



SCHOOL GUIDE

Occupational therapy and
physiotherapy service delivery
in schools

Endorsed by:



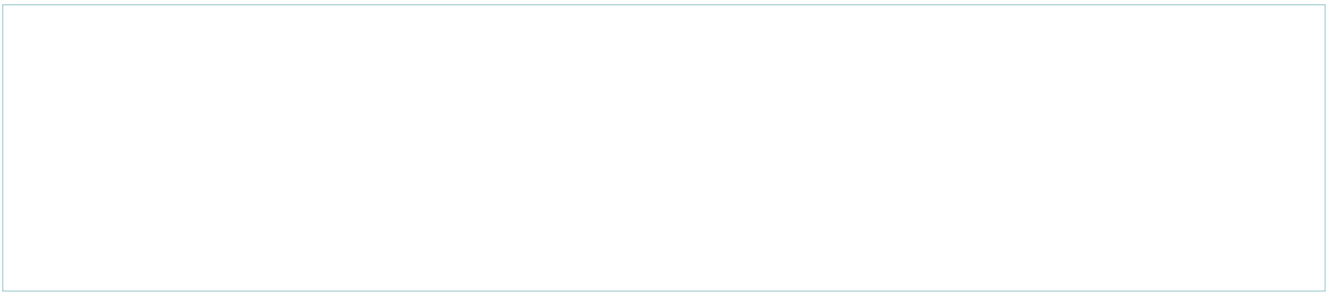
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- Australian Physiotherapy Association, Victorian Branch
- Australian Association of Occupational Therapists, Victoria
- Pint-sized Physiotherapy
- Principals' Association of Special Schools
- Scope, Victoria
- The Royal Children's Hospital
- The Royal Children's Hospital Occupational Therapy Department
- The Royal Children's Hospital Physiotherapy Department
- The Yooralla Society of Victoria
- Victorian Association of State Secondary Principals
- Victorian Primary Principals' Association

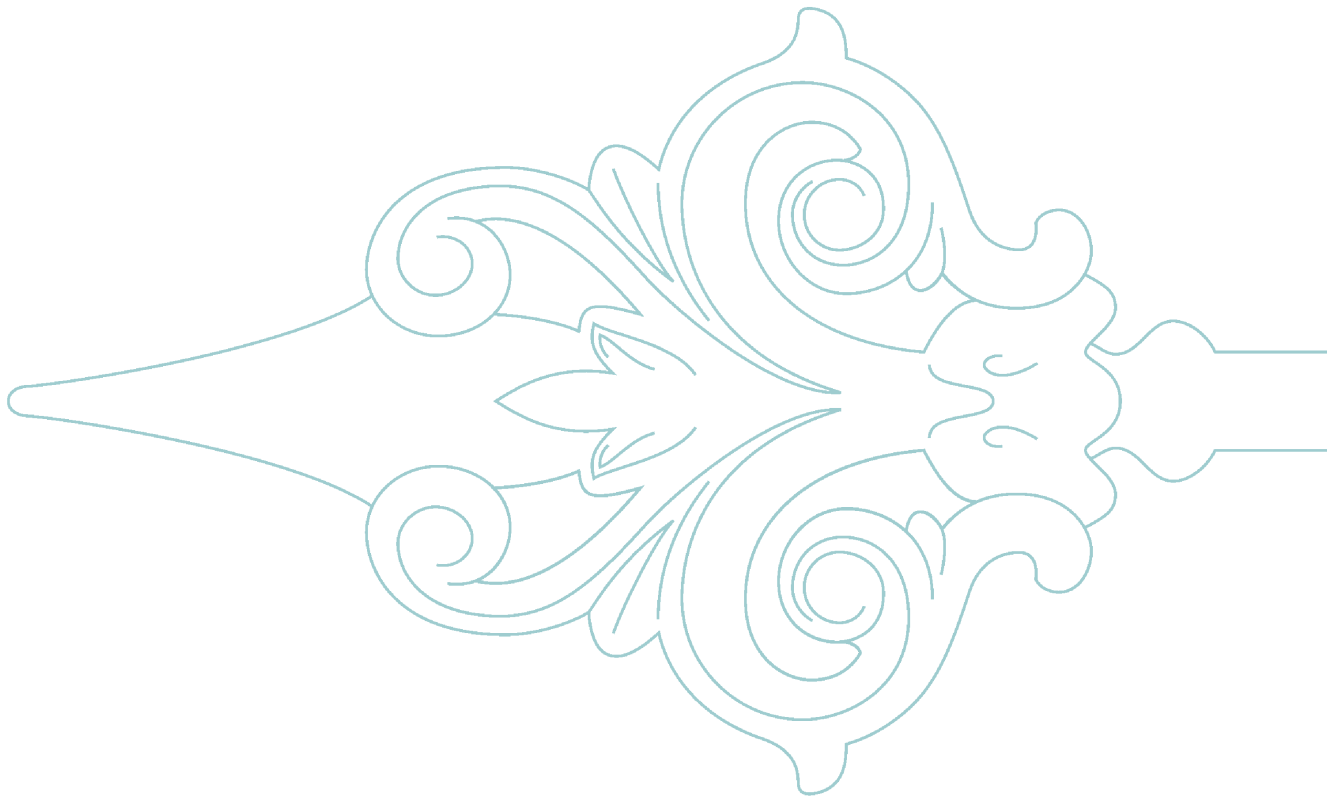
In addition, the author gratefully acknowledges the invaluable contributions of many Victorian schools, therapists, families and students.





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1 BACKGROUND

What is the purpose of the school guide?

The purpose of the guide is to provide school leadership teams, teachers, school staff, occupational therapists and physiotherapists with:

- New ways to collaboratively plan and deliver school-based therapy services.
- An understanding of how collaboration between education and allied health can improve educational outcomes for students.
- Practical examples of this approach via film bytes.
- Checklists for comparison between current procedures and exemplary practices.

Reasons for its development

In 2003, the Royal Children's Hospital (RCH) Education Institute initiated a three-year action-based research project to develop exemplary practice guidelines for the delivery of occupational therapy and physiotherapy in Victorian schools. Both health professionals and school principals had raised concerns relating to these services for many years. The RCH Education Institute, whose work brings together education and health knowledge to provide best possible outcomes for students, was well positioned to initiate a research project in this area.

A reference group consisting of key education, allied health and parent organisations formed to facilitate the project and to offer ongoing support and expert advice.

The school guide offers schools a framework for the delivery of school-based therapy by outlining exemplary collaborative practices between educators, occupational therapists, physiotherapists and parents to improve student educational outcomes.



Therapy is integrated in the education program and delivered in the classroom.

What does research already tell us?

Research identifies and defines nine validated exemplary practices in the education of students with disabilities (Williams and Fox 1990). One of these is the integrated delivery of services into everyday home, school and community activities. This practice emphasises the provision of instructionally and contextually integrated services within real-life situations.

Rainforth and York-Barr (1997) highlight the benefits of this approach, including:

- Student acquisition of skills in more meaningful situations.
- Compatibility between education and therapy service delivery as both disciplines recognise the importance of providing cognitive, social, communication and motor learning activities.
- Team responsibility for identifying and designing relevant interventions.

Integrated delivery of therapy has also been associated with a collaborative approach to planning and implementing inclusive programs by using the combined expertise of parents and professionals. The full inclusion philosophy sees services such as occupational therapy and physiotherapy *brought to the student and delivered in the general classroom* in order to emphasise the provision of services within meaningful educational contexts.

For the therapist, this means delivering services in the classroom or in a natural setting¹ within the school such as the playground, the art room or sports oval.

For educators, this means developing a collaborative team approach with occupational therapists and physiotherapists characterised by information and skill exchange across professional boundaries.

Collaboration both among and between professionals and families is an important feature of this school-based therapy service delivery framework. Characteristics that define collaboration are:

- Equal participation
- Effective communication
- Consensus decision-making about student educational goals
- Consensus decision-making about the type and quantity of therapy support
- Infusion of knowledge and skills from different disciplines into the design of educational strategies
- Joint problem-solving and shared responsibility for student progress.

Adapted from Rainforth and York-Barr (1997)



An inclusive classroom sees students working in mixed groups at an age – appropriate level.



Therapists and school staff share knowledge and skills to improve student outcomes.

1. Natural settings are defined as the activities and environments the student encounters in a typical school day including the classroom, corridors, stairs, schoolyard, gymnasium etc., with peers and staff.

An approach that sees school-based therapy services included within learning programs and delivered in the classroom may initially present a number of challenges for schools and therapists. The school guide offers assistance by providing:

- Checklists for schools to compare current approaches with exemplary practice.
- Framework for operation and implementation.
- Benefits from working collaboratively with education and health professionals.
- Film bytes that highlight exemplary practices.

How did the research project gather its information?

The RCH Education Institute gathered information from the following sources:

- Literature review on national and international best practice in therapy service delivery.
- Commentary group of health and education professionals and parents who met to identify and examine Victorian school issues.
- Statewide survey of schools to identify their future resource needs when delivering school-based service delivery.
- Action-based trial of the framework with five Victorian schools in metropolitan and non-metropolitan areas.
- Ongoing professional expertise and advice of educators, health professionals and parents.
- Statewide consultation with health and education professionals to review the guide.

Which professional associations were involved in the project?

A reference group guided and supported the project with representatives from the following organisations:

- Royal Children's Hospital Education Institute
- Association for Children with a Disability
- Australian Association of Occupational Therapy, Victoria
- Australian Physiotherapy Association, Victorian Branch
- Principals' Association of Special Schools
- The Royal Children's Hospital
- Scope, Victoria

Members ensured that key stakeholder views informed the development of the project by providing a pathway for ongoing community feedback.

Where can I find more information about the research project?

Further details are at the Royal Children's Hospital Education Institute website: www.rch.org.au/edinst

2 HOW TO USE THIS GUIDE

The school guide aims to establish and document a benchmark of exemplary practice in the collaborative planning and delivery of occupational therapy and physiotherapy services in schools.

The guide offers four essential elements:

- Checklists for schools
- Framework for operation and implementation
- Benefits from working collaboratively
- Film bytes that highlight exemplary practice.

Checklists for schools

A key feature of this guide is Section 7: Checklists for schools. Developed and trialled in Victorian schools using an action-based research approach, each checklist is based on a key principle supported by goals, strategies and exemplary practice actions.

Schools may choose to use the checklists when:

- Determining how current local practice match exemplary practice
- Conducting a whole school audit
- Establishing whole school collaborative procedures
- Seeking therapist services for a student
- Reviewing collaborative practice within the program support group or classroom.

Framework for operation and implementation

Four guiding principles underpin the framework (Diagram 1) and provide structure for all other elements. They are:

- Full inclusion
- Full commitment
- Family participation
- Collaboration.

Four goals and associated strategies further define the key principles (see Section 6).

To assist with implementation, each strategy has a series of promising practices or actions that the school can utilise to promote exemplary service delivery.

Benefits from working collaboratively with therapists

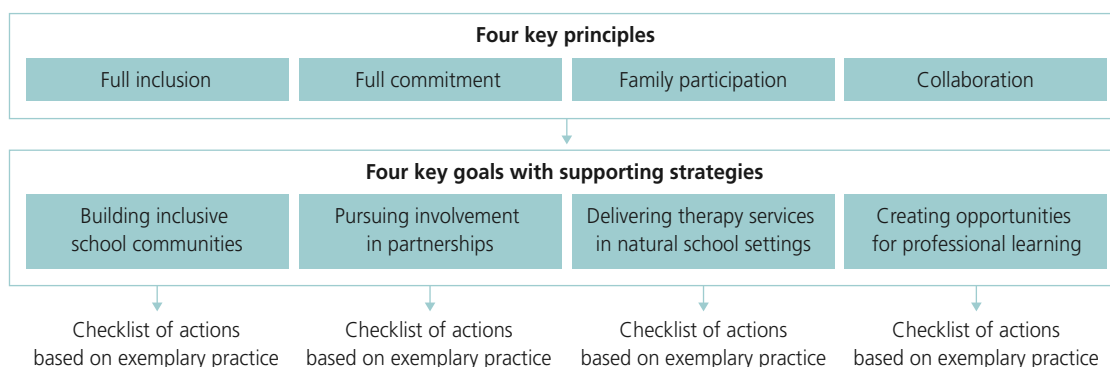
The school guide also outlines the specialised role of the occupational therapist and physiotherapist by describing:

- Each professional’s specific knowledge, skills and expertise.
- How collaborative partnerships between education and health professionals can benefit student educational outcomes.
- How schools can access assistance.

Film bytes that highlight exemplary practice

Each of the four checklists piloted and reviewed in a sample of Victorian schools outlines research-based promising practices or actions for implementation. Film bytes highlight a number of the framework’s key elements in current practice at Victorian schools.

Diagram 1: School-based service delivery framework



3 HOW OCCUPATIONAL THERAPISTS CAN WORK WITH SCHOOLS

Occupational therapists work collaboratively with the members of the Program Support Group (PSG). The occupational therapist assesses the biomechanical, cognitive, sensory motor, intra-personal and inter-personal components required of students for participation in the roles, routines and tasks of school life. Students are encouraged to be actively involved in the setting of their individual goals wherever possible.

What is occupational therapy?

Occupational therapists are concerned with how people function in their everyday environments. Occupational therapy processes focus on occupational needs and occupational performance, that is, the *ability to... carry out roles, routines, tasks and sub tasks for the purpose of self-maintenance, productivity, leisure and rest in response to the demands of the internal and/or external environment* (Chapparo and Ranka 1997). Occupational therapy is *primarily concerned with issues of justice, participation and representation relative to what people do in society* (Whiteford and Wright-St Clair 2004).

Occupational therapists are employed in a wide range of health, disability and community organisations, as well as in private practice. Occupational therapists do not have to be registered in Victoria; however, members of the Australian Occupational Therapy Association in Victoria comply with the profession's Code of Ethics and are eligible to become Accredited Occupational Therapists through undertaking continuing professional development.

How can working with occupational therapists benefit student educational outcomes?

Occupational therapists acknowledge that people are unique and complex, and attach diverse meaning to the performance of their chosen roles and activities. Within the education context, the student's physical, social and cultural environments are important considerations, as are the chronological and developmental age and health status of the student. Student goals for participation at school are set in relation to the Disability Standards for Education (2005) and the new Victorian Essential Learning Standards, and occupational therapy interventions are developed to enable achievement of these goals.

Occupational therapy best practice utilises several types of intervention to achieve the goals set. Intervention may be utilised to establish or restore student(s) ability to perform in the school context by identifying the necessary skills and barriers to performance and designing interventions to improve the student's ability to participate. An example of this type of intervention might be to identify heavy objects that can be incorporated into a student's daily routine so that the student's proprioceptive input will be increased, the student will be more aware of his/her muscles and joints and will be better placed to perform classroom tasks.



Specialised equipment can support more successful student participation.

The occupational therapist may suggest adaptation of some activities/ demands so that the student is better able to perform these, such as providing social and/or physical cues, or providing specialised equipment. Therapists may suggest that the environment be altered so as to support more successful student participation; for example, selecting a quiet section of the classroom that student(s) can use to minimise sensory overload in order to complete tasks successfully.

Occupational therapists may also suggest ways to prevent the occurrence of barriers to student performance or to create innovative programs to support increased participation of students. An example is working collaboratively with the teacher and a Young Ambassador to provide a social skills group that will enable students' understanding of diversity, support inclusion of all students, and prevent social isolation of students with communication difficulties.

Students may be provided with occupational therapy services directly or in small groups in the appropriate setting of the classroom or playground. Therapists will also work collaboratively and/or consult with teachers, aides, family and others to enable provision of consistency and repeated practice for desired student performance. The occupational therapist will monitor the interventions over time to ensure that they are being used safely, that appropriate progress is being made, alterations are made where necessary and that desired outcomes are achieved.



Tris, an occupational therapist works with Bianca in her classroom.

How can a school access the assistance of an occupational therapist?

Schools have several options in accessing the assistance of an occupational therapist.

- Organisations such as Scope, Yooralla Society of Victoria, and Child and Adolescent Mental Health Services provide existing occupational therapy services schools across metropolitan and rural Victoria.
- Private practitioners will also provide occupational therapy services. OT AUSTRALIA Victoria has a register of private occupational therapy practitioners on its website www.otausvic.com.au

4 HOW PHYSIOTHERAPISTS CAN WORK WITH SCHOOLS

What is physiotherapy?

Physiotherapy is a health profession with recognised expertise in treating people with conditions or injuries that affect their physical function. Physiotherapists have specialist skills in assessment, diagnosis and intervention. Physiotherapy is based on research evidence that demonstrates how and why physiotherapy works.

Physiotherapy can assist a wide range of people, including children, to perform to their optimal physical function and to participate fully within their community.

Physiotherapists are university educated and must be registered with a Physiotherapists Registration Board in order to practice.

Physiotherapists who are members of the Australian Physiotherapy Association must demonstrate their professional accountability by complying with the Association's Code of Conduct and undertaking continuing professional development.



Cathy, a physiotherapist works with Brianna and her aide during a physical education lesson.

What is paediatric physiotherapy?

Paediatric physiotherapy enhances the health and wellbeing of children and adolescents through treatment goals focused on optimal movement and physical function. The role of the paediatric physiotherapist in schools is to assess, diagnose and treat students with movement disorders, with particular emphasis on the neurological, musculoskeletal and cardiovascular systems. Physiotherapy programs are based on functional goals and are designed to facilitate development of the student's physical skills.

Paediatric physiotherapists evaluate the effectiveness of their treatment programs by using outcome measures that demonstrate changes in a student's impairments, activity limitations, participation or quality of life.

Paediatric physiotherapy is a specialised area of physiotherapy practice and requires a specific skill set to manage the assessment, diagnosis and treatment of students, as opposed to adults.

How can working with physiotherapists benefit student educational outcomes?

In a framework of inclusive education, physiotherapists can assist school principals, teachers and integration aides in schools to meet the special needs of students with a physical disability. This better enables these students to access the school curriculum and achieve optimal educational outcomes.

Physiotherapists can provide practical information, advice and treatment that enable students with additional physical, cognitive, emotional and social needs to learn and develop. The maintenance or improvement of physical function, health and wellbeing in students with a physical disability is an integral component of their education because it can have a profound impact on their self-esteem, freedom and independence in later life.

Paediatric physiotherapists can assist schools to maximise inclusive practices in active components of learning such as physical education, school sports, excursions, camps and lunchtime recreational pursuits.

The paediatric physiotherapist also has a vital role in prescribing and monitoring equipment for students with physical disabilities. In a school setting this is important as such equipment often allows for more inclusive learning experiences. This particular aspect of the physiotherapist's role also encompasses the training of teachers and integration aides in safe handling techniques and safe positioning of these students.

Paediatric physiotherapists are strongly committed to a family-centred approach in advocating for students with a disability and their families. Physiotherapists recognise the need to work collaboratively with families and schools to set and achieve appropriate educational and therapeutic goals for students with a disability.

How can a school access the assistance of a physiotherapist?

It is important that schools access physiotherapists with suitable qualifications and experience in paediatrics.

There are paediatric physiotherapists working in the private sector and in public organisations who have specialist skills in treating students with a disability and demonstrated experience within a school environment.

Schools have several options to access a paediatric physiotherapist, including:

- Organisations such as Scope and Yooralla Society of Victoria, which already provide much of the paediatric physiotherapy service to schools in Victoria
- APA Register of paediatric physiotherapists in private practice
- Classified advertisements in mainstream print and electronic media
- Classified advertisements in the magazine of the Australian Physiotherapy Association
- Classified advertisements on the website of the Australian Physiotherapy Association.



Safe positioning and handling techniques are discussed with Barry, the integration aide.

5 AN OVERVIEW OF THE FRAMEWORK

What is inclusion?

The *DE&T Program for Students with Disabilities Handbook* (2006) states that the key principles surrounding inclusive education are:

- Full acceptance and participation of all students in the life of the community
- Access to supportive learning environments, appropriate program goals and targets, as well as timely support from specialist professionals
- Valued partnerships with parents in the educational process, including setting learning goals
- Student input that is reflected in learning and teaching arrangements.

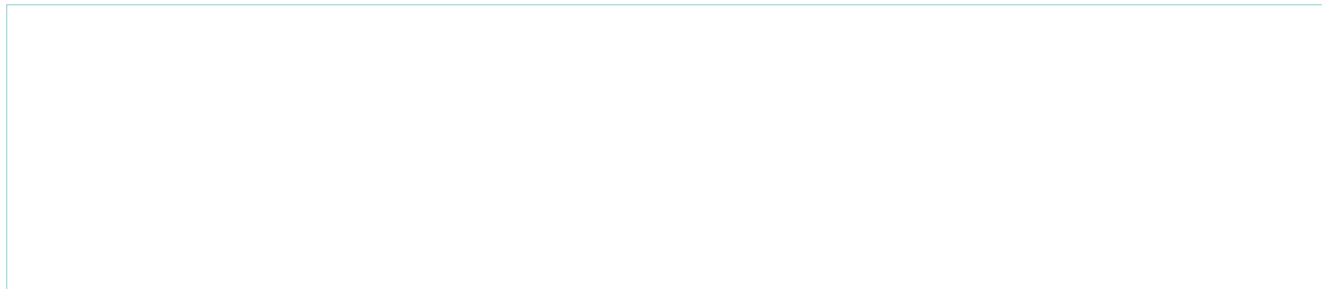
Mittler (2002) states that:

The essence of an inclusive approach lies in its emphasis on changing the environment—rather than the child. This means looking at the way our primary schools and classrooms are organised, how curriculum is designed, delivered and adapted, the kind of supports we provide for children experiencing difficulties and the way in which schools relate to parents and their local community.

An outline of a new approach

The guide outlines a school-based framework that may change the delivery of services in education settings. Based on exemplary practices, it may also alter the way some education and health professionals collaboratively plan and deliver services or embed these within a student's education program.

Some of these changes may already be happening in schools and some service providers may already be providing support in exemplary ways. However, to make it happen for all school communities, exemplary processes need to occur for all members: students, families, school staff, therapists and the broader school community.



Andrew, in his standing frame, works in the classroom with his peers, teacher and physiotherapist.



Family members, school staff and therapists combine their expertise to collectively enhance Andrew's learning outcomes.

What are the four guiding principles?

Four guiding principles underpin the service delivery framework. They are:

Principle of full inclusion

The principle of full inclusion recognises and values the rights and needs of students with disabilities, impairments and learning difficulties to participate in the full range of programs and services offered by the education system.

Principle of full commitment

The principle of full commitment by a school community means that all students are valued. The prevailing ethos and commitment of the school community reflect a belief in academic and social success for all students.

Principle of family participation and partnership

The principle of family participation and partnership means that a school respects, values and encourages the positive relationship between the family and the professionals. It is based on a philosophy of care that acknowledges the pivotal decision-making role of the parent relating to their child.

Principle of collaboration

A collaborative approach both among and between professionals, families and students sees members working collaboratively, sharing skills and knowledge, communicating effectively and setting goals and solving problems jointly.

How to apply the four key principles

The guiding principles are the values that underpin this approach. They form the basis for all other elements within the framework. In order for schools to apply this model, information, tools and film bytes highlight how schools and therapists can implement the four key principles. For example:

- **Section 6** outlines the goals and supporting strategies for each key principle.
- **Section 7** provides checklists and film bytes for schools to compare current approaches to exemplary practices.

6 GOALS AND STRATEGIES

Four goals and associated strategies further define the key principles. Each strategy has a series of promising practices or actions that the school can utilise to promote exemplary service delivery (Section 7: Checklists for schools).

Goal 1: Building inclusive school communities

To strengthen the school community so that it accepts all students as equal members who are valued and are offered all opportunities by the school.

Strategies

- 1.1 Strengthen the capacity of the school community to be supportive and inclusive of students with a disability.
- 1.2 Review school documents to ensure the philosophy of inclusion is embedded.
- 1.3 Develop shared statements and actions with the school community.

Goal 2: Pursuing involvement in partnerships

To promote partnerships among and between professionals and families as an effective means to collectively enhance learning outcomes for students.

Strategies

- 2.1 Utilise the expertise of parents and professionals to provide inclusive and practical outcomes for students.
- 2.2 Strengthen the role of the program support groups.
- 2.3 Support the infusion of knowledge and skills from different disciplines into the design of educational methods and interventions.
- 2.4 Provide the necessary resources for a collaborative partnership approach.

Goal 3: Delivering therapy services in natural school settings

To ensure that a student's individual needs are considered by providing school-based therapy services within meaningful and instructionally integrated educational contexts.

Strategies

- 3.1 Promote program support group responsibility for identifying and designing relevant classroom-based learning opportunities for therapy services to occur.
- 3.2 Provide the necessary resources for this to happen.

Goal 4: Creating opportunities for professional learning

To enhance and expand school staff and therapist knowledge of, and skills and strategies for, working in an inclusive classroom.

Strategies

- 4.1 Support and implement activities that promote the sharing of roles, practices and approaches across professional boundaries.
- 4.2 Support professional growth and the development of professional networks.

7 CHECKLIST AND FILM BYTES FOR SCHOOLS

Checklists

Checklists further describe promising practice or actions for implementation when planning and delivering an exemplary school-based therapy service. For schools, this may mean using the checklist to:

- Identify the exemplary actions required for each goal
- Determine how current school procedures match exemplary practices.

Film bytes

Six film bytes feature mainstream Victorian school staff, therapists, students and their families. They highlight the following:

- An overview of the service delivery framework.
- The benefits of having ongoing therapist involvement in program support groups.
- How to improve student outcomes by working with therapists in the classroom.
- Examples of occupational therapy services integrated in the education program.
- Examples of physiotherapy services integrated in the education program.
- Nicholas's story: A grade 5 student and his therapist's experiences before and after therapy intervention.



Brianna's use of a slantboard helps her posture.



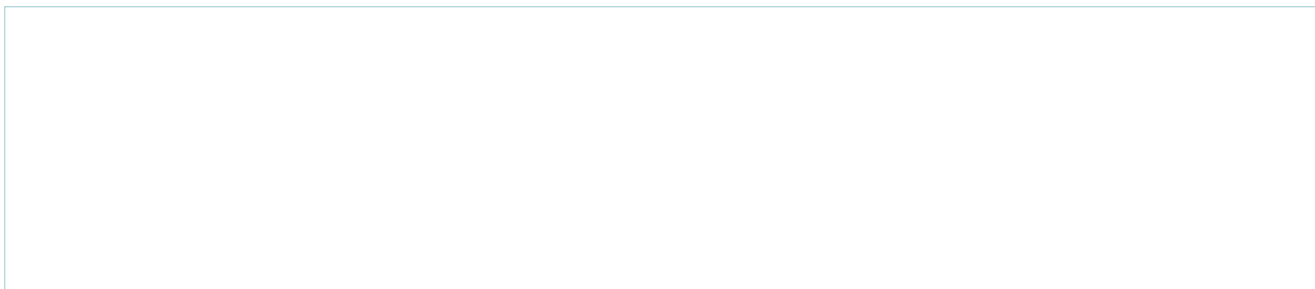
Nicholas tells his story of school life before and after physiotherapy intervention. (See film byte: Nicholas's story)

CHECKLIST FOR –

GOAL 1 BUILDING INCLUSIVE SCHOOL COMMUNITIES

Key objective: To strengthen the school community so that it accepts all students as equal members who are valued and are offered all opportunities by the school.

Use this tool to determine how your school’s practices match exemplary practices.	Not at all	Partly	Mainly	Completely
1. Students are fully included into the school				
1.1 All students are placed in age- and year-appropriate levels				
1.2 All students are given the opportunity to participate in school events such as excursions, camps with additional assistance and resources as required				
1.3 Students are in mixed groups				
2. The school environment is accessible, non-discriminatory and welcoming				
2.1 Lighting and safety arrangements such as markings on steps are in place throughout the school				
2.2 Ramps provide access to all school facilities				
2.3 Acoustic conditions minimise effects on hearing impaired				
3. Families feel a sense of belonging to the school community				
3.1 School newsletter seeks parent participation in school activities				
3.2 Parent suggestions about how to make things better in the school for their child are welcomed				
3.3 Parent concerns are acted upon promptly				
3.4 Workshops and information sessions are held for parents about ways to support their child’s education				
4. The mission and vision statements are developed in partnership with the community				
4.1 Documents are jointly developed with parents, students, education and health professionals and community organisations				
4.2 A statement has been included about how the school fosters partnerships with parents				
5. The school strategic plan and policies incorporate the school community’s philosophy of inclusion				
5.1 Information and perceptions about current inclusive practice are collected from the school community annually				
5.2 Information is gathered on current staff needs relating to inclusion and these are incorporated in whole school and individual staff performance plans				
5.3 Policy documents, work programs and teacher planning addresses inclusive practices				
5.4 Whole school targets for improvements are stated in the school strategic plan				
5.5 A consistent and transparent school-based funding allocation process is described				



5.6	Arrangements for the resource allocation to and among students on the Program for Students with Disabilities are outlined				
5.7	Strategies that enable all students to access broad, balanced curriculum are stated				
5.8	Criteria has been developed for evaluating success of inclusion policy and program				
5.9	A statement has been included about the use of support services and external facilities, agencies, special schools and community groups				
6.	The school ethos reflects their belief in academic and social success for all students				
6.1	Personal, social and health education programs stress the positive values of differences between people as well as the similarities				
6.2	School arrangements provide time for team reflection and planning				
6.3	Inclusive practice is a focus in all jobs				
6.4	Necessary classroom resources such as supports, adaptations, modifications and space enable inclusion to occur				
6.5	Diversity is celebrated such as different holidays or the recognition of a variety of types of achievement – academic, athletic, volunteering and so on.				

CHECKLIST FOR –

GOAL 2 PURSUING INVOLVEMENT IN PARTNERSHIPS

Key objective: To promote partnerships among and between professionals and families as an effective means to collectively enhance learning outcomes for students.

Use this tool to determine how your school's practices match exemplary practices.	Not at all	Partly	Mainly	Completely
1. The PSG utilises the combined expertise of parents, education and health professionals				
1.1 Family members, school staff and therapists are ongoing members of the PSG				
1.2 The student education plan is jointly written, developed, implemented and reviewed by program support group (PSG) members				
1.3 PSG members share information and skills with each other				
1.4 Parent concerns are reflected in the goals and objectives established for the student				
1.5 Parents are clear about actions and the way outcomes will be monitored and reviewed				
1.6 Changes to the student education plan are based upon data reflecting progress				
2. A PSG planning process is jointly developed by its members				
2.1 PSG members have a common understanding of the role and objectives of the PSG				
2.2 PSG meetings are held for 45–60 minutes at least once per term for each PSD funded student				
2.3 A clearly delineated system has been established for regular communication between all PSG members				
2.4 Agenda and minutes of PSG meetings are distributed within five working days				
2.5 Goals and objectives for the student education plan are written jointly during the PSG meeting				
2.6 Consensus decision-making occurs about the priority of the educational goals for each student				
2.7 Consensus decision-making occurs about the type and amount of school-based support the student receives from related allied health services				
2.8 Goals and objectives are jointly reviewed each term with PSG members				
2.9 Transition planning occurs well in advance of major moves and the objectives are included in the student education plan				
2.10 Leadership and staff are provided with information regarding student progress, directions for future program change and program impact on the student, family and community				
3. The PSG considers the needs and wishes of the student				
3.1 The PSG involves the student in the process				
4. Scheduled time for team planning and reflection occurs				
4.1 School leadership provides time for teachers, therapists and staff to utilise collaborative skills to develop integrated therapy strategies and resolve issues				

CHECKLIST FOR –

GOAL 3 DELIVERING THERAPY SERVICES IN NATURAL SCHOOL SETTINGS

Key objective: To ensure that a student’s individual needs are considered by providing school-based therapy services within meaningful and instructionally integrated educational contexts.

Use this tool to determine how your school’s practices match exemplary practices.		Not at all	Partly	Mainly	Completely
1. Integrated delivery of therapy occurs naturally across the day					
1.1	Therapy assessments are conducted in the context of the education program in the classroom				
1.2	Therapists identify strategies that teachers and staff can use in the course of the student’s daily routines				
1.3	Academic, social and therapeutic goals are incorporated and delivered in classroom programs				
2. Therapy services are delivered in the classroom or in a natural setting					
2.1	Therapy services are delivered in the classroom within the context of the education program				
2.2	Therapy is integrated in the education program				
2.3	Cooperative planning occurs with the teacher and therapist				
3. The school has developed protocols for therapists working in the school					
3.1	Information about school and classroom procedures is provided to all therapists				

CHECKLIST FOR –

GOAL 4 CREATING OPPORTUNITIES FOR PROFESSIONAL LEARNING

Key objective: To enhance and expand school staff and therapist knowledge of, and skills and strategies for, working in an inclusive classroom.

Use this tool to determine how your school’s practices match exemplary practices.		Not at all	Partly	Mainly	Completely
1. Roles, practices and approaches are shared between PSG members					
1.1	Opportunities are provided for interdisciplinary sharing of roles, practices and approaches within the PSG meeting				
1.2	Therapists, teachers and integration aides collaborate so that each can benefit from shared knowledge and skills for the good of the student				
2. Partnerships are fostered with neighbourhood services and school communities to promote inclusion					
2.1	Policies, practices and resources are shared with cluster schools and support agencies				
3. Professional staff networks are developed and maintained					
3.1	Opportunities for knowledge and skill exchange occur within the school for teachers, staff, occupational therapists, physiotherapists and other professionals				

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Further information is available at the following sites:

What is the Program for Students with Disabilities 2006?

www.sofweb.vic.edu.au/wellbeing/disabil/index.htm

What are the aims and responsibilities of a program support group?

www.sofweb.vic.edu.au/wellbeing/disabil/index.htm

What is a student educational program?

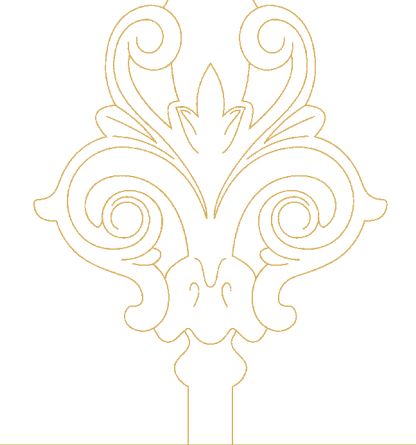
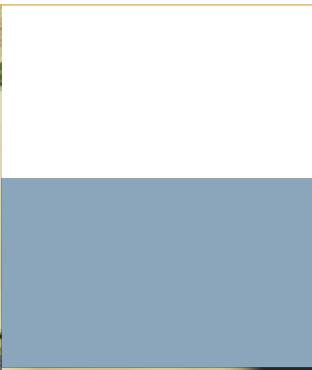
www.sofweb.vic.edu.au/wellbeing/disabil/index.htm

What support material is available for program support groups?

For proformas on gathering information, setting long- and short-term goals, implementing strategies and evaluation and monitoring, see: www.sofweb.vic.edu.au/wellbeing/pdf/2003PSDProgramSupport.pdf

For an individual learning goals record sheet, see:

www.sofweb.vic.edu.au/wellbeing/docs/D_I_Record.doc



ROYAL CHILDREN'S HOSPITAL
EDUCATION INSTITUTE

159 Flemington Road
North Melbourne
Victoria, Australia 3051
Telephone (03) 9322 5100
Facsimile (03) 9328 4433
www.rch.org.au/edinst