Transdisciplinary Teamwork and Integrated Therapy: Clarifying The Misconceptions

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The provision of transdisciplinary and integrated therapy services for students with severe disabilities in educational settings has been widely discussed in practice and in

"bandwagon effect." 13 As the transdisciplinary model bepriority home, school, and community environments and activities in which enhanced learner performance is decame vogue, a variety of approaches were inaccurately labeled transdisciplinary. When critical components of the transdisciplinary model are omitted, distorted, or taken out

sired. 18 Second, designated team members assess the learner's current abilities within the priority environments and activities. Integral to this assessment is identification of funcare those identified as instructional priorities. For an occasional learner with severe disabilities who makes progress very quickly or whose needs are very complex, a therapist may choose to keep assessment information on additional selected problems or needs. Joint range of motion measurements, for example, may be documented bi-weekly for a learner at risk for hip dislocation. For many students with severe disabilities, every three years (when a comprehensive evaluation is required by law) is a reasonable period at

- 6. Does it reflect student and family priorities and preferences?
- 7. Does it address important health and/or safety needs? Even when making decisions based on these criteria, however, team members must recognize that it is impossible to address every need presented by a student with numerous and complex needs.

IEP goals and objectives should reflect the combined environment-referenced and discipline-referenced ap-

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on" component with retained accountability. The therapist It is impossible to provide integrated therapy services

this way, direct services can continue to have an indirect transdisciplinary complement. In fact, when the therapist assumes the role of a primary implementor, he or she will need to incorporate the methods from other disciplines in the direct service sessions (e.g., behavior management technology from educators, language strategies from speech/

ing strategy whereby therapists spend significant portions of a day working with learners assigned to one class or building. This may result in therapists seeing learners less frequently but provides the opportunity to observe and work with learners more intensively across a variety of educational activities. Second, develop schedules that maximize efficient use of time for collaboration. For example,





