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## Collaboration in Schools: Perspectives of Occupational Therapist and Teacher Dyads

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A collaborative model of consultation is a problem-centered approach in which two or more professionals team together to create solutions to mutually defined problems (Idol, Nevin, & Paolucci-Whitcomb, 1996). As applied to occupational therapy services in the public school system, collaborative consultation is defined as an “interactive team process focused on student performance and influenced by critical personal and contextual variables” (Hanft & Shepherd, 2008, p. xix) and these mutually identified problems are solved through shared thinking and mutual decision making (Clark, 2000). Collaborative consultation is a team support (Hanft & Shepherd, 2008) that is emerging as a best practice standard in school-based occupational therapy practice (Sayers, 2008; Villeneuve, 2009).

The *Occupational Therapy Practice Framework: Domain and Process, 2nd Edition (Framework-II)* (American Occupational Therapy Association, 2008) recommends that occupational therapy practitioners consider a range of supports and services when providing services to clients; similarly, the Individuals With Disabilities Education Improvement Act of 2004 (IDEA) requires that the student’s special education team deliver educational interventions to the maximum extent possible, in the least restrictive environment, which is considered to be the place where the student’s typical peers are educated (Hollenbeck, Ray, Walker, & Bunch, 2005). School-based practices that include direct therapy in an isolated therapy room with a remediation focus are changing; however, the pull-out model still occurs (Spencer, Turkett, Vaughan, & Koenig, 2006) and is not considered to be a contextual service in the natural environment for student participation. Because practice in familiar contexts is the key to generalization and mastery of skills (Fishbaugh, 2000), alternatives to direct intervention in a pull-out model should be explored.

Alternatives to direct intervention (i.e., collaborative consultation) can include modifying materials, modifying the environment, and altering task demands, along with supporting educational staff. This model of service allows interventions to be delivered in the context of the classroom routines and academic demands (Knippenberg & Hanft, 2004). Collaborative consultation, as a more recent theoretical approach, differs from the traditional model of consultation in which shared knowledge is a

hierarchical, unidirectional flow as an expert consultant delivers recommendations to solve a problem encountered by a less-expert consultee (Dougherty, 2005). Collins and Crabb (2010) discussed the significant differences between these two models, highlighting active listening, shared goals of team members, mutual decision making, effective communication, learning from each other, and mutual respect as aspects of collaborative consultation. In contrast, assuming expert status, persuading others to adapt to one’s own ideas, sharing little information, and taking no responsibility for outcomes are seen as hallmarks of the more traditional expert consultation model.

The process of collaborative consultation can be a vehicle for facilitating contextual interventions and has become an important process to understand, especially in the practice arena of school-based occupational therapy services. Bose and Hinojosa (2008), in an analysis of interviews with school-based occupational therapists, concluded that current recommendations for collaboration within the educational environment had not been fully realized. In general, teachers perceived that better communication and more reciprocity was needed in their relationships with school-based occupational therapists and said they did not have a clear understanding of the role of occupational therapists in school practice (Casillas, 2010).

Villeneuve (2009) conducted a critical examination of peer-reviewed studies that involved school-based collaborative consultation and found emerging evidence of its effectiveness in promoting student achievement. Similarly, Sayers (2008) determined that both classroom-based consultation and pull-out interventions resulted in equally effective outcomes for students. There is little information on the perspectives of collaborative consultation with an actively collaborating dyad of a teacher and occupational therapist. Villeneuve (2009) suggested that to further inform school-based occupational therapy practitioners and related stakeholders of the value and outcomes of collaborative consultation, occupational therapy researchers need to include the joint perspectives of the participants involved with collaborative consultation. Through our unique professional lens and clinical reasoning processes (Mattingly & Fleming, 1994), we can positively impact students’ access to their occupational roles at school as we move toward using a collaborative consultation model.

## Interpersonal Variables Within Collaborative Consultation

Participants in a collaborative consultation relationship bring critical personal and interpersonal variables that include communication skills, respect for other participants in the relationship, a common vision for the work of the group (Hanft & Shepherd, 2008), a strong knowledge base in their particular field, and beliefs that are usually closely aligned with those of other participants in the relationship (Brownell, Adams, Sindelar, Waldron, & Vanhover, 2006). These interpersonal variables impact the initiation, maintenance, and effectiveness of collaborative consultation relationships for teachers and school-based occupational therapists. Mendoza-Smith (in Hanft and Shepherd, 2008) described building these interdependent professional relationships in school-based practice as an intricate and demanding portion of our role requiring further research.

Idol et al. (1996) described the process of collaborative consultation as involving multiple collaborators who bring a trilogy of skills: a unique and appropriate underlying knowledge base; interpersonal communicative, interactive, and problem-solving skills; and intrapersonal attitudes. This article presents information from a larger qualitative study of the experiences that teacher/occupational therapist dyads have with collaborative consultation, specifically a discussion of the interpersonal human factors described by the collaborating dyads.

## Methods

Participants were school-based occupational therapists and classroom teachers from Massachusetts, with 12 dyads in all. All were female; the teachers had worked in school systems for a range of 4 to 31 years, with a mean of 15.2 years; the occupational therapists had worked in school systems for a range of 5 to 24 years, with a mean of 16.5 years. They had worked together as partnering dyads for a time range of 1 to 18 years, with a mean of 8.6 years. School districts represented included small rural towns, two regional school systems, small and medium residential suburbs, one large town, and one small city.

A convenience sample of school-based occupational therapists who expressed an interest in participating recruited one classroom teacher to be a consistent dyad partner. Snowball sampling occurred as therapists who received the initial e-mail invitation forwarded it to other school-based occupational therapists.

## Procedures

Prior to initiating this study, approval was obtained from the Tufts University Social, Behavioral, and Educational Research Institutional Review Board.

**Demographic survey.** Each individual member of the dyad completed a demographic survey that gathered information about the participant and her descriptions of the current practice of collaborative consultation.

**Diary.** Dyads were sent copies of an online diary form at the beginning of each week for 4 weeks, with instructions to write comments about one collaborative consultation experience they had that week. Diary information focused on the process of the collaboration as well as the affective components of the relationship. Although both members of the dyad received copies of the online diary form for equal access, only one joint submission was required from the dyad each week.

**Self-reflective follow up.** Following the diary phase, individual participants were sent a one-time follow up questionnaire. Items on this scale focused on characteristics that have been defined in the literature as hallmarks of collaborative consultation as well as serve to differentiate collaborative consultation from a more traditional expert consultation model.

## Analysis

The text data gathered were reviewed using content analysis. Conventional content analysis was used as the researcher read text multiple times for immersion and discerned key words and phrases (Hsieh & Shannon, 2005). Key recurring words and phrases were collapsed to generate broad categories for discussion. Triangulation occurred as an independent occupational therapist familiar with the concept of collaborative consultation ascribed an identified list of key recurring words and phrases to the generated broader categories supplied by this researcher.

Directed content analysis using predetermined codes was also used. Directed content analysis is generally used to validate or conceptually extend a theoretical framework (Hsieh & Shannon, 2005). Previously identified interpersonal skills found to correspond to collaborative consultation in research include active listening, mutual respect, shared similar beliefs, use of effective communication skills, ability of the dyad to define roles and responsibilities, embrace of role release, mutual trust, mutual decision making, ability to negotiate and resolve conflicts, and the ability to learn from one another in the collaborative process. Triangulation occurred as key recurring words or phrases in the raw text data were blindly ascribed to one of these ten identified hallmarks of collaborative consultation by the same independent occupational therapist.

This researcher maintained a reflexive field journal during the study that included potential personal and professional biases, and notes of changes to consider for the next out-going diary. Member checking (Lietz & Zayas, 2010), in which research participant(s) are involved in the data analysis, occurred with one occupational therapist member of a dyad. She agreed with the researcher's placement of key words and phrases into the broader themes.

## Results

The dyads described interpersonal qualities that support collaborative consultation. In general, three interpersonal factor themes emerged from the dyad entries: mutual decision making; effective communication skills; and feeling respected and listened to by the other party. These broad themes concur with those found in the literature. In the weekly diaries, the themes of mutual decision making and effective communication skills were prominent. In the self-reflection surveys, the themes of effective communication, and feeling respected and feeling listened to were prominent.

For mutual decision making, dyad participants described their process for coming to consensus around the issue at hand. Phrases ascribed to the interpersonal factor of mutual decision making in the diaries included the following: "At times we have a different

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perspective on an issue; we are able to listen to each other, and typically we reach some type of consensus on the issue"; "We shared information and set a plan"; "After discussing pros and cons, we decided on one option"; and "We may have different philosophies or ideas about how to handle or solve an issue but we have always been able to come up with a compromise." Another comment was, "Taking the time to reflect on our process together was itself very positive and rare considering the pace of education...giving our ideas that were not always in agreement and choosing to try one way... and test out the ideas" supports the mutual decision making process as critical to collaborative consultation. In the self-reflection surveys, discussion of this theme of mutual decision making included "When she requests help, she isn't necessarily looking for someone to solve her problem on the spot; rather she is looking to work together towards a solution" and "Collaborating feels more like problem solving than throwing answers from my fund of knowledge at the teacher."

In the area of effective communication skills, dyads discussed the quality of the communication around the issue. Phrases ascribed to effective communication skills included "As each person brings up their ideas and concerns, discussion is generated as it often prompts additional thoughts, ideas, and questions from others" and "It's the talking out process that helps us both think of different ways to approach the problem." Also, "We communicate well" and the term "information sharing" were prominent phrases in the diary entries.

In the area of feeling respected, participants described the admiration and regard they have for each other's professional opinions and feelings. Phrases ascribed to feeling respected include "We genuinely like and respect each other," "She is very approachable; we treat each other with respect," and "This is a two-way relationship." With mutual respect there appears to come mutual trust: "We know that each other will follow through with promises and responsibilities." Participants spoke of their feelings of being listened to by their partner, often in conjunction with comments about respect: "I always feel listened to and respected." The phrase "good listener" was ascribed to many of the participants.

### Discussion and Limitations

The results in this study offer the inside perspective of 12 collaborating dyads of a classroom teacher and a school-based occupational therapist. Several themes around one important aspect of collaborative consultation, interpersonal factors, are documented by the dyads. The three main themes of (a) mutual problem solving, (b) effective communication skills, and (c) feeling respected and feeling listened to were evident in their entries and are supported by the literature in this area. Mutual decision making is a hallmark of the collaborative moments described by these dyads. Mutual decision making involves "we" and not "I" and does not appear to be unilateral or expert driven. Building a mutually respectful relationship, with mutual trust, also appears paramount to successfully collaborating. The mutual respect for each other's unique knowledge base in this two-way relationship eloquently described by participants succinctly defines the collaborative consultation relationship as heterarchical and one that differs from the traditional expert model of consultation.

The results of this study cannot be generalized due to the small sample size and the geographical nature of the sample (all Massachusetts teachers and therapists). There is a possibility that social desirability may have impacted the dyad responses as some were personally known to this researcher.

### Implications for Practice

Findings from this study offer insights into the process of collaborative consultation as described by active dyads of teachers

and school-based occupational therapists. Their perspectives on the importance of specific interpersonal communicative, interactive, and problem-solving skills highlight the necessity of mutual decision making to successful collaboration. Also crucial, from their perspective, is effective communication and mutual respect. To build a collaborative professional relationship with co-workers in schools, several suggestions are offered. For the occupational therapy practitioner, develop an "elevator speech" to succinctly and clearly describe your role in school, focusing on student occupations and the context of the environment in which you work. Embrace the environmental and curricular materials adaptation portion of your role. Spend more time in the classroom. Research demonstrates that the more time occupational therapy practitioners spend in the classroom, the more they interact with the teacher (Weintraub & Kovshi, 2004). Nurture the mutual trust in your professional relationship with a teacher as a foundation for tackling challenging issues for students. Occupational therapy practitioners are change agents. Discuss with your team the idea of formally meeting for a predetermined period of time to focus on how you work as a team. There are several texts and workbooks designed to assist teams to understand and gain practice in collaborative consultation practices. Formalize this study group for professional development units for each professional member. Find a grant source and write a proposal to support purchases of texts, workbooks, and professional time involved. Finally, interprofessional collaboration education continues to be needed for entry-level occupational therapy students. Future research should include the study of outcomes for students of the collaborating dyads. Collaborative consultation, as described by these dyads, is rich with promise for the profession in transition in schools practice. School-based occupational therapists are encouraged to move away from the expert model of consultation to the collaborative model in order to facilitate movement toward services that are provided within the context of the school day. ■

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