Impact of Planning for Support Services on Students Who Are Deaf-Blind

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general educators), special educators, and related service providers who work with the students. The teams work to develop a shared framework, in part, by determining the components of students' IEPs, such as goals. Unlike many educational programs in which team members each develop a set of goals that coincide with their respective disciplines, VISTA teams develop learning outcomes that are "discipline-free"; that is, they are based on the educational needs of the students, rather than on specific areas representing the orientations of members' various disciplines. In the context of VISTA, educational needs are operationalized in an educational program with three

and contradictions in the recommendations; and consider the educational relevance and necessity of the proposed services. Using VISTA, the team determines what support services are needed, the mode and frequency of the services, where the services should be provided, and when their decisions should be reevaluated. In do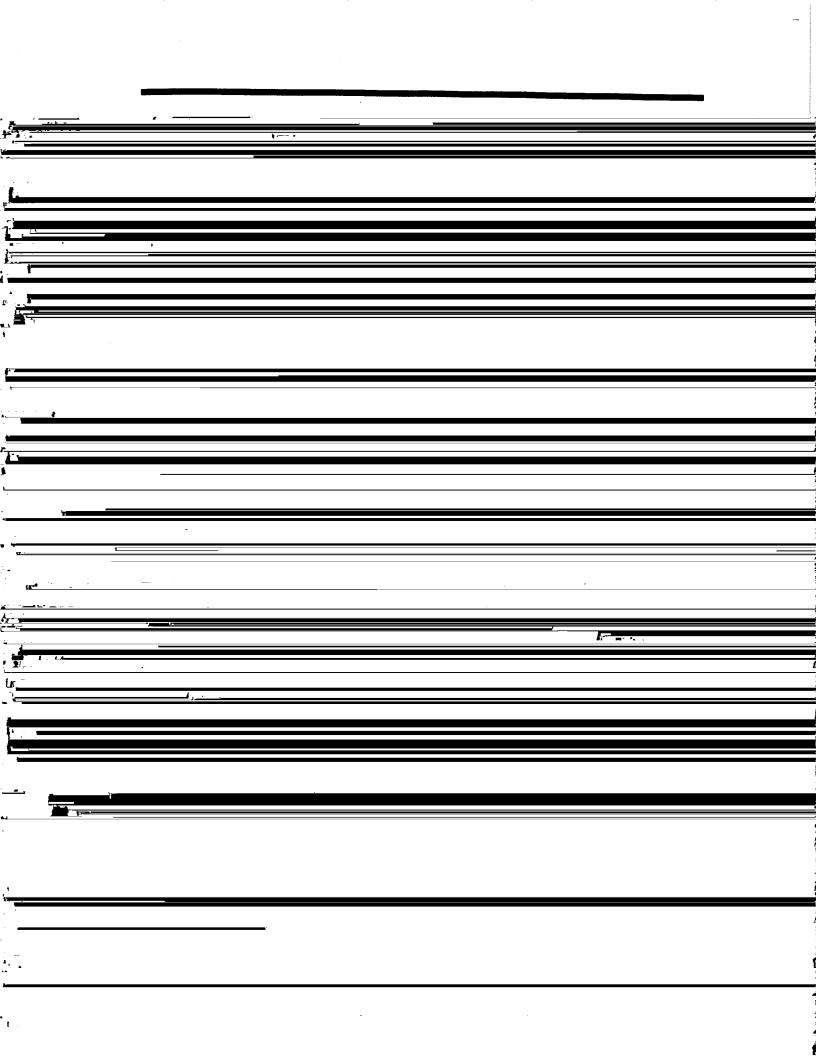ing so, the team recommends services that are only as special as necessary, in part, by considering natural supports (such as classroom teacher, guidance counselor) before assigning specialists to provide support.

PREVIOUS RESEARCH

Four studies pertaining to VISTA were

.... members .... sions about support services. Th...

In addition, a more methodologically detailed, pretest-posttest study, based on the published version of VISTA, replicated and

study extended those earlier investigations by collecting data on the implementation of the decisions the teams made using VISTA.

tional therapist, school nurse, hearing spe-

Table 1
Learning outcomes of students, by curriculum area (*N* = 35).

Curriculum area	Number	Examples of learning
Academics	4	Tracks, scans, differentiates, writes
Socialization	3	Engages in socially acceptable behavior
Leisure	2	

for the student to participate in activities   forced us to look at... People have to...

tates our communication as a team and

physical and occupational therapists in the study were itinerant staff, the nurses were school based, and the general educators were classroom based. Even when the scores for physical therapists, occupational therapists, general educators, and school nurses were in the positive range, 68 percent of the responses were between 5.57 and 6.86 with fairly wide standard deviations, suggesting a modest and varied impact.

It is interesting that as a group, the general educators rated themselves lower ($M = 4.86$, $SD = 3.44$) than did the parents or special educators. A team-by-team examination of the scores indicated that only two of the seven teams rated the general educators' contributions above 5.5. And only the mean scores of the parents were in the positive range for school administrators, hearing specialists, and vision specialists (ranging from 6.40 to 1.00), suggesting that these 3 disciplines had the

from 7 to 1, with 73 percent of those scores falling in the negative half of the 10-point scale (below 5.5). In four of these five cases, the use of VISTA was also rated medium. In one case, the student's progress was rated low even though the use of VISTA was rated high. As was stated earlier, the participants stated that the student's low progress was due to equipment problems that interfered with access to communication.

Discussion

The findings of this study suggest that 1) the use of VISTA was a positive contributing factor in the educational progress of some students in this study; 2) the greater implementation of decisions made using VISTA increased the likelihood of positive student outcomes; 3) disciplines that were perceived as having the most positive

Table 2
Positive impact of various disciplines.

Discipline	Parents			Discipline
	n	M	SD	
Special educator	7	8.00	1.91	Instructional assistant
Physical therapist	6	7.50	0.84	Physical therapist
Instructional assistant	7	6.86	3.18	Occupational therapist
Occupational therapist	4	6.50	3.70	Hearing specialist
Vision specialist	5	6.40	2.70	General educator
School administrator	5	6.40	3.78	Speech-language therapist
General educator	7	6.00	3.37	Special educator

Special educators			Discipline	General educators		
n	M	SD		n	M	SD
5	8.20	1.30	O&M instructor	1	9.00	—
2	8.00	1.41	Special educator	6	6.83	2.64
7	7.29	2.29	Instructional assistant	7	6.57	2.76
6	7.00	2.19	Speech-language therapist	6	6.33	2.94
4	6.25	3.86	Deaf-blind specialist	5	6.20	2.95
2	6.00	0.00	School nurse	5	5.80	2.86
7	5.86	3.02	Physical therapist	7	5.43	2.37
7	5.71	2.36	Occupational therapist	4	5.25	1.71
6	5.67	2.50	General educator	7	4.86	3.44
5	4.80	3.42	School administrator	6	4.67	3.01
7	4.57	3.41	Vision specialist	4	3.75	3.40
4	4.00	1.83	Hearing specialist	2	1.00	0.00

Luiselli, 1997; Giangreco, Edelman, Luiselli, & MacFarland, in press) even though such an approach confuses quantity with value (Giangreco, 1996). Second, that the general educators rated only 6 of the 12 disciplines positively suggests a potential area of conflict between parents and teachers and the absence of a shared framework. Third, the general educators' responses reflect a model that relies heavily

consider the use of natural supports (such as teachers and peers), those that would be available even if the students did not have disabilities.

In considering these data, the authors were prompted to shift their thinking from "Who can help?" because this question can lead to unnecessarily large teams, which, according to general educators, are often

on the provision of regular, ongoing support   are really needed for students to receive an

explore ways to gain access to the skills of a discipline in ways that build the capacity of those who spend the most time teaching the child. Thus, the team might use itinerant specialists to deal with certain issues for time-specific consultations or share specialized skills among the disciplines. By addressing these and other support service issues, the field can add to the constellation of practices

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