



The 3:1 Service Delivery Model

The 3:1 service delivery model for school-based SLPs calls for three weeks of direct intervention followed by one week of indirect services. Developed to help SLPs better manage their workloads while enhancing services to students, the 3:1 model supports SLPs in implementing curriculum-based therapy and encourages interaction between teachers and parents about students' needs. School districts using the model report increased job satisfaction and staff retention. This program describes how the model works, reviews data on its effectiveness, and offers practical steps toward implementation.

Learning Outcomes

You will be able to:

- describe and illustrate the value of the 3:1 model
- discuss how the model meets the requirements of IDEA 04 and NCLB
- discuss the steps to implementing the model
- interpret evidence on the model's effectiveness

Faculty



Sharon Soliday, MS, thinks in terms of system development. Her professional expertise is in the area of identifying the needs of professionals and the children they serve. She has worked across school environments addressing a range of disabilities. In 2004, Sharon

was awarded the Rolland J. Van Hattum Award for Outstanding Service in the Schools by ASHA and Outstanding Clinician in the Schools by her state association in Oregon. Sharon has presented across the country to school districts and at state conferences on the 3:1 Service Model, connecting speech-language intervention to general education, classroom collaboration, scaffolding language-based math curriculum to improve student performance, and providing philanthropic services in Costa Rica. In addition to her business, Sharon has two current projects: collaborating with the Department of Defense to provide continuing education to speech language pathologists serving military schools stateside and overseas and completing research on Distance Service (addressing a workload from a distance with the aid of an assistant) and developing industry standards for the Distance Service model. Sharon wants to remind every SLP working with children that their work makes a difference for a lifetime to come. She thanks you for your commitment.

Live broadcast
Tuesday, December 8, 2009
3–5 p.m. Eastern time

Replay available
through December 8, 2010

The Seminar lasts
two hours and begins
at:

3:00 p.m. Eastern
2:00 p.m. Central
1:00 p.m. Mountain
12:00 noon Pacific

Moderator

Lisa Rai Mabry-Price, School Services
Manager, SLP/Professional Practices Issues

Manager

Jack Coursen, Educational Program
Manager, ASHA



ASHA Professional Development is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.

This course is offered for 0.2 ASHA CEUs (Intermediate level, Professional area).

The 3:1 Service Delivery Model

*How to Provide Improved Service to Students, Teachers,
and Families*

Making the Connection to General Education

Sharon Soliday, MS, CCC-SLP
sharon@slpservice.net

ASHA PROFESSIONAL DEVELOPMENT
●●●●●○●●●●○●●●●●

Learning Outcomes

- Describe and illustrate the value of the 3:1 model
- Discuss how the model meets the requirements of IDEA '04 and NCLB
- Discuss the steps to implementing the model
- Interpret evidence regarding the model's effectiveness

Our Audience. We Know You...

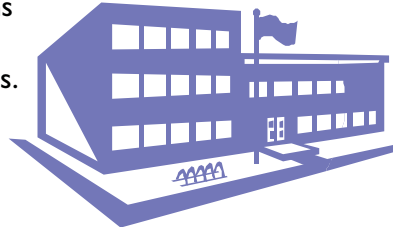
Your settings include:

- Elementary
- Middle School
- High School, including transition programs and alternative programs

You manage one, two or more schools.

You supervise paraprofessionals.

You work in collaborative settings.



The 3:1 model can be applied to ANY work setting; activities are defined by the clinician involved.

3

Your thoughts,
concerns, fears,
hostilities, hopes,
and dreams...



4

Where to Begin? A Realistic Inventory

- ASHA has moved away from the idea of considering someone's caseload as an accurate reflection of what they do professionally within the schools.
- ASHA now supports the concept of workload as the best practice reflection of professional demands within the school.
- The freedom to embrace our workload as service to students includes the responsibility to educate administrators, families, and staff on various service models* to achieve student outcomes.

**see ASHA 2002, A Workload Analysis Approach for Establishing Speech-Language Caseload Standards in the School*

5

A Typical Workload

- Testing (formal and criterion reference)
- Screenings (formal and informal)
- IEP meetings
- Evaluation meetings
- Eligibility meetings
- Building meetings
- Collaborative work with paraprofessionals
- Collaborative work with teachers
- Consultative work with parents
- Educating staff
- Material development
- Planning
- Paperwork (for the larger system)
- Personal data keeping/notes and documentation
- Supervision of others
- Travel
- Report writing
- Progress note writing
- Scheduling
- Consultation with other specialists
- Direct service to students

6



What Is the 3:1 Service Model?

- The model follows a calendar in which speech pathologists provide traditional, direct intervention to students three consecutive weeks, followed by a week of consultative services.
- This 'consultative week' is an opportunity for consulting with teachers, parents, specialists, and others, in addition to other workload-related tasks.
- **The primary objective is to work with the goal of aligning with curriculum and general education teacher's objectives for better generalization of skills.**

7




Note!

- The model is consistently successful across buildings, districts, and countries because it is structured to follow the lead and skills of the SLP implementing it.
 - There is no "Supposed to..."
 - There is no "Must do..."
- The biggest expectation is that we get out of our little rooms and breathe the fresh air of general education. We have a responsibility to understand the classroom work our students are attempting to master and the teaching styles they are confronted with.

SLPs retain their professional judgment to determine priorities and the best use of time to be effective.

8



Profile of the 3:1 Pilot Study

(Portland, Oregon)

During the 2001–2002 academic year, Portland Public Schools speech-language pathologists completed a pilot project to assess the efficiency and workability of this new service model.

- Review of the study includes:
 - Why PPS SLPs decided to pursue another service model
 - How the decision was presented to administration
 - How parents were informed of the district-wide shift in service model
 - An itemized list of consultative week work options
 - How time was tracked for accountability purposes
 - Summarized results of district data

9



Profile of Portland Public Schools 2001–2002

- 50,000+ students
- 100+ schools (included alternative and charter programs)
- 2,850 students served by district speech pathologists
- Average “caseload” included 50-55 students
- Approximately 80 SLPs filled 60 full-time positions
- No SLP Assistants were hired at that time

SLP Technical Assistant Role:

- Facilitate problem-solving within the discipline (aka herd cats)

10



Why Change?

- An **increasingly complex caseload, and recent reforms requiring special education services to align with general education goals.**
- Quality consultation with teachers could not be done under the previous model of managing all aspects of workload without support time.

SLPs had finished two years of training at this point on how to align with general education expectations.

But no one had time to leave their room to talk with a teacher, and workloads were only getting more demanding!

Something had to change...

11



The Origin of the 3:1 Model

- Gina Ossanna, a recent new hire at that time, shared her CFY experience in Wisconsin, in which consultative time (in lieu of direct service) was built into her schedule—a conceptual idea originating with SLPs but not formalized at the administrative level.
- Ms. Ossanna reported that without that consultative option she was struggling in her new position with PPS to effectively and efficiently meet the needs of her caseload.
- The larger discipline agreed with exploring such a model.

12

Presenting the Idea to Administration

- Ms. Ossanna requested any data from Wisconsin on the model and how it had been effective in that environment.
- SLP-TA contacted ASHA for information on service delivery models/practice and obtained information via a Special Interest Division listserv for personal experiences from others with consultative models.
ASHA, unfortunately, didn't have anything on alternate service models at the time.
- Information was organized and presented to administration. We requested a year-long, district-wide pilot project utilizing the 3:1 service model. We had 100% buy-in from district SLPs.

13

Questions and Answers



To ask a question:

Live Web access	Type your question into the Q&A panel and click send.
Live Telephone access	Press *1 on your telephone keypad to signal that you wish to ask a question.

14

Advocacy Points

- Improving the quality of service without increasing costs.
- Provides a structure to formally discuss student needs, progress, or strategies with teachers or parents (critical for NCLB and IDEA).
- Previous attempts to align intervention with curriculum were ineffective without time to talk to teachers.



15

The Agreement: Piloting the Model

- Clinicians would provide direct intervention for three weeks followed by a “consultative” week.
- All buildings would follow the same 3:1 schedule.
- Administrators could request access to SLPs during the consultative week, but they could not schedule additional meetings or responsibilities.
- A range of consultative and/or direct options of service would exist.
- Data was to be collected quarterly and reported back to them.
- A decision regarding implementation would be made at the end of the year.

16

Service Options: Consultative Week

(Autonomy of choice was insisted upon)

- Consultation with:
 - Teachers
 - Paraprofessionals
 - Parents
 - Other specialists
- Development of materials for student use
- Make-up sessions
- Student evaluations
- Continuation of direct service (# of students to be noted)
- Completion of paperwork
- Participation in special education meetings
- Participation in small group workshop/instruction

17

Tracking Time During the Consultative Week

- A checklist was provided with each activity delineated.
- Note which tasks would not have been completed without the structured consulting time, and whether they would have billed the district for their time to complete the task otherwise.



18

Informing Parents

See Handout #1

- A formal letter from the special education director was sent to all parents of students receiving speech and language services through the building speech pathologist.
- Parent questions were to be fielded first by the building SLP.
- If multiple concerns surfaced, management agreed to hold an informational meeting with parents (this was not needed).
- Number one concern by parents was, “Is this due to budget cuts? Are you cutting SLPs?”



19

Calendar of Service

See Handout #2

- Teacher calendar dates (e.g., grading deadlines, holidays)
- Multiple buildings
- Self-contained classrooms vs. general education students



NOTE: Consultative week must cover all buildings you serve. It may result in consultative Tuesday/Thursday only, if that's when you are in the building.

20

Quarterly Data: Consultative Week

Results (part 1)	Q1	Q2	Q3	Q4
Consultation with teachers	100%	92%	83%	87%
Consultation with EAs	50%	25%	56%	49%
Consultation with parents	66%	34%	61%	71%
Consultation with other specialists	73%	69%	65%	71%
Consultation with outside agencies	9%	.02%	7%	.05%
Developed materials for student use	77%	77%	50%	60%
Completed make-up sessions	55%	67%	43%	62%

Quarterly Data: Consultative Week

Results (part 2)	Q1	Q2	Q3	Q4
Continued with direct tx	86%	83%	74%	89%
(Average # of students seen)	(11)	(12)	(15)	(15)
Completed paperwork	89%	83%	87%	78%
Completed TPRM paperwork	43%	71%	65%	62%
Participated/facilitated special education meetings	84%	67%	72%	78%
Participated in small group workshop/instruction	25%	50%	44%	27%
Total responses	56	53	54	55

Quarterly Data: No Consultative Week

Results	Q1	Q2	Q3	Q4
Would not be able to complete consultations	86%	60%	61%	71%
Would not have developed materials	77%	55%	74%	48%
Would not have completed paperwork	30%	21%	21%	28%
Would not have been able to participate in meetings	83%	77%	72%	79%
Would not have been able to participate in group instruction	50%	69%	71%	67%

23

Frequently Asked Questions

See Handout #3

- How do we document IEP time?
- When do we do testing? Do we do it during the consultation week?
- Isn't everything except direct service put off until the consultative week?
- Is the consultative week just to see teachers? What if they don't want to see us? They're still teaching after all.
- How do we see all the teachers?
- How do assistants fit into this model?
- How do we teach students and teachers when to come to treatment and when not to?
- How did we deal with resistant/hesitant SLPs?

24

FAQs, continued

- How did we deal with resistant parents?
- Was the schedule always the same for consultative week?
- There's so much I can do! Where would I possibly begin?
- What is the impact on referrals?
- What is the impact on recruitment and retention?
- What was the timeline for model implementation? Did it take two years to organize and run the pilot?
- What happens when a different SLP is in the building the following year and has different priorities?

25

Questions and Answers



To ask a question:

Live Web access	Type your question into the Q&A panel and click send.
Live Telephone access	Press *1 on your telephone keypad to signal that you wish to ask a question.

26



Testimonials

*“‘Consultative week’ is evolving into a ‘consultative mindset’—the freedom to get many things done actually **increased** my service time with kids and made me more efficient.”*

*“Due to 3:1, I have not billed for **any** work time at home—I am able to complete my work in the contractual work-week.”*

“I had time to develop summer packets for students and families to attend to.”

“I went into five general education classes to do a whole group presentation on the use of visual strategies.”

“I use some of this time to simply go into classrooms and observe my kids and help them as appropriate. It helps base my work on the curriculum.”

27



Testimonials, continued

“I have time to talk to parents and really delve into communication observations, strengths, and needs from the home perspective.”

“My treatment supports the needs of a student not only at school but within the general community. It has resulted in faster progress than prior to the model change because parents know exactly what I’m looking for and can ask questions that support follow-through at home.”

“That equals success at school.”

28



Testimonials, continued

“This 3:1 model has been a mental lifesaver for me this year. At times I’ve been so overwhelmed, and then I remember that the consult week is coming and it keeps me from going off the deep end!

“This 3:1 model is one aspect of the job that would definitely keep me from moving to another district. It does help to make my job more manageable, and I feel as though my students are served much better than before we started this model in September. It seems to me everybody is benefiting without an increase in \$ spent.”

29



Pilot Results

- Allowed SLPs to discuss student needs, progress, and strategies with teachers, parents, and other specialists *within their current schedule.*
- This is a vital part of speech pathology services that is often overlooked while managing caseload sizes and treating increasingly complex disorders.
- **The district adopted the service model at the conclusion of the pilot.**

30

Revising Your Schedule

Action Steps:

1. Start with 20% of your workload.
2. Collaborate with teachers with whom you already have a relationship.
3. Expect to spend a minimum of two years implementing your effort.
4. Advertise your success!

31

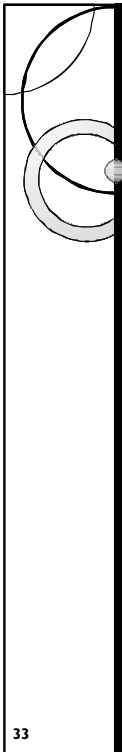
Questions and Answers



To ask a question:

Live Web access	Type your question into the Q&A panel and click send.
Live Telephone access	Press *1 on your telephone keypad to signal that you wish to ask a question.

32



Thank You!

Sharon Soliday, MS, CCC-SLP
sharon@slpservice.net

ASHA PROFESSIONAL DEVELOPMENT
●●●●●○●●●●○●●●●

33