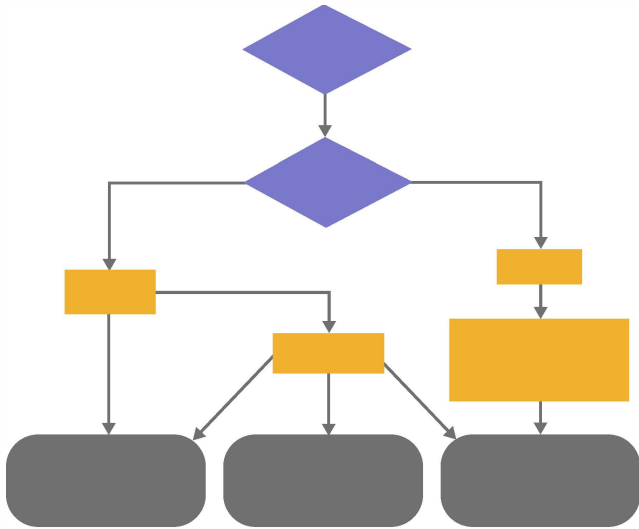





Coordination of Services



Dana Anaby, Chantal Camden and the GOLDs/OR Group

dana.anaby@mcgill.ca
chantal.camden@usherbrooke.ca

DEFINITION


 Involves a facilitator, on-going meetings and/or joint management of intervention plans to ensure that all distinct types of services are coordinated

This principle is one of the 10 evidence-based principles, identified in a scoping review, that can guide the organization and delivery of services for students with disabilities in integrated classrooms.

Examples

A facilitator, within the "Success for All" model, who takes a coordinating role (Shippen, 2006)

A systems-level approach including on-going meetings amongst different professionals (McIntosh, 2011)

Joint management by the core members of the educational team to create intervention plans for preschoolers with significant disabilities (Hunt, 2004)

Evidence & Outcome

In combination with other principles, coordination of services will lead to:

Improved students' social engagement, peer-interaction and overall communication (Hunt, 2004)

Decreased levels of students' referrals to office discipline and increase academic achievement (McIntosh, 2011)

Reduced disruptive behaviors within an "Intensive Mental Health Program" in primary school children with severe emotional disturbances (Puddy et al., 2012)

Application Ideas

Having external coaches or agents of change to facilitate leadership roles, provide ongoing communication, facilitate peer consultation and implement leadership teams

Assigning a facilitator to oversee the service provision of different professionals to ensure cohesiveness

Having regular team meetings to set joint objectives and to ensure all services are consistent

Create a flow chart/map of all existing student health resources as a starting point to optimize services