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The Effects of a Collaborative Team on Early Intervention in a Preschool

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The Effects of a Collaborative Team on

Early Intervention in a Preschool

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Abstract

The purpose of this project was to see what effects collaboration had on early intervention in a preschool. Fourteen guides at a Montessori preschool in Texas were asked to complete a beginning survey, attend weekly collaborative meetings for seven weeks, attend a focus group and complete an ending survey. Data showed that collaboration helped the teachers feel more valued and supported when helping all kinds of different learners. For the purpose of this study, different learners included children with behavioral concerns, learning disabilities and support needs. Interventions ranged from activities or exercises for individual children to lessons given to a group. Future research could be focused on how to bring the parents into the collaborative process for intervention and/or at what point a child should be referred for speech or occupational therapy evaluations.

Keywords: collaboration, different learners, intervention, preschool

At the core of Montessori education are the mantras: follow the lead of the child and respect for the child. Sometimes children display behaviors that the guide cannot follow. What is a teacher to do when a child is pushing other children? How can the teacher decipher if the child is being aggressive or seeking attention, demonstrating a deeper need? I consistently heard teachers at my school talking about behavioral issues. Determining if a child was displaying a behavior that would pass or if they needed a therapy referral seemed to be a constant dilemma. In conversations with the teachers, they felt as if they did not have the tools to help behavioral issues and different learners. Another theme among the teachers was that they felt alone when trying to figure out necessary behavioral and learning adaptations to include children in the Montessori work time. They seemed to feel overwhelmed, trying to figure out how to integrate these children into the learning environment. I also observed many teachers depending on administrators and certain staff members to offer solutions instead of feeling empowered to help children. I talked with the administrators and they agreed that a process was needed that would share the responsibilities of helping different learners in the environment. With collaboration in mind, I set out to create a system that would empower guides and distribute the responsibilities of helping different learners in a Montessori environment.

The Montessori preschool where I conducted my research houses six primary age (3-6 year olds) and two toddler (18 months-three year olds) environments as well as an after school program of elementary age children. All of the lead teachers and interns in the school were invited to participate. Fourteen teachers total participated in the project: four toddler teachers, nine primary teachers and the after school program teacher made the collaborative team.

Literature Review

Preschool teachers and parents represent the first interventionists for early detection of developmental delays with young children (Zucker, 2010). Teachers everywhere are seeing an increase in diverse learners among children in the classroom (Cossentino, 2010; Meadan & Konda-Amaya, 2008). Diverse learners include behavioral concerns, learning disabilities and children that simply need more support to function in the environment. Interactions between children and their teachers in the early childhood programs have surfaced as an important factor in influencing positive student outcomes (Vo, Sutherland & Conroy, 2012). Teachers should take care to maintain a positive attitude toward the children in their care. Along with a positive attitude, one of the most important tasks that early educators should carry out is identifying areas of delay and establishing a reasonably attainable plan for modifying the behaviors (Zucker, 2010).

Preschools typically represent an inclusion model of education. The inclusion model means that all types of learners are integrated into one mainstream environment. Most teachers do not have special training when it comes to integrating different learners into the classroom environment. However, general education teachers are expected to successfully include students with diverse needs into the school environment. These teachers, alone, may not feel equipped to meet the challenges presented by the diverse learners (Bouillet, 2013; Gal, Schreur & Engel-Yeger, 2010). Furthermore, research has shown that teachers who work in isolation do not reflect upon their practices, to adapt and meet the changing needs of the student (Greenwood & Maheady, 2001). Collaboration could help teachers to feel more supported and confident to meet students' needs. Research suggested that collaboration is the best practice in the workplace,

specifically when working to include different learners into the classroom environment (Bouillet, 2013; Cossentino, 2010; Gal, et al., 2010)

Professional teaching standards and public policy have highlighted collaboration as a vital skill in teaching (Hamilton-Jones & Vail, 2014). Key components of collaboration in the education setting include professional responsibility, coordination, communication, and accountability (Bouillet, 2013; Dearman & Alber, 2005; Hamilton-Jones & Vail, 2014; Santagata & Guarino, 2012). To effectively participate in the collaborative process, teachers must demonstrate professional responsibility to the school and most importantly to the learner (Hamilton-Jones & Vail, 2014). Based on their studies of collaboration, researchers concluded that teachers must coordinate to collect data through analysis of student thinking and learning as well as conducting observations (Dearman & Alber, 2005; Santagata & Guarino, 2012).

Communication between co-workers plays an integral part in the collaborative process. A professional should be able to share experiences, present the rationale behind strategies and express concerns about the implementation of interventions in a way that helps everyone in the collaborative process to feel like a valued part of the team (Bouillet, 2014; Dearman & Alber, 2005; Santagata & Guarino, 2012). Teachers need to be accountable to the collaborative team to insure the implementation of intervention strategies. They also need to be accountable to the diverse student population for the implementation of strategies in the classroom (Bouillet, 2014; Dearman & Alber, 2005). Teachers must take care to document the changes that occur with the implementation of each intervention (Cossentino, 2010). Then the teacher should report back to the collaborative team to demonstrate accountability for the implementations (Bouillet, 2014; Cossentino, 2010; Dearman & Alber, 2005).

As with implementing any new system, there are challenges to creating a team designed for collaboration. A reoccurring theme among obstacles to a collaboration group is the factor of time. The time obstacle presents itself in two ways, scheduling and physical lack of hours in the day (Dearman & Alber, 2005; Hamilton-Jones & Vail, 2014; Kimmell, 2012). Lack of time can be an obstacle to coordination and communication between teachers that are collaborating (Dearman & Alber, 2005; Hamilton-Jones & Vail, 2014).   Meeting the daily demands of the classroom and administration along with finding the time to coordinate and communicate might deter some teachers from seeking out a collaborative group.   Teachers may be asked to give up their planning period, lunch break or stay after working hours to be able to have the time to collaborate with a team. Even then, coordination is a major factor in getting all of the team members to the meeting.   Administrators can support teachers by setting aside time for the team to meet.   Dearman and Alber (2005) provided examples of successful strategies for the issue of time including starting the school day 30 minutes later or earlier and having the teachers arrive early then stay late one day a week to gain a full hour of collaboration time. They also included amending school policy to allow for early release of students once a week as well as using funds to buy time for school members to study together (Dearman & Alber, 2005).

Professional responsibility is a challenge that is individual in nature and can contribute to the issue of time.   Members that do not feel a sense of professional responsibility will not be motivated to find or make the time to collaborate for student success (Bouillet, 2014). If one or more member of the team is unwilling to share in the responsibility, it can produce undue stress for the other members. Lack of professional motivation can be a hindrance to the collaborative process (Bouillet, 2014). Professionals that lack in motivation will not be effective collaborators

as they are not motivated to reflect on their classroom practice to find a better way to help the child.

BEST in CLASS intervention model was derived from an ongoing collaborative team of early childhood teachers, school psychologists and program administrators (Vo, Sutherland & Conroy, 2012). The BEST in CLASS model includes rules, expectations and routines, behavior-specific praise, pre-correction and active supervision, opportunities to respond, instructional pacing and teacher feedback (Vo et al., 2012). With its clearly stated expectations and routines, active supervision and instructional pacing, this model could lend itself nicely to the early childhood Montessori environment. Pilot testing of the BEST in CLASS showed decreases in externalizing problems, internalizing problems and total problems (Vo et al., 2012). The study also had positive outcomes in the area of social competence with problem behaviors decreasing and social skills increasing (Vo et al., 2012). Teacher-child relationships were improved by the implementation of the BEST in CLASS model. An increase in closeness and a decrease in conflicts were noted in teacher-child relationships (Vo et al., 2012). Another benefit is that the intervention can be used with all children, not only children that display difficult behaviors. A fourteen-week professional development course is required to be able to implement the strategies of this program with a high level of integrity, as intended by the designers of the model. However, the model is well developed and proven to work.

Discrete Trial Teaching (DTT) is another intervention to be considered in early childhood intervention. DTT has been used with success for children with autism but has not been extensively evaluated with children who have other developmental delays (Downs, Downs, Johansen & Fossum, 2007). Instruction using DTT consists of five steps that can be implemented in about 3-10 seconds (Downs et al., 2007). The steps are cue, prompt, response,

consequence, inter-trial interval (Downs et al., 2007).   This process could easily be incorporated into a one-on-one or group lesson in a Montessori classroom setting. A trial of DTT intervention done with three to five-year-old students showed significant changes in adaptive behavior (Downs et al., 2007). After the intervention children test higher in the domains of daily living skills and marginally higher in the area of communication (Downs et al., 2007). Like the BEST in CLASS model for intervention, the DTT study was done with caregivers and researchers that were trained in the DTT method. Both interventions could be easily adapted to learner needs and implemented with preschool age children.

Collaboration has the potential to bring staff members together for the benefit of all children in the environment. There are proven techniques that can be implemented for early intervention in preschool. During the collaboration, teachers are free to share techniques that have worked for them as well as learn some techniques that have been proven to be successful. This project will join a collaborative team and early intervention to assess how working together can help teachers to integrate different learners into the Montessori preschool environment. I invited all of the lead guides and interns at my school to participate in the collaborative meetings. I talked to them individually to explain the requirements and gain consent. Fourteen guides opted into the action research project.

Methodology

I started the data collection for my action research project with a survey. I wanted to get a baseline to best gauge the effectiveness of the collaborative team. The survey had seven questions about the current system for early intervention at school. I questioned the teachers' understanding of the current system, their comfort level in addressing behaviors, and how often they use the system. The survey included a question about how many children could benefit

from early intervention to make sure that there is a need for a collaborative team. The survey was created in Google forms and sent out electronically. Each teacher was given a number so that I would have a way to track feedback and attendance while keeping teacher identities confidential. Teachers were asked to enter their participant number as a question on the survey (See Appendix A).

The associate head of school helped me with scheduling teachers to meet during their lunch breaks. We ended up with two groups meeting for 30 minutes every Thursday for six weeks. The first group met from 12:30-1 and the second group met from 1:30-2. If the teachers had a lunch break during these times, they attended at the appropriate time. If the guides did not have a lunch break during one of these times, a substitute was sent to cover their responsibility during the meeting time. I attended both meetings. I sent out an invitation to each teacher for the appropriate meeting time via Microsoft Outlook because that is the system that my school uses for email. When the teachers accepted the invitation, the meetings were added to their calendar and reminders were automatically sent on meeting days. Since the teachers were graciously giving up their break to help me, I provided snacks, and sometimes drinks, during the meetings.

Before the meetings, I gave each teacher a form to fill out if they had a child they wanted to discuss during the meeting. The form asked for the age of the child, behaviors that the guide was seeing and interventions/activities that had already been tried (See Appendix B). This form was meant to maximize our time in the meetings and let the group know what had been tried so as not to duplicate ideas. After the first meeting, I received some feedback to send out any forms that I received before the next meeting, the idea being that teachers could be thinking

of ideas to be ready to talk about them in the meeting. Some people needed time to process; coming up with ideas on the spot does not work for everyone.

During the meeting, a teacher would read the form and the group would discuss the behaviors and possible interventions to help the behaviors. The teacher that brought up the behaviors to the group would choose two or three interventions that she wanted to try during the week. Each intervention would be written on a post-it note with a column for "tried" and one for "worked." The teacher would use tally marks to document how many times each intervention was tried and how many times it worked. Then the teacher would use this system to report back to the group the next week. We would start the meetings by talking about the children that were discussed the previous week. Then there would be time for teachers to bring new children behaviors to the group for discussion.

During the meetings I would take attendance and notes on who brought up behaviors to be discussed. I kept documentation of all of the forms that were filled out and children that were discussed. Sometimes a child was out of town or there were other circumstances that kept a teacher from trying interventions. I would document if we were going to need to discuss that child in a later meeting. In some instances the teacher would want to continue trying one intervention and add a new one as well. Good documentation of all ideas discussed, even if the teacher did not choose it right away, was helpful in these cases.

Analysis of Data

Before I started the project, I sent out a survey about the current intervention process at school. This survey allowed me to establish a need for the collaborative team at school. Over half (57%) of the teachers rarely, if ever, use the current system for early intervention. Even though teachers hardly use the system in place, they reported, through the

survey, that an average of four students per environment could benefit from some type of behavioral or learning intervention. Four children times eight environments equals an estimated thirty-two learners that need extra support in the school. Even with four students per environment needing some extra help, only two guides out of fourteen reported feeling very capable of helping these special learners.
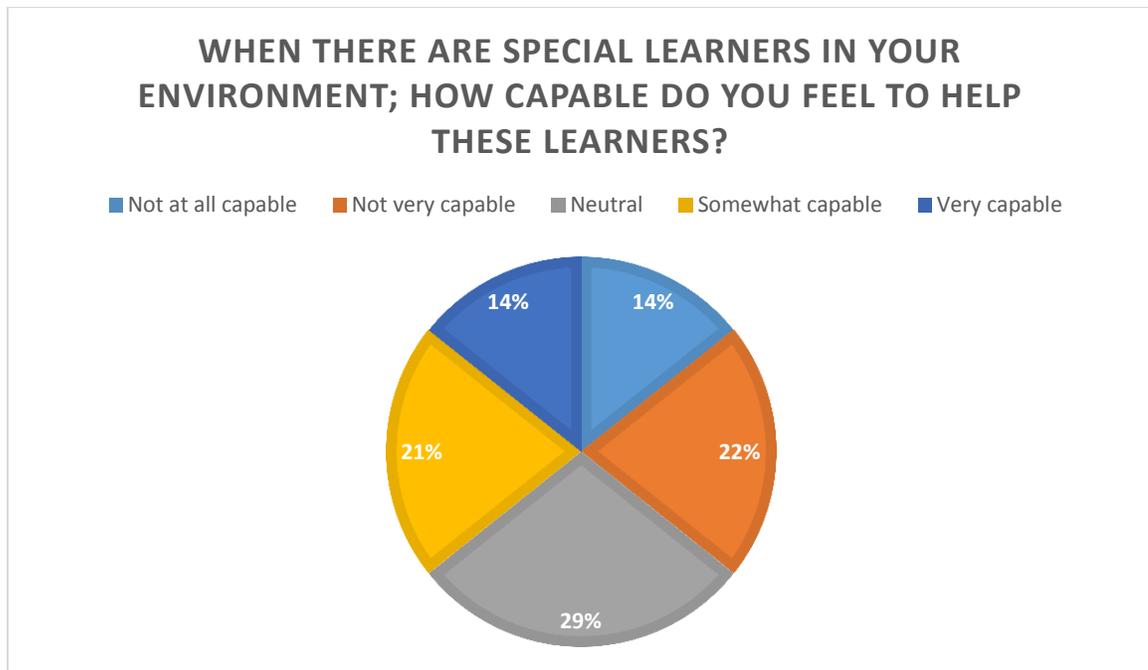

Figure 1. Measurement of Guide Capability in Helping Different Learners in Environment

        64.3% of the guides reported that they feel somewhat comfortable and/or very comfortable raising concerns about children with the administration while 92.9% feel somewhat and/or very comfortable raising concerns with other teachers. Since our team is made up of teachers, this helped with the comfort level when raising concerns with children to the team. In the survey, when asked what would help them to feel more equipped to help different learners in the environment one guide said, "Creating a safe and respectful environment where a collaborative team could bounce ideas off of each other and come out of it with practical

solutions to implement." Other teachers mentioned needing "a better process for sharing

information or gaining support" and "access to someone that has more information and tools."

Through my weekly journaling, I collected information on how many children were

discussed in the meetings. On average, we were able to discuss one new child in each meeting

along with consulting the guides that had tried interventions during the previous week. Through

journaling, I also collected the interventions that were suggested and which interventions the

teachers chose to implement for the child that week. This data was valuable to keep the teachers

on track when reviewing which interventions they would keep trying, what interventions worked

and what did not work. During the focus group, one idea was that the meetings should be longer

so that we would be able to discuss more children. Due to scheduling, having a longer meeting

during the work day is not an option. The teachers were willing to have a longer meeting after

school, once a month to talk more and make helpful materials.

During the course of the project, 18 children were brought up and discussed between two

thirty minute meetings. Each teacher chose three interventions from the ideas of the group to try

during the week. Typically at least one of the three ideas worked. The teacher could then

choose to continue the intervention, choose a new strategy or move on to another child. Some

strategies that were suggested include using weighted lap animals, personal work spaces, positive

feedback for the child, and parent communication/education. Most of the behaviors decreased so

the strategies were continued. Out of the 18 children that were discussed, three were referred for

occupational and/or speech testing. Through these meetings we were able to implement

interventions to see if some behaviors would decrease or if they needed to be evaluated by a

professional in another field.

For the meeting that was held at 12:30pm there were ten child behaviors that were discussed. Of those ten child behaviors, the group provided six interventions that worked and five that were continued over the course of a few weeks. Out of this meeting, one child was referred to be tested for occupational and/or speech therapy. For the meeting at 1:30pm, there were eight children behaviors that were discussed. This group found four interventions that worked and used or continued those interventions seven times. Two children from this group were referred to be tested for services. Through the course of the seven weeks, some interventions were only needed for one week so we would move on to discuss another child behavior. Some interventions needed a few weeks to be effective, so the teacher would continue those interventions for a few weeks. A few of the interventions are still being used because they allow the child to be able to function in the environment. Overall, the teams were able to brainstorm at least one intervention that would work for each child.

Toward the end of the project, the attendance at the collaborative meetings started to decline. During the project, there were several reasons for fluctuation in attendance: interns being out for their training, teachers being sick, some scheduling conflicts and other unstated reasons. Flexibility was important because uncontrollable circumstances happened. Every week we had a productive meeting, regardless of who was in attendance.
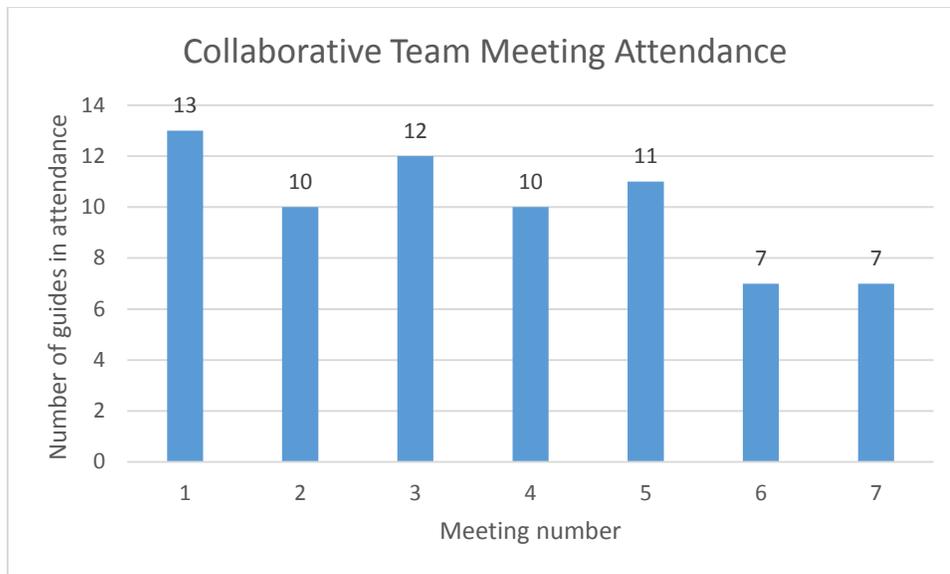
Figure 2. Collaborative Team Meeting Attendance.

One week after the last collaborative meeting, a focus group was held (See Appendix C). The teachers expressed that the meetings were helpful in creating a supportive, collaborative group of teachers that was working for the benefit of all children.   They also liked the chance to be heard. Another high point was the chance to socialize and share snacks. The teachers appreciated the chance to draw from the knowledge of others. Sometimes, discussions about one child's behaviors would bring to mind a child with similar behaviors in a different environment. In these cases, the suggested strategies proved useful for both teachers. The teachers that gave input at the focus group suggested a longer meeting time as well as time to make necessary materials such as picture schedules, weighted vests and various fidgets.

Individual teachers often have knowledge that is not widely used. The teachers use interventions that work in their environments but do not think or have a forum to share this knowledge that could benefit others. These meetings give teachers a forum to share with and learn from each other.

Action Plan

As a result of this action research project, the process for early intervention at my school will be changing. Previously, teachers were on their own to decipher if children were just passing through a behavioral stage or if they had developmental delays and what interventions to use. The teachers would often turn to administrators for advice but felt alone in the implementation of interventions. While the teachers should take care to inform administrators of what is occurring in the environment, the administrators agreed that a cooperative team could support teachers who are integrating different learners on a daily basis. Through the research, I learned that the teachers prefer collaboration to help with different learners. In the ending survey (See Appendix D), 93% percent of the teachers confirmed that they felt comfortable discussing learning issues in their environments with a group of colleagues. Drawing from the experience of other teachers helped each teacher not to feel so alone in their practice. At first, I had not considered having the toddler teachers as a part of the research, since the greater need seemed to be in the primary environments. However, with toddler teachers being trained in child development from birth to three years and primary teachers being trained from two and a half to six years of age, I knew both sides could benefit from the insight of the other. Feeling heard helps the teachers to feel valued in the work they are doing in the classroom. In the end, all of the teachers reported that they took comfort in knowing that they could bring up challenges with the team. With the support of a team, it is possible that the teachers will be less stressed and that will lead to more peaceful environments for the children.

During the feedback from the focus group, the teachers expressed that the meetings seemed too short to discuss multiple children. Sometimes when a teacher would discuss certain behaviors, other teachers would be reminded of a child in their environments. This resulted in

the same strategies being utilized for more than one child. More time would allow for deeper conversations concerning similarities in children's behaviors. Being able to have more time to discuss certain behaviors in depth could also help teachers to brainstorm a variety of ideas for intervention. Moving forward, we will have collaborative meetings bi-weekly as well as a monthly meeting. The monthly meeting will be one to two hours long to talk more extensively and to make materials that are needed. During the focus group, teachers expressed that we had a shortage of sensory input materials that were needed to help some children. Items such as weighted blankets and vests, fidgets, and sensory bins can easily be made by teachers if they have time and supplies. Having the tools readily available for each environment will empower teachers to meet the needs of the children in their care.

Teachers said that checking in every week gave them the opportunity and permission to focus on one child that needed the extra help. This allowed them to practice trusting the children in the class to be on task. Since we take specific notes, each week the teacher will able to report on the successes of each intervention. The practice of accountability, through the meetings, will serve to keep the teachers focused on the task of helping different learners. This accountability to the members of the collaborative team will ensure the children who are different learners will get the help and service that they need.

Another way that the collaborative team can support each other is through observation. A few times throughout the project, a teacher would ask the group for a volunteer to observe a certain child during the work period. The observing teacher could observe the child behaviors as well as the environment to see if something could be added or taken away. The observer could also suggest interventions based on any behaviors that were present during the observation period.

For future research, we need to decipher what the next official step is in the process if certain behaviors do not stop. For most of the child behaviors that we discussed, the suggested interventions helped children to function in the environment. In some cases, parent communication and parent education were suggested interventions. However, if parent communication is not intervention; what is the best way to add a collaborative element including the parents?   In a few cases, we did end up referring a child for testing. At what point do we refer the child for additional speech or occupational therapy? These are possible areas of research for making a completely collaborative team effort.

Collaboration helps to support guides that are nurturing children every day. A school that can provide support for the teachers will create a better working environment and has the possibility to create a better learning environment for the children.

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Appendix A

Early intervention at School in the Hills

This survey is to get a baseline about how our staff handles situations with special learners currently at School in the Hills.

How well do you know/understand the early intervention process that is currently in place at SitH?

1 2 3 4 5

Do not understand at all ○ ○ ○ ○ ○ Understand completely

How often do you use the early intervention system that is currently in place at SitH?

1 2 3 4 5

Never ○ ○ ○ ○ ○ Most always

When there are special learners in your environment; how capable do you feel to help these learners?

1 2 3 4 5

Not at all ○ ○ ○ ○ ○ Very much

How comfortable are you in raising concerns about children in your environment with administrators?

1 2 3 4 5

Not comfortable ○ ○ ○ ○ ○ Very comfortable

How comfortable are you in raising concerns about children in your environment with other teachers?

1 2 3 4 5

Not comfortable ○ ○ ○ ○ ○ Very comfortable

About how many children in your class do you think could benefit from some type of early intervention?

What would help you to feel more equipped to help different

What is your participant

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Appendix B

Age of child _____

Behaviors you are seeing _____

_____

Interventions/activities that you have

tried_____

_____

Appendix C.

Focus Group Questions

1. What was the best part about having a collaborative team for early intervention?

2. What effect did the team have on the way that you teach/integrate different learners in your classroom?

3. In what ways did the collaborative team help you in your teaching practice?

4. What are some ways that the team meetings could be improved?

5. What is one thing that you learned during the course of the last 5 weeks from the collaboration between teachers?

6. Do you have any questions that you would like to ask the team?

Appendix D.

Collaborative Team for Early Intervention

How well do you know/understand the collaborative team?

1   2   3   4   5

Do not understand at all ○   ○   ○   ○   ○   Understand completely

How often did you bring children to discuss with the team?
How often did you use the collaborative team?

1   2   3   4   5

Did not use it at all. ○   ○   ○   ○   ○   Used it frequently.

○   ○   Option 1

How comfortable are you in raising concerns about children in your environment with the collaborative team?

1   2   3   4   5

Not comfortable ○   ○   ○   ○   ○   Very comfortable

What day(s) work best for you to meet monthly for material making?

○ ☐ Monday

○ ☐ Tuesday

○ ☐ Wednesday

○ ☐ Thursday

○ ☐ Friday

○ ☐ Saturday

What is your participant number?

[   ]

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