Integrated Services in the Inclusive Classroom

Stephanie Wojcik
St. John Fisher College

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Integrated Services in the Inclusive Classroom

Introduction

Today, special education has become a large part of the educational world. There is less segregation amongst children and more collaborative efforts to integrate all students in their learning experiences. More and more inclusive settings are being set up to embrace all students, regardless of their ability level or needs. Inclusion has evolved over the years. Today, inclusive classrooms are a commonplace where teachers and service providers work together to provide the most effective instruction and supports possible for every child.

Within the model of inclusion, there are many collaborative efforts that encourage and foster growth within each child. Inclusion, itself, gives support to children with disabilities as well as children without disabilities. The positive results of inclusion are overwhelming. In order for inclusion to work, a variety of factors come into play. Integration of ideas, services, and goals are some examples of the variables that go into a productive and efficient inclusive classroom.

In the current inclusive setting, related service providers push into the classroom to service students, as well as pull students out of the classroom for more direct instruction. It is important for service providers and teachers to be aware of how these services are affecting a child. There are many different ideas on which service model is more effective- the push-in model, the pull-out model, or a combination of both. Schools today are dedicated to researching the best teaching models for students. However, there seems to be a lack of research surrounding the most effective model for providing students with the services that they need in order to succeed in school. Without these services, students would not gain the skills and knowledge needed to advance in their academic and social careers. Therefore, it is important to understand which method of providing services is the most beneficial to students and their development.
research action study will focus on the advantages and disadvantages to each model of providing services to students within the inclusive classroom.

Review of the Literature

Laws of Inclusion

According to Falvey (2004), “The call for integration of students with severe disabilities... was essentially based on the principle of least restrictive environment as defined in 1975 when Public Law 94-142 (Education of all handicapped children act) was passed” (p. 9). Since then the act has been reauthorized. Each time this occurred, Congress provided more clarity to the meaning and importance of the least restricted environment. Currently, the act requires that students with disabilities must have opportunities to interact with their nondisabled peers. Students with disabilities should also have opportunities to participate in extracurricular activities during and after school (Falvey, 2004).

Since the Education of all Handicapped Children Act has been passed, there have been a number of provisions and changes made. One change was the name of the act. Currently, the Education of all Handicapped Children Act goes by the name of the Individual with Disabilities Act. This altered name puts the individual first, instead of the disability. The fundamentals of the act remain consistent.

Since the 1975 implementation of the Individuals with Disabilities Act (IDEA), federal law has stated that children with disabilities have the right to an education in the least restrictive environment (LRE). According to the act, removal from general education environments should occur only when a student has failed to achieve satisfactorily despite documented use of supplemental supports, aids, and services.” (Villa & Thousand, 2003)
The only time a student should be considered for a self-contained classroom is if a student’s disability significantly impedes with their learning after multiple attempts to integrate supports, services, and differentiated instruction. The reauthorized of IDEA in 1997 also requires that students’ IEPs ensure access to the general education curriculum (Villa & Thousand, 2003).

According to Villa and Thousand (2003), when IDEA was first put into place in 1975, schools generally interpreted the law to mean that they should mainstream students with mild disabilities with minimal support and few or no modifications to either the curriculum or instruction. “In the early 1980’s, however, the interpretation of LRE evolved to include the concept of integrating students with more intensive needs—those with moderate and severe disabilities into regular classrooms” (Villa & Thousand, 2003, p. 19). By the late 1980s and early 1990s, another change had occurred. The interpretation evolved into the approach known as inclusion: “the principle and practice of considering general education as the placement of first choice for all learners” (Villa & Thousand, 2003, p. 19). “This approach encourages educators to bring necessary supplemental supports, aids, and services into the classroom instead of removing students from the classroom for those services” (Villa & Thousand, 2003, p. 19). The inclusion approach has decreased the amount of time that a student is pulled out of the classroom for support. This increases their time within the classroom interacting with their peers and receiving appropriate and effective instruction. “By 1999, 47.4 percent of students with disabilities spent 80 percent or more of their day in general education classrooms, compared with 25 percent of students in 1985” (Villa & Thousand, 2003, p. 19). With this new wave of push-in services for students, recommended by IDEA, new benefits have arisen. “IDEA contains language in its “incidental benefits” section that encourages applications of special education that hold promise for general education students. This approach enables special educators to support students with
special needs by means of integrated arrangements” (Roger & Sailor, 2005, p. 505). This means that, by integrating related services into the classroom, general education students can also hold benefits from these additional supports.

In 2004, IDEA was reauthorized, again. Included in this new authorization, was Title 1—Improving the Academic Achievement of the Disadvantaged of the 2004 IDEA. According to Title 1 (2004), states must guarantee that school districts ensure high quality assessments, accountability systems, teacher preparation and training, curriculum, and instructional materials that are aligned with state academic standards. Title 1 also states that school districts must “meet the educational needs of low-achieving children” (Title 1, 2004, p. 1), and “close the gap between high and low achieving children” (Title 1, 2004, p.1). Title 1’s (2004) purpose is to hold schools accountable for improving the academic achievement of all students by using resources to make a difference in local educational agencies and schools where needs are greatest. Title 1 was also written to “improve and strengthen accountability, teaching and learning by using state assessment systems” (p. 1). Title 1 also looks to “provide a greater decision making authority and flexibility to schools and teachers in exchange for greater responsibility for student performance... provide enrichment and accelerated programs... promote school wide reform to ensure effective scientifically based instructional strategies, [and] prove substantial opportunities for professional development” (p. 1). Title 1’s purpose is also to coordinate services with each other and give parents substantial and meaningful opportunities to participate in the education of their children (Title 1, 2004).

No Child Left Behind (NCLB) is another law that supports and fosters inclusion. “NCLB makes clear that all children in public education are general education students” (Roger & Sailor, 2005, p. 504). If a child is in a general education school and classroom, then they are general
education students. There is no discrimination within the classroom. If there is a student within a general education classroom that has a disability, they are still considered a general education student, based on their academic placement. No Child Left Behind holds teachers accountable to teach to all of their students, regardless of whether they have a disability or not. “The law is firmly anchored in accountability, even going so far as to define “evidence” and to restrict scientific inquiry to approved methodologies” (Roger & Sailor, 2005, p. 504). Within every general education classroom, teachers must follow the curriculum and carry responsibility for the learning of their students. “Today, NCLB exhorts us to teach all students to the highest attainable standards” (Roger & Sailor, 2005, p. 505). All children should be appropriately challenged so that they can reach their fullest potential. This growth starts with proper and effective teaching in the most appropriate setting.

Supporting Inclusion

There has been a great deal of research that has been done that supports the inclusive classroom. According to Sapon-Shervin (2008), “Inclusive classrooms give us many opportunities to be our best selves, reaching across our personal borders” (p. 52). Sapon-Shervin (2008) also insist that “inclusive classrooms that pay careful attention to issues of fairness and justice bring to the surface questions that have the potential to shift students’ consciousness now and in the future” (p. 53). In order to test this theory, Miller (2008) did a study with her undergraduate teacher candidates. They surveyed students no younger than age 10 and asked them about their experiences and perspectives on integrating students with disabilities in the general education classroom. “Their classroom interactions with students with disabilities have been positive—both for themselves and for the included students” (p. 391). Miller reports that some students are curious of the coming and goings of students who leave the room during the
day to receive support from the resource room. However, many students “asserted each student's right to be there, just like the other kids” (p. 391). Adversely, there were students interviewed that thought that students with disabilities should have their own room where their educational needs could be more easily served (p. 391). Also, some students reported that they sometimes hear negative comments towards students with disabilities. They also see students with disabilities being ignored by classmates and sometimes subjected to demeaning comments from teachers (p. 391). However, most students interviewed were “highly positive about having students with disabilities be a part of their classroom” (p. 391) and believed that they had a right to be in class. Brown, Sontag and Wilcox (2004) have this to say about inclusion:

> Long-term, heterogeneous interactions between severely handicapped and nonhandicapped students facilitate the development of the skills, attitudes, and values that will prepare both groups to be sharing, participating, contributing members of complex, post school communities. Stated another way, separate education is not equal education. (p. 3)

Along with these advantages to inclusion, Brown, et al. also discuss the disadvantages of the segregated service delivery model. These disadvantages include minimal exposure to nonhandicapped students; severely handicapped students tend to learn “handicapped” skills attitude and values; and most comparisons are made in relation to degrees of handicap rather than nonhandicapped performance (Brown, et al., 2004). One of the strongest points made by Brown, Sontag and Wilcox (2004) is that “lack of exposure to severely handicapped students limits the probability that the skills, attitudes, and values of nonhandicapped students will become more constructive, tolerant, and appropriate” (p. 4). Individuals with disabilities will eventually leave school and live in public, minimally segregated communities where they will
each student. "The critical importance of clear specific and shared goals is stressed across the literature on collaboration" (Horwath & Morrison, 2007, p. 62). Student's goals should be attainable and specific. All service providers and teachers should develop specific implications and modifications to guide students in meeting their goals. According to Horwath and Morrison (2007), "Goals provide direction for action and a base for measuring effectiveness and motivation" (p. 62). The goals set for students should be reevaluated and analyzed often to ensure that the goals are appropriate and that each member of the team is following through with their responsibility in guiding students in reaching their goals.

Within the inclusive setting, there is often a great deal of co-teaching that occurs. Co-teaching is a way for teachers to collaborate and work together to effectively reach all learners in the classroom. "Collaboration is the key variable in the successful implementation of inclusive education" (Villa & Thousand, 2003, p. 21). According to Villa and Thousand (2003) teaching models in the inclusive setting should include consultation, parallel teaching, supportive teaching, complementary teaching and co-teaching. Collaborating teachers should work together to promote inclusion with current theories of learning, relevant and meaningful learning, authentic alternatives to paper-and-pencil assessments, balanced approach to literacy, thematic/interdisciplinary curriculum approaches, use of technology, and differentiation. In order for collaboration to work, team members must "develop skills in creativity, collaborative teaming processes, co-teaching and interpersonal communication" (Villa & Thousand, 2003, p. 21). Another important aspect that must occur for co-teaching to be successful is that "partners need to appreciate potential differences in terms of values and philosophies" (Horwath & Morrison, 2007, p. 64). Educators that work together must be open to diversity both in the classroom and within each other. Differences in teaching styles and educational philosophies
may interfere with the collaboration between educators. Therefore, “effective communication is a key component for establishing trust” (Horwath & Morrison, 2007, p. 64). Teachers who collaborate with other professionals must work together and communicate to provide students with the most effective teaching. Co-teaching professionals should “create a powerful core coalition, shared commitment, leadership, and compelling joint narrative that creates the critical mass to drive change forward” (Horwath & Morrison, 2007, p.66). Paraprofessionals are also included in collaborative efforts in the inclusive classroom. According to Villa and Thousand (2003), paraprofessionals should be “presented to students as a member of a teaching team rather than as people Velcroed to individual students” (p. 21). This allows the paraprofessionals to work with students outside of their “assigned” child. Therefore, all students are benefitting from the additional support in the classroom. The individual child who was assigned the paraprofessional will be allowed to learn techniques and strategies from their paraprofessional and then they will have a chance to implement them independently, or with support if needed.

Another important factor in an effective inclusive setting is the degree of administrative support. According to Villa and Thousand (2003), the degree of administrative support and vision was the most powerful predictor of general educators’ attitudes toward inclusion. “If inclusion for students with disabilities is combined with weak administration support on behavior problems and modest intellectual goals for everyone, the process is unlikely to work” (Carpenter, 2008, p. 135). According to Roger and Sailor (2005), schools should engage in collaborative, team-driven decision making to improve academic and social outcomes for students. In order to strengthen the process of inclusion, school districts should develop a district leadership team and district resource team. These will provide consistency amongst schools across the district. These teams will also give the district a common place to gather and distribute valid information to the
 Integrat e d Service s 13

school district. According to Villa and Thousand (2003), administrators can also provide supports such as personal and emotional (listen to concerns), informational (trainings), instrumental (creating time for teachers to meet), and appraisal (constructive feedback). Schools must provide training to professionals working in the inclusive classroom in order to strengthen the district’s inclusive implementations. These trainings should include in-service opportunities, coursework, co-teaching, and professional support groups. Training should also include implementation of IEP-mandated activities as part of ongoing district evaluation procedures (Villa & Thousand, 2003).

Once proper support for students with disabilities is put into place in the inclusive setting, proper placement of students must be completed. The issue of social factors in the inclusive classroom has been a highly debated topic. Within the inclusive classroom, “most of the evidence for their effectiveness has been built around socialization, and socialization done poorly, at that” (Carpenter, 2008, p. 136). According to Carpenter (2008) the thought process of “they’re all equal in God’s sight” just won’t do, nor will “they all have to learn to get along with all kinds of people” (p. 136). We don’t have students sit next to felons everyday, for 180 days for 12 years to learn about felons. Children can learn about sewers without having to roll around in one. “Our society has not yet provided enough support or alternatives for exceptional kids, nor has it learned how to discriminate well. To make inclusion work beyond merely “adequate,” we need to provide more attractive alternatives for those kids who don’t want to be in schools and who detract from the education of those who do” (p. 136). Clearly, the issue of social factors in the inclusive setting is still a work in progress. School must consider all factors before placing students in their academic setting. “Equality and socialization should accompany—not replace-judgment and education” (p. 137). Administrators and teachers must be sure to place students in
least restrictive environments where learning can take place, along with proper social interactions. Roger and Sailor (2005) insist that “schools should address social development and citizenship forthrightly.” Falvey (2004) believes that inclusion should be chronologically age-appropriate. “When students are assessed using developmental measures to determine their current abilities and levels of functioning, it ignores and overlooks their chronological age, personal interests, and other important characteristics” (p. 10). Socially, children should be around peers of their age. If a child is struggling in an age appropriate setting, additional supports should be exhausted before that child is removed and placed in another educational setting.

Even with all the support and collaboration within the inclusive setting, many teachers “express frustration and sadness, usually without prompting of any sort, over students questionably included or included in large classes with inadequate support” (Carpenter, 2008, p. 135). According to Carpenter (2008), “We need to give teachers more support and give the kids more teachers” (p. 136). Educators and administrators must recognize that “inclusion is not as add-on, but a natural extension of promising research-based education practices that positively affect the teaching and learning of all students.” (Villa & Thousand, 2003, p. 20).

Related Services

Since the passage of the Education of All Handicapped Children Act in 1975, professionals and parents have disagreed concerning how to define and implement the related services requirement of the law. Some states have put regulations into place that establish criteria, however, many have not (Downing, 2004). The 1997 Amendments to the Individuals with Disabilities Act and the resulting final federal regulations published in 1999 describe related services as an essential component of a free, appropriate public education (FAPE) for many students with disabilities:
The term, free appropriate education or FAPE means special education and related services that (a) Are provided at public expense, under public supervision and direction, and without charge; (b) Meet the standards of the SEA [State Education Agency], including the requirements of this part; (c) Include preschool, elementary school, or secondary school education in the State; and (d) Are provided in conformity with an individualized education program (IEP) that meets the requirements of §§300.340-300.350. (Idea Regulations, 34 C.F.R. §300.13 in Downing, 2004, p. 195)

This amendment to the law allows all students to be placed in an environment where the least amount of restrictions are possible. If a student is placed in the least restrictive environment, they will often need additional support in order to be successful in their learning environment. Related service providers are assigned to children who need this additional assistance. IDEA provides a general description of related services:

The term, "related services" means transportation, and such developmental, corrective, and other supportive services (including speech-language pathology and audiology services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, social work services, counseling services, including rehabilitation diagnostic and evaluation purposes only) as may be required to assist a child with a disability to benefit from special education, and includes the early identification and assessment of disabling conditions in children. (IDEA, 20 U.S.C. §1401(a)(17))

(Downing, 2004)

Section 504 of the Rehabilitation Act also refers to education and "related aids and services" as a requirement to adequately meet the needs of students with disabilities. This law protects all students with special needs, not just those who qualify for special education under IDEA.
(Downing, 2004). “It is clear from IDEA that related services are a critical component of both FAPE and placement in the least restrictive environment” (Downing, 2004, p. 203). According to Patterson and Williams (2007), “Related services may not be required for every student with a disability, but if it is determined that a student needs a particular support service to receive free appropriate education, that service must be provided by his or her public school district at no cost to parents” (p. 64). If a student with a disability can be successful in the general education classroom with the support of related services, this represents a less restrictive environment where the services come to the student within the classroom rather than in a pull-out setting (Downing, 2004).

Although related service integration has many advantages for all students, there are disadvantages, as well. The most significant challenge of integrating related services is their cost. “Special education is notorious for being expensive yet unfundable, and costs are on the rise. Reasons for the mounting expenditures include inflation, expanded definitions of disabilities, increasing enrollments, and an increase in the number and cost of related services” (Patterson & Williams, 2007, p. 64). Another challenge is the ambiguity of the federal definition of related services. This limited definition of related services leads some parents, advocates, and attorneys to interpret related services as a limitless menu of options. “As a result, they frequently disagree with school staff members concerning the eligibility of students, the appropriateness of the related services, and the range of potential services” (p. 64). A final challenge is the shortage of service providers (Patterson & Williams, 2007). Without personnel to support students and implement the strategies and services that they need, students are not able to fulfill their potential within an inclusive educational setting.
Service Integration

One way to increase the effectiveness of the inclusive classroom is to begin to lean towards a service integration model. In this model, all agencies and support staff that are involved in working with a student with a disability work together under consistent goals to service a child. This would not require students to leave the classroom to receive the support that they are entitled to and all support staff would collaborate and work together effectively to guide all students in their educational and social learning.

Skrtic and Sailor (1996) support a school-linked service integration movement. They explain that “the service integration movement began with a prevention agenda, aimed primarily at service reforms affecting the lives of children and their families- today it has expanded beyond prevention to encompass all social services systems at the level of the community” (Skrtic & Sailor, 1996, p. 279). These researchers note that in traditional special education, separate teachers are assigned to instruct children with specific disabilities. For example, there would be separate teachers for students with learning disabilities, mental retardation, autism, emotional disturbance, visual impairments, etc. “Inclusive programs shift the focus away from disability categories, with their negative implications for typical child outcomes, and towards problem solving by a broader group of stakeholders at the school who use team processes to support the particular student’s participation in the general education program” (p. 279). The focus of Skrtic and Sailor’s discussions is that there should be a team of professionals that work together to guide a student with disabilities to full interaction with non-disabled peers in an inclusive setting. This vision “requires specialized skills in collaboration and interprofessional information sharing” (Skrtic & Sailor, 1996).
One method that supports the school-linked service integration movement is the “schoolwide approach.” The “schoolwide approach” was developed by Roger and Sailor (2005). They believe that all students should be included in the general education setting. Roger and Sailor insisted that students with disabilities can be serviced within the classroom where all students would benefit from additional support, regardless of whether they were disabled or nondisabled.

A schoolwide approach is not a variation on the older “pull-out” model. Under emerging schoolwide models, students with IEPs are not removed from general education classrooms to receive one-on-one therapies and tutorials or to go to “resource rooms.” Following the logic of integration, all services and supports are provided in such a way as to benefit the maximum number of students, including those not identified for special education. (Roger & Sailor, 2005, p. 504)

“Special education has developed evidence-based practices that have been shown to work for general education students as well. Learning strategies, positive behavior support, avid transition planning are three excellent examples” (Roger & Sailor, 2005, p. 504). In this “schoolwide approach” model, the benefits of inclusion reach far beyond the students with disabilities. However, for inclusions to work for students with disabilities as well as students who are nondisabled there are still factors that must come into play. “For researched-based enhancements to benefit all students, special education needs to be integrated with general education. Emerging schoolwide approaches and the call for “universal design for learning” represent early efforts in this direction” (p. 505). In order for general education to guide all students, learning should be guided by a district’s framework for curriculum, instruction, and assessment. All of these factors must align with state standards. Four critical features that support this principle are: 1) all
students attend their regularly assigned school; 2) all students are considered general education students; 3) general education teacher are responsible for all students; and 4) all students are instructed in accordance with the general education curriculum. In this model, the general education teacher is responsible for every child’s learning, with support from a variety of others. In an environment where students are integrated during every part of the day, “every effort is made to foster friendships and positive relationships among students with and without disabilities” (p. 506). Also in the “schoolwide approach,” “students with IEPs are pursuing goals and objective matched to and integrated with the curriculum being implemented in the general education classroom” (p. 506). Therefore, all students are reaching the same goals within the curriculum, but the path that they take to get there may be altered based on their abilities. This is where additional support and collaboration between all service providers become vital. Also within this approach, all students are included in all activities and all resources benefit all students. There is no division of students within an effective inclusion classroom. “Cooperative learning groups, student directed learning, peer tutorial, and peer-mediated instruction arrangements” (p. 506) all occur within this model of inclusion. “There should be meaningful service-learning opportunities for any student” (p. 507).

Research done in England showed that some parents do not support an integrated services model. They fear that there will be breaches in confidentiality and that schools should focus on education rather than collaboration with other agencies (Ward, 2005). They fear that the focus will be taken away from instructing children and, instead, be put on finding a way to include all service providers in the school day. In England, the majority of principals, or head teachers, had no plans to become involved in this model of inclusion. This indicated that a very low number of
schools are likely to be involved in the integration of children’s services in England (Ward, 2005).

Conclusion

The model of inclusion includes many factors that must work together in order to create an effective and productive learning environment for all students. Collaborative efforts occur between teachers, paraprofessionals, and service providers. By working together, all professionals encourage and foster growth within each child. Regardless of whether a student has a disability or not, each has the right to a free appropriate public education in the least restrictive environment. By integrating services and having related service providers come into the classroom instead of pulling students out, each and every child gets the opportunity that they deserve to interact with their peers and receive an effective, appropriate, research driven, and proactive education.

Methodology

Setting

This study took place at an elementary school in the suburbs of western New York. Elm Elementary (pseudo name) houses students in kindergarten through sixth grade. There are a little under 900 students in the school. This school also houses two 8:1:1 classrooms, as well as a REACH program for excelling students. Elm Elementary is unique in that its classrooms are set up in pods. With the exception of the kindergarten wing and a few classes in the middle of the pods, each classroom is divided by bookshelves and dividers. Most classrooms do not have a door. Six classrooms are joined through a common room in the middle.
Participants

Thirteen staff members of Elm Elementary volunteered to participate, all were female. Two kindergarten teachers, two third grade teachers, two fifth grade teachers, one consultant teacher, one speech language pathologist, one physical therapist, one occupational therapist, and two reading specialists participated. One participating teacher did not identify their grade level.

Procedures

Two surveys were generated for this study. One was directed towards teachers (See Appendix A) and the other was directed towards related service providers (See Appendix B). Both were virtually the same. Some of the wording was changed to match the professional’s relationship with the students. Both surveys asked the participants for the position that they currently hold and the responsibilities of this position. The survey went on to ask what related service model their students were involved in and their students’ disability areas. Next, the survey asked participants which services their students received and what they saw as the pros and cons of the pull-out and push-in models. Finally, the survey asked which related service model they prefer for their students and why.

The survey was distributed through the Elm Elementary staff e-mail system. The e-mail was sent to all professionals in the building, regardless of their position. All recipients of this e-mail were advised that the survey was being sent as part of the final piece of a Masters program. Recipients were informed that their participation was completely voluntary and that all information would be kept confidential, using pseudo names. They were also advised that responses could be given through e-mail. However, it would lead to the facilitator knowing the composer of the survey. Recipients were assured that all information would remain secured and confidential, even if their identity was revealed to the facilitator.
Results

Out of the 124 surveys sent out, thirteen were returned. The following information is organized according to the survey’s questions. Each response is prefaced with the participant’s job title. In cases where a grade level or position has more than one participant, job titles are numbered.

What position do you currently hold? What are the major responsibilities of this position?

- **Kindergarten (1):** Kindergarten teacher. I teach all subject areas and care and supervise 17 little ones.
- **Kindergarten (2):** Kindergarten teacher.
- **Third Grade (1):** Third grade general education- providing individualized education to all students so that they can be successful and reach their full academic, social and emotional potentials.
- **Third Grade (2):** Third grade teacher.
- **Fifth Grade (1):** Fifth grade, general education. I maintain classroom management and teach the fifth grade curriculum.
- **Fifth Grade (2):** I teach fifth grade. All subjects except Science.
- **Ungraded:** Classroom teacher. I follow the curriculum for the grade level I am in. I make sure the students reach benchmarks set for them at this grade level.
- **Consultant Teacher:** Consultant teacher for 3rd, 4th, and 6th grade. Servicing students with IEPs and 504 accommodation plans. Writing IEPs for newly classified students.
- **Reading Teacher (1):** Reading recovery and AIS support for kindergarten and 1st grade.
• Reading Teacher (2): Reading specialist/content area liaison. I serve as a liaison between central office and Elm Elementary in the area of Language Arts. I provide services to students grades two through six.
• Physical Therapist: District physical therapist. I evaluate and treat students within the school district for physical therapy needs.
• Occupational Therapist: Occupational therapist. Primary responsibilities are addressing concerns in fine motor, visual motor, visual perceptual, ocular motor, and sensory processing areas through screenings, evaluations, direct treatment and consultation.
• Speech Language Pathologist: Speech Language Pathologist.

What related service model do your students receive (push-in, pull-out, a combination of both)?

• Kindergarten (2): A combination.
• Third Grade (1): Both.
• Third Grade (2): A combination of both.
• Fifth Grade (1): A combination of both from reading, writing and math.
• Fifth Grade (2): I have over the years, received both push in and pull out services.
• Ungraded: I have speech pull out, ESL- push in and pull out, and reading support- pull out.
• Consultant Teacher: A combination of push-in and pull-out. As the content level increases the amount of pull-out tends to increase … I try to keep the students in the general education class as much as possible.
• Reading Teacher (1): Pull-out.
• **Reading Teacher (2):** I do both… it really depends on the needs of the students. Some teachers prefer I stay in the classroom and allow me to be a part of their reading workshop (rotate students for guided reading) while others prefer I pull my students out and do guided reading/interventions in my classroom. There are definitely students I see who benefit from being pulled out into a smaller, less distracting environment. For those who are most needy, a pull out service is best.

• **Physical Therapist:** I practice a combination of both, but a majority is the pull out model. Most often I observe in a PE class to assess carry-over of gross motor skill acquisition. When I push-in to a classroom, most often it is for instruction in classroom activities to be complete by the whole class throughout the day. I never administer individual treatments in the classroom due to the gross motor nature of the tasks.

• **Occupational Therapist:** Combination, but the majority is currently pull-out.

• **Speech Language Pathologist:** A combination of both.

(Optional) Of your students who receive related services, what kind of disabilities do these students have?

• **Kindergarten (1):** No response.

• **Kindergarten (2):** No response.

• **Third Grade (1):** Physical (artificial leg), speech/language impairment, ADHD.

• **Third Grade (2):** Mainly speech and language, one student is on the autistic spectrum.

• **Fifth Grade (1):** Two classified LD, five others are reading and math center (receive 2 or lower on state tests).

• **Fifth Grade (2):** LD, Autism, Speech, math and reading difficulties.
• **Ungraded**: Expressive and receptive language delays. Reading difficulties—some have made progress while others will be classified eventually. Early language learners.

• **Consultant Teacher**: Learning disabilities, speech impairment, autism, attention deficit disorder.

• **Reading Teacher (1)**: OT, speech.

• **Reading Teacher (2)**: Reading/writing disabilities...my students are not classified learning disabled, but there are those who, in my mind, clearly are!!!

• **Physical Therapist**: Developmental delay, autism, spectrum disorders, spina bifida, cerebral palsy, visually impaired, ADHD, prader-willi syndrome, amputees, learning disabled.

• **Occupational Therapist**: LD, multiply disabled, Down syndrome, ED, autism, Asperger's Syndrome. My caseload also has a good amount of non-classified children.

• **Speech Language Pathologist**: Speech impairment (apraxia, articulation/phonology), fluency/stuttering, language impaired (expressive/receptive), central auditory processing, hearing impaired, Autism, Down Syndrome, learning disabilities, ADD, ADHD, emotionally disturbed, memory impairment.

**In what areas do your students receive services (ex. Speech, OT, PT, etc.)**

• **Kindergarten (1)**: Speech, OT and PT - 1 child receives OT and PT, 2 children receive speech.

• **Kindergarten (2)**: Speech and ESL.

• **Third Grade (1)**: Speech, PT, OT, counseling.

• **Third Grade (2)**: Speech; academic support in math, writing, content areas; reading support through reading center.

• **Fifth Grade (1)**: Wilson reading.

• **Fifth Grade (2)**: All of the above = OT/PT in the past.
• **Ungraded:** Receptive and expressive language- for speech processing, too. Reading- early support. ESL- more literacy exposure and vocabulary.

• **Consultant Teacher:** Question not asked of service providers.

• **Reading Teacher (1):** Question not asked of service providers.

• **Reading Teacher (2):** Question not asked of service providers.

• **Physical Therapist:** Question not asked of service providers.

• **Occupational Therapist:** Question not asked of service providers.

• **Speech Language Pathologist:** Question not asked of service providers.

**What are your reactions to the current service model that your students are involved in?**

• **Kindergarten (1):** Speech is good and very consistent. OT and PT- I'm not as familiar with services provided in this case.

• **Kindergarten (2):** ESL beginner students are required to have 2 periods of ESL. Having one of those as pull-out and one as push-in gives those students the reading and math instruction and practice that they need in the classroom. The speech student pull-out is 3 days and is a time I can work around so that she is not missing direct instruction.

• **Third Grade (1):** Love the additional services, just time consuming to co-plan (push-in) and to keep everyone up to date on things going on in the children’s’ lives.

• **Third Grade (2):** I think the current service model allows for the flexibility that is essential to working with our students. [My consultant teacher] and I decide what situation (push-in or pull-out) is appropriate depending on the needs of the students. Those receiving speech have a combination too, which allows for applications of what they learn in their small targeted groups to their regular classroom experience.

• **Fifth Grade (1):** I feel that they are positive. The students get a lot out of it.
• **Fifth Grade (2):** Reading and math are pull-out and, I believe necessary for student learning. I have push-in for writing and that makes sense because I teach points throughout our writing block.

• **Ungraded:** ESL is working nicely this year. We are on the same page and consult regularly. Speech is the same. Reading is not as effective. I have no say in what happens to my children nor do I have any support. There is no consultation and I am left out of the loop.

• **Consultant Teacher:** It really depends on the students, in addition to the curriculum we are focusing on. When working on larger projects, students in higher levels tend to benefit from having the parts of the projects broken down into smaller, more manageable pieces. Some students can handle being in the general education class for all content subjects, while other students really need the smaller group to acquire the necessary skills.

• **Reading Teacher (1):** I feel it is extremely effective being able to work in a quiet setting. The students are very focused.

• **Reading Teacher (2):** I feel it is working...like I said, I have the flexibility to do what is best for each individual student depending on their needs.

• **Physical Therapist:** At the lower grade levels- k,1,2- I would love to do more push-in, emphasizing gross motor skills, say during center time. However, space is a huge issue as well as scheduling. The pull-out model allows for individual focus and specific skill enhancement. However, follow through with other staff and teachers is imperative so as not to isolate your specific discipline for 2x30 minutes a week.

• **Occupational Therapist:** Sometimes frustrating with trying to deliver service to one of my push-in students as the class isn’t always working on activities conductive to his OT goals, but that’s the time the teacher wanted. If I have more than one child, I worry that I don’t give
each one the proper amount of time and attention when I push-in. Pull-out can be isolating from the real workings of the classroom, and it takes a concerted effort to make sure that what I’m doing outside of the classroom has relevance. Overall, I feel good about what goes on the majority of the time whether I pull-out or push-in.

• Speech Language Pathologist: The newest model we’ve been using is RTI, which is usually pull-out individually or small groups 4-5 times per week for brief periods (15 minutes). This is great in theory to work on specific goals intensively but it is a scheduling problem.

What do you see as the pros and cons to the pull-out model?

• Kindergarten (1): Pros- Elimination of distractions, feeling of being “special” (in a good sense) in K, uniqueness of room for PT and OT. Cons- Not having a clear picture of what’s being done, how, and why. Need for in-class follow-up of skills worked on.

• Kindergarten (2): Pros- Pull-outs for needy students gives that student the individual help he/she needs while giving you time to spend with those students on or above grade level. Cons- Students are always missing instruction or practicing a skill in the classroom when they are pulled out. Scheduling is sometimes a problem.

• Third Grade (1): Pros- Get individualized attention. Cons- Missing classroom time to do so.

• Third Grade (2): Pros- Smaller group without distraction or other instruction. Can be slower pace. More opportunities to participate. Receive specific targeted instruction. Cons- If it is total pull-out I think the students may feel excluded from what is going on in the classroom. In my experience, the students feel like they are missing something.

• Fifth Grade (1): Cons- They do miss some class instruction. It is hard to re-teach. Some kids feel insecure about always getting pulled.
• **Fifth Grade (2):** *Cons*- Students have difficult time acclimating back into classroom activities. They may miss announcements, added information for homework.

• **Ungraded:** *Pros*- Pull-out model allows you to really focus on student needs. *Cons*- If the service provider is unaware of the needs of the student it becomes a waste of time. Then I have double duty and try to catch up the student when he/she returns. Sometimes it is hard to stick to a schedule and you really need to when you have providers in your room.

• **Consultant Teacher:** *Pros*- Students can work at their own pace, students may feel more comfortable asking questions in smaller groups, lesson can be tailored to the student’s specific needs. *Cons*- Students are not able to work with their general education peers, students can feel segregated and may not take academic risks.

• **Reading Teacher (1):** *Pros*- Quiet, less distracting environment, more intense focused lessons that are individualized for each child. *Cons*- The students miss things in the room like directions and activities.

• **Reading Teacher (2):** *Pros*- Students are in a less distracting environment. They are free to take risks and do not have to “hide” the fact that they can’t successfully read or complete a task. I find students don’t hesitate to admit when they are struggling in a pull out, where in the classroom they are “afraid” to be different or look “stupid” in the eyes of their peers. Small group situations are always better...they allow for individual needs to be met. *Cons*- Some students struggle with the “stigma” of being “dumb.” Some students prefer to stay within their classroom so as to feel a part of the classroom community. I find it much more difficult to be consistent with the classroom teacher when I pull out. Pull out programs tend to very isolated. Teachers are less apt to want to meet with me on a regular basis and really “co-teach.” I find they just assume I do my thing, they do theirs. NOT ideal.
• **Physical Therapist:** *Pros*- Can work on specific individualized needs. *Cons*- Isolation of your discipline to just the “therapy room,” not working as an entire team at times, need to reinforce carry over beyond therapy room.

• **Occupational Therapist:** *Pros*- The therapy room can be less distracting to many children as compared to a room full of children with multiple activities going on. Older children often feel embarrassed having a support person come in. Children can focus more easily on a specific task without have to change up when tasks in the classroom change. *Cons*- The therapy room can be more distracting to some kids- the equipment can be very enticing. Or, if PT is in full swing, that can be difficult. Children may be missing vital academic instruction. I do make an effort to remove students during the least disruptive time but that’s not always possible; or work can be brought to OT.

• **Speech Language Pathologist:** *Pros*- I like the pull-out model to teach a skill or strategy. It is easy to collect data and target a specific skill. I feel in control of planning and implementing my therapy. *Cons*- Kids are sometimes pulled from the academics and miss out on class activities.

**What do you see as the pros and cons to the push-in model?**

• **Kindergarten (1):** *Pros*- Can see methods used. *Cons*- Distracting to others wanting assistance.

• **Kindergarten (2):** *Pros*- Service provider sees your student in relation to others in the classroom and sees what is expected of the student in the classroom. Student does not miss instruction/practice. *Cons*- Scheduling is sometimes challenging. You may have to teach a subject at a less preferable time.
• **Third Grade (1):** *Pros*- Aren't missing classroom time done in the LRE. *Cons*- Not truly an "intervention" since it is during the child's typical learning time. More time consuming as a teacher to co-plan.

• **Third Grade (2):** *Pros*- Students feel part of the group. More flexible schedule since you don't have to wait until they get back. It seems easier to occasionally tweak the schedule with a missing service provider than a whole group of students.

• **Fifth Grade (1):** *Pros*- Kids won't get singled out. TA can also help other students in the classroom. Two adults are better than one. I can group kids with like abilities with TA even if they are not in reading or math center.

• **Fifth Grade (2):** *Pros*- Students may not feel singled out. Service providers have a better idea of what students are learning and what the teacher's style and expectations are.

• **Ungraded:** *Pros*- Students can hear the same prompts and see models from another teacher so there is consistency in the message you are sending to the students.

• **Consultant Teacher:** *Pros*- Gives the students a chance to interact with their age appropriate peers, can group students together based on interest and not just ability level, students can model positive work habits from other students. *Cons*- Students cannot always keep up with the pace of the general education classroom, consultant teacher pushing in can be distracting to other students, changes in daily scheduling can be difficult.

• **Reading Teacher (1):** *Pros*- Child stays with his peers. *Cons*- Distracting environment. Provider doesn't give as intensive instruction for the child. The provider ends up working with other children, too.

• **Reading Teacher (2):** *Pros*- Students don't feel different. They see themselves as the same as everyone else. They don't have to be self-conscious. I find it easier to co-teach and be
consistent with the classroom teacher. The students receive the same message this way.

Cons- Distracting to those who really need quiet, small group instruction. Many classroom teachers do not set aside a table or workspace for me. I tend to have to bring my own materials and sit on the floor. This is very disruptive to the classroom and does not help those students who I work with that are easily distracted.

- **Physical Therapist:**
  - Pros- Target more than one child, can incorporate with educational goals.
  - Cons- Too much equipment needed each time for set-up, not enough cooperative planning time, not enough space, possible too much disruption to classroom, difficulty finding appropriate ideas for older students (i.e.- sixth grade), unable to meet individual student goals at times.

- **Occupational Therapist:**
  - Pros- I think that when push-in works, it can’t be better. To actually be able to help during handwriting time, or cutting, etc, it’s just ideal. It’s also nice to be in the classroom to be of assistance for other students who may not be on my caseload but I can unofficially help. 
  - Cons- Some teachers have a more fluid/flexible approach to their day. That makes it very hard to know what to expect when I arrive, and whether delivering OT in the push-in model will work. I don’t find this to be an issue K-1, and usually 2, but the nature of subjects at older grade levels seems to require more instructional time or need for flexibility.

- **Speech Language Pathologist:**
  - Pros- Push-in can be good if it’s scheduled during language type activities (writing, ELA, science, social students). It is good to see if skills learned in the therapy room translate to classroom learning. 
  - Cons- I don’t have control of what goes on in the classroom, it may not be relevant to goals. I sometimes feel like a classroom aide.
Which service model would you like for your students to be in (push-in, pull-out, combination) and why?

- **Kindergarten (1):** Push-in with updates.
- **Kindergarten (2):** I prefer a combination because students will not miss as much instruction and practice in the classroom. For ESL students a time away from the classroom is beneficial because they become overwhelmed with the English language. They also feel more confident speaking in small group.
- **Third Grade (1):** Combination because the children receiving these services typically need the individualized attention but can’t always afford to be missing classroom instruction.
- **Third Grade (2):** I like a combination service model for the reason listed above. I feel that the children receive the best of both worlds in the model we presently use.
- **Fifth Grade (1):** Push-in.
- **Fifth Grade (2):** This depends on the student needs. Some are too distracted in the large group to attend to tasks at hand.
- **Ungraded:** I would prefer in class push in so that I can work with a service provider and then I think they would be more responsible for providing services and actually showing up to do their job.
- **Consultant Teacher:** I feel a combination is best and should be determined based on conversations with general education teachers and the consultant teacher. Content and student readiness are just a few things to take into consideration when planning lessons.
- **Reading Teacher (1):** Depends on the individual student and services they need provided.
- **Reading Teacher (2):** I feel a combination is best. Depending on the student needs and the willingness of the classroom teacher to allow me to be an integral part of the classroom
(access to a table, whiteboard(chalkboard, etc.). I definitely have students who need one-to-one interventions, in which case a pull out is needed. For those students however, who need just a little “extra,” I think push-in is best.

- **Physical Therapist:** Combination of both. Allows for carry over to other disciplines, allows comprehensive approach to obtaining student goals.

- **Occupational Therapist:** I would like to do much more push-in, especially with the younger (K-1) students. I find starting at grade 2 there’s more flexibility in the classroom for subject times which can be challenging. Ideally, for those kids who get serviced 2 times a week, a pull-out and a push-in seems to be beneficial as concerns seen in the classroom can be addressed during the pull-out session.

- **Speech Language Pathologist:** I like a combination of pull-out and push-in. It’s important to teach skills and strategies away from distractions and competition of getting class work done. Then push-in is good for practical application of skills and therapy is more curriculum based. For articulation and fluency therapy, I like all pull-out services. It’s too hard to do them in the classroom.

**Discussion**

After reviewing the previous thirteen surveys, many conclusions can be made on the benefits and downs fall of each service model. There are many different areas where comments and concerns were expressed. Each topic is outlined below.

**Self-Esteem**

One concern that most teachers and service providers commented on was based around each child’s self-worth and self-esteem. When children are pulled out of the classroom, they often feel singled out. Teachers and service providers worry that students will feel different from
their peers. Students often feel like they are missing something and are excluded from what is going on in the classroom. Some students may feel insecure and segregated from their peers. They may begin to feel that they are not part of their classroom community and are looked at differently in the eyes of their peers. Some students even struggle with the stigma of being "dumb" or "different" because they are being pulled out of the classroom. Self-esteem was one of the biggest cons of the pull-out model mentioned by teachers.

Collaboration

Within each model of related services, collaboration is apparent. Teachers and support service staff must work together to guide students in achieving the goals set for them. Many teachers and service providers agree that it is important to keep each other up to date and to take time to co-plan. One teacher stated that she and her consultant teacher met at the beginning of the year to decide which service model would work best for their students. Many teachers also stated that the push-in model is beneficial to students because the teacher and service providers can be on the same page as far as expectations and implementation of skills. There is much more consistency when the teacher and service provider work together in the same classroom. Some service providers explained that it is important for teachers to follow up on skills that are being taught by service providers. This requires collaboration and open communication. One teacher stated that pull-out services tend to encourage less collaboration. In her eyes, this model can cause the mentality that everyone does what they need to and no collaboration is needed.

Instruction and Implementation

The main goal of integrated services is to teach children in the best environment possible to reach all of their needs. The push-out model has many advantages and disadvantages when it comes to meeting the needs of students. Many teachers and service providers see that one benefit
of the pull-out model is that children can work at their own pace. The lessons are tailored to their needs and they are able to work at a rate that is comfortable and appropriate for them. The students also get more individualized help and tend to be more focused. Students also have more opportunities to participate in a small group setting and may develop more confidence with fewer peers around. Some teachers enjoy the pull-out model because it gives them a chance to work more intensely with other students in the classroom. Service providers also like the pull-out model because they are able to gather more data on the child’s progress.

The Elm Elementary professionals also expressed some disadvantages of the pull-out model. Some teachers don’t feel like they know what is going on during the pull-out sessions. They would prefer to be given more information as to the implementation of instruction and services given to their students. Teachers also find it difficult and time consuming to re-teach material to students who are pulled out of the classroom during important instructional times.

The push-in model also has its advantages and disadvantages in implementation and instruction. During push-in models, service providers are able to target more than one child. They may be able to work with other children on their caseload, or additional children that could use extra support but are not on the provider’s caseload. During push-in services, the students are spending more time in the classroom where they can learn good work habits from their peers. They are also able to implement skills that they are learning with support and assistance from a service provider. However, in the push-in model, some students aren’t as apt to participate as much. They know that someone else will have the answer and may not have the confidence to take risks in front of their peers.
Scheduling

Scheduling was another issue that commonly came up in the surveys. Both teachers and service providers feel that scheduling is a hurdle that arises during integration of services. Many teachers feel that they must stick to a strict schedule so that they are on time for when a service provider comes into their room to work or comes to pull a child out of the classroom. Teachers expressed that they can not be as flexible in their schedules. They also commented that it is sometimes difficult to find the best time for a student to be pulled out the room during the day, due to important instructional sessions. Many teachers also feel that they have to adjust their schedules for service providers and teach some subjects at a less preferable time during the day.

Adjusting and Attention

Each service model requires adults and students to be coming in and out of classrooms during the day. Therefore, adjusting to each environment and attention in each room is an important factor. Many teachers and service providers have observed that students are less distracted when they are pulled out of their classroom to receive support. When services are provided in the classroom, it can be distracting to other children. The child who is receiving the services may also be distracted by their peers and lose focus on the skill that they should be working on. Also, some teachers find that it can be difficult for children to adjust to being back in the classroom after they have been pulled out for their service time.

Physical Environment

Whether service providers deliver their services in the classroom or in their own therapy room, the environment must be conducive to learning. One kindergarten teacher stated that the therapy rooms are exciting for the young children. At an early age, it is unique and something to look forward to. This teacher thinks that the enticing room is advantage for when students are
students are pulled out for their services. However, service providers find that the therapy rooms can be distracting because of all the supplies and toys that it holds. Also, there are times where two professionals are working with children in the same room. Service providers believe that this can be a disadvantage and it can impede with a child’s focus and learning. Service providers also have some concerns regarding space to work when pushing into a classroom. One reading teacher explained that she often has to sit on the floor to work with her students because there is not a table or desk available for her. The physical therapist at Elm Elementary also stated that she would like to give more push-in services, however it is difficult because of the equipment needed to encourage development of gross motor in children.

Preferred Service Model

After reviewing the information presented in the survey, most teachers and service providers prefer a combination of push-in and pull-out services for their students. Most professionals surveyed believed that some students need the intensive and individualized instruction given during pull-out services. Then, the students need to learn how to implement these skills into the classroom. This is where push-in services become vital to student success. Many teachers stated that they would like to continue to use the combination model with more updates from service providers on what is being worked on and how it is implemented. However, the surveys did show that a few select teachers and service providers prefer one service model over the other based on the advantages and disadvantages described.

Conclusions

I felt like I was able to gather ample information from my survey. I was pleased with how many surveys were returned. I got surveys back from teachers at a variety of different grade levels. I also received surveys from an array of service providers. I think that this gave my study
more validity since many voices were represented. Some teachers did not give as much
information as I would have liked. For example, one teacher did not add pros to the pull-out
model and did not expand on why they preferred the push-in model.

During my research on this topic, I was not able to find great amounts of information on
the advantages and disadvantages of each service model. Most research was done looking at
integrating services and elements of positive integration. I was also unable to find information on
which service model was best for different disabilities.

My next step in this study would be to continue my research on related service models. I
would like to expand my knowledge on the advantages and disadvantages of each one, as well as
elements of how to make each model successful. I would also be interested in learning more
about student disabilities and how each service model guides students with disabilities in
reaching their academic, physical and social goals. As mentioned, there is not a lot of research
done on which service model is more beneficial for students with specific needs and disabilities.
I would be interested in learning more about the relationship between disabilities and related
service models.
References


Appendix A

What position do you currently hold? What are the major responsibilities of this position?

What related service model do your students receive (push-in, pull-out, a combination of both)?

(Optional) Of your students who receive related services, what kind of disabilities do these students have?

In what areas do your students receive services (ex. Speech, OT, PT, etc.)

What are your reactions to the current service model that your students are involved in?

What do you see as the pros and cons to the pull-out model?

What do you see as the pros and cons to the push-in model?

Which service model would you like for your students to be in (push-in, pull-out, combination) and why?
Appendix B

What position do you currently hold? What are the major responsibilities of this position?

What related service model do you administer (push-in, pull-out, a combination of both)?

(Optional) Of your students who receive related services, what kind of disabilities do these students have?

What are your reactions to the current service model that you provide for your students?

What do you see as the pros and cons to the pull-out model?

What do you see as the pros and cons to the push-in model?

Which service model would you like for your students to be in (push-in, pull-out, combination) and why?