

A Model for Promoting Interprofessional Collaboration and Quality in Early Intervention Personnel Preparation

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DEMANDS ON STATE PERSONNEL PREPARATION SYSTEMS have intensified as states have moved into the implementation phases of the Part H of IDEA legislative initiative. Policymakers now realize that no matter how brilliantly conceived their service delivery system may be, it will not be effective unless there are competent and qualified people to implement it. The demands on states are three-fold: (1) shortages of personnel, especially in allied health, abound with no end in sight (Yoder, Coleman, & Gallagher, 1990; Gallagher and Staples, 1990; Hebbeler, 1994); (2) existing personnel need support as they try to adapt new approaches and models of service delivery (integrated therapies, family-centered practices, service coordination roles, developing IFSPs, etc.) into their programs and communities; and (3) entry-level personnel need exposure and training at the university and community college level in the new Part H content and practice areas. A major challenge for states is identifying, coordinating, and developing the resources (financial, instructional, and human) to do this large task with both care and speed. Personnel preparation coordination problems are similar to those faced by early intervention systems when Part H was first passed: efforts are fragmented and disjointed. State-wide training on topics such as service coordination or child assessment might be offered in any one state by several different state agencies, each promoting different and contradictory models, strategies, and philosophies. Within one university the same topic might be covered in different disciplinary programs in the same inconsistent fashion. Throughout the country, training approaches are not modeling and demonstrating the interagency, interprofessional collaboration that we espouse in the literature. Those responsible for personnel preparation, especially university faculty (Bailey, Simeonsson, Yoder, & Huntington, 1990; Cochran, Farley, & Wilhelm, 1990; Crais & Leonard, 1990; Humphry & Link, 1990), need support, information, and training to effectively respond to these training needs and challenges.



Four regional faculty training institutes were funded in 1992 through the US Department of Education for a three-year period to address the challenges described above. Data from one, the Southeastern Institute for Faculty Training (SIFT), indicates that an effective model has been identified for addressing these challenges. The goals of SIFT were: (1) to increase collaboration among state agencies, families, universities, community colleges, and other institutions with training dollars, responsibilities and authority for early intervention personnel preparation; (2) to increase the knowledge and skill levels of the trainers (faculty, families, consultants) who provide training within those contexts; and (3) to assist participants in applying what they learned through participa-

tion in a faculty training institute to the training they provide to others. The SIFT project used a systems change model in 15 states¹. The model components are illustrated in Figure 1. The outcomes, documented through multi-method data support the strategies, document that the model. Highlights from these data are provided below as they relate to different components of the model.

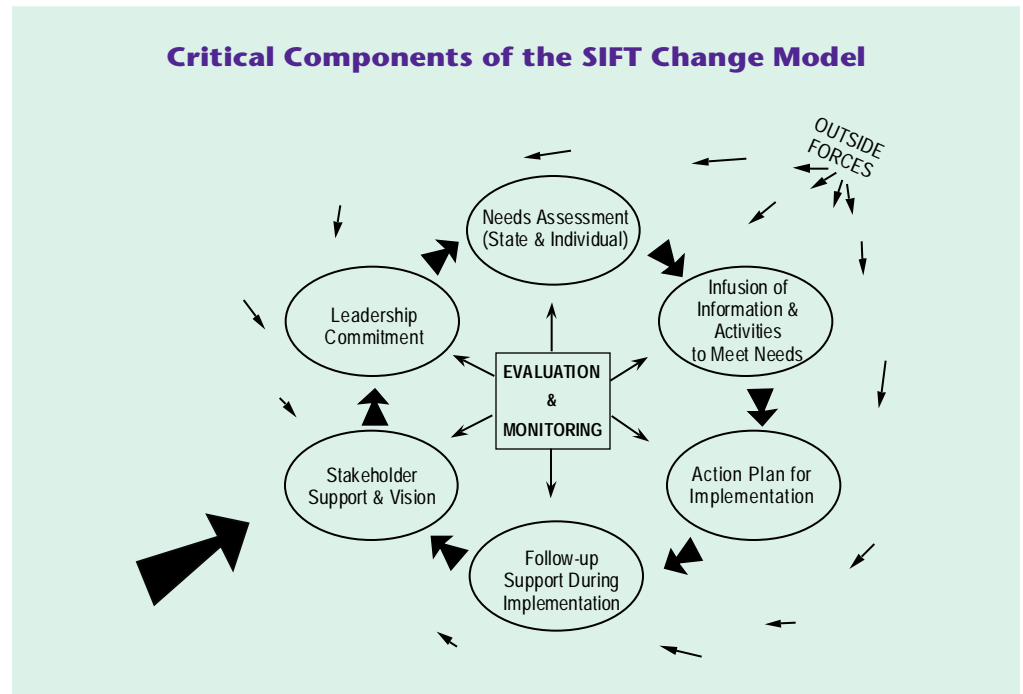


Figure 1.

Increased collaboration among institutions and individuals

Identifying key stakeholders, or early intervention leaders with power, money, and authority for early intervention training, was an initial activity of the project. The approach to this task was to ask the Part H Coordinator and the Director of the University Affiliated Program (UAP) in each state for their support of the SIFT project. This dyad was asked to identify a group of key people to be invited to a 1–2 day state meeting. Each state meeting was designed to accomplish the following objectives: (1) to identify all of the existing personnel preparation initiatives that were taking place; (2) to enable the leaders to share perspectives and develop a vision and specific plans for future personnel preparation activities in the state; and (3) to identify a group (n=12-15) of faculty from institutions of higher education that they felt could help the state accomplish their plans for personnel preparation after receiving four days of training (faculty training institute) and ongoing support from the SIFT project. This group of leaders (n=262 total across the 15 states with a range of from 7–52 in the stakeholder group within each state) met twice over an 18-month period. They met at the beginning of the project to accomplish the above objectives; and they met six months after the faculty training institute to evaluate the success of the SIFT project and to identify “next steps” for the state in terms of accomplishing personnel preparation goals.

¹ The SIFT project worked with the 15 states in three cohorts of five states each over the three years of the project. Cohort 1 states were TN, NC, SC, AR, and LA. Cohort 2 states were KY, MS, WV, FL, and PR. Cohort 3 states were AL, GA, VA, DC, and the VI.

Data collected from these leaders immediately prior to their involvement with the SIFT project indicated that many leaders were unaware of existing state personnel preparation efforts other than their own. They were not operating within an overall plan for early intervention personnel preparation. In fact, most were unaware that a Comprehensive System for Personnel Development (CSPD) existed in their state. This CSPD plan is necessary for states to receive Part H funds; therefore, all states had plans. As illustrated in Figure 2, comparisons of the pre-institute and six-month post-institute responses indicated that statistically significant changes occurred in this respect. Leaders were more likely to know that a CSPD plan existed.

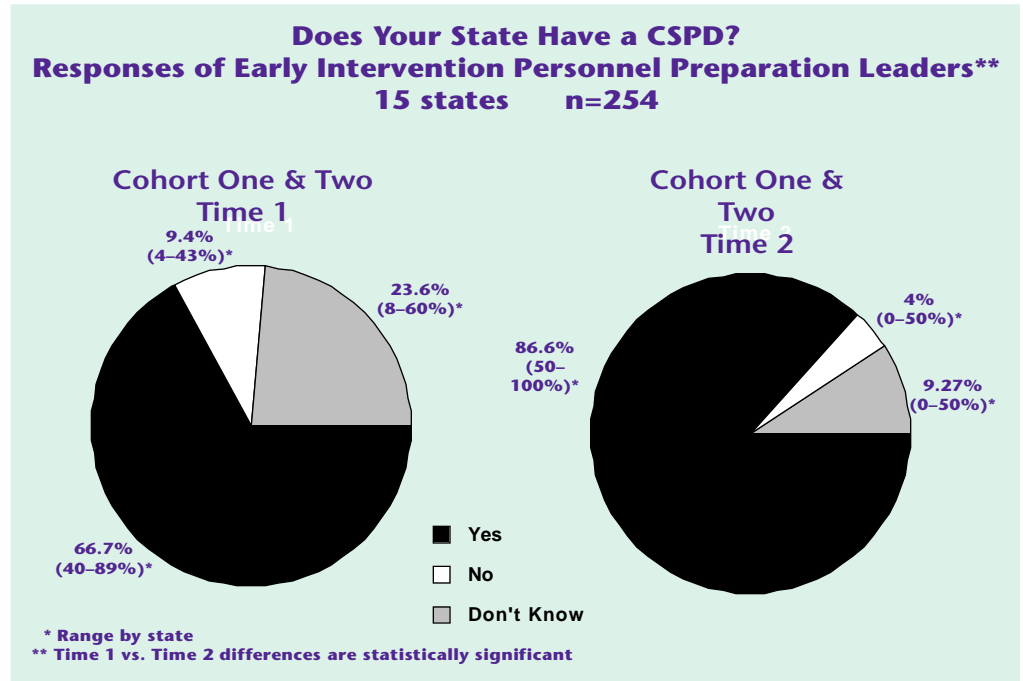


Figure 2

In addition, comparison of pre/six-month post data indicated that the CSPD plans were more likely to be used and more likely to be coordinated across Part B and Part H of IDEA. Other statistically significant findings include the following:

- increased coordination and collaboration across agencies in inservice efforts
- representatives of institutions of higher education more involved in planning and implementing inservice training
- institutions of higher education doing a more adequate job at preservice training
- more linkages between preservice and inservice efforts
- greater family participation in training
- more training efforts linked with certification
- more interdisciplinary efforts at the preservice and inservice levels
- more family-centered inservice training

A question of interest is to what extent can these changes be attributed to the SIFT project. At the six month post-institute follow-up point, 92% of the leaders surveyed felt that the SIFT project had made a significant contribution to their state's early intervention personnel preparation efforts, and 99% felt that SIFT had contributed to their knowledge of personnel preparation activities within their state. These quantitative findings are supported by qualitative evidence of lasting changes related to quality

and collaboration in state personnel preparation efforts. At the six month follow-up meetings held in each state, the key leaders rated the extent to which they felt the efforts started through SIFT would continue at a mean of 4.25 on a 1–5 scale (with 5 being “extremely likely” efforts will continue).

Increases in Faculty Knowledge, Skill, and Willingness to Conduct Inservice Training

As mentioned above, the state leaders were asked to identify a group of faculty from their states to participate in a four day training institute provided through the SIFT project. The SIFT project required that states select a faculty group which represented multiple disciplines, cultural diversity, family members, Part H, and the UAP. In addition, SIFT defined “faculty” in an inclusive fashion so that practica supervisors and adjunct instructors were included in order to ensure the presence of direct service providers on the state faculty teams. The 191 faculty who participated from the 15 states represented 16 different disciplines with a mean of 12.5 years of service delivery experience and 9.98 years of personnel preparation experience. Twenty-one percent were family members with children with disabilities, and there was 27% minority representation.

As soon as faculty were selected they were asked to respond to a needs assessment measure related to content areas, instructional strategies, and resources that they would like exposure to in order to enhance their ability to provide early intervention training to others. Their priorities for content were (top five in order of priority): cultural diversity/IDEA (tied); family-centered practices/IFSP (tied); and inclusion. Training strategies that they prioritized were: families as co-teachers; team training; and cross-discipline co-teaching. Resources that they said would best help them were: access to training resources (packaged curricula, videotapes, activities); show of interest from Part H; and access to other faculty doing early intervention training. The results of the needs assessment data, as well as the state priorities identified by the leaders in each cohort of five states, were used to design the four day training institutes held each year. The training institutes are described in detail in Winton (1995).

Data suggest that the faculty training institutes were successful in terms of short-term and long-term outcomes. These data showed increases in faculty knowledge and skill in all 17 early intervention content areas and training strategies measured (significant differences pre and six-month post). The faculty also showed a statistically significant increase in their commitment and willingness to participate in community-based, early intervention inservice training and technical assistance and, in fact, did increase the amount of inservice training they provided after participation in the SIFT training project. This commitment was made despite the fact that inservice training is not a primary part of a university faculty members’ position. This indicates that faculty are willing, and when given support and training and encouragement by state agencies, able to serve as competent inservice training resources. University faculty may be an untapped human resource for state agencies that have the bulk of the inservice training responsibilities.

Application of New Knowledge and Skill to Practice

The true test of effectiveness of a project like SIFT is the extent to which new knowledge and skills are applied to real life settings. Pre/six-month post comparisons of reports of training practices utilized by faculty indicate that this did indeed occur. Training provided by SIFT faculty participants improved from pre to six-month post in terms of quality indicators identified in advance by the SIFT project. Specifically, participants were more likely to provide training that:

- was coordinated with their state's CSPD plan;
- was attended by an interdisciplinary audience (at least three or more disciplines);
- was endorsed by administrators;
- was attended by administrators;
- included experiential activities and modeling and demonstration opportunities;
- used strategies for applying training ideas to the workplace;
- used training strategies that were varied to meet different learning styles; and
- included action planning (trainees identified specific ideas/practices that they would try).

Barriers and Facilitators

One of the critical components to the SIFT model was to request that participants develop a specific plan for how they would use what they learned through the SIFT project in their states and universities. This planning process took place at a state level, with the generation of a specific state action plan, and at the individual level, with the generation of individual action plans. Participants were interviewed by telephone at a six-month follow-up point about the barriers and facilitators that helped or hindered them in accomplishing individual goals that they identified as part of their SIFT participation. The results a content analysis of these interviews are indicated in Table 1.

Variables That Impacted Implementation of Individual Action Plans (15 States) n = 162 respondents n = 1001 individual goals

Facilitators

- Support of Colleagues
- Follow-up Support from SIFT

Barriers

- Not Enough Time/Competing Priorities
- Bureaucratic "Red tape"

Table 1

In addition to the telephone interviews, six-month follow-up meetings were held in 14 of the 15 states with the leader and faculty teams who participated in the project. The barriers and facilitators identified in these meetings affecting the accomplishment of state goals were similar to those affecting individual goals. In 12 of the 14 states the personal relationships and mutual support that had been forged through the SIFT experience were cited as major facilitators to accomplishing goals. Comments like, "We are now mentors to one another" characterized the nature of the partnerships that had been formed. During the individual telephone interviews, participants identified

many positive outcomes that resulted from their involvement with the SIFT project. At the end of the interview they were asked to identify the major impact. A content analysis of responses indicated that the relationships formed through SIFT was the most frequent response to this question. These relationships were with other faculty, family members, state agency representatives, SIFT staff and faculty, and SIFT participants from other states. The two other most frequently mentioned responses to the major impact question were related to their knowledge and use of innovative training strategies and their knowledge and incorporation of new early intervention training content.

In terms of barriers, the lack of time/competing individual responsibilities and priorities was identified as a major barrier in 10 of the 14 state meetings. In addition, the geographic distance between team members, bureaucratic red tape, lack of administrative support, and lack of communication between key leaders were also mentioned as barriers in 50% of the states. It should be noted that there was turnover in the Part H Coordinator position in 8 of the 15 states during the SIFT project. These transitions definitely were a disruptive force in states' efforts to pursue goals in an efficient and timely fashion. It should also be noted that SIFT was most successful in states in which there was clear, unequivocal, and consistent support for faculty training and involvement in inservice training from the Part H leadership.

Lessons Learned

The six-month follow-up evaluation component of the SIFT project was invaluable in understanding the complexities of making changes in early intervention personnel preparation systems. The lessons learned from the combination of qualitative and quantitative data are as follows:

- Building a comprehensive, collaborative plan for personnel development across multiple agencies takes more than a day. This process takes time. Ongoing support from external projects like SIFT makes a difference.
- Faculty are eager for support, access to materials and to each other, and are willing to volunteer time to their state and community. If they are not provided with continued support and incentives from higher education and state agency administration, willingness to volunteer is likely to decline as other priorities emerge.
- Individual relationships are important. External projects like SIFT can facilitate connections, and in many cases these connections are leading to important and lasting changes.
- External projects like SIFT must have the active support and endorsement from state agency leadership to be effective.

Enduring Legacy

As mentioned earlier, leaders in the 15 states indicated that the SIFT project served as a catalyst for positive changes that will endure. These changes include the following:

- New collaborative relationships among individuals (faculty, families, providers and agency personnel) have been formed.
- New infrastructures in some states, such as regional training teams, that were not in place before have been created. These are beginning efforts and time will tell how well they endure.

- New resources for faculty have been developed or refurbished. Lending libraries have been set up or restocked with exemplary materials or made more visible.
- New ways of thinking about training with increased emphasis on systematic approaches to personnel preparation have been institutionalized. In many states new ways of planning and implementing statewide, regional, and community-based training have taken place, using elements of what was modeled and demonstrated through the faculty training institutes. Examples include conferences or strands of conferences devoted to “train the trainers” across disciplines and agencies, setting up resource libraries at conferences, supporting faculty by writing boss/dean letters, and recognizing the importance of action planning by using back home plans. ●

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Addendum (8/97)

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