Best Practice in Instructional Consultation and Instructional Consultation Teams

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OVERVIEW

Instructional consultation (IC) engages school psychologists in consultee-centered consultation with school staff on the most basic goal of schooling: enhancing the academic achievement of students. One of the major aspects of IC (Rosenfield, 1987), and its systemic delivery system, IC Teams (Rosenfield & Gravois, 1996; Rosenfield, Silva, & Gravois, 2008), is the ecologically driven focus on academic concerns, although other concerns are also addressed. In the context of the 2004 reauthorization of the Individuals with Disabilities Education Act (IDEA) and the No Child Left Behind Act, there is an increased emphasis on achieving academic outcomes for all students, including those who are often considered at risk for meeting standards. School psychologists’ response to this context has been to evolve problem-solving models, such as described by Tilly (see chapter 2, vol. 1). IC Teams, as a consultee-centered approach to problem solving (Knotek, Kaniuka, & Ellingsen, 2008; Knotek, Rosenfield, Gravois, & Babinski, 2003), focuses on improving and enhancing staff competence as a route to both systems improvement and positive individual student outcomes.

In this chapter, the essential assumptions of IC and IC Teams, including how IC relates to School Psychology: A Blueprint for Training and Practice III (Ysseldyke et al., 2006; also see Ysseldyke et al., chapter 3, vol. 1), will be presented as basic considerations. A review of research supporting IC/IC Teams can be found in Rosenfield et al. (2008). The best practice section will describe the process for conducting IC, focusing on the three central elements: (a) the problem-solving stages, (b) the communication and relationships skills, and (c) the use of evidence-based assessment and intervention strategies. Best practice in conducting IC Teams, which is the school-based delivery system for IC, follows, including the team structure, functions of the team, and the referral system. Because best practice also requires that any model of service delivery attends to issues of training and implementation, IC’s approach to these components are included.

BASIC CONSIDERATIONS

Blueprint III delineates foundational and functional domains of practice that should be within the repertoire of school psychologists. IC is a problem-solving model that is directly related to the functional competence domain of “Enhancing the Development of Cognitive and Academic Skills … [s]chool psychologists … should know empirically supported components of effective instruction … and they should … work with others to improve instruction” (Ysseldyke et al., 2006, p. 19). In addition, the process of IC incorporates interpersonal and collaborative skills and data-based decision making, two additional functional competencies. Further, IC Teams, as a delivery system, is based on systems thinking. The Blueprint III model also addresses outcomes, and implementation of an IC Team in a school is designed to address both individual competence for all students and building competence of the system through both professional development of staff members and a systemic approach to school improvement.
Components

The original use of the term *instructional consultation* referred to consultation designed to “modify teacher behavior to enhance the learning of all students in a class” (Bergan & Schnaps, 1983, p. 105). The specific model of IC, developed by Rosenfield (1987), and its integration into a school-wide delivery system as IC Teams (Rosenfield & Gravois, 1996; Rosenfield et al., 2008), have extended this concept to a consultee-centered consultation framework that provides support to staff and students. IC Teams include the following components: (a) a stage-based process that embeds relationship and communication processes within the model; (b) an implementation design to support schools and school districts in facilitating change from initiation through to the institutionalization phase; (c) a formative and summative evaluation of the training, the implementation, and the outcomes as an ongoing commitment of the developers; and (d) a causal model incorporating past, current, and future research to guide research and development (see Gravois & Rosenfield, 2002; Rosenfield et al., 2008).

Importance of Underlying Assumptions

IC is, however, more than a set of procedures and activities. The assumptions underlying IC are ecological in nature and are central to integrity of the model’s implementation. Failure to accept the assumptions leads to problems in the successful implementation of any service delivery or intervention model (Benn & Rosenfield, 2005), especially when the model challenges traditional beliefs. IC challenges the traditional deficit models that have been central to the training and practice of many school psychologists. Thus, a discussion of those assumptions becomes the starting point for the practice of IC.

IC begins with the assumption that the consultant and consultee actively construct and resolve the problem through their interaction: “The facts of a particular case are but a reflection of the values and prejudices of those persons describing that situation” (White, Summerlin, Loos, & Epstein, 1992, p. 350). Often, teachers, parents, and school psychologists assume that there is a problem to be diagnosed through the use of instruments, such as intelligence and processing tests, designed to examine and describe the student. They seek answers to questions about whether, for example, the child has an Attention Deficit Hyperactivity Disorder or is learning disabled, not recognizing that the very questions asked and instruments used frame the type of problem that can be found. In IC, a different set of values and perspectives guide the process, based on an ecological view of problem construction. These assumptions guide the use of an ecological problem-solving process, addressing teacher concerns about students in their classrooms: (a) the school’s mission is to support learning, not sort learners; (b) support should be provided at the classroom level; (c) the focus is on the instructional triangle, not just the student; and (d) embedded professional development is best practice.

School’s Mission is to Support Learning

As schools increasingly move away from sorting and sifting students to accountability for academic outcomes, school psychologists have a valuable contribution to make at the classroom and system level rather than serving as the gatekeeper for special education. IC is not, in the usual sense, a prereferral model, since the primary goal of IC is to enhance learning rather than to focus on whether the student should be considered for or will require special education. When response to intervention is interpreted within the revision of IDEA as a problem-solving approach to finding the most effective way to enhance student learning within the classroom, IC can be considered a response-to-instruction approach.

Support at the Classroom Level

Given that the mission of IC/IC Teams is to support learning in the least-restrictive environment, it follows that support at the classroom level is a core value. Evidence confirms that early intervention and prevention for both academic and behavioral concerns are more effective and preferable to waiting until the problem requires intervention at more intensive levels. This is appropriate, moreover, “for children of any race or ethnic group, and children with or without an identifiable ‘within-child’ problem” (Donovan & Cross, 2002, p. ES-5), and this support should be provided within the setting in which the concerns first appear, beginning with the classroom. Thus, the teacher is a critical resource in enabling students to close gaps in achievement or behavior. As such, consultee-centered consultation that enhances teacher knowledge and skills is at the core of the IC model. It should also be noted, however, that IC is a problem-solving approach that has also been used by special education teachers and specialists for students who have been designated for
services but about whom teachers still have concerns. For example, in one recent case, a teacher of a self-contained class for students with autism was able to work with an instructional consultant to resolve a concern. As in all cases, the focus of the service is to enable the staff to support the students more effectively.

**Focus on the Instructional Triangle**

When a student is experiencing academic problems, the focus is on the interactions between the student’s entry-level skills, the instructional design or format, and the actual task with which the student is presented, rather than a search for an internal deficit within the student. The concept of the instructional triangle (see Figure 1) is in contrast with the traditional assessment paradigm that focuses predominantly on the student’s characteristics. When assessment addresses student characteristics, the target is alterable learner variables (Bloom, 1976), such as the prior knowledge of the student, rather than IQ test scores. When the presenting concern of the teacher is behavior, the IC process includes an evaluation of whether students are able to engage successfully with classroom tasks and instructional methods, since behavior concerns are often the effect of student–task mismatch.

Teachers operationalize curriculum objectives into classroom materials and tasks, and their expectations for the students in their classroom are based on their evaluation of student work on these materials and tasks. Students who are unable to complete the work successfully are considered to be at risk or in need of additional support. In IC, it is not just the performance on the task but the gap between the task and the learner’s skills that is assessed, requiring an instructional assessment. (The term instructional assessment has now replaced the former label of curriculum-based assessment; see Gravois & Gickling, chapter 30, vol. 2). An instructional assessment enables the teacher to gain an understanding of what skills the student has and where the student can enter the curriculum at an instructional level. Improving the match between the learner skills and the task is the goal, so that the student can engage successfully with the material.

The instructional assessment method used by instructional consultants differs from curriculum-based measurement (CBM) in several ways. Screening and monitoring students using CBM does not target the specific learning needs of the students, so decisions based on a CBM can continue to reflect poor instructional matches unless additional assessments are done. For example, screening students for reading problems using fluency measures or instruments measuring level of skill is not sufficient to determine the specific academic needs of the student. Screening should be followed by an instructional assessment in the tasks that the student is expected to master in order to ensure an instructional match. Without the specificity of an instructional assessment on entry-level skills, implementing even an evidence-based program may not result in student progress if the level of the materials and instruction is not matched to the students’ instructional levels.

The third point of the triangle is the instructional and management strategies that are implemented. Because IC is a consultee-centered consultation model that focuses on building teacher knowledge and skills, it provides an opportunity to introduce evidence-based interventions to the teacher through the collaborative process and to support teachers in their use. The instructional consultant combines knowledge of evidence-based interventions with the capacity to support teachers in their implementation. There is growing recognition of how difficult it is to move interventions from research to practice, and consultee-centered consultation is viewed as one way to address this concern (Rosenfield, 2000).

If classroom instruction is not affected by the consultation process, the student loses the benefit of productive engaged time in the classroom setting. Sending the student for interventions outside the classroom, without affecting and coordinating the instructional methods within the classroom, can result

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**Figure 1. The instructional triangle.**

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STUDENT

Match = Success

INSTRUCTION  TASK
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*Note. Source: Gravois, Rosenfield, & Gickling, (2006).*
in overloading the student with multiple tasks. What is equally problematic is that some portion of the tasks might not be at the instructional level. Further, valuable instructional time is lost as the student moves back and forth between instructional settings. Thus, IC emphasizes developing a good instructional match for the student in the classroom setting.

**Embedded Professional Development**

Building support at the classroom level also means that teacher professional development is a key aspect of the model. Current best practice in professional development values creating learning communities for teachers as a prerequisite for building learning communities for students. However, the learning community must also embed best practice (Benn & Rosenfield, 2005). Supporting teacher-reflective activities enables teacher skills to grow and improve student outcomes (Rosenfield et al., 2008). Referrals by teachers are viewed by instructional consultants as venues for teachers to consult and collaborate with colleagues about the problems of practice. As schools move away from sorting and sifting students to enhancing outcomes for all students, learning communities are increasingly viewed as important investments for school staff.

**BEST PRACTICES**

Conducting IC requires skill in the essential components of the process. The essential components include the capacity to build a collaborative working relationship, requiring effective use of communication skills, and to complete the steps of the problem-solving stages that comprise the process. Best practice of the IC Team requires attention to team maintenance and work functions. Finally, best practice requires that implementation be addressed, including training to facilitate integrity of implementation, and program evaluation to ensure that the model has both been implemented and has an evidence base. These aspects of IC/IC Teams are described in this section.

**Core Components of Instructional Consultation as a Process**

Three components are central to the IC process of the IC Teams model: (a) the relationship between the consultant and consultee, based in part on effective communication skills; (b) the stages of problem solving; and (c) the assessment and intervention strategies to address learning and behavior problems.

**Consultation Relationship**

IC Teams, unlike most other team problem-solving models, is composed of both a case management and a team structure. Although IC Teams involves a multidisciplinary school team, the consultation process itself begins at the dyadic level between a teacher and a consultant, termed a case manager in IC Teams. At the center of the case management structure is a dyadic consultant–consultee relationship, essentially an “interchange between two or more professional colleagues, in a nonhierarchical relationship, working together to resolve a problem” (Rosenfield, 1987, p. 21).

Establishing a collaborative relationship between the case manager and teacher is core to the IC process. The relationship provides a space for teachers to reflect on their practice in a supportive environment and opens the possibility for them to examine the instructional environment for the student who has brought them to the table. For example, in a recent consultation case, a skilled and caring teacher was able to reflect with the consultant on her interactions with a child. She could comment at the conclusion of the process on the benefit of the interaction in reframing her understanding of the problem and her own part in both creating and resolving the concern that brought her to the problem-solving process. In front of a team there is often not the time to build this supportive environment for a teacher to be reflective, nor time to engage fully in all the steps of the problem-solving process. When case management is not available, there is often a press to develop interventions in the time allotted at a team meeting for any individual case. Teams may move too quickly to the intervention stage without adequate attention to definition and analysis of the problem.

Thus, building a working relationship is critical in IC because of the ecological focus and the focus on supporting the teacher. Teachers are informed from the beginning about the instructional triangle, making it clear that the process directly involves the nature of the teacher’s work with the student. Without a working relationship in place, it would be difficult to examine and change the curricular, assessment, instructional, and management issues that will surface during the process.

The relationship in IC is collaborative, with the partners working shoulder to shoulder to resolve the concerns of the consultee rather than the consultant shouldering the problem. A working relationship is also one that allows the consultant and consultee to continue
to work shoulder to shoulder in the face of potential differences that may arise in how the problem should be conceptualized and the intervention implemented. The consultant is, however, responsible for monitoring the quality of the relationship. Since the consultant is also responsible for ensuring that the stages of the problem-solving process are completed with integrity, a solid working relationship enables difficult situations to be negotiated. For example, consultation skill is required to work through the temptation to rush to intervention without a complete problem identification and analysis.

**Communication Skills**

The consultant’s communication skills are essential to the quality of the relationship, as consultation is largely conducted through verbal exchanges (Rosenfield, 2004). It is through dialogue that the problem and solution are coconstructed. Skilled consultants are aware how much their language affects the relationship and problem solving, and develop skills in using language to facilitate the process. Instructional consultants-in-training are asked to tape their sessions with teachers. In listening to themselves on these tapes, many novice consultants recognize for the first time that the teacher’s willingness to collaborate on problem solving is, in part, a function of the verbal interchanges during the sessions. Thus, attention needs to be paid to the quality of the consultant’s communication and to examine the language used when problems arise in the problem-solving process.

**Defining the problem in behavioral terms.**

One of the key roles of the consultant is to support the teacher in constructing a problem definition that the teacher views as connected to the concern but that is also potentially resolvable within the classroom. If the teacher views the problem as an attention or memory deficit, the consultant helps the teacher to reframe the concern in terms of what the child is actually doing in the classroom to generate that perception. When a problem is defined in terms of learning and behavior rather than child deficit language, the teacher is more empowered to address the problem within the classroom (Rosenfield, 1987; Tombari & Bergan, 1978).

For example, a teacher brought a case to the consultant for problem solving because of concerns about a child’s lack of work completion and poor handwriting. The teacher and parent had viewed the child as having poor motor skills. They were trying to find a computer for use in the classroom and were considering occupational therapy for the child. Using communication skillfully, the consultant helped the teacher to develop a behavioral definition of the concern in terms of the student’s handwriting skills. An instructional assessment of the child’s handwriting revealed that he had difficulty forming his letters and was left-handed. He had never been taught to write as a left-handed person. The intervention included implementing an evidence-based program for handwriting and teaching him to write with strategies designed for left-handed students. The student’s handwriting improved, and as he became more fluent, his work completion increased. As the child became more successful, the teacher’s relationship with the child improved as well. Further, as a consultee-centered consultation process, the teacher now had a method for improving handwriting in the classroom and knew how to teach left-handed students to write. No out-of-classroom interventions were required. Through co-constructing a behavioral definition, the focus of the problem was changed.

**Listening skills.** Communication strategies that are particularly useful in IC, and likely familiar to school psychologists from the helping skills literature, are listening skills such as clarifying, paraphrasing, and perception checking (Rosenfield, 1987, 2004). Without using such skills, consultants may develop and pursue hypotheses about problems based on their own interpretations rather than working collaboratively to understand the teacher’s perception of the problem. In other words, consultants direct their questions to refining their own hypotheses rather than helping teachers to frame their concerns at the observable and measurable level. For example, if teachers say that they think the child has an attention deficit disorder because of the lack of work completion, school psychologists with a deficit model orientation will begin to frame questions to explore that possibility.

On the other hand, an instructional consultant is more likely to look for conditions under which work is completed or not, and whether the work is at the instructional level of the student. To explore the problem from the teacher’s perspective, the instructional consultant would use listening skills, such as clarification, to specify the behavior that the teacher observes that leads to the inference that the student has an attention deficit disorder. The consultant would also check on the academic skills of the student with respect to the work in question, using clarifications and paraphrases to be sure that the consultant and consultee are congruent in their understanding of the behavior. Some preliminary
research suggests that experienced instructional consultants use more clarification than novice ones (Benn & Rosenfield, in press).

Early in their training, novice instructional consultants often find the focus on using clarification and paraphrasing irritating, believing that it is time consuming and does not get them anywhere in diagnosing the “real” problem. With increasing practice, however, they come to recognize the value of communication skills and become more automatic in their use. Such skill development, however, does require specific attention to the language used in consultation, including taping sessions and feedback from supervisors or peers.

**Problem-Solving Stages**

The consultant and consultee collaborate to conduct a set of structured problem-solving stages. Each stage has specific tasks that need to be completed before moving on to the next stage. Without the scaffold of the stages and the work that each stage requires, many consultation interactions lack focus and accountability. Conversations with teachers in the hallway and in other informal settings are typical regularities for school psychologists, but such interactions are a limited vehicle for best practice in instructional consultation.

The stages of IC problem solving are (a) entry and contracting, (b) problem identification and analysis, (c) intervention design and planning, (d) intervention implementation and evaluation, and (e) closure. While the stages are linear, in that the business of each stage must be conducted before moving on to the next one, at any time it might be necessary to move back to an earlier stage. For example, a teacher may express concern about some aspect of the consultation process, and it might be necessary to re-contract, to determine if the teacher is clear about the process or committed to continuing, or if additional information in the intervention stage might require a new analysis of the problem (i.e., the problem identification stage may be need to be re instituted). The stages are similar to those of behavioral consultation, but there are differences as well. Because these stages are so central to IC, a brief description of each stage follows.

**Entry and contracting.** Introduction of IC and IC Teams is done at two levels, to the school through entry and to individual teacher consultees through contracting. In entry, the school community is provided a basic awareness of IC/IC Teams as a component of the school psychologist’s service delivery. Presentations at staff meetings and written materials, including brochures and newsletters for teachers and parents, are common formats for this process. During this stage, information about referral procedures is disseminated so that staff can easily access consultation services; a simple one-page request for consultation with an indication of when the teacher is available to meet enables staff to access the process. When IC is introduced to a school district, systems-level entry is also advised (see Rosenfield & Gravois, 1996, for additional information).

However, no group presentation or written material about IC absolves the instructional consultant from the requirement of contracting with the individual consultee to obtain informed consent from the consultee to engage in the process. Contracting informs the consultee about the collaborative nature of the consultation relationship and the stages of the problem-solving process. The consultee can then make an explicit decision about whether or not to engage in the problem-solving process. This stage can be especially important for school psychologists, as the teacher may not really be clear about what is involved and may expect the school psychologist to test the student in the more traditional direct service paradigm.

The information that the consultant presents about IC during contracting includes the following:

- Informs the consultee about the stages of the problem-solving process
- Explains the instructional triangle (with its focus on alterable student variables, instructional methods, and tasks in the classroom)
- Clarifies the collaborative nature of the relationship
- Discusses time involvement
- Explains data collection that is typically involved
- Introduces the Student Documentation Form, the form that is used to guide and document the process (see Figures 2–4 in Appendix)
- Discusses the limits of confidentiality and the nonevaluative nature of the process (before engaging in consultation, it is critical for the consultant to clarify the school/school district policy on student and teacher confidentiality, so that the teacher can be accurately informed)
- If there is an IC Team in the school, discusses the function of the team in relation to the consulting process
- Concludes with a joint decision to move forward, including scheduling time and place, or concludes with a joint decision not to move forward but to leave the door open for a possible later collaboration
**Problem identification and analysis.** Once the consultant and consultee agree to move forward with problem solving, the problem identification and analysis stage begins. Although the consultee’s initial description of the concern serves as a starting point, and is captured on front page of the Student Documentation Form, it is assumed that the participants will coconstruct the problem through their dialogue and data collection. A problem meaningful to the participants and respectful of their perspectives emerges from this stage. The problem will be framed in terms of the gap between current and desired performance and is defined in relation to the instructional triangle.

Communication skills play a major role in problem construction. The consultant avoids diagnostic and clinical jargon, focusing instead on the presence or absence of behaviors that led the teacher to decide that a referral was needed. Since speakers attune their concerns to their listeners (Rosenfield, 2004), teachers may focus when speaking to school psychologists on disorders such as attention deficit rather than academic concerns or specific classroom behaviors. Teacher concerns are reframed from initial, often high inference within-child concerns to specific behaviors within the ecology of the classroom that teachers feel more empowered to intervene.

The work of this stage is often completed over several sessions, depending upon the information that the consultee brings to the session and the complexity of the concerns. This work is done at the dyadic level rather than at the team level for several reasons. The quality of the assessment information obtained by teams is often fairly limited, a function of their time constraints, and not useful in providing data for setting specific goals or targeting interventions in relation to student instructional needs. Moreover, the dyadic consultation model allows teachers time to reflect on the problem within a collaborative relationship.

The following tasks are required to complete the stage: (a) specify the teacher’s concerns in observable and measurable terms, defined as a gap between current and expected performance; (b) select a data collection method and establish a baseline with at least three data points; (c) identify the context of the problem within the instructional triangle; (d) decide if the gap is significant and requires intervention; and (e) establish short, intermediate, and long-term goals for the student.

Assessment strategies, usually instructional assessments and behavioral observation, are designed to supply information about the student’s entry-level skills or behaviors, the task, and the instructional/management strategies in use. An essential aspect of IC is the requirement that an instructional mismatch be ruled out even when the teacher’s presenting concern is behavior. That principle is based on the assumption that students who are working at frustration level in the classroom instructional setting can be prone to behave inappropriately as well. For example, even if the teacher’s initial concern is a student’s lack of work completion or constant annoying of other students during reading lessons, the first hypothesis to be explored is the appropriateness of the reading tasks assigned in relation to the student’s skills. Instructional assessment helps to identify whether a mismatch is present.

Instructional assessment is “a system for determining the instructional needs of a student based upon the student’s ongoing performance within existing course content in order to deliver instruction as effectively and efficiently as possible” (Gickling, Shane, & Croskery, 1989, pp. 344–345). According to Stiggins and Conklin (1992), many “teachers either do not take the time or do not know how to make good use of assessment in presenting instruction, in evaluating it, and in making it more effective and meaningful” (p. 148). As a result, instructional assessment is a valuable tool in this stage. The five basic instructional assessment questions are:

- What does the student know?
- What can the student do?
- What does the student think?
- How does the student approach what he or she is unsure of?
- What can the teacher do next?

School psychologists are typically skilled in behavioral observation techniques, which are also tools for the instructional consultant. However, the IC process provides teachers working with instructional consultants opportunities for reflecting together on designing an observation in relation to the teacher’s concern and jointly interpreting the data gleaned from the observation. Data gathered through the collaborative interactions between teachers and consultants during the problem identification, and later the implementation stage, may help teachers gain a more objective perspective on the concern and better value the data gathered.

The Student Documentation Form (see Figures 2–4) serves several functions during the problem identification stage. The front cover of this four-page document provides a place for up to four initial statements of concern, a checkmark to ensure that instructional match
has been evaluated, the behavior that will be addressed, and short/intermediate/long-terms goals, with a timeline for achieving the goals. Inside the form are two graphs on which baseline and later intervention data can be entered for two concerns (additional graphs can be added on separate sheets). Technical perfection in data collection may not be achieved, but over time teachers and consultants seem to develop a healthy respect for the process. They also recognize that the graphing of this case-specific data is valuable to their decision making.

**Intervention planning.** Jointly planning the intervention, based on the problem definition, is the next stage. The specificity of the IC problem definition process enables a targeted intervention. Sometimes this stage is easily completed. Teachers often can plan an intervention in their classroom once the initial problem that seemed unsolvable at the classroom level has been reframed through the problem identification and analysis stage. If the instructional assessment results document that work is not at instructional level for a student who was referred for being off task much of the time, then the intervention is targeted to developing tasks that better match the student’s skills rather than focus on the behavior. Alternatively, collaborating with the teacher to clarify that a reading problem is a problem with comprehension skills might provide an opportunity for the teacher to learn new empirically supported strategies to teach comprehension to the target students and others in the classroom. Such strategies can then be tailored to fit that teacher’s classroom context.

This stage is completed when the details of the intervention are described and the intervention is perceived as do-able by those responsible for implementation. The following questions must be answered:

- What is the description of the strategy?
- When and how often will it be implemented?
- Who will implement the intervention?
- What materials are required and are they currently available? (If not, how will they be obtained?)
- What data collection methods will be used to evaluate progress toward the student’s goals?
- When will progress be monitored?

The Student Documentation Form provides a place for documenting the intervention design, including who will be responsible for the implementation.

Selecting a research-based intervention is the goal whenever possible. Research supports instructional strategies rather than interventions designed to fix processes that are deficient (e.g., Kavale & Forness, 1999). Thus, the interventions typically involve classroom personnel, including teachers, aides, and peers. Further, strategies need to be tailored to the demands of a particular classroom setting or student situation. Conditions that increase treatment integrity include ensuring that teachers have the necessary materials and that the persons designated to deliver the intervention are available.

Yet research-based interventions may still need to be modified in a particular case (Rosenfield, 2000). For example, behavioral contracting is a research-based intervention, but an effective contract may not be constructed on the first attempt. Building a student’s sight word vocabulary may require modification of the number of new words introduced per lesson or the type of reinforcement used. Instructional consultants and consultees share the understanding that intervention plans may need to be modified based on data gathered to monitor progress toward goals.

**Intervention implementation.** It is during implementation that the feasibility and effectiveness of an intervention are determined. Classrooms are complex places. The collaborative working relationship allows the consultation dyad to problem solve during the uncertainty of the treatment implementation stage. This includes resolving the inevitable practical problems that arise during implementation, coping with treatment integrity issues, and supporting data collection on the effectiveness of the intervention. Consultants should be prepared for problems in these areas rather than view them as evidence of teacher resistance or failed problem solving. Consultation sessions are typically less frequent during this stage, but meetings to evaluate progress and treatment integrity should be scheduled at regular intervals.

During this stage, data continue to be collected, and evaluation of progress toward goal attainment is monitored. As short-term goals are attained within the designated time period, progress toward longer term goals can be addressed. If goals are not attained in a timely way, treatment integrity problems can be addressed, or the intervention can be changed or modified. Sometimes there is a need to return to the problem identification stage.

**Resolution/termination.** The last stage is formal closure of the problem-solving process and the
working relationship with the teacher. Accountability requires a resolution/termination stage, culminating in a decision to continue or terminate working together. If the goals have been achieved and the problem is resolved to the partners’ satisfaction, then the achievement can be celebrated. It should be clear to the consultee that the consultation process can be reengaged should new concerns emerge.

If progress toward goals is unsatisfactory, according to the data, it may be necessary to recycle back through the stages. For example, a more clearly defined behavior or additional data collection may be needed. Alternatively, the consultant–consultee dyad can ask for support from the building-level team or other resources, including other professionals (either internal to the school or in the community), or family members. In some cases, referral to special education becomes appropriate when the resources of general education and other remedial services do not meet the instructional or behavioral needs of the student. However, labeling students does not guarantee that appropriate services will follow, and much of the problem solving done during instructional consultation helps to focus the Individualized Educational Plan team on intervention planning. Even within special education, IC can play a role in supporting teachers and students.

If the teacher decides not to continue in the relationship, formal termination of the process should occur. One hazard of consultation is that the relationship may fade away through the press of time, personal concerns (such as an illness in the teacher’s family or other major life event), unwillingness by one or both parties to confront relationship issues, or perceived or real lack of progress in resolving the referral concern(s). Explicitly addressing the reason for the teacher’s withdrawal makes it possible to terminate the process while leaving the door open for future opportunities to consult on the current or other concerns.

**Documentation**

Documentation should be incorporated into any consultation service delivery system to demonstrate accountability. While this can be handled differently at the local level, documentation should provide a brief summary of the concern, relevant assessment data, a description of the interventions implemented, and the results. A summary form with instructional and management recommendations can be prepared for the student’s next teacher. Maintaining records is important in the event of future concerns about a particular student, and outdated records should be culled when appropriate. For individual accountability, consultants should examine how many consultee concerns are successfully addressed during the school year so that they can evaluate the effectiveness of their practice and target appropriate professional development.

A central document within the IC model is the Student Documentation Form, which has been discussed earlier in relation to the stages. Part of IC training involves use of the Student Documentation Form, which structures the process and provides a document for accountability. The format was designed in collaboration with school staff that had experience in implementing IC. This four-page folder is printed on card stock. As has been noted above, the cover page (Figure 2) includes space to write up to four initial concerns, to prioritize those initial concerns, to remind the dyad to evaluate the instructional match between the student’s skills and the classroom task requirements, and to state short- and long-term goals. The inside of the form consists of two identical pages on which to provide an observable and measurable statement of the concern, to graph baseline and intervention data, and to describe the major components (who, what, when, materials needed) of the intervention design (Figure 3). The back cover of the form (Figure 4) provides space to summarize the consultation sessions and their outcomes.

The documentation process is multifaceted and comprehensive. However, fidelity in documentation is one measure of integrity in completing the steps of the IC problem-solving stages. In program evaluation of IC, the completed Student Documentation Forms enable schools to use goal attainment scaling, based on actual data on students’ progress in relation to goals set, to evaluate the effectiveness of their work. However, use of the form requires training in the instructional consultation process, and by itself does not provide all the necessary skills to conduct IC.

**IC Teams**

It is possible to adopt IC as a delivery system as an individual practitioner. However, the IC process has also been embedded in a school-wide delivery system, IC Teams (Rosenfield & Gravois, 1996). The core component of IC Teams is a multidisciplinary team, each of whose members is trained in the IC process and is expected to serve as a consultant (called a case manager in the IC Team model) to classroom teachers. The team, led by a trained facilitator,
represents major building stakeholders, including regular education teachers, administrators, special educators, and pupil services staff. The team meets weekly to assign new cases, monitors case progress, discusses cases that are not making progress, engages in embedded professional development, and attends to maintenance activities, including team evaluation. Team members do the majority of problem-solving work in dyadic consultation sessions with teachers separate from the team meetings. The rationale for using a case management system is that team meetings provide insufficient time for the work of the problem-solving stages; further, the large team meetings are not conducive to building high quality working relationships with teachers. However, the team can provide consultation to the teacher–consultant dyads when they need additional support or are not able to make progress at that level.

IC Teams have been implemented in multiple types of schools, geographically and demographically (urban, suburban, rural, and with different ethnicities; see Rosenfield et al., 2008, as well as www.icteams.umd.edu for updated information on school sites). Although IC Teams have been implemented in middle and high schools, elementary schools have been the site of most implementations. When implemented in secondary schools, case management with individual teachers appears to be more effective than grade-level meetings for similar reasons to their effectiveness in elementary schools. However, research on secondary school models and outcomes are in progress to examine how best to provide services at this level.

**Training**

Bringing an IC Team from initiation to implementation to sustainability within the school requires adherence to principles of school change; those principles are more fully described elsewhere (Rosenfield & Gravois, 1996). However, one critical component of effective implementation of IC Teams is comprehensive training (Gravois, Knotek, & Babinski, 2002; Rosenfield, 2002). An intensive training program has been designed to enable team members to grow from novice to competent consultants. Additional training is provided to team facilitators, who must acquire not only competence in the instructional consultation process but also skill in team facilitation (Rosenfield et al., 2008).

A team can be brought into operation when there is a skilled IC facilitator to lead it. One competence required for facilitators is skill in case management. Each aspiring team facilitator attends a 20- to 24-hour IC training institute and is then coached through a consultation case. Novice facilitators tape each consultation session of their first IC case in a school and then send the tapes to a coach. The coach responds by e-mail, using a structured coaching process. After developing basic IC skills, the facilitator-in-training received an additional 2-day institute in the skills of facilitation, including school change issues. Facilitators then attend a training institute with their teams. The facilitator guides team members through the problem-solving stages of IC with practice cases in their home school (see Rosenfield et al., 2008, for additional information about coaching and team training).

**Program Evaluation**

Program evaluation is integrated into every step of IC Team implementation. Training is evaluated for skill development of participants. Treatment fidelity of the IC process and team functioning is measured by the Level of Implementation Scale (Fudell, 1992), as revised by Rosenfield and Gravois (1996). Outcomes are also assessed for a variety of variables, including increases in professional collaboration, application of assessment and instructional practices, positive student behaviors, academic achievement, and decreases in inappropriate referrals for special education, especially for cultural and linguistic minority students. A review of the research and development of IC Teams is found in Rosenfield et al. (2008), and the impact on disproportional placement of minority students in special education is presented in Gravois and Rosenfield (2006).

**Role of Parents in IC**

A frequently asked question is the role of parents in the IC Team problem-solving process. An IC Team is based on consultee-centered consultation principles, and a major focus is on building the skills and knowledge of teacher consultees so that they can more fully support student growth. School staff are encouraged to view consultation as providing an opportunity for teachers to reflect on their practice and obtain support for improving aspects of the instructional triangle in their classroom, not just with the student whose concerns bring the teacher to the process, but with other students with whom the teacher works. Building a working relationship so that teachers feel comfortable in examining their practice is more difficult when parents, whose major concern is naturally their own child's progress, are present.
In most cases, communication with parents remains the function of the classroom teacher. As a result of engaging in the IC process, teacher–consultees can base their discussions with parents on specific academic and behavioral goals, have useful data to share, and may have introduced instructional modifications matched to the student’s skill level. With these specifics in place, teachers report being able to provide recommendations to parents that are based on data. In some cases, for example, family members are able to provide additional structured practice activities that support the classroom interventions.

SUMMARY

IC is an early intervention, stage-based problem-solving process based on consultee-centered consultation principles. The purpose is to enhance teacher capacity to use data-based decision making and evidence-based interventions to address student academic and behavioral concerns in the classroom. Ecological assumptions are the foundation, leading the problem solving to focus on the instructional triangle of alterable student variables, instructional tasks, and instructional design. Variables taken from the instructional triangle are assessed to determine if there is an instructional match that facilitates student learning and if there is a gap between the student’s current and expected performance that requires intervention. Evidence-based interventions are implemented if a gap exists. Data are used to evaluate progress and make decisions about additional resources needed, including those of special education in some cases.

In order to function as an instructional consultant, school psychologists must be comfortable with the ecological assumptions that sustain the model. They need skills in collaborative problem solving, including building a working relationship with the teacher and good communication strategies. The consultation process involves specific stages of problem solving, each with its own tasks. The stages include entry and contracting, problem identification, intervention planning, intervention implementation, and resolution/termination. When the concern has not been resolved, the stages can be recycled or additional resources accessed. Instructional consultants are competent in instructional and behavioral assessment and intervention, including the domains of instruction and classroom management.

Data-based decision making is a core component of instructional consultation, and documentation of the process is critical for accountability. The Student Documentation Form provides a format for this process, and also helps to structure the problem-solving stages. The form is integrated into program evaluation of the effectiveness of IC Teams (Gravois & Rosenfield, 2002).

The IC Team model was developed to provide a structured school-based service delivery system. Although case problem solving with teachers continues to be implemented at the dyadic level, the team serves other functions. The multidisciplinary team, led by a skilled facilitator, includes stakeholders that represent administration, regular and special education, pupil service staff, and others as determined by the school leadership. The team provides opportunities for embedded professional development of team members, for working on cases that have not made progress in the case-based consultation process, for examining schoolwide problems that individual cases may highlight, and for evaluating the effectiveness of the implementation.

Research on the IC process and the IC Team has been largely based on program evaluation as the model has been developing since the 1980s (see Rosenfield et al., 2008, for the most updated review). Research and development of training, technical assistance, fidelity of implementation, and outcomes have led to current best practices on IC Teams. Outcome research has documented the effect of IC Teams on teacher satisfaction and professional development, student goal attainment, and special education referrals and placements, including the effect on disproportional placement of minority students in special education (Rosenfield et al., 2008). An experimental study, funded by the Institute for Education Sciences, is underway to evaluate experimentally the model of IC Teams.

IC Teams is congruent with Blueprint III domains, tiers, and outcomes. IC brings school psychologists into contact with teachers for the purpose of enhancing academic and behavioral outcomes for students within their classroom. There is an emerging evidence base, including demonstrating that IC Teams can be scaled up for use in schools in different geographic and demographic settings. Implementing IC Teams in schools has enabled many school psychologists to move from a narrow psychometric role connected to special education classification to a one that has an impact on the positive development of both teachers and students.

REFERENCES


**ANNOTATED BIBLIOGRAPHY**


Provides an extended description of the IC process, including the assumptions, the communication skills, and the stages, that are presented in this chapter.


The structure and implementation of IC Teams are presented. Includes forms useful for implementation of IC and IC Teams, as well as a copy of the Level of Implementation Scale–Revised.


Provides a history of the development of the IC and IC Teams model, including the conceptual framework, the components of the model, and the research documenting the process and the outcomes.
## APPENDIX

**Figure 2. Student Documentation Form, cover page.**

### INSTRUCTIONAL CONSULTATION STUDENT DOCUMENTATION FORM

<table>
<thead>
<tr>
<th>Student's Name</th>
<th>Grade</th>
<th>Date of Birth</th>
<th>Date Started</th>
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<tbody>
<tr>
<td>Teacher's Name</td>
<td>Case Manager</td>
<td>School</td>
<td></td>
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</tbody>
</table>

### GOAL ATTAINMENT SCALE (GAS)

|--------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------
| | | Date collected | Date collected | Date collected | Date collected |
| | | | | | |
| | | Date consistently attained | Date consistently attained | Date consistently attained | Date consistently attained |
| | | | | | |
| | | Date consistently attained | Date consistently attained | Date consistently attained | Date consistently attained |
**Operational Definition of Academic/Behavioral Performance:**

<table>
<thead>
<tr>
<th>Priority #</th>
<th>Key</th>
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What specific academic/behaviors will be recorded?

When will the behavior be recorded?

Where will the behavior be recorded?

**Baseline (Step 3)**

<table>
<thead>
<tr>
<th>Describe intervention design and materials</th>
<th>When and how often?</th>
<th>Persons responsible?</th>
<th>Motivational strategies?</th>
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</table>
Figure 4. Student Documentation Form, back cover.

<table>
<thead>
<tr>
<th>Date</th>
<th>Summary of Meetings</th>
<th>Follow-Up Activities</th>
<th>Next Meeting Date and Time</th>
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