



**SUCCESSFUL
COLLABORATION WITH
SCHOOL PROFESSIONALS**

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- Through innovative training, direct service, and cutting-edge research, NCDDET advances independent living, employment, and career opportunities for people with disabilities, while improving their lives and the communities in which they live.
- Oklahoma Project SEARCH
- Pre-Employment Transition Services (Summer Camps)
- Peer Mentoring
- Employment Support Professional Training
- Oklahoma Work Incentives Planning and Assistance
- Inclusive Employment Initiative
- Certified Behavior Analytical Support

*“LEARNING IS NOT
ATTAINED BY CHANCE;
IT MUST BE SOUGHT FOR
WITH ARDOR AND
ATTENDED TO WITH
DILIGENCE.”*

ABIGAIL ADAMS

COLLABORATION

- Collaboration is an interactive process that enables professionals with diverse expertise to provide quality services to students with a range of academic and social needs, including students with disabilities, in the general education classroom (Idol, Nevin, & Paolucci-Whitcomb, 2000; West & Idol, 1990).
- According to Webster’s Dictionary, the word collaborate means - **“to work with another person or group in order to achieve or do something”**.
- Collaboration is the **“mutual engagement of participants in a coordinated effort to solve a problem together.”**
- Collaborative interactions are characterized by **shared goals, symmetry of structure, and a high degree of negotiation, interactivity, and interdependence.**

(Lai, E, 2011, Collaboration: A Literature Review).



WHAT IS COLLABORATION?

- Collaborative Team = A partnership of team members who make effective and efficient use of each team member's specialization and expertise to maximize student achievement.
- Effective teams are made up of team members who perceive themselves as life long learners.



WHY IS COLLABORATION IMPORTANT?

- It helps us problem-solve
- It brings people/professionals closer together
- It helps people learn from each other
- It opens up new channels for communication
- It boosts morale among the team members
- It leads to higher retention rates
- It makes us more efficient workers

WHAT IS THE VALUE OF COLLABORATION

- The value of collaboration among professionals and other school personnel is to ensure the success of every student academically, in career development, and personally/socially.
 - Increase in skills when working with students with disabilities
 - Strengthening relationships with stakeholders
 - Collaborative schools promote school improvement efforts
 - Relationship team building within schools
 - Supporting family involvement
 - Support education level transition
 - Maximize use of limited school resources



THE TEAM



- Members of IEP teams can vary from student to student.
- Required IEP team members include the parent/guardian of the child, a regular education teacher, a special education teacher, a representative of the local education agency, someone to interpret evaluation results, any necessary related service providers, and, when appropriate, the child. Related service members can include a range of specialist, but most common are an Occupational Therapist, Physical Therapist, Speech/Language Therapist, Board Certified Behavior Analyst (BCBA).
 - Occupational Therapists address activities that the student is required to perform daily and try to minimize the effects that occupational and performance concerns have on the completion of those activities (AOTA, 2010; Case-Smith and Arbesman 2008).
 - Physical Therapists work to increase students' motor development and skills. They support health promotion, obesity management, differentiate programs for individual learners, ensuring safe and appropriate educational environments, and community education (APTA, 2022).
 - Speech Language therapists focus their efforts on improving student's communication skills (Koenig and Gerenser 2006). Increasing students' social skills and communication will increase a student's quality of life and social acceptance (ASHA, 2015).
 - BCBA's use interventions derived from the science of behavior change to affect socially significant behavior change in students who may present with a range of behavioral challenges. Strategies may focus on functional communication training, function-based interventions, and differential reinforcement (Cooper et al., 2007; Donaldson and Stahmer, 2014).
- While many common team members have been discussed here, it is also important to note that for an Individualized Education Program (IEP) to be truly comprehensive, additional team members may be necessary in the collaboration process (e.g., orientation and mobility, supports coordination, school psychology, advocates).

GIVEN THE IEP/SCHOOL CONTEXT...

- We want to avoid:
 - Alienating others and creating motivation to avoid us
 - Using jargon that makes it hard for people to understand
 - Assuming that what's socially significant for us is "right"
- Instead, we seek to:
 - Create strong working relationships
 - Explain things accurately but clearly
 - Listen and explore what's meaningful for everyone

SUPPORTING THE CHILD'S EDUCATION

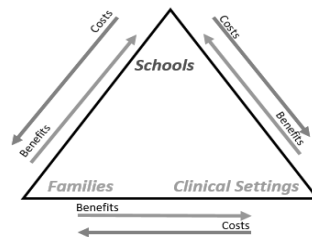
- BCBA's will collaborate with the teachers of the children they work with before the child starts school, at the beginning of the school year, and throughout the school year to support the child's success in their educational activities.
- Collaborating with teachers means to coordinate behavior intervention plans and skill acquisition programs.
- BCBA's and teachers can work together to help make sure the child is experiencing similar reinforcement, antecedent strategies, prompting, and other behavioral interventions which ultimately helps the child develop new skills and behaviors more quickly. This collaboration helps the child generalize their skills in new settings and with new people, as well, which is an essential component of helping children learn and grow.

COMMUNICATION IS THE KEY

- Many of the students who receive special education services within the school also receive services outside of the school setting. It is essential that the lines of communication are open not only within schools but with these other related service providers that are involved in a specific student's daily life.
- Every individual or company that is involved in the well-being and education of the child should be communicating their role and how that can be facilitated throughout the child's day to day life.
- This collaboration is key to ensuring that the child is receiving the best services and education. So how do we go about collaborating with other service providers?
- There are many ways to collaborate. The key to collaboration is communication! The parent is the mediator since they have direct contact with teachers and the other service providers.



The Costs and Benefits of Building a Bridge Between Families, Schools, and Clinical Settings



Schools	Families/Children	Clinical Settings
<ol style="list-style-type: none"> 45-60 minutes BCBA push-in per week Staff training using technology Weekly pull-out Supports Transition plans and fading plans Collaborative PBIS with IEP Team Team approach and collaboration 	<ol style="list-style-type: none"> Direct client of BCBA Behavioral supports occur in school setting during school hours No additional time commitment from family 	<ol style="list-style-type: none"> BCBA collaborates with IEP team and parents Primary Relationship: Child and Family Secondary Relationship: School and IEP team
<p>Benefits</p> <ol style="list-style-type: none"> Bill goes to private insurance No financial burden Professional Training for Staff Research Based Interventions Data Driven Decision Making Minimal disruption through technology 	<p>Benefits</p> <ol style="list-style-type: none"> Bill private insurance No financial burden Collaboration between behavioral and academic professionals for student success 	<p>Benefits</p> <ol style="list-style-type: none"> Meets medical necessity requirements Ability to use DTT and NET to teach generalization and maintenance of skills across multiple environments, settings, situations, and teachers. Increase fidelity and social validity of interventions for skill acquisition
<p>Costs</p> <ol style="list-style-type: none"> Time allotted for staff training Daily/Weekly time allotted for student behavioral supports 	<p>Costs</p> <ol style="list-style-type: none"> Time allotted during child's school day for behavioral support. 	<p>Costs</p> <ol style="list-style-type: none"> Travel to school setting Time spent collaborating with IEP team, parents, and school staff

CHALLENGES OF COLLABORATION

- Collaborating with other professionals can be challenging for BCBAs and for other types of service providers, as well.
- Professionals from two different fields try to come together in an effort to help a particular child, challenges may arise.
- Each professional is engaging in the collaboration from a focused mindset.
- They are interacting with the other professional simply from their own point of view and with their own agenda.
- This then makes them less open to hearing and understanding what the other professional has to say and truly hearing the other person's valid professional opinions and recommendations.



SCOPE OF PRACTICE AND SCOPE OF COMPETENCE: WHAT ARE THEY?

• Scope of Practice

- What the profession, as a whole, is able to do. (Some states have more restrictive rules about this than the BACB itself.)
- Examples: Consulting on classroom behavior; feeding disorder treatment; and lots of other things!
- Non-examples: surgery; piloting planes; giving dietary advice.

• Scope of Competence

- What the professional, as an individual, is able to do well. These skills are based on their education, training, and experience.
- Examples: domains of practice in which the professional is educated and trained.
- Non-examples: everything else (even if it is within scope of practice!)

Behavior Analysis Scope of Practice/Competency

Scope of practice (everything that can be done within the profession of behavior analysis). This is neither good nor bad; it's our framework.

Examples: functional analysis of severe behavior, school consultation, behavioral safety coaching for construction businesses, etc.

Scope of competence (skills within scope of practice which the person can actually perform well, based on training). This is where we want to be!

Example: toilet teaching for young children (after training/supervision).

Irrelevant (skills that are not being performed as a professional - not bound by behavior analytic practice considerations). This is okay outside of work.

Example: recommending a diet plan to a friend.

Outside scope of competence (professional activities that are okay for behavior analysts to do, but that a specific individual cannot personally do well). This is not okay.

Example: offering classroom consultation without training/supervision needed to be good at it.

Outside scope of practice (professional activities that behavior analysts are not allowed to do). This is not okay unless we're practicing with a separate credential.

Examples: offer psychotherapy, provide diagnoses.

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TIPS AND STRATEGIES FOR SUCCESSFUL COLLABORATION

WHY CAN'T WE ALL GET ALONG TOGETHER?

BARRIER #1: MISUNDERSTANDING OF ROLES

- ABA providers have been collaborating with schools for years without a lot of structure. Some schools allow providers to come, observe, and provide written feedback. Other schools do not allow outside providers at all.
- The schools that do allow BCBA's to observe and participate in the IEP, do not have defined roles for each professional to ensure productive collaboration.
- This has created tension between BCBA's and educators that hinders progress of the child. Often times, relationships can become strained without guidelines and protocols for the professionals to follow.



SOLUTION #1: CLEAR ROLE DEFINITIONS

- Roles and responsibilities must be defined and agreed upon in writing by the professionals. Some common roles and responsibilities may include:
 - Who is responsible for behavior IEP goals?
 - How to provide feedback to either party on the fidelity of the behavior plan?
 - Structured mediation practices – what will they look like? How do you document?
 - How do you distinguish between skill acquisitions that the teacher and the ABA provider are responsible for?
 - How does the RBT receive instruction from both professionals? Whose recommendations take priority and for what content area?





BARRIER #2: DIFFERENCES IN EDUCATION AND TRAINING

- It is very important to know that each professional has a different set of training and skills.
- Many BCBA's are not trained in education.
- Although BCBA's have successfully taught academic content through interventions based on behavior analysis, they are not trained in curriculum design and instruction.
- Some BCBA's recommend behavior-based programming that requires more time and attention than the teacher can feasibly accomplish.
- Teachers are not trained in behavior management which is much different than classroom management. Behaviors keep teachers from teaching as much academic content as they needed to.

SOLUTION #2: COHESIVE AND COMPREHENSIVE EDUCATION AND TRAINING

- Both teachers and BCBA's need to continue their education on topics within each other's fields. In the larger scope.
- BCBA's need to be trained in the content of IEP's, general classroom management, and understand the full scope of the teacher's role. They need to be able to implement effective behavior programming in the classroom while accounting for the teacher's capabilities as they meet the needs of all children in the classroom.
- Both general and special educators need to be adequately prepared for the behaviors of the students they are teaching.
- Basic classroom management skills are not enough to manage these behaviors without advanced training.
- As inclusion continues to be more and more prevalent within the classroom, it is important to ensure that our educators are adequately prepared to support these children.

BARRIER #3: LRE (LEAST RESTRICTIVE ENVIRONMENT)

- LRE, or Least Restrictive Environment, is a part of the Individuals with Disabilities Act (IDEA) which was established to help provide students with disabilities proper educational accommodations. Establishing ABA services within the school has posed challenges with meeting LRE requirements because ABA is technically a related service. Related services are additional services provided to the child which are outlined in the IEP. These services often include speech, occupational, and mental health.
- If an ABA provider is servicing the student in the educational setting, should this service be counted as minutes of related services on the IEP? If so, how does this affect the Least Restrictive Environment? When attempting to help service students in the classroom in the past, this has often come up because a direct therapist was not listed as a service.





SOLUTION #3: IEPS WITH ABA THERAPY?

- There needs to be a consensus made on how to write ABA as a related service into the IEP. It is going to be very important that a 1:1 ABA provider is reflected accurately in the child's LRE considerations, and that the child's present level of performance is accurate. Some very important questions need answers prior to implementing this level of services
 - Will the ABA provider be listed at all in the IEP?
 - If not, and it is just an outside service, how will the next school know how to best support the child?
 - For districts and schools, how is this going to reflect on their legal obligations if an RBT is currently unavailable and they are not meeting their required ABA service hours?



SKILLS NEEDED

- Here are a few examples of how BCBA's can use soft skills to collaborate with teachers:
 - **LISTENING SKILLS:** Be sure to truly take the time to listen to the teacher's perspective and opinions. Express understanding of what you hear them saying.
 - **EMPATHY:** Show empathy in your interactions with teachers. Teachers have a uniquely challenging job. Be empathetic toward them by putting effort into understanding their emotions and perspective.
 - **COMPROMISE:** Compromise with teachers on intervention plans being created for the learner you are both trying to help particularly when your perspectives or priorities differ.
 - **CREATIVE THINKING:** Use outside-the-box thinking to come up with new and creative ideas to help the student. Try getting insight from the teacher to help come up with these ideas (i.e., What materials are available in the classroom? What systems are already in place for reinforcing students' behaviors?)
 - **CONFLICT RESOLUTION:** Be compassionate when addressing problems. Work together to resolve conflict.
 - **COMMUNICATION:** Be an effective communicator. One way to do this is to create easy-to-understand intervention plans and/or recommendations that you share with teachers. You can have clearly written programs that you share with teachers. You can also practice effective communication skills verbally by using terminology that the teacher might be familiar with when describing your recommendations. It's okay to use terminology from the behavior analytic literature as long as you communicate your message well.

SKILLS FOR EFFECTIVE COLLABORATION

Skill	Go-To Moves
Preparedness	<ul style="list-style-type: none"> •Identify a facilitator. This person may be the team leader, or you may opt to rotate facilitation responsibilities. •Set an agenda ahead of time and identify meeting goals. •Communicate pre-work, ideally no more than 30 minutes' worth, to maximize collaboration.
Active Listening	<ul style="list-style-type: none"> •Be present. Silence cell phones, close laptops, and focus only on the meeting agenda and goals. •Allow others to fully finish their thoughts. •Follow up with questions.
Summarizing	<ul style="list-style-type: none"> •As the meeting goes on, summarize what you're hearing (or think you're hearing!) from your colleagues. •As the meeting concludes, summarize next steps, ownership, and any deadlines for follow-through. Identify any unresolved topics for the next meeting. Don't forget to revisit these next steps during future meetings to ensure follow-through.
Questioning	<ul style="list-style-type: none"> •Approach colleagues with an inquiry mindset. Ask questions, particularly open-ended and clarifying ones. •Check your own understanding of your colleagues' views by paraphrasing.
Delivering	<ul style="list-style-type: none"> •Deliver ideas and solutions with evidence.
Integrating	<ul style="list-style-type: none"> •Synthesize colleagues' ideas to arrive at an actionable solution. •Use input and feedback to strengthen initial ideas.
Empathizing	<ul style="list-style-type: none"> •Assume positive intent of others. •Ensure that everyone's voice is equally heard and that everyone is contributing.



WHAT PARENTS CAN DO?

- Provide each teacher and/or provider with a contact information document.
- This should include the names and contact information of teachers and other providers who work with your child.
- Check-in with the various adults that work with your child to ensure that they have gotten in touch.
- Provide updates yourself to teachers or other service providers about your child's goals and progress.

WHAT TEACHERS CAN DO?

- Ask parents for contact information of other service providers that the student might be seeing (if the parent doesn't provide you with this information).
- Reach out to other service providers.
- Update other service providers throughout the school year regarding the student's performance and goals.



WHAT SERVICE PROVIDERS CAN DO?

- Ask parents for contact information of other services providers that the student might be seeing (if the parent doesn't provide you with this information).
- Reach out to other service providers
- Update other service providers and teachers throughout the year regarding the student's performance and goals.



WHAT DOES RESEARCH SAY?

EFFECTIVE COLLABORATION

The research of (Ascher et. al., 1990, 1988) have identified what they believe to be essential strategies to effective collaboration and are achieving successful in meeting their objectives.

- Service delivery is 'family- centered', rather than 'child-centered'. The child with a disability is treated as a member of the family, and the family is treated as a member of the community, so that a family unit, rather than a group of individuals, is served.
- Staff are given the time, training, and skills—including multicultural awareness and communication skills to establish and maintain sustained and supportive relationships.
- Flexibility is essential, going beyond rigid rules and procedures to allow the focus to remain on the service and not the structure.
- Actions are results orientated and accountable to families, professionals, and the general public.

5 POSITIVE OUTCOMES OF COLLABORATION:

- It Helps Teachers Brainstorm Creative Ideas
- It Provides an Avenue for Professional Growth
- It Leads to Improved Student Outcomes
- It Aids in the Success of School and District Initiatives
- It Decreases Teacher Turnover



DOS AND DON'TS



DO'S



DON'TS

- **Do's**
- Build a rapport
 - When we invest in a relationship, it's easier to deliver feedback and the feedback is better received. Teachers are also more likely to implement recommended interventions when a rapport has been established. To build a rapport, ask meaningful questions, practice active listening, and point out the positives. Sharing some personal information can be helpful, but only if the intention is to emphasize commonalities. For example, it's acceptable to say, "I have a student in elementary school, too," or "I'm also a runner". Avoid "oversharing" or talking about things that the teacher cannot relate to.
- Engage in perspective-taking
 - Take a step back from who you are and what you're there to do and consider what it's like to be the other person in this relationship. I will never pretend to understand how hard it is to be a teacher, but I will always try to empathize. I also ask a lot of questions about what it's like to be a teacher and try to learn from every observation I do. Use your soft skills and be compassionate.
- Do what you say you're going to do
 - This should go without saying, but if you say you're going to do something, do it. This will build trust. Being busy is not an excuse. If you are having trouble prioritizing, ask the teacher for input. You can't go wrong with under promising and overdelivering.

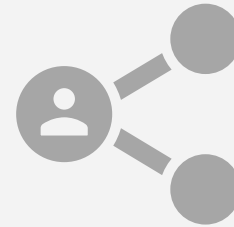
DON'TS:

- Make it about you
 - Your role is to support the teacher. Whenever possible, do an observation first. What does the classroom look like? Make a note of the teacher's style. How does the teacher interact with the students? How do the students respond to the teacher? Always listen before your talk. Instead of pointing out what you think is wrong, ask thoughtful questions. How can I help you? What is the hardest part of your day?
- Interrupt
 - Don't talk when the teacher is talking. Be as unobtrusive as possible during an observation. Maintain an open line of communication. Ask when the best time to talk and what the preferred mode of communication is.
- Make unrealistic recommendations
 - If a teacher can't implement the strategies you've developed, you've wasted everyone's time. "Give the student a reinforcer every 30 seconds contingent upon sitting appropriately" will not work in a classroom. Working in a school is very different from working in a clinic where you have the staff and environment where you can control everything and give immediate reinforcers. Don't tell the teacher to do something without demonstrating it.



COLLABORATION IS...

- Collaborating is more than just emailing and making phone calls with updates.
- It involves meeting in person as a group and individually to ensure that everyone is on the same page. Once introductions have been completed a meeting should be arranged with all professionals and the family.
- This provides everyone with the opportunity to meet!
- In addition, it gives everyone the time to sit down and discuss the child so that everyone can ensure that they are all working together allowing fluidity between the variety of settings that the child will be in.



COLLABORATION IS ...

- Collaboration is all about teamwork!
- Working as a team is essential for the success of the children that we work with.
- We need to ensure that we continue to keep the lines of communication open and work with each other and the family.
- It is important to loop all professionals the family into decision making processes and program planning. It is also important to share a child's success and progress so that the same high standard and expectations are held for the child no matter the setting.
- Collaboration is a truly important component in ensuring that our children are provided with the best services and education.



EXAMPLE



Relative Strengths and Opportunities for Collaboration

RELATIVE STRENGTHS

SPEECH-LANGUAGE PATHOLOGISTS

Diagnostics
Spoken and Written Language
Child Development
Articulation/Phonology
Swallowing and Feeding
Language Structures
Augmentative and Alternative Communication
Speech, Fluency, and Voice

BEHAVIOR ANALYSTS

Data Collection Strategies
Behavior Interventions
Functional Behavior Assessments
Reinforcement and Motivation
Single Case Design Methodology
Functional Communication Training
Preference Assessments
Principles and Tactics of Effective Teaching

OPPORTUNITIES FOR COLLABORATION

SPEECH-LANGUAGE PATHOLOGISTS

Behavior Management
Functional Communication Training
Single Case Design Methodology
Data Collection Strategies
Preference Assessments
Principles and Tactics of Effective Teaching

BEHAVIOR ANALYSTS

Developmental Norms
Articulation/Phonology
Structures of Language
Feeding
Language Sampling
Augmentative and Alternative Communication

FINAL THOUGHTS

- In summary, as with all big changes, it will take time and a group positive effort to ensure a smooth transition to this model.
- There is a need to make accommodations, policies written, and an open mind from all of the providers to set up a clear path of success for the collaboration of direct ABA providers, BCBAs, educators, school staff, and districts.
- With some of the solutions and questions proposed, I am hopeful that we are creating an opportunity to expand our reach and help more students succeed.



FIGURE 1.1 *Not everything people do together in schools is collaborative...*



Remember the goal:

**STUDENT
ACHIEVEMENT**

REFERENCES

Brodhead M. T. (2015). Maintaining Professional Relationships in an Interdisciplinary Setting: Strategies for Navigating Nonbehavioral Treatment Recommendations for Individuals with Autism. *Behavior analysis in practice*, 8(1), 70–78. <https://doi.org/10.1007/s40617-015-0042-7>

Cooper, J. O., Heron, T. E., & Heward, W. L. (2007). *Applied Behavior Analysis* (2nd Ed.) New York, NY: Pearson

Donaldson, A. L. & Stahmer, A. C. (2014). Team Collaboration: The Use of Behavior Principles for Serving Students with ASD. *Language, Speech, and Hearing Services in Schools*, 45, 261–276

LaFrance, D. L., Weiss, M. J., Kazemi, E., Gerenser, J., & Dobres, J. (2019). Multidisciplinary Teaming: Enhancing Collaboration through Increased Understanding. *Behavior analysis in practice*, 12(3), 709–726. <https://doi.org/10.1007/s40617-019-00331-y>

Stone, Douglas., Bruce Patton, and Sheila Heen. *Difficult Conversations: How to Discuss What Matters Most*. New York, N.Y.: Viking, 1999

QUESTIONS

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