A Proposal for Involving Teachers in School Integrated Services in the Province of Québec

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Abstract

In the province of Québec, there has been a movement towards creating community schools since the last education reform. School integrated services make a unique contribution to the creation of a community school, and some important challenges must be considered and overcome if the community school is to exist in Quebec as it currently exists in the rest of Canada and in the United States. This paper consists of a proposal for the use of a pull-in program, namely the consulting team model (CTM), whose aim is to support and involve teachers as part of this consultation model within full-service community schools. Over and above its multi-agency and multi-disciplinary emphasis, the CTM also incorporates the instructional interventions and the educational success of each student. CTM is presented as a fundamental component of the service delivery model that serves students with special needs which can be linked to school integrated services in the province of Québec; such a model can also be replicated elsewhere for any student. Our CTM proposal is part of a school integrated services delivery model we are working to put in place in Québec schools.

Key Words: school integrated services, service delivery model, full-service community schools, special needs students, Québec, Canada, teachers, consulting team model, intervention, prevention, inclusion, special education
Educational Orientations in Québec: Addressing the Needs of Each Student

During the last decade, Québec’s Ministry of Education focused its mission toward educational success for the greatest possible number of students with a threefold mission of imparting knowledge to students, fostering their social development, and giving them qualifications for work or college (Ministère de l’Éducation du Québec, 2002). For the general curriculum, in order to achieve the prescribed mission, emphasis is placed on learning and the necessity for education agents to work together within the school and with the surrounding community. There is a clear desire for Québec schools to become educational communities that empower all of their stakeholders (Ministère de l’Éducation du Québec, 2003). Accordingly, a new policy and lines of action for special education are now acknowledging the importance of addressing every student’s needs when choosing or adapting educational services (Ministère de l’Éducation du Québec, 1999a, 1999b). According to this perspective, the least restrictive environment should be promoted whenever possible. There is a willingness to act to prevent difficulties and to address the needs of each student, while favoring their inclusion (whether partial or full inclusion) and providing integrated services whenever needed (Ministère de l’Éducation du Québec, 1999a, 1999b). The idea is not new, but it is now clearly acknowledged. Nevertheless, if the Québec Ministry’s intentions are to be realized, the plan to implement an integrated model needs to be more clearly articulated.

School-Community Relationship

The community school concept has received some attention as a result of the legislation and policies promoting the school-community relationship (Ministère de l’Éducation, 2005). Based on this model, some schools have begun to more formally integrate some community resources and services to address the needs of their students (e.g., Finn et al., 2002; Picard et al., 2005). These approaches are still isolated, and data is currently being documented to evaluate the effects on the students’ school achievement (Finn et al.; Heath et al., 2004). Through amendments of the Education Act, the Ministry of Education of Québec showed its willingness to include the involvement of parents and the surrounding community in children’s education. Along came the idea of developing community schools in the province of Québec. However, when one looks at the documentation provided by the Ministry of Education on this matter, although we know what it should be in practice, it is not well defined (Ministère de l’Éducation, 2005). Moreover, and most disturbingly, the Ministry of Education neglects to mention the origins of the desired community
school characteristics, although most of them are direct translations of well-known papers, like those of Blank, Melaville, and Shah (2003), and of Calfee, Wittwer, and Meredith’s (1998) book, without any references to those authors or their work. If Québec schools are now challenged in practice, implementing community schools could be an interesting path to follow, but in order to integrate school services that really involve the teachers as professionals, some challenges must be considered and overcome.

This paper will outline issues we are facing in Québec in developing school integrated services and a proposal for implementation that could be interesting for other provinces, as well as other states or countries. We will first define and characterize a community school through a synthesis of models borrowed from U.S. and Canadian literature, followed by one specific model on school integrated services. We will then propose an integrated service model that we believe would work in Québec, namely, a consulting team model, to help serve as a link for school integrated services and the promotion of inclusion.

Methodology

The model we are proposing results from an analysis of the community school concept and the school integrated services concept and the application of the consulting team model concept. Content analyses were conducted using anasynthesis methodology developed by Silvern (1972) and further adapted by Legendre (1988). Anasynthesis corresponds to an iterative process through steps of analysis, synthesis, prototype, and simulation leading to the proposition of a model. For every document, content analysis is employed to identify and classify the elements on all definitions given, the goals or aims of a term, the praxis (i.e., the applications or the evaluations), and all other explanatory characteristics (i.e., the advantages, limitations, principles, etc.). This synthesis serves as a framework for our proposal of a school integrated services model.

Community School: A Synthesis of Definitions

In order to make a proposal inspired by the work of others in the field and adapted to the reality of Québec, we made our own synthesis of the community school concept, mostly from American documentations on the subject, since these documents were more easily accessible than those from other countries (Annie E. Casey Foundation, 1999; Blank et al., 2003; Calfee et al., 1998; Children’s Aid Society, 2001; Dryfoos, 2003; Dryfoos & Maguire, 2002; Epstein et al., 2002; Kretzmann, 1997; Melaville & Blank, 1998; Raffaele & Knoff, 1999; Sanders, 2003; Veale, Morley, & Erickson, 2002).
Community schools are public schools serving as a common resource and activity center to assist their students, their families, and the surrounding community in order to promote the healthy development and educational success of every child in a given community. That explains, in part, why so many authors describe community schools as a community “hub.” Many terms have been used to refer to community schools: full-service community schools, comprehensive schools, full-service schools, and extended-service schools (Children’s Aid Society, 2001). However, these different terms refer to the same concept.

According to the U.S. Coalition for Community Schools, a community school offers quality educational service programs and youth development programs to its students; it also provides support to families while encouraging family and community involvement and community development (Coalition for Community Schools, 2004). Extended hours also characterize a community school. This means the school operates seven days a week, all year long, and that services and activities can occur before, during, and after the school time schedule (Coalition for Community Schools; Dryfoos, 2000, 2003; Dryfoos & Maguire, 2002). School integrated services also characterize a full-service community school, which may explain the complexity and multifaceted aspect of this model.

If school integrated services are at the core of a community school, the involvement and collaboration between the school staff, the parents, and the community is also an inevitable characteristic. At another level, as Lawson (2003) explains, ten types of collaboration have to be considered in designing institutions like community schools: youth-centered, parent-centered, family-centered, community, interprofessional, intra- and inter-organizational, intra- and inter-governmental, and international collaboration.

Also essential to a community school is a school coordinator (Calfee et al., 1998; Dryfoos & Maguire, 2002; Melville & Blank, 1998; Parson, 1999) whose role is to ensure that services, activities, and programs will be offered to address students’ and families’ needs considering the available, existing resources in a given community. The service coordinator facilitates the access to services for children and, whenever necessary, for their families. The service coordinator has to be appointed by the school and the community. Moreover, a family resource center is often part of a community school, not only to welcome parents but to provide support services within the school building. Since the institution should be supportive of the continuing education of its staff, a full-service community school becomes synonymous with quality professional development for educators. Finally, some community school models offer technical assistance to sustain the schools in providing effective, integrated school services and activities and to assist them whenever necessary.
In the different community school models we’ve analyzed (and in some cases visited to compare the literature with observations), nothing seemed to be explicitly or systematically done to provide immediate support to the classroom teacher on a day-to-day basis as the consulting team model was intended to do. Although it seemed that support was existent, it was not included explicitly in the community school literature. It also appeared that the teachers and the community school staff were not necessarily one and the same, maybe in part because their salaries were not necessarily coming from the same source. For example, in some community school models, community school staff salaries (e.g., for social workers, speech therapists) depend on a foundation payroll, while teachers and regular school staff are on the (public) school board payroll.

With these basic characteristics, a full-service community school seems to be the ideal setting for teachers to be considered as real professionals. Curiously, inclusive service delivery models for children with particular needs did not seem to be fully implemented, although pull-in and pre-referral intervention programs could serve integrated services in this perspective.

**School Integrated Services**

As shown in Figure 1, school integrated services can be defined as the process by which educational, social, and health services are coordinated in a concerted way and offered to students and their families in order to address their needs. Services can be located within the school building (i.e., school-based services), near the school but accessible from there (i.e., school-linked services), or in the community (i.e., community-based services). Community-based services are not necessarily linked to school activities or to the students, unlike school-based and the school-linked services. Whether based within the school building or not, school integrated services are a key to ensure and facilitate coherence among interventions. Interprofessional collaboration then becomes a main challenge that includes “engagement in an interactive process, mutual control over decisions made and actions taken, some common goals and values, and shared ownership of responsibilities and outcomes” (Walsh & Park-Taylor, 2003, p. 16). In other words, “the key is to foster partnerships that both ensure quality services and promote academic achievement” (Murray & Weissbourd, 2003, p. 183).

One issue facing full-service community schools development in Québec is the need for schools to clarify their needs before asking for any collaboration with the community, including social and health services agencies. School integrated services must be directed toward the children’s educational success,
Figure 1. A school integrated services framework.
otherwise, there would be no real reason to link the needed services to schools, since all public services can be available somewhere in the community. Still, when a child is concerned, the fragmentation of services is an acknowledged problem in our public system, due to a lack of coordination between the school and other agencies providing services to the child and his/her family.

Complementary services do actually exist in Québec’s public school system. Among other things, they include special education, speech therapy, psychology, psychoeducation, and social and health services (Ministère de l’Éducation du Québec, 2002). Nevertheless, complementary services are not coordinated from a school integrated services perspective, regardless of administrative issues. Rarely, if ever, are a student’s teachers invited to participate in the individualized health and social service planning, even though educational service is part of the services provided to a child in a public system. In this kind of relationship, social and health services agencies can have a tendency to impose their visions on the educational system, since the non-teaching professionals are not necessarily working alongside the teachers. Although special schools often work in collaboration with health and social services agencies, it is not yet common in regular public schools, and when these actions are taken, the procedure of supporting a teacher in his/her classroom is not systematic. In clarifying their demands about the services their students need, schools could better contribute to the students’ success. Moreover, it would make more sense to initiate children’s services from their school settings, since every child must go to school. Based on this premise, we propose the use of a consulting team model to serve as a link between the school, the family, and the community to make school integrated services work and to favor educational inclusion.

The Planning Steps From a School’s Perspective

In trying to develop the best possible model, considering the experiences of others, we established some standards from a synthesis of documentations related to the planning and realization stages of community schools and integrated services initiatives. Based on papers from Annie E. Casey Foundation (1999), Blank et al. (2003), Calfee et al. (1998), Children’s Aid Society (2001), Dryfoos and Maguire (2002), Epstein et al. (2002), Kretzmann (1997), Melaville and Blank (1998), Raffaele and Knoff (1999), Sanders (2003), and Veale et al. (2002), the following guidelines emerged and are shown in Figure 2.

A team responsible for the implementation of services must begin by identifying the needs and resources of the school by gathering objective information on the school, its surroundings, and its characteristics. An inventory of the ongoing services and the desired services must also be made. In order to do so, objective data should be collected through group and individual interviews.
with the professionals involved, including teachers and other professionals working with children in the school and outside of the school (i.e., community agencies), and non-professionals, including parents and children. From there, the team will be able to identify the needs from which an action plan will be formulated. As pointed out by Calfee et al. (1998) and Dryfoos and Maguire (2003), measurable goals must be set out in relation to each identified need. According to the authors, this planning stage could take up to a full year to complete. In the meantime, information on the full-service community school concept and the school integrated services concept should be provided to school staff, including the school council and the community agencies working alongside the school. Since it is an essential component of a community school, professional development for the school staff should also be planned. In addition, the services and activities plan should apply to the next school year and then be extended for a period of 3 to 5 years. This plan should be reviewed annually so the whole process stays dynamic, adjusting with the school’s changing reality. The implementation of these steps are dependent upon the composition of the team and the ability of its members to gather data objectively through focus groups or interviews and to document these facts in a systematic manner. Later, an evaluation of the effects of this model on children, their parents, and teachers should be conducted and examined. Based on these guidelines, a full-service community school would evolve as it continues the process of developing.
A School Consulting Team Model

A school consulting team model (CTM) is a pull-in program intended to assist a teacher in his/her work with the identified children when the assistance of a multi-disciplinary team is necessary. In this model, the team members involve all the professionals that may be needed depending on the difficulty encountered by the teacher. The child’s parents are also involved in the creation of the individualized action plan. In a school where integrated services occur, systematic implementation of a CTM could help in assisting and supporting the teachers in their actions. To work efficiently, the team should meet on a regular basis, even once a week (Idol & West, 1987; Yau, 1988).

The implementation of a school CTM could serve as a link between what’s going on in the classroom and the other professionals working with the same child in the school and outside the school. Before going any further, we will describe the origins of the CTM within service delivery models used in regular and special education.

Service Delivery Models for Every Child

There is a range of service delivery models that could be considered to address every student’s needs, and inspiration can come from a cascade system proposed in the 1970s to organize educational services for special needs students (e.g., Figure 3) as outlined by Reynolds’ 1962 model (see also Deno, 1970). Emphasizing the least restrictive environment perspective, we rearranged the first five levels of schooling of this cascade system and present them as a typology, allowing us to classify the service delivery models that can be used in education (Trépanier, 2005). As shown in Figure 4, student services can be provided outside the regular class, inside the regular class, directly to the teacher, or in combination, depending upon the needs of a student.

In the field of special education, the pull-out or pull-aside programs correspond to the models of service delivered outside the regular class, like the resource room, one-on-one instruction, or any type of special or remedial classes that can take place in an elementary or high school (Trépanier, 2005). The duration of the service provided, the amount of time spent outside the regular classroom, and the number of students served at once are often the criterion used to distinguish these various models and their application. Based on this perspective, an “outside the regular class” model could be applied when a professional, including a teacher, can work with one or more students outside the regular class.

The other service delivery models are referred to as pull-in programs. Pull-in programs consist of the provision of educational services to a student allowing
him/her to be serviced in the regular class; this explains why these models are favored for inclusion. For example, two or more professionals (including the teacher) can coordinate their interventions within the class, as in a team teaching model. On the other hand, the professionals (including the special education teacher, depending on the needs of the student) can offer some individual consultation to the student’s regular teacher. A professional team can also meet together for the planning of services and educational interventions. Some applications of the consultation model are well known in the field of psychology. As a matter of fact, the general typology’s framework could be used to classify the service delivery models used by other specialists such as the speech therapist or the school psychologist. Here, we are using it to help provide an understanding of the service delivery models implemented (or that could be implemented) by the special education teacher to address the needs of each student.
Figure 4. School service delivery models within a school integrated services framework.
Usually, when the time comes to choose a special education service delivery model for a child, the “administrative solution” too often still prevails in real life, meaning the “student must fit the system” in what the school boards and/or the school principal and teachers believe to be the right thing for each student, rather than effectively adapting to the student’s needs. At a political level, an agreement was established between the Ministry of Education and the Ministry of Social and Health Services to support the idea of integrating services for children to address every child’s needs and to provide some guidelines for regional and local agreements to occur (Ministère de l’Éducation du Québec, 2003). Even though such policies exist, the implementation still remains uncertain.

A Link for School Integrated Services

Consultation team models may be referred to by a variety of different terms such as teacher support teams or problem solving teams, and other collaborative consultation practices may include similar or different arrangements promoting collaboration and consultation between general and special education agents. Most of them were developed to help regular classroom teachers cope with students with special needs in inclusionary settings. If collaborative consultation practices were primarily for special education and school psychologists (1970s to 1990s), they are now more inclusive in their approach and involve all the education agents (Dettmer, Thurston, & Dyck, 2005). In the community schools’ literature review conducted for this analysis, it was found that case management teams or student-study teams (or the equivalent) are implemented to identify the services a child and his/her family may need. These may correspond to the individualized service plan (ISP) and do not necessarily include a specific individualized education plan (IEP) involving the teacher(s) and what is going on in the classroom during the day. We believe ISP meetings should be kept apart from the meetings that would occur while the service plan is implemented. By providing some support, a school consulting team (CT) would insure real participation, collaboration, and understanding of the teachers (general and special education) in the school integrated services process. In the Detroit Public Schools, resource coordinating teams (RCT) were put in place in schools according to Adelman and Taylor’s framework (2002). However, if a school CT coordinates its services with RCT, the two teams differ in orientation toward educational and, consequently, instructional success. Moreover, the consulting team model (CTM) that we are proposing allows one to distinguish intervention models from service delivery models that can be used in (special) education.
A problem solving approach could be used to provide a plan of action for the school CTM we are proposing. The phases of the Stephens/systems model (Stephens, 1997, in Dettmer et al., 2005), which resemble the IEP process, could easily be used to help structure CTM meetings: (1) assessment, observation, data collection; (2) specification of objectives, problem identification; (3) planning, finding ways to resolve the problems; (4) implementation of the plan, measurement of progress; and (5) evaluation, data analysis. The difference between our proposal and the IEP process would be to assist the teacher in daily interventions and program modifications or communication with parents (as in a Teacher Assistance Team, see Wood, 2006) during the application of the IEP. In other words, to link school integrated services with what is going on in a child’s classroom, those steps could be applied along with the IEP follow-up. The consulting team would not be intended to propose services for a child but to support the teacher in his/her interventions prescribed by the IEP.

An Overall Process for School Integrated Services

School integrated services represent the necessary linkage between the school and the community that can make service delivery more efficient in addressing children’s needs. There are two case scenarios in which the school consulting team (CT) could play a key role when school integrated services are concerned. The first is when a child already has an Individualized Service Plan (ISP), and the second is when a child does not have one. If a child has an ISP, it means some professionals from health and/or social service agencies have met with the child and the parents, and they have identified and mapped the needed services. In Québec, education is among the mandatory services that must be provided to a child ages 5 to 18, or 21 if handicapped.

In a case where a child would have an ISP, the school CT would then ensure and facilitate the cohesion of the interventions in setting up the Individualized Education Plan (IEP) goals. Furthermore, to support the teacher’s actions promoting the concerned child’s success in school, the CT could be involved occasionally or on a regular basis, depending on the intensity of the needed support. Thus, the school CT serves as one service delivery model among others that may involve direct interventions from other professionals (e.g., school psychologist, speech therapist, resource teacher, occupational therapist, etc.). In sum, the existence of the school CT would promote collaboration among the professionals from the health and social services agencies and the school for the benefit of a child’s welfare, which, in our contemporary society, is connected to educational success. It could also facilitate the involvement of the school’s professionals in the ISP process while serving as a bridge between the
organizations providing the services, preventing disconnected or duplicated services. The school CT would then be an essential part of the process whenever a child who has an ISP goes to school.

The other possible case scenario where a school CT could be needed is when a child who does not have an ISP is showing some difficulties: either emotional, behavioral, and/or educationally related, with or without a formal diagnosis. This kind of child could be at risk and not able to succeed in school if no help is offered or if the help provided is inadequate, possibly resulting from each professional trying his/her best, but in isolation from the others. The first actions of the CT in this case would be to provide a regular service delivery model for at-risk students. An IEP should then be made and after a semester or less, depending on the situation, the CT could confer and ask the social and health agencies for the necessary evaluations that could lead to the elaboration of an ISP. Figure 4 simply illustrates where a school CT is situated if school integrated services are desired.

When a child goes to school, the teacher becomes the front line education agent and is often the first to detect needs or difficulties the student may be experiencing. After referring to a service coordinator in the school (or, if not available, to the resource teacher) who would serve as the primary link between the school and the community professionals, a school CT would begin the process of consultation. Accordingly, the CT meetings play a key role in the prevention of further difficulties, as well as in providing understanding of the needed interventions if the child’s difficulties persist.

**Conclusion**

In this paper, we presented a school consulting team model (CTM) as a way of linking school integrated services while ensuring that the child’s educational success is at the core of every professional’s actions. Since a school consulting team (CT) is one available educational service delivery model among others, the aim of the CT meetings should always be to ensure the educational success of the concerned child. In a school integrated services context, CTM as we propose it is intended to help educators coordinate their actions in the school while helping each individual teacher to cope with the students’ difficulties or challenges. CTM then becomes the minimum service delivery model to put in place when a school offers integrated services, whether the student is taught in a regular class or in a special class. In this context, a school CT would not be intended to replace the ISP or other team meetings sometimes necessary outside the school life of the concerned child. We are also not proposing that the school adopt the CTM as the only service delivery model or that it replace
essential direct interventions. Because complementary service professionals should work together in order to help the same children, we are arguing for CTM to exist in each school when integrated services become necessary for a child. In this perspective, we believe our proposal will help clarify the turf war that can occur in such a context (Heath et al., 2006). In the near future, we will work on implementing these recommendations in urban schools through the English and French school boards system. First, we recommend systematically employing a CT model for the integrated services for all children with an ISP, and then, we will help to put in place a school CT to help each child who may need complementary services to succeed in school.

Moreover, these community school services will provide children with necessary support needed to succeed academically and will also provide easy access to services for their families. The school consulting team could then become the place to share, if ever necessary, relevant information about the child’s daily living situation at home and at school and help the educators better understand a student’s behavior and plan accordingly. In no way should the school CT replace social or health services team meetings, since their goals differ widely. Indeed, CTM, when involved through the school, aims to make each child’s educational success at the core of every professional action. In the meantime, professionals will not be working in an isolated way to provide services to the child and the family. By effectively supporting the teacher, we assert that the professionals’ actions and the actions of the parents could be well coordinated and clearly goal-directed.

Although there are many community school models in existence around the world, they are often limited with respect to teachers’ involvement and in facilitating the relationship between other professionals to support educational success. Based upon this concern, we are recommending a consulting team model as a link for providing school integrated services.

Endnotes
1 For example, see MELS. (2005). L’école communautaire. Un carrefour pour la réussite des jeunes et le développement de la communauté. Rapport de l’équipe de travail sur le développement de l’école communautaire [Community school. A pathway toward youth’s success and the community development. Report from the working group on community school development.] (pp. 11-13).
2 NYC Beacon Schools, Children’s Aid Society Schools, CA Healthy Start Schools, and FL Full-Service Schools, among others.
3 In this paper, we will not distinguish the special education teacher from the resource teacher and will consider the special education teacher as a teaching professional who can act in a variety of contexts, as in a resource room, a special class, and even in a regular class. In this perspective, a special education teacher can also play a role in helping the regular class teacher in preventing difficulties.
References


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