

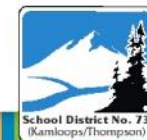


SD #73 SPEECH AND LANGUAGE SERVICES THREE TIER MODEL OF SUPPORT

PRINCIPALS MEETING NOVEMBER 29, 2012
PRESENTED BY SD #73 SLPS



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INTRODUCTION

- Purpose is to introduce a new direction for speech and language services (SLS) in the district.
- Why a new direction is needed.
- How we came to focus on a new model.
- What the new model is going to look like
- Impact on schools
- Future directions



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INCREASING NEED

- Large need- In BC, one in four children is “developmentally vulnerable” when beginning kindergarten (www.decoda.ca)
- 10% of SD73 K students measured as “at risk” for communication skills on Wave 4 EDI with some areas being as high as 18-20% (North and North West Kamloops) (earlylearning.ubc.ca).
- 2009 SLS Parent Survey found that 45% of speech or language impaired kindergarten students were not identified before they began school.



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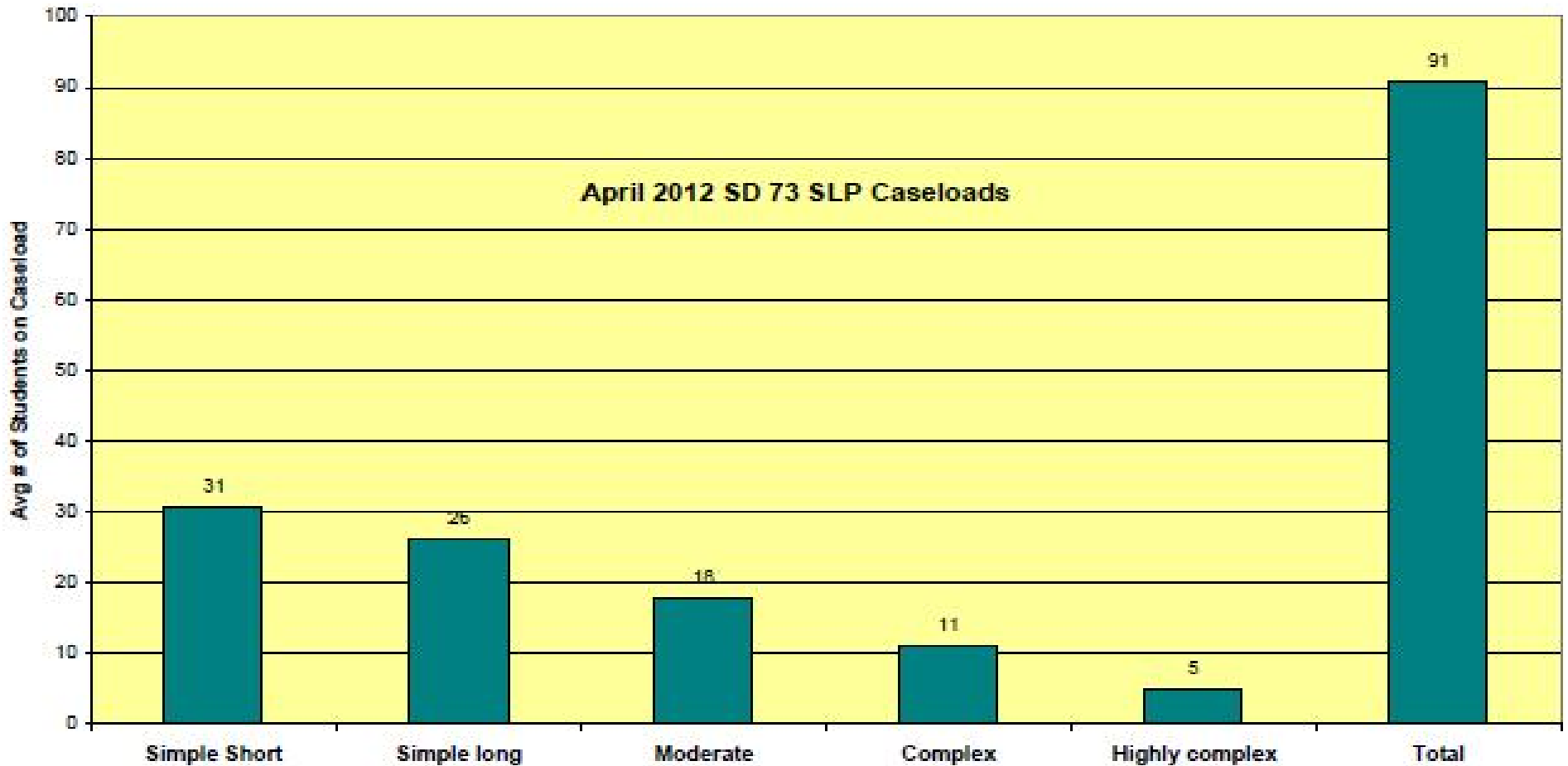


TIME ALLOCATION

- April 2012 caseload showed an average of 91 students per SLP.
- Over half of our caseload consisted of mild speech and language delays (i.e. simple short/simple long)
- We are spending significant amount of office time on simple cases (e.g. 1 hr. TX time : 1 hr. of client-related tasks)
- Reports, notes, phone calls, materials preparation, emails.



Avg. # of Students by Workload Complexity

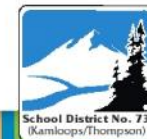


	Simple Short	Simple long	Moderate	Complex	Highly complex	Total
SLP 1-4	35	25	19	11	4	93
Consultant	16	30	15	12	9	82
Summary	31	26	18	11	5	91



TRADITIONAL PULL-OUT SERVICES

- SLPs have traditionally used a pull-out model of services for students. This has various cons.
- Therapy room is a more restrictive environment than the classroom.
- Generalization of learned communication skills is less effective.
- Assessment of the communication disorder is often limited to standardized assessment tools, which yields a narrow perspective of the child's communication disorder.
- Therapy goals tend to be less relevant to the curriculum.
- SLP schedules reduce time for communication with classroom teachers or other professionals.





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 (i.e. in the classroom with typically developing peers)
- 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).





INCLUSIVE PRACTICES

- Therapy and assessment services that are conducted in the child's classroom setting have the following benefits:
- Carry-over or generalization of learned communication skills is greater.
- Assessment of the student involves a complete description of the communication disorder and its impact on the student's ability to meet expected academic outcomes and participate in classroom expectations.
- Communication goals are written so that they are compatible with curriculum. Therefore, goals are educationally relevant and in compliance with PLOs





INCLUSIVE PRACTICES

- 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.





NEW DIRECTION

- Decided to research different models of service delivery.
- We focused in on a three-tier model that has been gaining traction in USA, Ontario, Saskatchewan.
- Response to Intervention (RTI)



WHAT IS RTI?

- A three-tiered educational approach that provides short-term, evidence-based services to students before referring them to special education.
- Students receive systematic instruction for a short period of time
- School team measures students' progress before and after the intervention.
- The students that learn quickly and “respond to the intervention” need more instruction, not special education.
- Students who are not successful may require in-depth testing for language and/or learning disabilities, special ed. services.

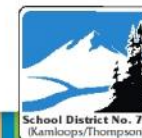




CORE PRINCIPLES

1. All children can learn.
2. All interventions (specific services) must happen early.
3. Use more than one tier (level) of intervention.
4. Use a problem-solving method when moving between tiers of intervention.
5. Methods must be based on research or scientific evidence.
6. Use data to make decisions about placement and intervention.

Note: This is a systemic approach not a special education approach. The goal is to provide a response system for every student.



RTI and Three-Tier Intervention

Tier 3 Intensive Individualized Intervention

- Minimal progress with Tier 1 and 2 instruction/intervention.
- Individualized intervention with extended frequency and duration + Tier 1
- Curriculum-based, individual, frequent progress monitoring
- May or may not be provided through special education
- Needs met for 2 to 5 percent of the students

Tier 2 Targeted Group Intervention

- At-risk students not responding to Tier 1 interventions.
- Targeted intensive prevention or remediation services + Tier 1 instruction.
- Small, same-ability groups of up to four students
- Meets the needs of 5 to 15% of students

Tier 1 Core Instruction

- Ongoing universal screening, progress monitoring, and prescriptive assessment to design instruction
- All students
- 80 to 85% of students respond at this level.



SLS THREE TIER MODEL

- RTI is a systemic model.
- Our new SLS model tries to take the best parts of RTI and work this into our existing model.
- This allows us to target less complex cases with effective, classroom- and home-based interventions.
- This then gives us more time for teacher and parent collaboration.
- More student contact for the most severe cases.



Speech and Language Three-Tiered Intervention in School District #73 (3TI)

**Tier 3
Intensive
Individualized
Intervention**

- 1:1 work with SLP with home practice component
- 1:1 work with SSW directed by SLP
- 1:1 work with parent directed by SLP

**Tier 2
Targeted
Group
Intervention**

- Support learning centres in classroom
- Support and develop SSW led group programs – (e.g. SOLVED, Talking Tables)
- SLP runs small groups outside of classroom
- Research programs for LARTs and SSWs to deliver to students

**Tier 1
Core Instruction**

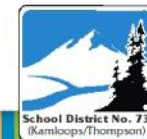
- Support classroom teaching (team problem solving)
- Teaching conversational strategies for skill development
- Workshops for teachers, paraprofessionals, parents
- Distribution of information re: when to refer
- Research or development of screening tools
- Kindergarten screening

<p>Tier 3 Services: Intensive, Individualized Intervention</p>	<ul style="list-style-type: none"> •1:1 work with SLP with home practice component •1:1 work with SSW directed by SLP •1:1 work with parent directed by SLP
<p>Tier 2 Services: Targeted Group Intervention</p>	<ul style="list-style-type: none"> •Support learning centres in classroom •Support and develop SSW led group programs – (e.g. SOLVED, Talking Tables) •SLP runs small groups outside of classroom •Research group intervention programs for LARTs and SSWs to deliver to students
<p>Tier 1 Services: Core Instruction</p>	<ul style="list-style-type: none"> •Support classroom teaching (problem solving with teacher) •Teaching conversational strategies for skill development •Workshops for teachers, paraprofessionals, parents •Distribution of information re: when to refer •Research or development of screening tools •Kindergarten screening



WHAT IS GOING TO LOOK DIFFERENT?

- SLP scheduling will change. We will have more time available for teachers to invite us into their classrooms for problem solving.
- Decrease in direct 1:1 intervention for simple cases but increase in collaboration.
- Increase in capacity building for school staff (i.e. pro-d, staff presentations)
- Increase in group interventions for “at risk” students (e.g. language groups) at Tier 2.





IMPACT

- Need for increased SSW or LART time to oversee group intervention that target language-based academic skills.
- Greater need for space to accommodate groups and schedules.
- Increase in our time at your school collaborating with staff individually and in groups.
- Students with simple speech and language concerns will be addressed through Tier 1 and 2 levels.





IN PROGRESS

- Invested money in Tier 1 and 2 resources
- Invested time in researching and producing classroom-centred handouts/strategies
- Purchased RTI theory manuals and strategy books.
- Reworked our schedule for increased flexibility so that teachers can access us and problem solve.
- Devising a workshop rollout for teachers.
- Monthly departmental meetings
- Branding and blog
(<http://speech.blogs.sd73.bc.ca>)
- SLPA to assist with Tier 1 and Tier 2 tasks.





FEEDBACK

- Questions? Concerns? Comments?



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