor, who needs to give a recommendation, a valid “handle” on the pulse of the teacher’s skill before providing a recommendation for placement?

Programming:
• How are the students assigned to the special education classroom (i.e. age, ability, language skills, behavior)?
• How are the teachers in special education assigned to their classrooms in the school (i.e. seniority, certification, ability)?
• Is the classroom a basic classroom, a resource room with all students possessing the same eligibility, or is it a cross categorical classroom?
• Does the teacher in a high needs special education classroom have readily available support, on a daily basis, to assist in difficult situations?
• Is there a sufficient mentoring program for the teacher(s)?

Administration:
• Is the administrator regularly observing in the classroom?
• Are protective stress reducing behaviors, procedures and processes for staff being followed? Examples might include:
  • Is the teacher taking necessary breaks during the day so as not to become over-stressed?

cont.
• Are the support staff assisting the teacher or adding to teacher stress in terms of requests without appropriate support?
• Does the administration work closely with the Union to support new teachers who may need additional assistance to avoid a potential crisis situation?
• Are the processes and procedures necessary for an effective classroom being implemented with efficacy?
  • Is there sufficient staffing in the classroom?
  • Is the staff in the classroom adequately trained for the position?
  • Is the administrator looking for signs of stress from staff?
  • Are teachers being asked to do more than they are capable of doing in a day’s time?

Parents:
• How are you communicating with the teacher about the needs of your child?
• Do you see signs of stress from the teacher?
• How do you deal with stress when working with your child?
• What support can you provide to the teacher for communicating effectively with your child?
• Who do you regularly communicate with at the school? Counselor? Social worker?

We need to work together, support one another
“Parent-teacher-administration”... on behalf of our children.
How can we do this?

cont.
## ON BEING PROACTIVE

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<tr>
<th>PARENTS</th>
<th>TEACHERS</th>
<th>ADMINISTRATION</th>
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<tr>
<td>• Have open dialog with your child’s teacher with the understanding of time constraints.</td>
<td>• Be open with parents about your classroom rules, responsibilities, and lessons.</td>
<td>• Be there; be present - for students, teachers, and parents.</td>
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<td>• View and work with school staff as allies and not war opponents, in planning for your child. This will help reduce stress on both sides.</td>
<td>• Do not be afraid to seek assistance when needed. Asking for assistance is not a sign of weakness when done with professionalism.</td>
<td>• Provide a strong mentoring program.</td>
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<td>• Build a relationship with other professional staff responsible for evaluating, working with your child (school psychologist, social worker, speech pathologist) in order to meet the needs of your child so that responsibility for meeting your child’s needs does not fall on one individual.</td>
<td>• Maintain open communication with administration that is based on observation and data not judgment.</td>
<td>• Maintain regular, open and supportive communication with the teacher.</td>
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<td>• Share with school staff what works for you as you deal with your child’s behavior, skills, activities so that your child can productively engage in home and outside-of-school activities.</td>
<td>• Have written procedures for classroom paraprofessional support staff.</td>
<td>• General education and special education administration work together to ensure appropriate and supportive programming for students that maintains the integrity of a program that supports student growth.</td>
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<td>• Effective communication on the part of parents, teachers and administration will be the most useful tool in providing an appropriate educational program that will reduce stress and meet student needs.</td>
<td>• Use the professional support staff (psychologists, social workers, occupational therapists, speech staff, behavior staff) as needed; have open and critical conversations with them.</td>
<td>• Understand the various types of classrooms, the types of students in the classrooms and the demands on the teacher.</td>
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<td>• If you see signs of stress from the teacher talk with them about it.</td>
<td>• Include parents in discussions and have activities for them that support your work in the classroom.</td>
<td>• Understand, as you evaluate the teacher, that often student growth must be in appropriate behavior before you can evaluate academic growth. A great deal of time and effort may be involved in getting the student ready to learn.</td>
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### Additional Points

- **Positive results in conversation can be achieved by stating:**
  - My intention for this feedback is to help you.
  - Walk me through your thought process.
  - Let’s get a date on the calendar to review your progress.
  - Here’s what I need from you in the future. Let me offer some assistance by:

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*Note: The content continues on the next page.*
# APRIL AT A GLANCE

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<th>Sunday</th>
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<td>GOGO Formal Dance &amp; Dinner (Michigan Center)</td>
<td>Bring Autism to Light (Royal Oak)</td>
<td>BWCL Cooking Class (Port Huron)</td>
<td>U of M Grand Rounds (Ann Arbor)</td>
<td>IEP 101 and Effective Parent Advocacy (Escanaba)</td>
<td>Baseball Bash (Royal Oak)</td>
<td>FREE Family FUN DAY (Hastings)</td>
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8  
**Sensory Friendly Sunday at the University of Michigan Museum of Art** (Ann Arbor)

9  
Goals and Objectives (Hudsonville)
DWMHA Autism Conference: Partners in Progress (Livonia)

10  
Disability Network Oakland & Macomb Lunch & Learn (Troy)

11  
Hurdles of Growing Up with Autism (Grand Haven)

12  
Meditation, Facilitation, Supports and Resources & Student Self Advocacy (Bloomfield Hills)

13  
Alex Burt RAIND/VPRGS Brown Bag (East Lansing)  
MiAEYC 2018 Early Childhood Conference (Grand Rapids)

14  
The ABCs of ABA (Southfield)

15  
MSU Spartan Spectrum Autism Awareness 5K (East Lansing)

16  
MiWorks Outreach (Ypsilanti)

17  
34th Annual Developmental Disabilities Conference (East Lansing)

18  
How to Have a Successful Office Visit with a Patient with ASD (Grand Rapids)  
After I'm Gone (Traverse City)

19  
Self-Advocacy Conference (Muskegon)  
MedHealth Summit (Detroit)

20  
Sibshops (Troy)  
Let's Talk Transition! (Howell)

21  
On Board with Autism (Detroit)  
3rd Annual Puzzle Run (Walker)

22  
Rejoicing Spirits No-shush Worship Service (Birmingham)

23  
ADOS-2 Introductory (Modules 1-4) (Ann Arbor)

24  
Understanding Autism Workshop (Ann Arbor)  
Light up the Lanes at Lucky Jack's (Traverse City)

25  
ADOS-2 Toddler Module Introductory (Ann Arbor)

26  
The After I'm Gone Program (Livonia)  
Blue Bridge Walk for Autism and Sensory Friendly Museum Night (Grand Rapids)

27  
ADOS-2 Advanced / Research Training (Ann Arbor)

28  
FALCONERS “Party for the Planet” (Lansing)  
Sibshops (Escanaba)

29  
The Fowler Center Weekend Respite Camp (Mayville)

30  
17th Annual START Conference (East Lansing)

**For more information on any of these events please contact MiNavigator line at 877-463-AAOM**

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**Celebrate those affected by Autism Spectrum at**  
**The 7th annual Michigan Shines for Autism Gala**

April 14, 2018 | DTE Energy  
1 Energy Plaza Dr.  
Detroit 48226

Tickets and Sponsorship Opportunities Available at www.AAoMGala.org

For More Information Please Visit AAoMI.org