Why are integrated IEP goals and objectives and intervention important?

The Individuals with Disabilities Act indicates that the full individual evaluation of a child needs to be conducted by a group of qualified professionals. So from the very beginning of the instructional process, it is clear that the IEP process should be a collaborative process. A team of people should evaluate the child and develop an IEP within a collaborative meeting where all parties, including the parents, are active participants. Thus it is logical that the prioritized goals and objectives developed to “focus on the learning and behavioral problems resulting from the child’s disability” (NASET, 2006-07) be developed as a team rather than in isolation by various service providers. The goals should address the student’s deficit skill areas which interfere with the student’s ability to participate and progress in the general curriculum. Examples of areas that might be addressed are (not all inclusive):

- Reading
- Writing
- Listening
- Organization
- Study Skills
- Communication
- Physical Development
- Motor Skills
- Cognitive Processing
- Problem-solving
- Social Skills
- Play skills
- Memory
- Visual Perception
- Auditory Perception
- Attention
- Behavior
- Career and Community Living (NASET, 2006-07).

Only after the goals have been created should the question be asked: What services are necessary for the student to be successful on the prioritized goals and objectives? So it is clear that there is only one set of student goals and objectives, and the implementers of the IEP are determined after the plan has been devised. Some questions to consider when determining necessary implementers are:

1) Is the service needed to help the student make progress with the educational goals?
2) Does the student have significant difficulty accessing areas of the school environment or communicating that would require the knowledge/expertise of other service providers for adaptations/modification or consultation?
3) Can the student’s needs/skills be addressed in the curriculum through the educational staff, parents, student, or community programs without additional specialists?
4) And most importantly, will the absence of the services interfere with the student’s access to or participation in his educational program this year? (Paraphrased from UCPS, 2009).

In this way the intervention services and strategies match the child’s specially designed instruction and are coordinated to assure that the child is successful in mastering the goals and objectives as stated in the student’s IEP. “Identification of integrated IEP goals and intervention strategies that maximize a child’s opportunities to succeed depend on the team’s willingness to…rethink traditional disciplinary boundaries.” (Preschool Network, 2003).

Integration of goals and objectives, as well as intervention strategies, allow for effective instruction where all implementers of the IEP are working together for the same outcome. “Teaming allows specialists, teachers and families to work together to teach skills in the natural contexts where there is more opportunity for frequent practice.” (Smith, 2008). Brain research indicates that basic skills must be taught in an explicit or targeted way so they become automatic and efficient. This allows the brain to concentrate on additional learning and/or generalization of the skills. Thus instruction must be targeted
and focused on the skills the student needs to learn and the instructional strategies must allow the student to be actively involved so that the student can:

- Understand and make sense of the new material
- Relate ideas and information to prior knowledge/experience
- Use organizational tools or principles to integrate ideas
- Look for principles or patterns
- Learn and apply the skills.

This is easier to accomplish if the learning takes place in the natural context of the classroom or learning environment rather than pull-out in an isolated unrelated setting. In addition students need multiple opportunities for guided practice in order to master a skill. Guided practice requires a high level of repetition with immediate feedback so that the student does not practice the skills incorrectly. Random practice is not effective. Thus to achieve maximum student success it is best practice for IEP goals and objectives to be integrated so that interventions can be targeted by the direct service providers as well as those who are providing support through consultation.

This is not to mean that all goals will be integrated. At times a service provider might be providing instruction outside the typical class until the skill can be mastered to the degree that it can be integrated into the natural context. A teacher of the visually impaired might need to teach a student Braille outside of the classroom until the student learns the foundational skills well enough that they can be integrated into the classroom activities. An orientation and mobility specialist might work on community travel skills ahead of time so that the student may fully participate in an extracurricular activity, a work-study program, etc. A physical therapist or adaptive physical education teacher may need to focus instruction on a particular skill so that the student can participate safely in a physical education class. However, in these cases it is imperative that the service provider provide instruction frequently enough that the student can receive targeted instruction, guided practice and reach mastery of the skills as soon as possible so that the skills can be generalized into the classroom setting and become integrated to allow the student to continue to make educational progress.

National Association of Special Education Teachers (NASET), 2006-07. Determining Measurable Annual Goals in and IEP. [http://www.naset.org/760.0.html](http://www.naset.org/760.0.html)


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