

A Partnership of School and Therapy

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St. David's Center for Child & Family Development

- St. David's Center is regional leader in child and family development located in Minnetonka, MN.
- Provider of therapeutic, educational, and support services, including mental health and pediatric therapies, autism treatment, home visiting, an inclusive preschool, and disability services.
- Over 4,000 children and families access these services at our two early intervention centers in Minneapolis and Minnetonka, more than 30 partner sites, including Harley Hopkins Family Center, and hundreds of homes across the community.



St. David's Center - Autism Day Treatment Program



- Day treatment program designed specifically for preschool age children who have a diagnosis of Autism Spectrum Disorder or a related condition
- Multi-disciplinary approach within a mental health model (MH, OT, SLP)
- Whole child focus:
 - Social emotional development
 - Sensory and motor development
 - Speech and communication
 - Cognitive skills
 - Self-help skills
- Year-round programming
- Treatment model is rooted in evidence-based practices including the Greenspan Floortime Approach, that focus on relationship and play-based intervention
- Weekly family therapy support to generalize skill development

High Level Overview of Center-Based Programming



- Centerbased instruction focuses on functional skills across all domains of learning (communication, adaptive, social emotional, sensory, gross/fine motor, and school readiness) with a heavy emphasis on each student's IEP goals and objectives.
- The majority of instruction occurs in this small group setting and offers a more individualized learning approach.
- Teaching team includes a special education teacher, two paraprofessionals, and related services team members (may include OT, PT, DHH, Speech/Language) as part of each student's IEP.

How did we get here? - Hopkins

1. Understood our Why: Families needed full day care or needed to access full day treatment and timings and transitions weren't working well. This is why families were leaving Hopkins.
2. Looked to Examples: Bloomington has a similar collaboration with Fraser.
3. Built on our established partnership with St. Davids
4. Determined logistics as meetings happened

How did we get here? - Hopkins

1. Secured administrative support
2. Worked with students established in our center based classes, may or may not have been in Day Treatment already
3. St. David's supervisor and ECSE Lead got releases and paperwork through summer
4. Shared spaces negotiated
5. Now the interest outweighs the capacity! :)



How did we get here? - St Davids

1. Understood our Why: Our organization didn't have a connection with schools, transportation was a real barrier to shared services, and families were having to choose between school and treatment.
2. Eliminated barriers due to sharing the same building
3. Not having to pay for the space alleviated risk
4. Ensures a multidisciplinary approach
5. Shared spaces negotiated as meetings happened

How did we get here? - St Davids

1. Needed to replicate therapy structure at Harley
2. Needed to hire new and current staff
3. Hired supervisor to do the assessments and evals
4. Room set up to mirror what is at the treatment center



Benefits to this partnership

1. Monthly consults with school teachers for practitioners
2. Creates cohesive care and strategies
3. Ease of access and accessibility for St. Davids by having program presented by Hopkins
4. Having both programs in the same building allows for communication between staff from both teams
5. Connection between Hopkins School District and St. David's for resources outside of the ADT programming

Benefits to this partnership

1. Students are more confident - feel ownership of school and space
2. Minimized transitions
3. Families have responded very positively to this program
4. Less taxing socially / emotionally
5. Students stay with the same group all day which makes it easier to build connection/social skills
6. Prepares students for their kindergarten routine - mirrors more accurately what will happen

Issues and Considerations - Students

1. Fatigue for long day - doesn't have that break from a bus ride
2. Different expectations in morning vs. afternoon programming may be challenging for some students
3. Families should have opportunity to see that there are different kinds of programs - though insurance may lead them to a specific program



Issues and Considerations - Programs

1. Calendars aren't 100% aligned, and there have been hiccups there
2. Different expectations: therapy service vs. school program
3. Medical transportation may not automatically accept transportation to a school
4. Timing of classes had to be adjusted for center based classes and general ed preschool classes because they didn't align with Day Treatment hours
5. ADT / Therapeutic programs are not consistently and easily available across state

Issues and Considerations - Suggestion

1. Suggest a more robust informational session with families - they may not have the all the information a family would have starting at home center (St Davids)
2. Use information sessions to describe differences in programs

If your programs are considering partnering you should know...

1. Open communication has been key -
2. The host building should offer a warm, positive welcome
3. We have monthly meetings to address issues and hiccups as they arise
4. This has been a long time coming!!
5. Doing this in your district = providing the space in your school and partnering with a treatment center that can hire staff in your area
6. Find out what the treatment center offers - multidisciplinary, behavior, ABA

Annie's interview



Staff Feedback about program

Pros:

- same group of peers all day
- teaming abilities (connecting with one team vs connecting with different teachers from various programs, ongoing collaboration between programs, opportunities to observe students in both programs)
- ADT coming to IEP meetings, connecting about IEP goals & treatment plan goals
- sharing resources (supports that can stay with them all day), trial devices (school based aug comm trial devices can stay with students all day)

Things we figured out / managed:

- school vs clinic rules
- parent expectations of each program



Questions and Answers