

FACT 6:

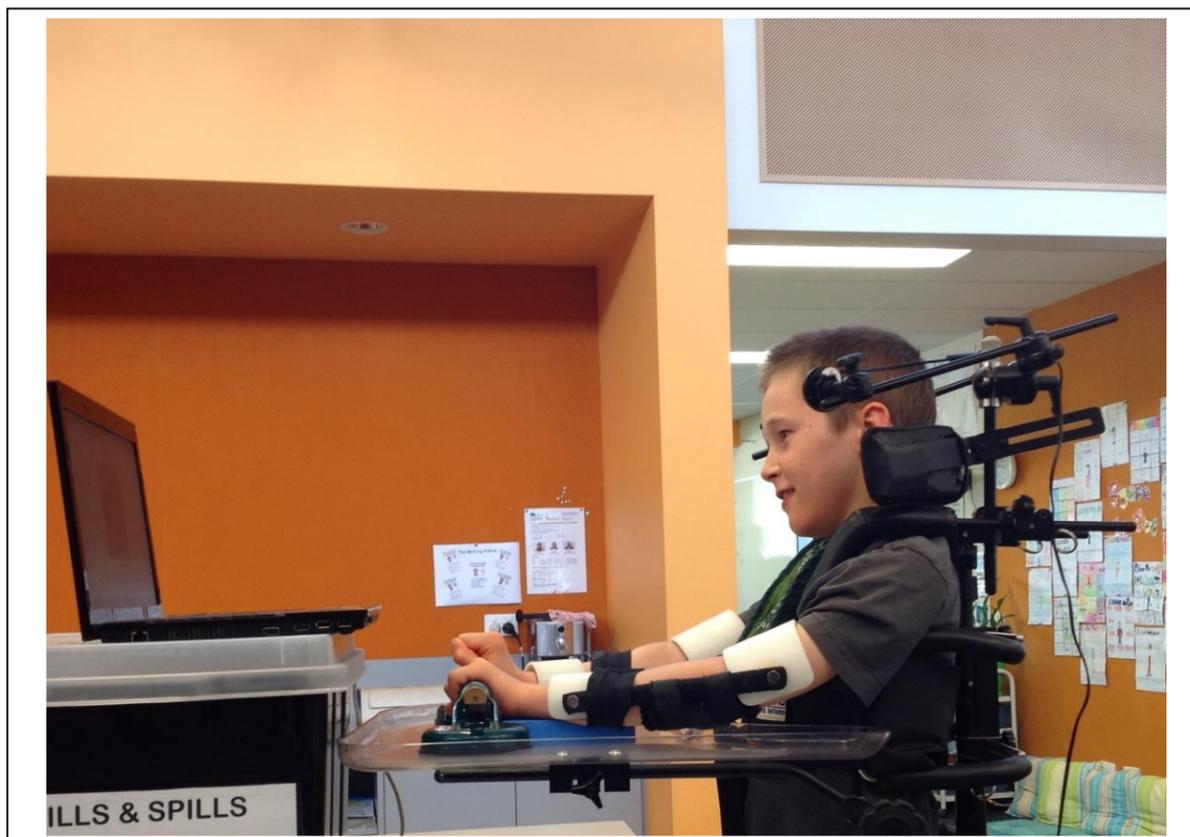
Allied Health Practitioners are Part of the Home & School Teams that Support Students' Success

Findings from the research project:

"Successful School Experiences for Victorian Students with Cerebral Palsy in Local School Communities"¹

KEY MESSAGE: Students benefit the most when allied health practitioners, teachers, aides and families work collaboratively.

The research identified allied health – namely speech pathology, occupational therapy and physiotherapy – as professionals who were actively working with children and families from early intervention through school and after. This continuity of service allowed seamless service delivery which was helpful for students and families. Therapists believed that knowing the child and family enhanced the services that they provided at school. Being part of a larger comprehensive team that had good communication and capability to help the student was considered important.



"For our more complex students... we rely enormously on Allied Health. If a child's non-verbal then we really need our speech pathologist to be giving us some really good professional learning and strategies and to be working with us to make sure the staff are trained in the best approach.

So Allied Health is really, really important." Principal

Conclusions & Recommendations

- 1. With training and support, teachers and aides can adapt, modify, tailor and offer innovative solutions to the daily curriculum issues that arise for students with disabilities.** When educators have access to allied health experts, collaborate with a student's family, receive adequate and appropriate support from school leadership, and receive training, they can and do create great and appreciated school experiences for students with disabilities. Teachers must have access to education and experts who work with them inside schools and as professional development, so that teachers can feel confident to involve students with disabilities in both curricular and extracurricular school activities.



"I know a lot more about cerebral palsy now, I've had to train myself up, I've had to go to the CPEC professional development sessions to learn a bit more about it and what his needs are." **Teacher**

"Like when the physio comes I actually have to do work, like physio. [I have to do] Stretching, sit to stands, stool; yes that's about it really. It's inside the classroom. And the walker. If I'm sitting in my corner chair I have to get help from my Aide, my Aide brings me up and then I have to get in the walker.. The physio just helps me walk, and get stronger, and all that." **Student with CP, spastic quadriplegia and visual impairment**

"All the therapists were very helpful and made things easier for me. My message to therapists would be: you have to help the students understand it is very, very important to go to school and learn no matter how difficult it is with your body and communicate and the therapists not to be scared to go and see the principal if they think a problem with the Aide. I would go and see my principal if I had a problem with the Aides." **Teenager with athetoid CP and Complex Communication Needs**

- 2. Allied health experts are recognised as useful providers and essential experts.** Experts can and do assist teachers, aides and schools to make appropriate and reasonable accommodations and adaptations that will enable individualised success for students, particularly in the areas of communication, physical access and modifications of tools and curriculum, technology and timetabling. Allied health practitioners must be aware of the culture and processes within schools to respectfully and effectively collaborate and consult with students, families and school staff in ways that will make a difference to the student's capacity to access curriculum, make friends and achieve health and participation. Schools should also be inclusive of allied health practitioners as key team members who can and do provide services to students and their families before, during and after the school years.

Advice on making use of Allied Health in school "I would say do as much as they can to help the integration aides put into place things in the classroom so that the students are having experience of movement, of proper seating, getting out of their wheelchair, being more actively involved in the classroom so that they can be using their therapy in constructive ways in the classroom as well... That would be really beneficial." **Mother to student with spastic quadriplegia CP, GMFCS level 5 & Complex Communication Needs**



"I think having a really collaborative team. So OT, speech and physio. Or whether all three or just one or two of those disciplines are involved – communication between therapists is really important...you need to make sure that you're all talking and on the same page. Just regular contact about what's happening and making sure that you're working collaboratively as a team. It's also really important for the school to have an open mind about what's possible...there are vastly different experiences of schools that are really open and other schools who find that a little more challenging...it's a really important thing for them to be willing to try new things, because there's no set script for every child – that you tick the box and that works. You have to look at the child as an individual and it's also lots of trial and error as well...The schools that are generally willing to give things a go tend to find a solution that works quite well for them." **Occupational therapist**

3. Schools cannot build up expertise to assist students alone. Students and school communities often embrace students with disabilities, although physical accessibility, knowledge and use of student's particular communication methods or needs, and social participation must be carefully addressed through a strategic plan that includes appropriate experts. These include speech pathologists trained in augmentative and alternative communication, occupational therapists trained in technology and switch access, and physiotherapists with expertise in childhood physical disability. Collaborations with the same aim – a successful school experience for the student – should underpin all interactions between schools and external experts and agencies.

“Her therapy needs, we go to CPEC weekly. She has physio weekly and then speech therapy or occupational therapy on a fortnightly basis and they also come out to the school...speech therapist comes fortnightly...OT fortnightly...physio monthly to the school. She has constant therapy all the time and what the therapists do when they come to school, especially the speech therapist, looks at the curriculum and looks at ways to help Elisa to be able to access the curriculum... So they're really working with the Aides...[The school] asks for it to happen. They would much rather that the therapists be there and teach the Aides because the Aides are not fluent in this communication language, so especially the speech therapist needs to be there constantly to be able to help them navigate the PODD [Pragmatic Organisation Dynamic Display] book and to be able to help...just to be able to bring new things to the table for her, new challenges, they definitely need to have the speech therapist and the occupational therapist there.”
Mother to student with motor difficulties and Complex Communication Needs

“CPEC from the start ...really helped us with our approach, not saying, “You should do it this way,” I guess they helped us change our thinking and opened our thinking to say look at the big picture, look across the week...these children need to use their bodies...be as independent as possible, to be in control of their body, use their body because they've got to use it to maximum ability...the importance of drinking, the importance of eating, their toileting needs, that is part of their day, that's their part of their education. You can't learn if you're not feeling happy, if you're not feeling safe, if you're not comfortable, if you're hungry, if you need to go to the toilet. Getting that whole picture of their needs, that's part of their time at school. All that equipment, the transfers...it's not reasonable to put them in the standing frame if we're going up to the Mother's Day stall 10 minutes after...looking over the week ... this is a good time for standing frame daily, library time is a good time, show and tell time is a good time...” **Principal**

4. School communities are places where all children can thrive and all children should feel welcomed and valued. In order for students to feel welcomed and safe, other students, teachers and the whole community must show respect and accommodations for the students mobility needs, communication methods, self-care needs and education needs. Practical measures such as using and including a child's communication system in and outside class, making the school grounds physically accessible and having positive regard for the school experience of students with disabilities as different but valuable, are all essential features of a successful school experience for any student.

“They [Allied Health Practitioners] come in and they'll do activities with him and their goals are the same as our goals really. We have SSGs [Student Support Group meetings] or the meetings every term. We go through and we say these are the goals. The goals have been independence for a big part of it, now it's beating the fatigue. A bit of it has been the comprehension and lifting the academic side of things, some of it's been to bring back the independence, all that sort of stuff...They visit three or four times a term. It's good. It was especially helpful at the beginning, now it's more like a check in to see how he's going and how everything is...They provide strategies and things that can help, that I can do with the whole grade that helps with inclusion, things that we can do just so that he's not the only person doing that.” **Teacher**



5. Organisations such as the Cerebral Palsy Education Centre are centres for excellence with considerable expertise in low incidence disabilities such as cerebral palsy, associated conditions, and complex communication needs. Such organisations offer long term services to students with disabilities and their families before school entry, across the school years and after school completion. Families identify such services as essential to their child’s health development and participation in daily activities. Schools identify services as useful in preparing schools to accommodate the needs of students with disabilities. Funding is an issue that needs attention to ensure that the right skilled practitioner or service can be engaged to assist schools, teachers and students to experience optimum success at school.

“I always go in with the attitude that the person working with the child wants to do the right job and always, nearly always they are there to do the best for the child, they want to see the child improve, they want to see the child learn, they want to see the child stay healthy and symmetrical and they become concerned and disheartened when these things aren’t happening. And so the way we get there is just through one on one time, practising transfers, problem solving transfers, spending a lot of time giving information, practical information hints and tips about well this is the way her sensory system works, these are things we know help and lots and lots of praise.” **Physiotherapist**

Her CPEC speechie [Speech Pathologist] offers quite a lot of information in regards to her curriculum, so it’s very helpful. They offer ideas about how we should modify things for her. Being new to it, and I haven’t taught someone with CP before, they have been really helpful. But when I’m thinking about people that visit [student] her speechie would be the most helpful in providing us with supporting information.” **Teacher**

“CPEC services provide an after school program and so our kids who are in school can come back and access that program and they can do an hour of a communications session where there are goals set out at the beginning of the year or at the beginning of the term. Because a lot of our therapists are involved with the children in schools, we kind of have a good idea about how we can marry up their goals with what they need in schools...one of the difficult things for these children is that when they are in their school environment there isn’t necessarily another AAC [Augmentative & Alternative Communication] user to bounce ideas off, to model off... well, these past couple of years one of our senior mentors is an AAC user. The children look up to her so much because this is a person that they relate to and they connect with her. They will generally have conversations that they won’t have with us and it provides us with insight as to what other support we can give...But what works is showing them ‘Well here’s someone older who has been through this and has done it before. This is what we are aiming for.’ so that’s been an asset.” **Speech pathologist**

“...without CPEC I don’t know how I would have figured that out. And I know that speaking with the Vice Principal, she deals with a lot of different early intervention centres that all have different approaches. But she said she’s never experienced such structure and CPEC kind of just guided her really.

Mother to student with CP, spastic diplegia-GMFCS level 2



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¹This information sheet has been compiled following a research project called: Successful school experiences for students with cerebral palsy. The William Buckland Foundation proudly sponsored the study. Dr Helen Bourke-Taylor, researcher and occupational therapist and Ms Claire Cotter, Manager of Cerebral Palsy Education Centre (CPEC) collaborated to produce the findings contained in this fact sheet. The research project was a qualitative study that involved interviewing 47 people about their perspective of the experience of students with cerebral palsy in local schools. The rigorous research involved analysis of interviews: 7 students; 11 parents; 10 teachers; 9 principals; 10 allied health therapists. This fact sheet is number 6 of a set of 6 fact sheets. Each fact sheet summarises one theme that was derived from the data that represented the collective experience of participants. The fact sheets may be downloaded from the CPEC website (<http://www.cpec.org.au/>).