Meeting the Needs of Individuals with Severe Disabilities as Professional Partners

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Learning Objectives & Disclosures

• Describe interprofessional collaborative practice (IPCP) and share three things promoting effective IPCP with individuals with severe disabilities

• Describe two collaborative literacy practices for students with severe disabilities

• Describe two collaborative motor/assistive technology practices for students with severe disabilities
Speaker Disclosures

- The presenters of this session have no financial or non-financial relationships to disclose relative to the content of today’s session.
Getting Started

We are members of the National Joint Committee for the Communication Needs of Individuals with Severe Disabilities (NJC). The NJC advocates for individuals with significant communication support needs resulting from intellectual disability, that may coexist with autism, sensory, and/or motor limitation.
The NJC is made up of representatives from eight member organizations:

- American Association on Intellectual and Developmental Disabilities
- American Occupational Therapy Association (Schoonover)
- American Physical Therapy Association (Therrien)
- American Speech-Language-Hearing Association (Goldman)
- Association of Assistive Technology Act Programs (Mineo)
- Council for Exceptional Children Division for Communicative Disabilities and Deafness
- The Association for Persons with Severe Handicaps (TASH) (Erickson)
- United States Society for Augmentative & Alternative Communication
Severe Disabilities – A Population Well-Suited for IPCP?

• Who am I talking about?
  – The American Association on Intellectual and Developmental Disabilities – Severe Disability
    • Originates before are 18; and
    • Presents as limitations in both intellectual and adaptive functioning
  – TASH – Severe Disability
    • Necessitates the need for ongoing support;
    • Support needs cross life areas including mobility, self-care, independent living, and self-sufficiency.
Does the NJC Interest You?

- Visit us online at http://www.asha.org/NJC/
- Nominate a team serving individuals with severe disabilities for the 2018 McLean Yoder Award for Professional Excellence.
  - 2017 winner: *Children’s Hospital of Richmond Assistive Technology Team* (Richmond, Virginia).
- Join the NJC network!
Interprofessional Collaborative Practice

- What is it?
- Where did it come from?
- Is it worth pursuing?
- How do I do it in general?
- How do I do it specifically with individuals with severe disabilities?
What is Interprofessional Collaborative Practice?

• Interprofessional Collaborative Practice (IPCP)
  – “When multiple health workers from different professional backgrounds work together with patients, families, and communities to deliver the highest quality of care.” (WHO, 2010)

• The core ideals of IPCP
  – patient and family centered
  – community oriented
  – relationship focused
Definition of Interprofessionalism

• “Interprofessionalism is the process by which professionals reflect on and develop ways of practicing that provide an integrated and cohesive answer to the need of clients and families.” (D’Amour & Oandasan, 2005)

• It occurs as teams:
  – are organized to explore and solve care issues;
  – continuously interact and share within their team structure &
  – optimally seek the patient’s and their stakeholders’ participation.
Interprofessional Collaborative Practice in Loudoun County Schools
Welcome to Loudoun County!

- Loudoun County Public Schools (LCPS) is the third largest school division in the Commonwealth of Virginia.
- Established in 1870, LCPS is located in the rapidly growing Washington metro-area.
- Each year, approximately 2,500 new students enroll in our schools, and one to three new school facilities are opened to accommodate them.
- LCPS serves more than 78,000 students in 89 facilities.
LCPS Assistive Technology (AT) Team

Comprised of professionals from multiple disciplines including:

• teachers
• speech-language pathologists
• occupational therapists
Resources for Everyone!
Core competencies of IPCP
Competency 1:

Work with individuals of other professions to maintain a climate of mutual respect and shared values. (Values/Ethics for Interprofessional Practice)

The IEP Team
Competency 2:

Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health of populations.

(Roles/Responsibilities)

Present Level of Academic Achievement and Functional Performance
Competency 3:

Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease. (Interprofessional Communication)

Collaborative Progress Notes-written together
Competency 4:

Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan, deliver, and evaluate patient/population centered care and population health programs and policies that are safe, timely, efficient, effective, and equitable. (Teams and Teamwork)

Everyone’s goals—not separated by discipline
Considering the need for AT

Not a unilateral decision made by an “expert”, but rather a team approach which may or may not require an AT assessment or intervention.
Interprofessional Collaborative Practice in Early Intervention
Key Principles of IPCP in Early Intervention

• Competency 1- Mutual Respect & Shared Values
  – Identify family strengths as a foundation for building capacity
  – Reflect on the role of cultural beliefs, values, and priorities for the child, family, and service providers

(Coufal & Woods, 2018)
Key Principles of IPCP in Early Intervention

• Competency 2- Roles & Responsibilities
  – Understand how each team member’s unique knowledge/skills can be integrated into a collaborative service plan
  – Consider service delivery models to best meet the needs of the child & family
  – Work to effectively coordinate services and supports with other team members

(Coufal & Woods, 2018)
Key Principles of IPCP in Early Intervention

• Competency 3- Interprofessional Communication
  – Support dynamic open communication among all members
  – Facilitate family-centered discussions that encourage family participation and decision-making
  – Use family-friendly jargon-free communication at the linguistic level of the family

(Coufal & Woods, 2018)
Key Principles of IPCP in Early Intervention

• Competency 4- Teams & Teamwork
  – Establish a collaborative, supportive relationship with families & other professionals
  – Engage all team members in collaborative planning and problem solving
  – Use team process to derive mutual goals and interventions with shared accountability
What does this look like in practice?

- Identify family priorities and create consensus on goals
- Observe family members interacting with their child in meaningful routines & provide strengths-based feedback, coach them to embed interventions, and provide feedback to them in multiple contexts to promote generalization
- Encourage caregiver reflection and problem-solving on what worked and what other outcomes, strategies, and routines to practice throughout the day

(Coufal & Woods, 2018)
Interprofessional Collaborative Practice in Literacy, AT, and Severe Disabilities
Learning Together

• Language and literacy environment
• AAC and Assistive Technology
• Team approach
Oral and Written Language Development
(Koppenhaver, Coleman, Kalman & Yoder, 1991
adapted from Teale & Sulzby, 1989)
IPCPC Team in Literacy

- Families - critical knowledge of students’ interests and experiences
- SLPs - expertise in the development of expressive and receptive language,
- Educators - expertise in the development of written language
- Occupational Therapists and Assistive Technology specialists - expertise in access to the tools required for literacy (e.g., books, pencils, computers, AAC).
- Students – knowledge of personal interests
Comprehensive Instruction

• Address everything – every day  (Pressley & Allington, 2014)

• Integrate, engage and interact (McSheehan, Sonnenmeier, Jorgensen, & Turner, 2006)

• Balance skill and meaning

• Emphasize application and use
How do we get there?

By starting together!
The Evolution of IPCP

• Professionals have served side by side for decades.
  – BUT have we just worked together (next to our peers) or have we WORKED TOGETHER (seamlessly as a collaborative unit).
• Really WORKING TOGETHER requires preparedness and commitment.
• Ogletree (2017) suggests that “The continuous, reflective, and purposeful collaboration, described as IPCP, is relatively new and likely stems from another more recent concept, Interprofessional Education (IPE).”
What is IPE?

• Interprofessional Education
  
  – "When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.” (WHO, 2010)

• IPE is increasingly occurring in student preparation
Examples of IPE

- Universities may have varying levels of IPE involvement
  - Joint lectures or activities
  - Joint clinic placements
  - Collaborative curricular offerings
  - Integrated curricular development and course/clinic offerings
Barriers to IPE?

• Why do you think IPE challenges universities?
  – It’s out of the box
  – We’re comfortable with siloed student preparation
  – We’re certain that we have too much to teach to work in new materials or methods
  – TIME
  – Other disciplines deal with these constraints as well

• ALL OF THIS SAID – IPE IS THE FUTURE
IPE in Practice at the University of Delaware’s Center for Disabilities Studies
Intentionality

- It rarely “just happens”
- The earlier we start, the more it influences knowledge, skills and dispositions
Learning about…

Learning with…

Learning from…
Undergraduate Minor in Disability Studies

- Draws students from the entire university
- 3 required courses, 3 electives
- Cross-cutting concepts: inclusion, rights, social justice, self-determination, person-centeredness

- Capstone course:
  - Assignment to groups intentionally mixes things up
  - Personal connection with PWD and families
LEND Programs

• Leadership Education in Neurodevelopmental Disabilities
• 52 programs in 44 states
• Graduate, postdoctoral and family trainees
• Core principles – Philosophies and practices that are interdisciplinary, person- and family-centered, culturally competent, and evidence-based
Key Features

• Intentional focus on:
  – Clarifying disciplinary practices (emphasis on commonalities
  – Observation of interprofessional collaborative practice
  – Engagement in IPCP
  – Why families are the core
Collaboration in Design, Fabrication and Evaluation

- IPCP including engineers, computer scientists, materials experts, and “tinkerers”
- Once again, PWD and families at the core
Paths to IPCP

• IPE – If we train in integrated collaborative settings, they will learn to be integrated collaborative professionals.
• Continuing Education – Train professionals in the area of IPCP post graduate school (another form of IPE)
• Work Settings — If we immerse professionals in IPCP
Is IPCP Worth Pursuing?

- IPCP is an attractive concept.
- How many of you enjoy effective teaming?
- In a world that requires an evidence base, where does IPCP stand?
Evidence About IPCP Effectiveness

Zwarenstein, Goldman, & Reeves (2009) – Noted difficulty in assessing concept; found IPCP in care settings reduced nonessential drug prescriptions and lengths of hospital stays; reported IPCP contributed to “compliance” with audit guidelines.

Deneckere et al. (2012) – Considered the impact of an interprofessional structure for health care teams on care provision; reported less “burn out”, better conflict management, and more openness to practice innovations with interprofessional teams.

Brandt, Lutfiyya, King, & Chioreso (2014) – Examined the impact of IPCP and IPE on health care improvement and cost reduction finding inconclusive results.
Why Don’t We Know More about IPCP Effectiveness?

- IPCP has been hard to describe in measurable ways
- This is a challenge for the future
- Yet it seems the IPCP is a good idea especially for individuals with severe disabilities and complex communication needs
IPCP’s Fit With Daily Practice

• IPCP is particularly important when
  – Patient/family needs are high
  – Needs necessitate involvement of several professionals
  – Optimal care requires cross-disciplinary knowledge
  – Does a specific population come to mind?
References


https://harveyaac.recovers.org/

**AAC Relief: Hurricane Harvey**

- **I Have A Need**
  - Get assistance: connect with the goods and services you need.

- **I Want to Give**
  - Send supplies: connect with people who need them.

- **I Want to Volunteer**
  - Send a hand: connect with people who need your help.

**Community Updates**

**Emergency Information**
- **Emergency 911**

**Durable Medical Equipment Distribution in Houston Saturday Sept 9**

![Image](https://harveyaac.recovers.org/)

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**AAC Disaster Relief**

- **I Have A Need**
  - Get assistance: connect with the goods and services you need.

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**Community Updates**

**Welcome to AAC Disaster Relief for Hurricane Irma**

*This site assists people with severe speech and language disabilities who use augmentative and alternative communication (AAC) to communicate, live, and function in the aftermath of Hurricane Irma. Help us get the word out!*

**New Site added to address needs of people who use AAC and their family members impacted by Hurricane Irma**

![Image](https://aacdisasterrelief.recovers.org/)
Thank you for Attending!

• **CEUs: Session Code:** AAC-65

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