Perceptions of Consulting in Inclusive Preschool Classrooms

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PERCEPTIONS OF CONSULTING IN INCLUSIVE
PRESCHOOL CLASSROOMS

by

Natalie E. Forsythe

A thesis submitted in partial fulfillment
of the requirements of the degree

of

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in

Special Education

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ABSTRACT

Perceptions of Consulting in Inclusive Preschool Classrooms

by

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Utah State University, 2020

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Department: Special Education and Rehabilitation

The study examined consultants’ and consultees’ perspectives of consulting, a method sometimes used to deliver services to students with disabilities in inclusive preschool classrooms. Consultants (early childhood special education teachers, speech-language pathologists, occupational therapists, and physical therapists) and consultees (lead and assistant preschool teachers) working in inclusive preschool classrooms in a large Utah school district completed a survey eliciting their perceptions on consulting, including their definitions of the consulting role and factors they believed to be most important in building successful consulting relationships. Participants’ answers to survey questions were analyzed and grouped into themes. There were similarities between consultants’ and consultees’ descriptions of the role of consultants, including assumptions that consultants should work directly with students in the classroom. Consultants and consultees agreed that they have a positive consulting relationship and that the consultants are effective; however, consultant and consultee survey responses emphasized a need for respect within the consulting relationship.
Consulting is a method of delivering special education services in inclusive preschool classrooms (consisting of both students with disabilities and typically developing peers) where special education teachers and related service providers (consultants) visit the classroom and support general education preschool teachers (consultees) in implementing special education services and accommodations. This thesis examined the results of a survey gathering perspectives of both consultants and consultees on the definition of the consulting role and factors in building positive consulting relationships. Providers from both groups who responded to this survey defined the consultant role as working with both students and consultees, but primarily with students. Consultants gave responses calling for additional training and understanding of the consultant role, and consultees emphasized a preference for consultants to be actively involved in the classroom. While consultants and consultees agreed that they have a positive consulting relationship and that consultants are effective in supporting students and consultees, both groups also frequently mentioned a need for establishing a respectful relationship between consultants and consultees.
## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abstract</td>
<td>iii</td>
</tr>
<tr>
<td>Public Abstract</td>
<td>iv</td>
</tr>
<tr>
<td>Contents</td>
<td>v</td>
</tr>
<tr>
<td>List Of Tables And Figures</td>
<td>vi</td>
</tr>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Literature Review</td>
<td>4</td>
</tr>
<tr>
<td>Method</td>
<td>11</td>
</tr>
<tr>
<td>Results</td>
<td>17</td>
</tr>
<tr>
<td>Discussion</td>
<td>27</td>
</tr>
<tr>
<td>References</td>
<td>36</td>
</tr>
<tr>
<td>Appendix. Survey Questions</td>
<td>39</td>
</tr>
</tbody>
</table>
LIST OF TABLES AND FIGURES

Table 1  Frequency and Perceived Importance of Consultant Activities…………………………33

Figure 1  Selections by Consultants and Consultees as Activities to Be

Provided…………………………………………………………………………………………..35
Inclusive preschool (age 3-5) classrooms, consisting of both children with disabilities and their typically developing peers, are recommended by the Division of Early Childhood and the National Association for the Education of Young Children (DEC/NAEYC, 2009), in part because of the benefits that inclusive classrooms bring to all children. Inclusive classrooms are associated with increased cognitive, language, literacy, and social skills for children with disabilities, as compared to segregated classes (Green et al., 2014; Nahmias et al., 2014). For children without disabilities, being in an inclusive classroom is associated with increased emotional understanding and with more positive attitudes towards children with disabilities (Lawrence et al., 2016).

Despite the benefits of inclusive classrooms, there are also challenges to implementing an inclusive preschool program, including: ensuring program quality; determining personnel and fiscal/contracting policies; and arranging student transportation (Barton & Smith, 2015). Barton and Smith found that the biggest perceived challenge to implementing inclusion in preschool programs was in the area of teacher attitudes and beliefs. Specifically, administrators were concerned about a lack of collaboration between general education and special education staff, children not getting the services or attention they need, and teacher preparedness to work in inclusive settings. These results have been replicated in other studies where early childhood teachers (including those with high levels of education and experience) have reported that they feel unprepared to meet the needs of children in inclusive classrooms (Mitchell & Hegde, 2007).

Consultation strategies can be used as a professional development model to fill in knowledge gaps for general education teachers in an inclusive preschool classroom (Mitchell & Hegde, 2007). In a consultation approach, special education and related service providers (e.g.,
special education teachers, speech-language pathologists) work itinerantly as consultants (i.e., coaches, specialists) with general education classroom teachers and staff (consultees). Itinerant consultants may visit inclusive classrooms and meet with early childhood educators to support implementation of the Individualized Education Plan (IEP) for children with disabilities, but are not in the inclusive setting all of the time. Consultative services are supported by the 2014 DEC Recommended Practices, “...to facilitate positive adult-child interactions and instruction intentionally designed to promote child learning and development” (p. 13).

Similar to the challenges associated with establishing high-quality inclusive settings, researchers have identified challenges with consulting in preschool settings. For example, professionals involved in consultative models (i.e., consultants and consultees) often lack a shared framework or common definition of consulting (Dinnebeil et al., 2001; Dinnebeil et al., 2019; Wesley et al., 2001). Consultants and consultees may have conflicting expectations of the role of a consultant working in an inclusive preschool classroom. For example, consultants tend to prefer child-directed activities such as pulling out a child for one-on-one or small group instruction (Dinnebeil et al., 2001). In contrast, consultees prefer consultants to be actively involved with the class, including training or modeling interventions for staff and teaching children alongside the consultee in the classroom rather than pulling a child out (McDonnell, et al., 2001).

ECSE teachers who work in an itinerant position often have no formal training in consultation, and may find it challenging to move away from direct service provision with children to consultative work with other adults (Dinnebeil et al., 2019). Consultants report difficulties with consultees’ lack of follow-through on suggested strategies or interventions (Dinnebeil et al.; Wesley et al., 2019) despite research with consultees indicating that the
Consultees want to be actively involved in developing interventions and teaching strategies for preschool students with disabilities (McDonnell et al., 2001).

Ineffective consulting relationships can lead to problems such as stress and decreased job satisfaction, which can then impact the quality of services provided to children (Johnston & Brinamen, 2012). Consultants may perceive themselves as having a higher status or as having a position of authority, which may not be well received by the consultee (Johnston & Brinamen, 2012). According to Green et al. (2006), a relationship where the consultant and the consultee collaborate and work together as a partnership is essential when implementing a consulting model. Consultants need to be seen as part of the team rather than as an outside expert telling the consultee what to do. Green et al. also found evidence for the importance of the consultants’ level of involvement in the classroom. They state that, “consultants who interacted more frequently with staff members and children had more positive relationships with staff members; in turn, these relationships were strongly associated with how helpful staff members perceived the consultation services to be” (p. 150).

Consultation models have been explored in a variety of settings including homes, child care centers, and Head Start (Dinnebeil et al., 2001; Dinnebeil et al. 2019; Knoche et al., 2013, Wesley et al., 2001). Despite this body of work, however, Knoche et al. suggested further research into a specific setting to enable a more in-depth analysis of consultee perspectives, such as inclusive preschools. Knowledge of the perceived benefits and disadvantages of using a consulting approach (to support the use of recommended practices for children with disabilities in inclusive settings) could help school districts and other organizations improve consulting relationships, and thus, allow teachers to provide more effective services, leading to improved outcomes for preschool children with disabilities. To date, studies examining consultative
models have primarily focused on gathering perspectives of either consultants (e.g., Dinnebeil et al., 2001; Dinnebeil et al., 2019; Wesley et al., 2001) or consultees (e.g., Knoche et al., 2013; McDonnell et al., 2001). This study expands knowledge of consulting in two ways—first by focusing on inclusive preschool settings, and second by including perceptions of both consultants and consultees.

**Literature review**

I reviewed six studies that reported on provider and/or caregiver perspectives on the role of a consultant in early childhood special education, and the perceived challenges and successes of using consulting to provide services to students with disabilities in a variety of settings. Three of the studies reviewed below obtained perspectives of consultants, including itinerant ECSE teachers, early childhood mental health consultants, and a small number of speech-language pathologists, physical therapists, and occupational therapists. Each study had a portion of participants working in inclusive preschool classrooms providing services to students with disabilities. Two additional studies gathered perspectives from participants who either were caregivers in the home or worked with families (Knoche et al., 2013, Wesley et al., 2001). Only one study gathered perspectives from both groups (Green et al., 2006), and this study focused only on mental health providers rather than other itinerant special educators. Five of the six reviewed studies used surveys or questionnaires to obtain their information. One study (Knoche et al., 2013) interviewed the participants in addition to sending them surveys, and one study (Wesley et al., 2001) conducted focus groups with their participants.

**Perspectives of Consultants**

*Dinnebeil et al. (2001).* Dinnebeil et al. (2001) developed a questionnaire for itinerant preschool special education teachers with 19 questions about the frequency with which the
consultants used particular activities in classrooms when consulting with early childhood educators, such as providing one-on-one instruction to students or modeling interventions for classroom teachers. The questionnaire also asked the consultants to rate perceived effectiveness of the activities and their comfort level performing each activity. The researchers sent this questionnaire to 327 ECSE itinerant teachers in a midwestern state and received 229 responses.

The activities listed in the questionnaire were divided into two categories: child-directed and teacher-directed. Child-directed activities consisted of instruction delivered directly to students, such as one-on-one instruction or small group instruction, while teacher-directed activities included consulting, demonstrating, and providing written materials to the classroom teacher. Dinnebeil et al. (2001) found that itinerant teachers were more likely to rate that they were comfortable with the child-directed activities than the teacher-directed activities, and reported higher frequency of performing child-directed activities. The authors argued that with the limited amount of time itinerant ECSE teachers have to spend with children (as compared to the classroom teacher), consultants’ time would be better spent providing training to the early childhood classroom teachers, who spend more time with the children and are less likely to have adequate background knowledge in special education. The authors also pointed out that the definition of the term “consultation” in ECSE is unclear, and different itinerant teachers may have different ideas of what consultation means, which not only leads to ambiguity regarding the role of the itinerant teacher, but also could be a limitation of the study, as the term “consultation” was used in the questionnaire.

Wesley et al. (2001). Wesley et al. (2001) also gathered perspectives from consultants providing services to students with disabilities ages birth to 5 years; however, rather than using questionnaires like the other reviewed studies, Wesley et al. (2001) ran focus groups with
professionals \((n = 86)\) in early childhood special education programs \((54\% \text{ of participants})\) and families in homes. In these focus groups, researchers asked professionals about the factors that contributed to their comfort or discomfort when acting as a consultant.

The researchers coded and categorized the participants’ responses to open-ended questions. Upon further examination of the data, the researchers detected that, as also mentioned in Dinnebeil et al. (2001), the participants did not have a shared conceptual framework on the process of consulting, especially when working in early childhood programs \(\text{ (compared to those working with families in homes)}\). Wesley et al. (2001) also concluded that the consultants lacked training on how to build relationships with consultees and elicit their participation in the consulting process. The authors mention that “although consultants at times spoke of ‘collaboration’ and ‘being a diplomat,’ they described telling consultees what to do and then being frustrated by their lack of follow-through” (p. 122).

Dinnebeil et al. (2019). In order to gain more information about the challenges consultants face when collaborating with other early childhood educators, Dinnebeil et al. (2019) administered a survey with 28 closed-ended and 2 open-ended questions to 277 itinerant ECSE teachers in Ohio. Based on the 117 responses they received, Dinnebeil et al. (2019) identified challenges that fell under six themes: logistics; caseload; confidence and competence; characteristics of teachers, parents, and programs; access to supports and resources; and meeting the needs of specific children.

Dinnebeil et al. (2019) were particularly concerned about the challenges consultants reported regarding working with others, as these challenges are “difficult to address and can have more serious implications for the quality of services young children receive” (p. 26). Similar to the findings in Wesley et al. (2001), Dinnebeil et al. (2019) found that consultants reported
facing challenges with consultees who seemed resistant to working with the consultant or did not follow through on suggested interventions. The authors pointed out that general early childhood teachers often are assigned to work with a consultant, rather than entering into a consulting relationship by choice, which may have caused them to be resistant to receiving consulting. Additionally, many of the consultants who reported challenges in working with others also reported low confidence in their role as a consultant—perhaps due to many itinerant ECSE teachers receiving little or no formal training in consultation.

Dinnebeil et al. (2019) discussed the lack of a shared understanding of the terms “consultation” and “coaching”. As mentioned in Dinnebeil et al. (2001) and Wesley et al. (2001), the lack of consistent definitions for terminology in the field made it difficult to identify effective consulting practices and also made it difficult for general education teachers to know what to expect from their consultants.

**Perspectives of Consultees**

*McDonnell et al. (2001).* Three studies have considered perspectives on the consulting relationship from consultees. McDonnell et al. (2001) examined (among other research questions) the extent to which general education preschool teachers preferred to actively work with a special educator, and what role the teachers preferred special educators to take when working in their classrooms. The researchers mailed a questionnaire to a random sample of 500 general education preschool teachers working for programs accredited by the National Association for the Education of Young Children. They received 276 responses. The authors acknowledged that three-fourths of the respondents had never worked with a special educator, so many of the responses did not reflect teachers’ actual experiences.
McDonnell et al. (2001) provided teachers with a list of job descriptions for an itinerant ECSE teacher, and asked teachers to select the job description the teachers would most prefer for a consultant working in their classroom. They found that “nearly 95% of the teachers chose one of the three roles which involved having the special educator co-teach or serve as an active support specialist in the classroom” (p. 78). The job description provided to respondents for a “support specialist” included tasks such as staff training, coordinating team/family communication, and teaching children in the classroom. Very few respondents were interested in consultation only or a special educator working with students outside the classroom. The teachers also preferred to take an active role themselves when determining individual interventions and teaching plans for students with disabilities, rather than being told what to do by the special educator. These findings, when compared to those of Wesley et al. (2001), indicate a possible conflict in perspectives between the consultants and consultees, which may interfere with their ability to effectively provide services to preschoolers with disabilities.

Knoche et al. (2013). Knoche et al. (2013) studied early childhood consultees' perceived benefits and challenges of the consulting relationship, as well as changes in the consultees’ attitudes and practices that resulted from the consulting experience. Twenty-one consultees (16 preschool and childcare workers, and 3 family members) from a variety of early childhood settings (e.g., Head Start, homes, child care centers) participated in the study. These consultees worked with consultants who represented a range of experience levels and service contexts, including ECSE, early intervention, and mental health. The researchers conducted interviews with the consultees and also sent out surveys. They found that, overall, consultees viewed their consulting experience as positive. The consultees valued their consultants’ knowledge, experience, and ability to provide a fresh perspective. The consultees also valued the resources
provided by the consultant, including ideas and strategies and the consultant’s presence in the classroom, similar to findings from McDonnell et al. (2001) and Green et al. (2006).

Knoche et al. (2013) stated that the consultants who worked with the participants in their study had completed training that included a significant amount of content on building effective relationships with consultees. They found that consultees had primarily positive perceptions of their relationships with consultants. Attributes that consultees appreciated in their consultants included dependability/reliability, effective communication practices, and giving feedback. The quality of the relationship between the consultant and consultee was viewed by participants as essential to the success of the consulting relationship. A few challenges with the consulting relationship were identified, including time/scheduling difficulties, situations that caused discomfort (i.e., feelings of being watched, fear of criticism, tensions among team members), and difficulty applying strategies.

**Green et al. (2006).** Green et al. (2006) is the only study found in the search that examined the perspectives of both consultees and consultants. While there were children with disabilities enrolled in the programs included in this study, the focus was on children with emotional and behavior challenges. Green et al. (2006) surveyed 655 direct service and administrative staff from 74 Head Start programs. Eleven percent of the respondents were mental health consultants, 55% were teachers and assistant teachers, and the rest were directors, coordinators, and family advocates. Like Dinnebeil et al. (2001), Green et al. (2006) developed two categories to determine the frequency with which the consultants engaged in different activities: individual-level (child-directed activities) and program-level (staff or teacher-directed activities). The survey also asked respondents to rate the quality of the relationship between staff members and consultants, and the effectiveness of the consultation services.
The authors found that higher reported levels of both the individual and program level consulting activities were associated with an increase in staff’s perceived effectiveness of consulting overall; however, this association did not maintain statistical significance when participants’ reported perceptions of the quality of the consulting relationship was taken into account. Green et al. (2006) theorized that higher frequency of consulting activities led to better relationships, which then led to higher levels of perceived effectiveness. Researchers suggested that consultants who are more involved in the classroom and interacted frequently with staff and children had better relationships with staff, and were perceived to be more helpful. As in the study by McDonnell et al. (2001), Green et al. (2006) also stated that Head Start staff members in their study found consultants most helpful when the consultants worked collaboratively with staff, rather than coming in as an outside expert telling the staff what to do.

Most studies examining the perspectives of itinerant service providers and early childhood educators have focused on an analysis of data from one group or the other. Although Green and colleagues (2006) surveyed both consultants and consultees, they did not compare differences between the perspectives of the two groups. As mentioned above, researchers who gathered perspectives from consultants or consultees exclusively, showed differing perspectives of preferred roles and responsibilities of consultants. According to Green et al. (2006), Knoche et al. (2013), and McDonnell et al. (2001), consultees tended to prefer the consultant be actively involved in the classroom, and collaborate with the consultee to determine strategies to teach children with disabilities; whereas, consultants tended to prefer to work directly with the children on their caseload (Dinnebeil et al., 2001). As suggested by Dinnebeil et al. (2019) and Wesley et al. (2001), poor relationships and misunderstandings between consultants and consultees can lead to feelings of frustration and lack of follow-through on interventions, which may impact the
quality of services to children. A direct comparison of consultants’ and consultees’ perceptions of the consulting model within early childhood special education inclusive settings may provide a deeper understanding of possible differences in perspective, and can therefore identify potential areas of improvement in implementing the consulting model in inclusive preschool classrooms.

The purpose of this study, therefore, is to identify perceptions, from both consultants and consultees, of using a consulting model to provide services to children with disabilities in inclusive preschool classrooms. The study will address the following research questions:

1. How do consultants and consultees describe the role of a consultant in early childhood special education inclusive classroom settings?
2. What factors do consultants and consultees believe are most important in building a positive consulting relationship?

Method

Participants and Setting

Fifty-four consultants and 128 consultees working in 64 inclusive preschool classrooms in a large Utah school district were asked to participate in this study. Of these, 50 participants responded to the survey. Nine respondents were excluded from the study because they did not work in an inclusive preschool classroom (two worked only on an assessment/evaluation team, five worked only in a self-contained classroom, and two selected “other” as their role). After excluding these nine respondents, responses from 41 participants (14 consultants and 27 consultees) were included in the study.

Thirty-nine survey respondents reported being female, whereas two remaining respondents (one consultee and one consultant) reported being male. All participants (consultants and consultees) listed White as their racial background, except for one consultant who indicated
being White and having Filipino heritage. One consultant indicated being white and Hispanic. The consultants’ average age was 43.62 years ($SD = 11$, range = 27-62), and the consultees’ average age was 44.04 years ($SD = 11.06$, range = 26-61). One consultant entered an age of “60+” and one consultee entered an age of “over 60”; these responses were included as 60 in the mean calculations.

**Consultants.** The majority of consultants who participated in this survey were special education teachers ($n = 8$). Other consultants were speech-language pathologists ($n = 5$) or speech technicians ($n = 1$). Nine of the consultants had a Master’s degree and five had a Bachelor’s degree. Fields of study included Early Childhood Special Education, Speech/Language Pathology, Communication Disorders and Deaf Education, and Curriculum and Instruction. Consultants had an average of about 13 years of experience working with preschool children with disabilities ($M = 12.79$, $SD = 9.58$, range = 1-28 years), with an average of about 10 years consulting with general education preschool teachers ($M = 9.64$, $SD = 8.35$, range = 1-25 years). Most consultants ($n = 12$, 85.7%) responded that they had received training, either in schooling or within their professional practice, on providing consultative services. One consultant worked part time (17.5 hours/week), and 13 consultants worked full time. Full-time consultants spent an average of 22.62 hours a week in the inclusive preschool setting ($SD = 4.67$, range = 10-30).

Full-time consultants reported having an average of about 40 students on their caseload ($M = 39.38$, $SD = 11.17$, range = 30-64), across an average of about six classrooms ($M = 6.15$, $SD = 2.88$, range = 3-12). Consultants’ frequency of visits to each classroom varied considerably. Six consultants reported visiting each classroom once per week. Other consultants reported more frequent visits to individual classrooms – four times per week ($n = 1$) or twice per
week \(n = 5\). The frequency of visits listed by two remaining participants was determined to be invalid. Fewer consultant-consultee interactions were reported occurring outside of the classroom setting. On average, consultants reported communicating with consultees outside of the classroom about two times per week \((M = 1.98, SD = 1.27, \text{range} = .75-5)\).

**Consultees.** Eighteen lead teachers and nine assistant teachers participated as consultees in this survey. Most consultees \(n = 13\) had bachelor’s degrees, including two in early childhood special education. Other consultees had a Child Development Associate (CDA; \(n = 7\)) or other associate’s degrees \(n = 6\), and one reported having 60 hours of college credit. Twenty-five of the 27 consultees responded that they had received training, either in schooling or within their professional practice, on working with children with disabilities. Consultees had an average of 11 years of experience working with preschool children with disabilities \((M = 11, SD = 8.39, \text{range} = 1-35 \text{ years})\), and an average of about eight years of experience working with consultants in their classroom \((M = 7.93, SD = 6.05, \text{range} = 1-20)\). Most consultees \(n = 27\) responded that they worked full time \((26 \text{ and } 29 \text{ hours per week for assistant and lead teachers, respectively})\), whereas, the five remaining part-time consultees worked between 14-16 hours per week \((M = 14.7, SD = .75)\).

Full-time consultees reported teaching approximately 40 students each day across morning and afternoon sessions \((M = 39.71, SD = 7.97, \text{range} = 25-62)\). Of these, an average of about 12 students were reported as having active IEPs \((M = 11.85, SD = 7.56, \text{range} = 1-33)\). The majority of consultees \(n = 18\) reported that each consultant visited their classroom once per week, with responses varying from 10 times per year to 4 times per week. Consultees also reported a wide range of frequencies of communication with consultants outside of the
classroom, with responses varying from no outside communication to as often as four times per week ($M = 1.54$ per week, $SD = 1.34$).

**Survey Development and Description**

The survey used in the study was developed to obtain information about consultants’ and consultees’ definitions and perspectives on consulting and the consulting relationship. Survey questions were developed based on previous research related to perspectives of early childhood educators and related service providers (e.g., Dinnebeil et al., 2001; Green et al., 2006; Knoche et al., 2013). Feedback on an initial version of the survey was gathered from experts in the field.

The survey consisted of 13 questions about respondent characteristics, and four closed-ended and four open-ended questions related to perspectives about consulting. Surveys were similar for consultants and consultees with small wording adjustments based on the respondent group. The survey included questions about participants’ racial and ethnic background, age, educational background, whether the participants worked full time or part time, caseload (number of children with disabilities with whom the participant works and/or number of classrooms the participant visits), and frequency of consultant visits to the inclusive preschool classroom.

Open-ended questions included asking participants to list three things that described the role of a consultant in the inclusive preschool classroom. Participants were also asked how they could improve their relationship with consultants or consultees (depending on which role the participant performs), what consultants or consultees could do to improve the relationship, and what additional resources were needed to improve relationships between consultants and consultees. Closed-ended questions included asking participants to select the frequency with which the consultant performed each of a given list of activities, select the activities the
participant thought were important for consultants to provide, and select one activity the participant thought was the most important. Participants also rated on a scale of 1 to 5 (with 1 being strongly disagree and 5 being strongly agree) their agreement with statements such as “The consultant(s) that works in my classroom is effective in providing support,” and “I have a good relationship with the consultees I support in inclusive classrooms”.

**Survey Procedures**

Surveys were distributed via one-time email to all consultants and consultees in the target district \((n = 182)\). Following completion of the survey, respondents were asked if they wanted to be entered into a drawing for a $10 gift card incentive, and random selection was used to determine participants who would receive each of the ten available gift cards.

**Data Analysis**

The student researcher and faculty researcher analyzed open-ended survey questions following Braun and Clarke’s (2006) six steps for thematic analysis. First, to familiarize themselves with the data (2006), each researcher independently reviewed participants’ responses to open-ended questions, and based on previous literature that divided the categories into child- and adult-directed tasks. Then, following step two of Braun and Clarke’s thematic analysis, the two researchers generated initial ideas for codes (2006), and used these codes to group the survey responses, adding more categories as needed.

To complete step three of Braun and Clarke’s (2006) thematic analysis, the student researcher and faculty researcher searched for themes by collating the codes into potential groupings. For example, when reviewing codes for the survey question asking respondents to describe the consultant role, the researchers combined the code for, “providing behavior support,” with the code for, “providing instruction to students,” to create a single theme, “direct
instruction of students”. For step four, the researchers reviewed these themes, checking them with the survey responses and developing subthemes. For example, regarding themes about consulting relationships, the theme “communication” included two subthemes, frequency of communication and communication to provide information.

Step five of Braun and Clarke’s (2006) thematic analysis suggests, “refining definitions of themes…[and]…generating clear definitions...” (p. 92). The student researcher named and defined the themes, and wrote operational definitions with input from the faculty researcher. The student researcher trained the faculty researcher on coding each survey responses into the different themes. Inter-coder reliability was 91.27%. The two individuals met and came to a consensus on all disagreements in coding. When a respondent’s statement included more than one theme (e.g., consultant role is to, “make and work on student goals”), the statement was coded under both categories (“work completed outside of the classroom” and “direct instruction of students”). Finally (step six, Braun & Clarke, 2006), researchers pulled out participant quotes that aligned with the thematic analysis and were related to the research questions and previous literature.

The perceived frequency of activities performed by consultants in the classroom were rated by participants on a scale of 1-4 (1 = never, 4 = always), and then summed and divided to determine the mean rating. The degree to which participants believed different consulting activities to be important for consultants to provide were measured by calculating the percentage of respondents who selected each activity from a list as being important.

To determine consultants’ and consultees’ perceptions of the quality of the consulting relationship, the coders developed five themes for each of the three open-ended survey questions, and coded survey responses using the thematic analysis method described above. Overall
reliability between the two coders when determining how each statement aligned with themes was 91.36% (87.23%, 95.74%, and 91.11%).

The perceived quality of consultant relationship and perceived effectiveness of the consultants in the classroom were rated by participants on a scale of 1-5 (1 = strongly disagree, 5 = strongly agree), and then summed and divided to determine the mean rating. One respondent put “strongly disagree” on all questions in this section, but later in the open-ended questions wrote that they had a good relationship with their consultants which indicates that the respondent’s answers may be invalid, so they were not included in the mean rating calculations. Finally, mean ratings from consultant and consultee responses across the survey were compared to determine any differences in perspectives between the two groups.

Results

Definition of Consultant Role

Survey respondents answered open-ended questions about the consultant's role, and responded to close-ended prompts to select activities consultants most often provided and activities that are most important for consultants to complete. The results of each (separated by consultant and consultee) are listed in the sections below.

Open-ended Descriptions of Consultant Role

Respondents were asked to list three things that describe the role of a consultant in the inclusive preschool classroom. Thematic analysis of a total of 125 responses resulted in the following themes describing a consultant’s role: direct instruction of students, observation and assessment of students, work completed outside the classroom, consultee instruction and support, and personal attributes.
The theme *direct instruction of students* was defined as instructing or working with students with and without IEPs, on academic, behavioral or other skills (one-on-one, small group, large group, routines-based, etc.). *Observation and assessment of students* included responses that mentioned the consultant conducting observations, collecting data, progress monitoring, or performing assessments with students, but not necessarily providing instruction to the student. *Work completed outside the classroom* was defined as tasks consultants performed outside of class time, such as IEP meetings, paperwork, instructional planning, communication with related service providers or families, etc., with the exception of consultee support.

The theme *consultee instruction and support* was divided into two subcategories: *support within the classroom*, which included active support given to the consultee during class time (e.g., modeling a strategy or providing back up support during an activity led by the consultee); and *instruction/consultation outside of class time*, which included instruction, consultation, or collaboration that could be completed with the consultee outside of class time (e.g., conducting team meetings, providing ideas or strategies, providing written materials, collaborating to determine strategies, etc.). Finally, rather than responding to the opened-ended question by listing an activity that described consultants’ actions, some respondents listed *personal attributes* they believed a consultant should have (e.g., helpful, flexible, good communicator, etc.).

For consultees, the theme with the greatest percentage of coded responses describing the consultants’ role was *direct instruction of students* (44% of responses), followed by *consultee instruction and support* (25% of responses) and *observation of students* (19% of responses). The last two themes were less frequent (*work completed outside the classroom*, 8%; *personal attributes*, 4%). Most consultant responses describing their role were coded under *consultee instruction and support* (39%) and *direct instruction of students* (37%). The remaining codes
included work done outside the classroom, 10%; observation of students, 7%; and personal attributes, 7%.

**Frequency of Activities**

Table 1 shows consultant and consultee mean reported frequency ratings on a researcher-created list of activities consultants can perform in the inclusive preschool classroom. Respondents reported frequency for each activity on a scale of 1-4, with 1 being “never” and 4 being “always”. The majority of both consultants and consultees reported most of the activities occurring at high frequencies (“often” or “always”). One exception was providing large group and small group instruction. Overall, most consultants reported that they “rarely” or “never” led large group and small group instruction, and consultees also reported rarely observing the consultant lead large group and small group instruction (large group instruction: $M_{\text{consultees}} = 2.04$; $M_{\text{consultants}} = 2.31$; small group instruction: $M_{\text{consultees}} = 2.11$; $M_{\text{consultants}} = 2.29$).

Regarding one-on-one direct instruction of students, both groups reported a high frequency of the consultant pulling a child aside to another area of the classroom ($M_{\text{consultees}} = 3.3$, $M_{\text{consultants}} = 2.93$); however, consultees reported observing consultants pull a child out of the classroom more frequently ($M = 2.44$) than consultants reported doing so ($M = 1.57$). Consultees also reported observing consultants administer assessments more frequently ($M = 3.0$) than consultants reported doing so ($M = 2.5$).

**Activities Selected as Something Consultants Should Provide**

Figure 1 shows results of consultant and consultee responses when they were provided with a list of activities consultants might do in the classroom, and were asked to select all activities they thought consultants should provide. Both groups selected all the activities at high
rates (above 50%) with the exception of “pull a child out of the classroom to work one on-one”. Only 21% of consultants and 48% of consultees selected this activity.

There were some differences between the rates at which consultants and consultees selected activities as being important for consultants to provide. Consultees more frequently selected that it was important for consultants to lead large and small group instruction and administer assessments to students (74% and 81%, respectively) as compared to consultants (57% and 50%, respectively); whereas, consultants more frequently selected that it was important for them to work on paperwork and communicate with families (79% and 100%, respectively) as compared to consultees’ perspectives on these activities (63% and 81%, respectively).

Consultants and consultees both selected the activities “collaborate with consultee to determine interventions and strategies” and “determine interventions and strategies and tell consultee how to do them”, at high rates. Both groups more frequently selected the activity to “collaborate” with the consultee as compared to the activity to “tell [the consultee] how to do”; however, a larger percentage of consultees (89%) than consultants (71%) selected that consultants should determine interventions and strategies and tell the consultee how to do them.

**Activity Selected as the Most Important for Consultants to Provide**

When respondents were asked to select the activity they thought was the most important for consultants to provide, the most frequently selected response for both consultants and consultees was “working with a child within classroom activities and routines” (selected by 57% of consultants and 44% of consultees). The next most commonly selected response by both groups was “collaborate with consultee to determine interventions and strategies”. No
respondents selected “determine interventions and strategies and tell consultee how to do them” as the most important activity for consultants to provide. Other activities selected as most important were: model interventions and strategies for consultee, providing backup support when consultee is leading instruction, pulling a child aside to another area of the classroom to work one-on-one, and pulling a child out of the classroom to work one-on-one (see Table 1).

Factors Perceived as Important to the Consulting Relationship

Survey respondents selected the degree to which they agreed to close-ended statements about their consulting relationship, and responded to open-ended questions about actions that consultants, consultees, and/or administrators could do to improve the consulting relationship. The results of each are listed in the sections below.

Levels of Agreement to Statements about Consulting Relationships

Overall, consultants and consultees viewed their consulting relationships as positive and effective. Both groups indicated high levels of agreement with the statement that they have a good consulting relationship with one another ($M_{[\text{consultants}]} = 4.64$; $M_{[\text{consultees}]} = 4.69$, on a scale from 1-5). Most consultants and consultees also agreed that the consultants were effective; however there were slight variations in the perceived level of consultants’ effectiveness working with students vs effectiveness in working with consultees. For example, consultants rated their own effectiveness (on a scale of 1-5) in supporting students as 4.57, whereas consultees rated consultants’ effectiveness in supporting students slightly lower ($M = 4.38$). Perceived effectiveness in supporting consultees was slightly lower in both groups. On average, consultants rated their effectiveness as a 4.29 with consultees, and consultees rated consultants’ effectiveness as 4.35.
Consultants agreed that they are open to ideas and suggestions from consultees ($M = 4.71$), and consultees agreed that they are comfortable sharing ideas and suggestions with consultants ($M = 4.5$). However, respondents rated slightly lower levels of agreement with the statement that their consultant(s) or consultee(s) recognizes their input ($M_{[consultants]} = 3.93; M_{[consultees]} = 4.15$). Consultees reported higher levels of agreement that they worked to implement their consultants’ suggestions, as compared to consultants, who viewed consultees less favorably in implementing the consultants’ suggestions ($M_{[consultees]} = 4.54; M_{[consultants]} = 3.5$).

Regarding training, on average, consultees agreed that their training prepared them to build successful consulting relationships with special education teachers and related service providers ($M = 4.12$). Consultants, however, rated lower levels of agreement that their training prepared them to build relationships with early childhood educators ($M = 3.21$).

**Consultant Actions to Improve the Consulting Relationship.** Five themes emerged across all survey respondents regarding the open-ended survey question of what consultants could do to improve the consulting relationship. The first theme was related to *communication*, including: frequency of communication, (e.g., check-ins, keeping in touch, etc.), and providing more or better information or explanations of the students’ needs and interventions (e.g., problem solving with the consultee). The second theme was related to *time* spent by the consultant in the classroom providing instruction, modeling, support, etc., and suggestions that consultants come to the classroom more often. The theme related to *respect* included listening (e.g., being understanding of roles and challenges, listening to the consultee's questions/concerns, being receptive to the consultee’s input) and experience (i.e., statements mentioning a need for acknowledgment or respect of the consultee’s skills, training, and credentials). The last theme
was personal relationship which included being personable, or getting to know the consultee personally, or seeing the consultee as part of a team. All remaining responses fit under nothing/don’t know suggesting respondents did not have any suggestions on how consultants could improve relationships with consultees.

Consultant Responses. Consultants most frequently gave responses that were coded under the themes respect (42% of responses) and personal relationship (32% of responses). The theme respect included statements describing the consultant listening to the consultee's questions and concerns (e.g., “I try to remain open to ideas and feedback from them”), being understanding of roles and challenges (e.g., “Try to listen to the consultee's perspective and understanding where they are coming from”), and being receptive to the consultee’s input (e.g., “...make sure they are comfortable with expressing their concerns to me”). Statements were coded under the theme personal relationship when they described the consultant being personable (e.g., “Praise consultees for their efforts...”), or getting to know the consultee personally (e.g., “Take time to get to know them on a personal level”). The remaining consultant responses were coded under the themes communication (16%) and time (5%).

Consultee Responses. When consultees were asked what consultants could do to improve the consulting relationship, they most frequently gave responses that were coded under the themes nothing/don’t know (28% of responses). Seven consultees (24%) gave responses that were coded under the respect theme. One consultee stated: “Do not treat us like we are stupid, and subpar. Be respectful in all aspects...we might not have a masters but many of us have bachelor and CDA’s.” The remaining consultee responses were related to themes of time (21% responses), and communication (21% of responses). Some consultees wrote that they wanted to see the consultant in the classroom more frequently and for longer amounts of time, with
responses such as, “be there more than once a week,” and, “come to [the] classroom more often and stay longer.” Consultees also wrote that they wanted the consultant to communicate with them by providing more information about how to work with students. For example, one consultee wrote they would like consultants to, “… explain what they are doing for a child and how I could implement what they are doing to give the child more opportunities to practice what the specialist is trying to do.”

**Consultee Actions to Improve the Consulting Relationship.** Themes identified for responses to the survey question of what consultees can do to improve the consulting relationship were similar to those described above, including communication and respect. Communication responses for consultee actions, however, focused on different aspects of communication than the responses described above for consultant communication. Suggestions for improving consultee communication included the consultee giving the consultant information about how students are doing and feedback about how interventions are working. The theme respect, similar to the responses for consultant actions described above, included listening to the consultant’s ideas and suggestions, being understanding of roles and challenges, seeing the consultant as part of a team, and respecting the consultant’s knowledge and experience. Additional themes that were developed for consultee actions to improve relationships included: implementation of interventions and data collection (i.e., the response mentioned the consultee implementing the consultant’s suggestions or being willing to try interventions and collect data); training/credentials the consultees should have, and nothing/don’t know as described above.

**Consultant Responses.** Consultant responses were most frequently coded under the theme respect (35% of responses). For example, “Respect my ideas and experience...” The second most common theme was related to implementation (25% of responses) where some consultants wrote
that they would like the consultee to understand the consultant’s role in the classroom and be willing to try the interventions the consultant suggests. For example, one consultant stated, “I would love if consultees looked at me as a help, not just another person in their classroom....Sometimes I feel like the consultees just think that I will help the child when I come in once or twice, and they don't have to do anything the other days.” Consultants also wrote about communication (25% of responses), and suggested that consultees could give them more information, particularly about how the consultant’s suggestions are working.

**Consultee Responses.** When asked what consultees could do to improve their relationship with consultants, consultees most frequently gave responses that were coded under the communication theme (39% of consultee responses). Consultees wrote that they could ask the consultant more questions about strategies for students and give the consultant information about the classroom. One consultee suggested giving the consultant a monthly calendar outlining classroom activities. Other responses were coded under the themes nothing/don’t know (29% of responses), such as, “no concerns” or “n/a;” implementation (18% of responses), including, “Follow up on strategies that they have suggested for students;” and respect (14% of responses). For example, one consultee said, “...don't assume [consultants] are trying to make my life difficult when they implement new interventions that cause major disruptions to class or students.”

**Resources to Improve the Consulting Relationship.** The themes that emerged from the question of what resources could improve the consulting relationship were: communication, time, respect (consultants and consultees listening to each other, having respect for each other, or being open to ideas from each other), training/administrative support, and nothing/don’t know. Similar to the responses for consultant actions to improve communication in the consulting
relationship, the communication theme for resources needed included statements about frequency of communication (i.e., the statement mentioned a need for more communication, including additional team meetings) and providing information (i.e., descriptions of collaboration, or more/better information about student needs and interventions). Responses about time also were similar to the responses for consultant actions, and included additional time for consultants to be in the classroom, additional working hours for consultees, or any other need for additional time that was not related to additional communication. Training/administrative support included statements mentioning support from administrators, including additional training, education requirements, or professional development.

Consultant Responses. Consultants most frequently gave responses that were coded under training/administrative support (31% of responses) as a resource that would improve consultant-consultee relationships. Several consultants suggested additional training on the roles and responsibilities of consultants and consultees, suggesting the need for, “trainings for both consultants and consultees on how to work together in a general education classroom to support students,” and additional training for consultees to understand, “…the roles of consultants in their classrooms and that we [consultants] are there to support them [consultees] and give them strategies to support the students in the classroom.” One consultant suggested giving more paid work hours to consultees. Other consultant responses were coded under communication (25% of responses), including “…we need to discuss how we can support each other to benefit the children”, nothing/don’t know (25% of responses), time (13% of responses), and respect (6% of responses).

Consultee Responses. Consultees gave responses that fell under each of the themes. Half of the consultees (52%) didn’t have any suggestions (nothing/don’t know) for what resources
could improve the consulting relationship (e.g., “None, I do have positive relationships with them.”). The next most frequently coded theme was communication (24% of responses), for example: “Information about students needs/challenges that help me understand goals....” The last two themes by frequency were respect (14% of responses), including a call by a consultee respondent to have an, “open mind to changing how things are done”, and time (10% of responses), for example: “more time in the classroom”. Two consultees wrote that they would like more frequent team meetings.

Discussion

The purpose of this study was to gain perspectives of the consulting model for delivering special education services to preschoolers with disabilities in inclusive classrooms. Professionals working in a large Utah school district responded to a survey, answering questions about the consultant’s role in the classroom and factors influencing the consulting relationship. Previous literature had examined consultant roles (Dinnebeil et al., 2001; Wesley et al., 2001; Dinnebeil et al., 2019) or consultee roles (McDonnell et al., 2001; Knoche et al., 2013; Green et al., 2006); however, this study extended the previous literature by comparing the perspectives of both groups. There were similarities between the two groups on how the role of consultants within early childhood inclusive settings was described, including assumptions that consultants work directly with students, as well as provide direction to consultees. Consultants and consultees also agreed that they have a positive consulting relationship and that the consultants are effective. There were a few differences between consultants’ and consultees’ responses. Consultee responses, more than consultant responses, emphasized the importance of the consultant leading instruction and being present in the classroom frequently and for longer periods of time. Consultants more frequently mentioned the importance of training and developing a better
understanding of the consultant and consultee roles and responsibilities. Both groups gave responses discussing the importance of building a respectful relationship between consultants and consultees.

**Definition of Consultant Role.** In contrast to previous literature suggesting that professionals working within the consulting model often lack a common definition of consulting, there were many similarities in the consultant and consultee groups in describing the consulting role. Across groups, respondents described the consulting role as having several different attributes, with the most common being direct work with students (i.e., instruction, observation, and assessment), similar to the finding in Dinnebeil et al. (2001) that consultants focused more on child-directed activities. The largest percentage of both consultants and consultees also responded that the activity of highest importance for consultants is working with students in routines-based instruction. Many consultees preferred a consultant role that included the consultant providing large and small group instruction, similar to the finding by McDonnell et al. (2001) that consultees would like the consultant to be an “active support specialist” and co-teach in the classroom. Few consultees and consultants preferred a consultant role that included pulling a student out of the classroom, which suggests that both groups think that consultants should provide instruction within the inclusive classroom, and within class routines.

While embedding instruction within class routines aligns with the 2014 DEC Recommended Practices, Dinnebeil et al. (2001) emphasized the importance of consultants working with consultees rather than focusing primarily on the students, because consultees will need to implement a student’s specialized instruction during the times the consultant is not in the classroom, which is the majority of the time the student is attending the preschool program. Survey responses indicate that consultants in this school district visit each classroom only one or
two times per week; consultees need instruction and support from the consultant to effectively work with the student with disabilities when the consultant is not there.

Although the majority of consultees described consultants’ roles as working primarily with children, many also suggested that consultants should support the work of the consultee through modeling during classroom instruction time and with meetings outside of class time. In addition, every consultant who completed the survey indicated that consultants should communicate with parents, and while it is important for providers to build relationships with families, it may be equally or more important for consultants to communicate with consultees so that the lead teachers can serve as the primary point of contact for families (rather than having an early childhood special education teacher, physical therapist, occupational therapist, and/or speech-language pathologist each communicate with the caregiver separately). In many inclusive settings (as was the case in the district involved in this study), the lead teacher is in contact with the students’ caregiver each day during pick-up and drop-off, and has more consistent and frequent communication with the caregiver as compared to the consultants.

Most descriptions of consultants’ roles were straightforward; however, descriptions related to the consultee-consultant interactions were multi-faceted. Consultants and consultees thought it was important for consultants to both “collaborate with the consultee to determine interventions and strategies” and “determine interventions and strategies and tell the consultee how to do them”. However, no respondents said “telling consultees…” was the most important activity for consultants to do, while multiple respondents said “collaborating with the consultee” was most important. This finding suggests that consultees are open to information consultants can share with them, but are more likely to look for collaborative relationships than supervisory-type interactions where consultees are directed by consultants. McDonnell et al. (2001) and
Green et al. (2006) also found that consultees prefer having an active role in determining interventions and strategies, rather than being told what to do.

**Factors Perceived as Important to the Consulting Relationship.** Regarding factors affecting the consulting relationship, both groups viewed the consulting relationship as positive and also viewed consultants as being effective in their role. This finding was similar to Knoche et al. (2013), who showed that consultees had positive views of their relationships with consultants. Despite general positive impressions of the consultee-consultant relationship, survey respondents suggested several actions consultants, consultees, and administrators can take to improve the consulting relationship. Some consultees wrote that they wanted the consultant to come to the classroom more often and stay for longer periods of time, similar to previous literature (e.g., Green et al., 2006; Knoche et al., 2013; McDonnell et al., 2001) showing that consultees prefer the consultant to be an active presence in the classroom. Some consultees also wrote that they would like more communication with consultants. Green et al. (2006) suggested that consultants who interact frequently with their consultees have better relationships with them.

Data from the first research question supports the idea that consultants and consultees had many similarities in how they described the role of a consultant. When asked about consulting relationships, however, some consultants expressed that consultees need training on what the consultant’s duties are – indicating a perception that consultees lack a solid understanding of the consulting role even though data from this sample suggest that consultees’ perception of the consultant role is very similar to that of consultants themselves. Similarly, despite consultees agreeing that they worked to implement their consultants’ suggestions, consultants did not think consultees’ implemented suggestions as often as consultees stated they did. It is possible that consultants are not seeing consultees implement suggestions with as much frequency as
consultees perceive themselves to be implementing the suggestions. Perceived differences between consultants and consultees in understanding of consultants’ roles and following through on consultant suggestions can lead to challenges in the consultant-consultee relationship. For example, Dinnebeil et al. (2019) suggested consultants may feel that the consultee is resistant to their help and suggestions, or that the consultee lacks the capacity to implement strategies and take data while the consultant is not present.

Consultants and consultees frequently mentioned a need for respect within the consulting relationship, including listening to each other, understanding each other’s challenges, and acknowledging each other’s experience and credentials. While respondents generally felt that they were receptive to ideas and suggestions and comfortable sharing ideas, they didn’t feel as strongly that their consultant or consultee was receptive to their input. These findings suggest, as argued by Johnston and Brinamen (2012), that consultants and consultees developing a respectful relationship with one another is important in successfully teaming to support students in inclusive settings.

Limitations. Several limitations may have affected the outcomes of this study. This was not a racially/ethnically diverse sample, and only represented respondents from one school district (albeit a very large one). It was also a relatively small sample, but comparable in size to other studies (e.g., Knoche et al., 2013, n= 21). Lack of diversity and small sample size may therefore have limited generalizability of results. Despite these limitations, this study is distinctive because it examined and compared perspectives of both consultants and consultees from the same workplace.

Future Research. Future studies should examine additional ways to gain perspectives of consultants and consultees, including measuring the collaborative relationship in early childhood
settings more formally (e.g., Boavida, Silva, Aguiar, & McWilliam, 2020). Future research should also look at perspectives of consultants and consultees with less experience working within a consulting model. Consultees in this study had an average of eight years working with consultants, and consultants had an average of ten years with consulting. It would be interesting to know if more recently-trained professionals would differ in their perspectives of the consultant role and consultant-consultee relationships.

Additional research is needed to examine possible reasons consultees want consultants to give assessments to students with special education needs, with the possibility that consultees may need more training on giving assessments. Future studies should also investigate perspectives of parents regarding how their children are receiving services in inclusive settings and whether they would prefer to be in communication with the lead teacher/consultee, special educator/consultant, or both.

**Implications for Practice.** Consultants did not report having sufficient training to build relationships with early childhood educators, similar to findings by Wesley et al. (2001) and Dinnebeil et al. (2019). Providing consultants from a variety of professional backgrounds with high-quality in-service training could help ensure that consultants and consultees are prepared to work together to support students in inclusive settings.

Another implication for practice is to consider the amount of time consultants work with students as compared to coaching consultees. Although survey responses indicated that a large percentage of consultants and consultees believed that it is most important for consultants to work directly with students, Dinnebeil et al. (2001) argued consultants’ time would be better spent providing training to the early childhood classroom teachers, because they spend more time with the children and are less likely to have adequate background knowledge in special
education. Consultants and consultees would benefit from additional training on the role of the consultant to work with classroom teachers, as well as additional resources for teaming outside of class time. Opportunities for additional communication and team meetings (suggested by some respondents in the survey) would allow consultants to build relationships and consultees the opportunity to ask questions and practice intervention strategies outside of the busy class times when their attention may need to be focused on different areas of the classroom.

Consultants and consultees are both interested in supporting the needs of students with disabilities in inclusive preschool settings. They also see the importance of working together. Important differences in training, expectations, and resources continue to show that there is room for improvement with the use of consultative models in inclusive settings. Programs and school districts should provide training and opportunities for communication between consultants and consultees so that preschool students with disabilities have access to specially designed instruction and interventions across their entire time in the inclusive classroom, rather than just when the consultant is present in the classroom. Given sufficient support, early childhood educators (consultants and consultees alike) who work in inclusive settings can develop positive working relationships with one another and collaborate to support students with disabilities. As the capabilities of practitioners grows, inclusive environments will support students with disabilities to have similar opportunities as typically developing peers, and outcomes will be improved for all children.
Table 1

*Frequency and Perceived Importance of Consultant Activities*

<table>
<thead>
<tr>
<th>Activity</th>
<th>Mean consultant frequency rating (scale of 1-4)</th>
<th>Consultants selecting that the activity as most important (<em>n</em> = 14)</th>
<th>Mean consultee frequency rating (scale of 1-4)</th>
<th>Consultees selecting that the activity as most important (<em>n</em> = 27)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction</td>
<td>3.29</td>
<td>1 (7.1%)</td>
<td>3.26</td>
<td>3</td>
</tr>
<tr>
<td>Pulling a child out of the classroom to work one-on-one</td>
<td>1.57</td>
<td>0</td>
<td>2.44</td>
<td>1</td>
</tr>
<tr>
<td>Pulling a child aside (to another area of the classroom) to work one-on-one</td>
<td>2.93</td>
<td>1</td>
<td>3.3</td>
<td>3</td>
</tr>
<tr>
<td>Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)</td>
<td>3.21</td>
<td>8</td>
<td>3.11</td>
<td>12</td>
</tr>
<tr>
<td>Modeling interventions and strategies for consultee</td>
<td>2.93</td>
<td>2</td>
<td>2.67</td>
<td>2</td>
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<tr>
<td>Leading in-class instruction for the whole group (e.g., circle time)</td>
<td>2.14</td>
<td>0</td>
<td>2.04</td>
<td>0</td>
</tr>
<tr>
<td>Leading in-class instruction for a small group (e.g., teaching table activity)</td>
<td>2.29</td>
<td>0</td>
<td>2.11</td>
<td>0</td>
</tr>
<tr>
<td>Administering assessments to students</td>
<td>2.21</td>
<td>0</td>
<td>3.04</td>
<td>0</td>
</tr>
<tr>
<td>Collaborating with consultee to determine interventions and strategies</td>
<td>3.14</td>
<td>2</td>
<td>3.33</td>
<td>6</td>
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</tbody>
</table>
## PERCEPTIONS OF CONSULTING

<table>
<thead>
<tr>
<th>Activity</th>
<th>Mean</th>
<th>Std Dev</th>
<th>Median</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>Determining interventions and strategies and telling consultee how</td>
<td>2.71</td>
<td>0</td>
<td>3.15</td>
<td>0</td>
</tr>
<tr>
<td>to do them</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Observing students</td>
<td>3.29</td>
<td>0</td>
<td>3.44</td>
<td>0</td>
</tr>
<tr>
<td>Taking data on students</td>
<td>3.29</td>
<td>0</td>
<td>3.33</td>
<td>0</td>
</tr>
<tr>
<td>Working on paperwork</td>
<td>3</td>
<td>0</td>
<td>2.89</td>
<td>0</td>
</tr>
<tr>
<td>Communicating with families</td>
<td>2.71</td>
<td>0</td>
<td>2.96</td>
<td>0</td>
</tr>
</tbody>
</table>
Figure 1

Selections by Consultants and Consultees as Activities to Be Provided
References


Appendix. Survey Questions

Inclusionary Question

Q1. Please reply to questions in this survey based on your experience during typical, face-to-face schooling experiences occurring prior to policies implemented in March 2020 to limit the spread of COVID-19/Coronavirus.

My job responsibilities include: (please check all that apply)

- Work in one or more inclusive preschool classrooms (i.e., the classroom has one or more preschool students with an IEP and one or more preschool students without an IEP)
- Work on an assessment/evaluation team
- Work in one or more self-contained classrooms for students with IEPs
- Other __________
- None of the above

Inclusionary Follow-up

Q2. During a 5-day school week, how many hours do you typically spend in the inclusive preschool classroom setting? __________

Q3. The purpose of this survey is to learn more about the perspectives of consultants and consultees working with children with disabilities in inclusive preschool classrooms (i.e., general education classrooms that include children with disabilities).

As you respond to this survey, please consider your role as it relates to the inclusive preschool setting only. Please also consider the following definitions:
We define preschoolers as 3-, 4-, and 5-year-olds attending a group education setting.

We define consultants as specialists who come into an inclusive preschool classroom. This includes early childhood special educators as well as speech-language pathologists, occupational therapists, physical therapists, and other related service providers.

We define consultees as lead and assistant preschool teachers who have one or more students on an IEP enrolled in their classes, and have one or more of the following specialists working in their classrooms: early childhood special educator, speech-language pathologist, occupational therapist, physical therapist, or other related service providers.

Q4. What is your primary role within the inclusive preschool classroom?

- Lead Teacher
- Assistant Teacher
- Special Education Teacher
- Speech-Language Pathologist
- Occupational Therapist
- Physical Therapist
- Other __________

Consultant Survey: Demographics

T1. How many years of experience do you have working with preschool children with disabilities? __________

T2. How many years of experience do you have consulting with general education preschool teachers? __________
T3. Please select the highest level of formal education you have:

- High school diploma
- Child Development Associate (CDA)
- Other Associate's degree (enter field of study): 
- Bachelor's (4-year) degree (enter field of study): 
- Master’s degree (enter field of study): 
- OTR/L
- CPT
- Ph.D. (enter field of study) 
- Other 

T4. Has your training to this point (in schooling or within your professional practice/in-service training) included any of the following? (select all that apply)

- Working with children with disabilities
- Working with lead and assistant teachers and other related service providers and providing consultative/coaching services
- Other
- None of the above

T5. What is your racial background? (select all that apply)

- White
- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Pacific Islander
- Middle Eastern or North African
- Other __________
- Prefer not to answer

T6. Are you Hispanic?
- Yes
- No
- Prefer not to answer

T7. What is your age? __________

T8. What is your gender?
- Male
- Female
- Nonbinary
- Other __________
- Prefer not to answer

T9. Do you work full time or part time?
- Full time
- Part time
  - [Follow-up] Please enter the number of hours you work per week: __________

T10. How many preschool children with disabilities (i.e., children with an active IEP) are on your caseload? __________

T11. In your role as a consultant, how many inclusive preschool classrooms (i.e., each classroom that has a different lead teacher) do you serve? __________

T12. On average, how often do you visit each of the preschool classrooms on your caseload?
  - [Number of visits] per [week, month, year]

T13. On average, how often do you communicate with each consultee outside of classroom time?
  - [Number of communications] per [week, month, year]

 Consultant Survey: Research Questions

T14. List 3 things that describe the role of a consultant in an inclusive preschool classroom (i.e., services consultants provide and activities consultants do)

T15. The following list represents typical activities by consultants who work in inclusive preschool classrooms. Please select the option that best describes how frequently you perform each of these activities as you support an inclusive preschool classroom:
   [Never, Rarely, Often, Always]
- Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

T16. The following list represents typical activities by consultants who work in inclusive preschool classrooms. This is the same list from the previous question. Please select the activities you think consultants should provide as they support an inclusive classroom:

- Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

T17. Out of the following activities that a consultant could perform, which one activity do you believe is the most important?

- Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

T18. Please rate the degree to which you agree with the following statements.

[Strongly agree, Somewhat agree, Neither agree nor disagree, Somewhat disagree, Strongly disagree]

- The support that I provide to consultees is effective.
- The support that I provide to students is effective.
- I have a good working relationship with my consultees.
- I am open to ideas/suggestions from consultees.
- I feel like the consultee(s) implement my ideas/suggestions.
- I feel like the consultee(s) are receptive to my input.
- My training prepared me to build successful consulting relationships with early childhood educators.


T20. As a consultant, briefly describe what you could do to improve your relationship with your consultees.

T21. What additional resources do you need to have positive relationships with consultees?

Consultee Survey: Demographics

E1. How many years of experience do you have working with preschool children with disabilities?

E2. In general, how many years of experience do you have working with a consultant in your classroom?

E3. Please select the highest level of formal education you have:
   - High school diploma
   - Child Development Associate (CDA)
   - Other Associate's degree (enter field of study): __________
   - Bachelor's (4-year) degree (enter field of study): __________
   - Master’s degree (enter field of study): __________
E4. Has your training to this point included any of the following? (select all that apply)

- Working with children with disabilities
- Working with special educators and other related service providers
- Other __________
- None of the above

E5. What is your racial background? (select all that apply)

- White
- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian or Pacific Islander
- Middle Eastern or North African
- Other __________
- Prefer not to answer

E6. Are you Hispanic?

- Yes
E7. What is your age? _________

E8. What is your gender?
- Male
- Female
- Nonbinary
- Other _________
- Prefer not to answer

E9. Do you work full time or part time?
- Full time
- Part time
  - [Follow-up] Please enter the number of hours you work per week: _________

E10. How many preschool children do you currently teach? _________

E11. How many consultants work in your classroom? _________

E12. On average, how often do you have each consultant in your classroom?
- [Number of visits] per [week, month, year]
E13. On average, how often do you communicate with each consultant outside of classroom time?

- [Number of communications] per [week, month, year]

E14. List 3 things that describe the role of a consultant in an inclusive preschool classroom (i.e., services consultants provides and activities consultants do)

E14-2. What is the professional title of the consultant who most frequently visits your classroom?

- Early Childhood Special Education (ECSE) Teacher
- Speech-Language Pathologist (SLP)
- Occupational Therapist (OT)
- Physical Therapist (PT)
- Other __________

E15. The following list represents typical activities by consultants who work in inclusive preschool classrooms. Please select the option that best describes how frequently you see the [title selected in previous question] you work with perform each of these activities as they support your classroom:

[Never, Rarely, Often, Always]
- Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based
  learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

E16. The following list represents typical activities by consultants who work in inclusive
preschool classrooms. This is the same list from the previous question. Please select the activities
you think consultants should provide as they support an inclusive classroom:

- Providing backup support (i.e., supporting individual students in attending and
  participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

E17. Out of the following activities that a consultant could perform, which one activity do you believe is the most important?

- Providing backup support (i.e., supporting individual students in attending and participating) when consultee is leading instruction
- Pulling a child out of the classroom to work one-on-one
- Pulling a child aside (to another area of the classroom) to work one-on-one
- Working with a child within classroom activities and routines (i.e., activity-based learning, embedded instruction, milieu teaching, etc.)
- Modeling interventions and strategies for consultee
- Leading instruction for the whole group (e.g., circle time)
- Leading instruction for a small group (e.g., teaching table activity)
- Administering assessments to students
- Collaborating with consultee to determine interventions and strategies
- Determining interventions and strategies and telling consultee how to do them
- Observing students
- Taking data on students
- Working on paperwork
- Communicating with families
- Other: __________

E18. Please rate the degree to which you agree with the following statements.

[Strongly agree, Somewhat agree, Neither agree nor disagree, Somewhat disagree, Strongly disagree]

- The consultant(s) that works in my classroom is effective in providing support to me.
- The consultant(s) that works in my classroom appears to be effective in providing support to my students.
- I have a good working relationship with the consultant(s) that works in my classroom.
- I feel comfortable sharing ideas/suggestions with my consultant(s).
- I feel like the consultant(s) recognize my input.
- I work to implement the ideas/suggestions from my consultant(s).
- My training prepared me to build successful consulting relationships with special education teachers and related service providers.

E20. As a consultee, briefly describe what you could do to improve your relationship with your consultant(s).

E21. What additional resources do you need to have positive relationships with consultants?