

Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.

**Teachers' and Speech and Language Therapists' Perceptions of Collaborative
Practice in Post-16 Special Education Needs and Disabilities (SEND) Settings**

**A thesis presented in partial fulfilment of the requirements for the degree of Master
of Speech and Language Therapy**

At Massey University, Auckland, New Zealand

Amber Dampney

2026

Abstract

Collaboration is a key factor in providing holistic educational supports for young people with special educational needs and disabilities (SEND). At present, much research into collaboration between teachers and speech and language therapists (SLTs) has focused on primary-aged students in mainstream and special education settings. This study explored teachers' and SLTs' experiences and perceptions of collaboration in education settings for young adults with special educational needs and disabilities (Post-16 SEND) using an explanatory sequential mixed methods research design.

This two-phase study involved initial data collection from teachers and SLTs via an online survey, followed by semi-structured focus group discussions with a nested sample of SLTs. Quantitative data from the online survey was analysed using descriptive statistics, while an inductive content analysis approach was used to examine open-ended survey responses (qualitative data). Survey data were used to create a semi-structured topic guide for the focus group discussions, conducted in Phase 2. Data from two focus groups with four SLTs in Phase 2 were analysed using a reflective and inductive thematic analysis.

Results from this study indicated that teachers and SLTs tend to agree that the main purposes of collaboration are to share information, improve educational outcomes for students, and develop and share resources. Teachers and SLTs consistently described their main collaborative activities to be individual planning meetings for setting targets and sharing strategies, attending information training sessions, and ad-hoc corridor conversations.

Several factors that facilitate or hinder collaboration were identified. Most notably, both teachers and SLTs highlighted the lack of time to effectively collaborate, and SLTs emphasised the importance of senior leadership teams and their role in supporting collaborative practice.

Practice implications and areas for further research are discussed, including the need for clarity about the SLT role, increased opportunities for interprofessional education, and the need for research to explore and test models of collaboration.

Acknowledgments

I would like to thank all the teachers and speech and language therapists (SLTs) who participated in this study. Particular thanks go to those who agreed to participate in the focus groups. Your openness and readiness to share your thoughts and experiences has been invaluable. Also, thank you to Natspec for your help in sharing the survey to a wider audience.

To my primary supervisor, Sally Clendon, thank you for all your guidance and support throughout this process. Your own extensive experience as an SLT working in education has been such an important contribution, helping to guide and develop my consideration of themes and areas to explore. I would also like to thank Lisa Furlong, my second supervisor. Your insights into the body of literature have supported me to think more critically about what I have read and what the data could be telling me. Returning to studying after a break of several years has been quite a change, but Sally and Lisa's support has made the journey much smoother.

To my mum and dad, thank you for always supporting me to pursue my interests and goals, and for believing that I can.

And finally, to my partner, for always listening to me and encouraging me to keep going.

Table of Contents

<i>Abstract</i>	2
<i>Acknowledgments</i>	4
<i>Table of Contents</i>	5
<i>List of Tables and Figures</i>	10
List of Tables	10
List of Figures	10
<i>Terminology</i>	11
<i>Chapter 1: Introduction</i>	12
Post-16 Special Education Needs and Disabilities (SEND) Context	13
SEND Provision in England	15
Prevalence of SEND in England.....	17
A Changing SEND Landscape	18
SLTs and Post-16 SEND Institutions.....	20
The Researcher’s Journey.....	22
<i>Chapter 2: Literature Review</i>	24
Models of Speech and Language Therapy Service Provision	24
Defining Collaborative Practice	28
Collaborative Practice in Policy	31

Interprofessional Collaboration in Education	32
Collaboration Between Teachers and Speech and Language Therapists	35
Time commitment and constraints	36
Communication	42
Personal attributes and quality of relationships	43
Understanding of each other's roles and responsibilities	45
Organisational structure	46
Chapter 3: Methodology	48
Research questions	49
Research approach.....	49
Research design	50
Participants.....	52
Target Population	52
Participant Sampling and Recruitment.....	52
Research Methods: Phase 1	54
Survey Methodology	54
Survey Design.....	55
Survey Distribution	58
Data Analysis	58
Research Methods: Phase 2	59
Focus Group Design	59
Semi-Structured Focus Group Guide Development	60
Focus Group Procedure	60
Data Analysis	62
Integrating quantitative and qualitative data	63

Ethical considerations	64
Autonomy	64
Avoidance of Harm	64
Benefit	65
Justice and Equity	65
Special Relationships	66
Cultural and Social Responsibility	67
Chapter 4: Results.....	68
Online Survey	69
Demographic Data.....	69
Perceptions of Collaboration	71
Planning the Ideal Service	83
Summary	84
Focus Groups	85
Demographic Data.....	85
Themes	85
Theme 1: SLTs' understanding and implementation of collaborative practice is vague and varied...	86
Theme 2: Understanding of roles influence collaboration at an individual and organisational level.	87
Theme 3: Barriers to collaborative practice occur at profession, organisation, and individual levels	
.....	91
Theme 4: SLTs' attempts or suggestions to improve collaborative practices within their own settings	
.....	96
Chapter 5: Discussion	100
Experiences of Collaborative Practice	100
Purposes, Advantages, and Disadvantages of Collaboration	101
Factors that Influence the Success of Collaboration	104

Time commitment and constraints	104
Communication	105
Personal attributes and quality of relationships	106
Understanding of each other's roles and responsibilities	107
Organisational structure	108
Chapter 6: Conclusion.....	111
Purpose and Rationale of the Study	111
Research Strengths	112
Credibility	112
Transferability.....	113
Dependability.....	113
Confirmability	114
Research Limitations	114
Clinical Implications and Practical Applications	115
Directions for Future Research.....	116
Conclusion.....	117
References	119
Appendix A	126
Recruitment email to settings	126
Appendix B	127
Recruitment email to Natspec.....	127
Appendix C	128
Participant information sheet.....	128

Appendix D	131
Online Survey Questionnaire	131
Appendix E.....	145
Semi-structured focus group guide.....	145
Appendix F.....	147
Low-risk ethics notification	147
Appendix G	149
Codebook	149

List of Tables and Figures

List of Tables

Table 1	38
Table 2	70
Table 3	70
Table 4	72
Table 5	75
Table 6	76
Table 7	81
Table 8	82

List of Figures

Figure 1	72
Figure 2	73
Figure 3	74
Figure 4	77
Figure 5	78
Figure 6	79
Figure 7	80
Figure 8	80
Figure 10	82
Figure 11	85

Terminology

The present study was conducted in England and, as such, there are some differences in terminology between the England and New Zealand contexts. Definitions of key terms are provided below.

Local Authority – a term generally used interchangeably with “council” a Local Authority is the local government body with oversight of education and social care, among other responsibilities.

Further Education (FE) - any education for people aged 16 or older, who are not completing a degree (Department for Education, n.d.-a).

Natspec – a membership organisation for organisations providing specialist education to young people with learning difficulties and disabilities.

Post-16 SEND – a type of FE setting for young people aged 16-25 with special educational needs and disabilities.

SEND – Special Educational Needs and Disabilities.

Chapter 1: Introduction

Speech and Language Therapists (SLTs) have an important role to play in supporting children and young people (CYP) across the educational journey, from early years through to higher education. According to the Royal College of Speech and Language Therapists (Royal College of Speech and Language Therapists, n.d.-c), the core role of SLTs working in education is to address communication barriers to CYP accessing education and support CYP to meet their full educational potential. As part of this role, SLTs are known to work closely with education professionals, CYP and their families to provide tailored support.

Collaboration, therefore, is key to providing an effective service, enabling SLTs to provide holistic care, raise awareness of communication, and raise the profile of the profession (Royal College of Speech and Language Therapists, n.d.-a). Across the SLT profession, collaborative practice can encompass a wide range of activities, including working with stakeholders such as individuals with communication difficulties, families and other professional groups to improve communication participation; providing training to those who work with people with communication difficulties; and raising public awareness about communication difficulties.

Given that, by nature, collaboration involves participants from different backgrounds working together, it is important to understand how collaboration happens and the factors that influence it. However, a recent House of Commons Committee report, with recommendations for 'solving the SEND crisis' (Education Committee, 2025), draws attention to the fact that the Further Education (FE) sector, which includes Post-16 SEND settings, receives little attention within SEND policy, and that existing

SEND policy focuses on schools, making an inaccurate assumption that Post-16 SEND settings are also schools, functioning in the same way, when in fact they are typically more focused on vocational activities and life skills, which is a distinctly different context, particularly for SLTs working within them.

Post-16 Special Education Needs and Disabilities (SEND) Context

In England, all children and young people (CYP) must remain in full-time education until they are 16. However, between the ages of 16-18, CYP have a choice to:

- Stay in full-time education, for example at a college,
- Undertake an apprenticeship, or
- Spend 20 hours or more per week working or volunteering while in part-time education or training (Department for Education, DfE, n.d.).

The Children and Families Act (2014) and SEND Code of Practice (DfE and Department for Health, DfH, 2015) make provisions for CYP with Education, Health and Care Plans (EHCPs) to remain in education until they are 25. An EHCP is a legal document that describes a child or young person's special education needs, outcomes they would like to achieve, and the specialist supports they need to achieve those outcomes (Council for Disabled Children, n.d.). For those in full-time education, there are three basic types of educational settings in England (Independent Provider of Special Education Advice, n.d.)

- *Maintained by the local authority:* often referred to simply as 'maintained' settings or 'state' settings, these schools and colleges are funded and controlled by a local council, referred to as the local authority (LA). Maintained schools and

colleges can include both mainstream and specialist settings and can include schools for those over the age of 16, referred to as ‘Post-16 providers.’

- *Controlled by the Secretary of State:* these types of education settings are referred to as ‘academies,’ and are controlled and funded directly by the Secretary of State for Education.
- Those not controlled by a local authority or the Secretary of State, including:
 - ‘Independent’ schools and colleges, which are mostly controlled by charities and are not for profit, although some private owners operate for profit. Many of these may be designated ‘Section 41’ settings, meaning they have been approved by the Secretary of State for Education under Section 41 of the Children and Families Act (2014) as education settings which a parent or young person can have named on their EHCP. Some may be described as ‘specially organised to make provision for pupils with Special Educational Needs (SEN),’ however, these are not specifically designated ‘mainstream’ or ‘special.’
 - ‘Non-maintained’ schools, all of which are charitable and not for profit.

While the SEND Code of Practice (Department for Education & Department for Health, 2015) stipulates a focus on inclusive education, stating that the United Kingdom (UK) Government is “committed to inclusive education of disabled children and young people and the progressive removal of barriers to learning and participation in mainstream education” (Department for Education & Department for Health, 2015, p. 25), young people with EHCPs may be educated in any of the above settings.

SEND Provision in England

The UK Government website (DfE, n.d. -a) states that SEND can affect a child or young person's ability to learn. NHS England goes further to indicate that a child or young person has SEND if they have a learning difficulty or disability that means they require special health and education support (NHS England, n.d.), such as Autistic Spectrum Condition (ASC); speech, language and communication needs (SLCN); social, emotional and mental health (SEMH) difficulties; hearing or visual impairment; moderate, severe or profound learning disability; or a specific learning disorder such as dyslexia, dyspraxia, or dyscalculia.

In England, there are two main avenues for accessing special health and education support for CYP with SEND. These are:

- Special Educational Needs (SEN) Support, or
- Education, Health and Care Plan (EHCP).

Definitions of both these forms of support are laid out within the Children and Families Act (2014) and the Special Education Needs and Disabilities (SEND) Code of Practice: 0 to 25 (DfE & DfH, 2015).

According to the SEND Code of Practice, SEN support is educational or training provision for CYP with SEND in mainstream settings. This support is additional to or different from that generally available to other age-matched peers without learning difficulties within Local Authority maintained mainstream schools or Post-16 institutions. SEN supports are described as a four-part cycle to include *assessment*, *planning*, *doing*, and *reviewing*. Examples of SEN supports for college-aged students suggested within the SEND Code of Practice (DfE & DfH, 2015) include assistive technology, personal care, interpreters, one-to-one and small group learning support,

accessible information such as symbol-based materials, and access to therapies, such as speech and language therapy (SLT) or occupational therapy (OT). The SEND Code of Practice goes on to indicate that funding for SEN support comes from within the CYP's educational setting. Local Authority maintained educational settings receive annual notification of a notional budget for SEN support, which is part of their overall budget allocation (DfE, 2024). That is to say, schools are advised of an approximate guideline on how much should be spent on fulfilling their duties to provide for students with SEN, and it is for these settings to determine how to use these resources.

The Children and Families Act (2014) Part 3, Section 37, states that “an EHC plan is a plan specifying:

- The child's or young person's special educational needs;
- The outcomes sought for the child or young person;
- The special educational provision required;
- The health care provision reasonably required by the learning difficulties and disabilities which result in him or her having SEN;
- In the case of a child or a young person aged under 18, any social care provision which must be made for him or her by the local authority as a result of section 2 of the Chronically Sick and Disabled Persons Act 1970;
- Any social care provision reasonably required by the learning difficulties and disabilities which result in the child or young person having special educational needs, to the extent that the provision is not already specified in the plan under paragraph (e).”

According to the SEND Code of Practice (DfE & DfH, 2015), the purpose of an EHCP is to make special educational provisions to meet the needs of the child or young

person and to achieve the best possible outcomes within education, health and social care. Funding for EHCPs is provided in a variety of ways but generally involves partial or total direct payment from the CYP's Local Authority to their educational setting (Department for Education, 2025b). EHCPs can make specific provisions a legal requirement for the child or young person's education, such as naming specific schools or educational facilities that are able to meet the individual's needs, and detailing levels of therapeutic provision.

Prevalence of SEND in England

At an individual level, SEN Support and EHCPs provide important information regarding the support CYP with SEND require to effectively access education. In addition, SEN Support and EHCP data can be used as a gross measure of the prevalence of SEND in England.

Annual data related to SEN Support in England is gathered from the School Census (surveying state-funded schools), the School-Level Annual School Census (surveying independent schools) and General Hospital School Census (Department for Education, 2025c). The latest data, published by the DfE in June 2025, reveals that 1,284,284 CYP across early years settings, schools and colleges, received SEN Support in the 2024/2025 academic year. This equates to 14.2% of all students in England, an increase from the 11.6% of students requiring SEN support in 2016. These data also reveal that the most common type of need for those receiving SEN Support was 'speech, language and communication needs' (23.7%), followed by 'social, emotional and mental health needs' (21.7%) and 'moderate learning difficulty' (13.2%).

Annual data related to EHCPs in England is also published by the Department for Education in the Education, Health and Care Plans report (2025) and provides detail about the total number of CYP with EHCPs, including those who are in non-maintained early-years education; further education; home education; or not in education, employment or training (Department for Education, 2025a). The most recent data from this survey, published in June 2025, reveals that 638,745 CYP currently have an EHCP in England, an increase of 10.8% since the January 2024 data was published. Indeed, the most recent data indicates that the number of requests for new education, health and care needs assessments is 11.8% higher than in 2023 and the number of new plans that started during 2024 is 15.8% higher than the year before. The most common primary type of need for those with an EHCP was ‘autistic spectrum disorder’ (31.5%), followed by ‘speech, language and communication needs’ (21.2%) and ‘social, emotional and mental health difficulties’ (20.7%).

The combined SEN Support and EHCP data indicate that 19.5% of all school students require some form of additional educational support. This number has been increasing since 2016, when the total was 14.4% (DfE, 2023).

A Changing SEND Landscape

Little research has been conducted to explain this trend of increasing SEND in recent years. However, several theories have been proposed by academics within the SEND field. First, Van Herwegen (2022) proposes that the recent increases in SEN Support and EHCP numbers are a result of historical events within the SEND landscape. For example, SEND reforms in 2014 meant that many children were not transferred from the old system of support to a new system, resulting in an apparent drop in numbers at

that time. The current increase may be a 'catch up' from this change, as children are now being reassessed and provided with the appropriate levels of support again.

Second, Van Herwegen (2022) and Crane (2024) both posit that increased awareness of SEND could be partially responsible for the recent increase in SEN Support and EHCP figures. Both propose that specific awareness campaigns for autism may mean that families and educators are more informed and able to recognise early signs that a child or young person is developing differently from their peers. Van Herwegen (2022) also theorises changes to diagnostic criteria, for example for autism, may contribute to the increase in SEN Support and EHCP figures. Similarly, both Van Herwegen (2022) and Crane (2024) consider changes to the conceptualisation of education as a contributing factor, with both referencing the fact that EHCP assessments consider the personal, social, and emotional development of the child or young person, rather than solely focusing on academic engagement and performance. Crane (2024) goes further to state that assessing CYP on such a broad range of areas is likely to result in seeing an increasingly diverse range of needs.

It appears that there is no single reason for the increase in SEN Support and EHCPs over recent years, but it may be the result of societal changes towards support for those with additional learning needs. With autistic spectrum disorder and speech, language and communication needs as the two most common primary needs for those with SEN support or an EHCP, SLTs have an important role to play in supporting these young people, including those in special Post-16 institutions.

SLTs and Post-16 SEND Institutions

The DfE maintains and publishes a list of all independent specialist schools and special Post-16 institutions that are approved under section 41 of the Children and Families Act (2014) in England and Wales (Department for Education, 2015). Approval under section 41 means that an education setting can be specifically named in a child or young person's EHCP. According to this list, there are 138 special Post-16 institutions that are approved under section 41 to meet the needs of young people with SEND in England. All these settings will employ qualified or non-qualified teachers to work with the young people. Many of these settings will also employ SLTs or commission SLT services, although no specific data describing SLTs in Post-16 SEND is available.

A number of international longitudinal studies document the long-term consequences of communication difficulties, including early language impairment as a predictor for reading outcomes (Catts et al., 2001; McLeod et al., 2025). Additionally, the Royal College of Speech and Language Therapists' (RCSLT) position paper on learning disabilities highlights the relationship between learning disabilities and poor health outcomes (Money, 2023). This paper describes communication difficulties as a core characteristic of learning disabilities. It is stated that communication difficulties and reduced health literacy is a determinant of health inequality, although no definitive prevalence statistics for those who experience SLCN exist. It is stated that those with communication difficulties are at greater risk of:

- Not being understood,
- Being unable to independently communicate their needs,
- Experiencing barriers when accessing health, education and social care, particularly in understanding information and expressing themselves, and,

- Having limited involvement in decision-making.

This position paper states that SLTs' role within specialist learning disability settings, such as Post-16 SEND settings, should include improving the knowledge and skills of staff in understanding and responding to individuals with learning disabilities and SLCN, as well as working to establish supportive and responsive environments that enable more effective communication.

Indeed, current statistics indicate poorer health and employment outcomes for autistic individuals or those with learning disabilities when compared with neurotypical people, which are contributed to by communication difficulties and differences (Money, 2023). The Buckland Review of Autism and Employment (Buckland, 2024), states that only 3 in 10 working age autistic people are in employment. In comparison, 5 in 10 of all disabled people, and 8 in 10 of non-disabled people are in employment. This same review identifies a range of factors leading to these poor employment outcomes, including differences in communication style and information processing as one of the perceived biases or stigmas about autistic individuals. It also identifies the need for greater training and awareness, for example, developing understanding that taking longer to process information is not a reflection of cognitive ability. These training and awareness efforts could be contributed to by SLTs and teachers, particularly when working with young people in Post-16 SEND settings who are focusing on gaining work experience and employment skills. Indeed, The Royal College of Speech and Language Therapists' (RCSLT) Autism Guidance (2023) states that the role of the SLT is to support the development of self-advocacy skills in the right place and the right time, including doctors' offices and job interviews. However, as an experienced practitioner in the Post-

16 SEND field, the researcher has identified a paucity of research evidence to support the use of specific approaches to help CYP develop these skills.

The Researcher's Journey

I hold a speech and language therapy qualification from the University of Canterbury, New Zealand. As a new graduate, between 2017 and 2019, I worked at the Ministry of Education in New Zealand supporting preschool and early school aged children and their families who were affected by SLCN. This is where my particular interest in collaboration with teachers really began, as I developed close professional relationships with teachers in several kindergartens and schools and gained experience in coaching approaches.

At this time, I worked in a community that was known to have many households of a low socioeconomic status (SES), and feedback I received from kindergarten and primary teachers was that many children were transitioning into school who were not “school ready” due to poor speech and language skills. However, many of these children did not ‘qualify’ for targeted SLT support. It became clear that it was necessary to implement more universal approaches that could benefit all children and that these were only effective through collaboration with teachers. However, there was no clear system in place for providing this.

When I reflect on my time in this role, I think of a particular school-wide approach that I was trialling with one school. I was tasked with providing training to teachers around key domains of speech and language development, so that teachers could take on more of the assessment and implementation of speech and language

strategies, an incredible ask of teachers, and reflective of the lack of shared understanding of teachers' and SLTs' roles.

Since 2020, I have worked in a residential specialist college for autistic young adults aged 16-25 in England. Many of the students also have learning disabilities and SLCN. Working in this context has helped me to develop as a holistic practitioner, placing individuals' wellbeing at the centre of their educational experience through supporting the development of autonomy, independence, and self-advocacy skills.

Providing a speech and language therapy service that is integrated into the educational environment has also highlighted the necessity of effective collaboration with teachers, so that care, support, and education are provided in evidence-based and meaningful ways. The longer I have worked in this setting, the more evident it has become that much of the speech and language therapy research in education settings focuses on early years or primary-aged students. This is an issue for SLTs working with young people in education settings because generally, when young people have reached college age, their social interests have changed, as well as their aspirations and priorities for the future.

It can be difficult to implement evidence-based SLT programmes or strategies that have been designed for primary-aged children, when so much about the context in which young adults learn and communicate is different to that in a primary school setting. The unique complexities of working with young people with SEND who are transitioning into adulthood has fuelled my interest in investigating the realities that teachers and SLTs experience working together in Post-16 SEND settings

Chapter 2: Literature Review

Models of Speech and Language Therapy Service Provision

Speech and language therapy services have taken a range of forms over the years, as evidenced by the international body of literature. Law et al. (2002) describe the traditional model of speech and language therapy as that in which an individual SLT works with an individual child, within a clinic setting. This traditional model is also sometimes referred to as a “pull-out” model of delivery (Hartas, 2004), referencing the culture of withdrawing a child from their natural environments (e.g., the classroom or home) to deliver therapy in a clinic. This approach to service delivery evolved from a medical model (Hartas, 2004; Koski, 2014) which is considered to reinforce perspectives of deficit and disability, in which the difficulties are located within the individual (Hartas, 2004; Koski, 2014). According to Law et al. (2002), in the traditional model, the focus is on minimising or removing the impairment that the child experiences.

Discussions around a shift away from this traditional, medical model of service provision to a more consultative, ecological approach were the focus of speech and language therapy literature in the early 2000s (Hartas, 2004; Kersner & Wright, 1998; Law et al., 2002; Law et al., 2000). Although both the traditional medical model and consultative model are about delivering supports for the individual child, the consultative model is one in which an SLT advises those within the child’s usual or natural environments (e.g., parents, teacher) (Hartas, 2004). The nature of this model is difficult to quantify in terms of frequency or intensity of input from the SLT, with ‘consultative’ being used to describe SLT input ranging from a single annual visit to a

block of direct therapy (Gascoigne, 2006; Law et al., 2002; Law et al., 2000). However, the theory underpinning this approach is consistent – that of Bronfenbrenner’s Ecological Systems Theory of Human Development (Bronfenbrenner, 1979).

Bronfenbrenner’s theory considers the myriad of dynamic relationships between an individual and their social and physical surroundings (Tong & An, 2024). It has practical application for SLTs working in consultative models in which goals are embedded into the daily routines of the young person and undertaken by those people who are part of the routines. However, there are a number of reported concerns regarding the effectiveness of this consultative model. Firstly, SLTs generally deliver services indirectly through others, such as school staff (White & Spencer, 2018). This approach may encourage a professional hierarchy between teachers and SLTs, with the SLT being viewed as a visiting ‘expert,’ providing advice for teachers to incorporate into classroom instruction (Kersner & Wright, 1998; Law et al., 2002; Mathers et al., 2024; Wilson et al., 2016). It has also been suggested that limited funding to SLTs providing a consultative model in schools has resulted in a lack of true collaboration between teachers and SLTs (White & Spencer, 2018). In addition, research into parents’ perspectives on a consultative model has indicated their concern that it is simply a cheap way of providing services, as opposed to their child receiving one-to-one therapy (Law et al., 2002).

More recently, speech and language therapy provision within education contexts has been conceptualised using a hierarchical, or tiered approach (Ebbels et al., 2019; Gascoigne, 2006; Law et al., 2013). This is referred to in the literature with various names, including tiers, stages, or response to intervention (RTI) models. RTI began as a framework for identifying children with learning disabilities following the

introduction of the 2004 Individuals with Disabilities Education Improvement Act (Fuchs & Fuchs, 2006), and its history is embedded in learning disability literature (Preston et al., 2016). In its original design, the RTI model focuses on assessing students and monitoring those identified as “at risk,” (for example, of reading difficulties) to determine their responsiveness to interventions, and therefore identify, in a timely manner, ‘non-responders’ who require increasingly intensive levels of support (Fuchs & Fuchs, 2006).

The common theme within RTI models is three levels in a pyramid-like structure, with increasingly intensive levels of support. Gascoigne (2006) and Law et al. (2013) labelled the first or lowest level of the pyramid (i.e., Tier 1) as *Universal*, which Ebbels et al. (2019) defines as high-quality teaching and interactions for all. The second or middle layer of the pyramid is the targeted level (i.e., Tier 2), defined by Ebbels et al. (2019) as education-led groups providing additional targeted support for areas of identified need. The third or highest layer of the pyramid is often referred to as the specialist level (i.e., Tier 3) (Gascoigne, 2006; Law, 2013), and in the context of speech-language therapy service provision, is defined as intensive direct or indirect support specifically tailored to a child’s individual needs (Ebbels et al., 2019). This tiered approach incorporates aspects of both the traditional (direct) model and the consultative (indirect, ecological) model of speech and language therapy provision. The fundamental difference is that, while a traditional or consultative model of provision focuses on the communication needs of an individual child, the RTI model allows scope for SLTs to advise on communication supports for all children (Tier 1) or for those who are at risk of communication difficulties (Tier 2). Tier 1 interventions are conceptualised as ‘preventative,’ (Law et al., 2013), and Tier 2 as more remedial for high-risk populations. Further, ongoing monitoring and assessment to determine the appropriate

level of support, or tier, for each child is a key aspect of the RTI model, with children moving between tiers based on how they respond to the supports put in place (Ebbels et al., 2019).

Despite being a common conceptual framework for determining service provision, there is no definitive standard for SLT input at each level. Ebbels et al. (2019) conducted a systematic review of literature examining tiered approaches to speech and language therapy for children with language disorders and drew conclusions about practice implications for SLTs in the UK. They propose that the universal and targeted levels of provision require the least SLT input, mostly involving influencing national policies and public advocacy, and collaborating to provide advice and support regarding evidence-based programmes that can be delivered by education professionals. Ebbels et al. (2019) posit that Tier 3, the specialist level, is a core part of a speech and language therapy service, given that evidence indicates children with complex and pervasive language disorders and additional complex needs require specialist SLT input to make progress. Ebbels et al. (2019) state that SLTs are part of the multidisciplinary workforce supporting children with communication disorders, and that close collaboration between SLTs, families, and other professionals is a crucial component of effective support. However, they then go on to state that a lack of shared terminology between health and education professionals hinder shared understanding and effective collaboration.

In contrast to the UK, steps to address this lack of shared terminology have been taken within the New Zealand context. This is through the introduction of He Pikorua, where ‘pikorua’ refers to the strength of relationships on the journey through life (Ministry of Education, n.d.). It is a practice framework for Ministry of Education and

Resource Teacher of Learning and Behaviour (RTLB) learning support practitioners (Te Kete Ipurangi, n.d.). According to Te Kete Ipurangi, He Pikorua provides guidance on a set of shared principles and shared language, with the aim of supporting flexible collaboration between learning support practitioners such as SLTs, Occupational Therapists (OTs), physiotherapists, educators, children, and families across early learning services and schools. He Pikorua includes a multi-tiered system of supports, Te Tūāpapa. This ranges from universal supports for all students such as inclusive environments, cultures and practices, to targeted supports such as focused approaches to enhance participation and wellbeing, to tailored supports for specific needs and contexts. This differs from the Ebbels et al. (2019) conceptualisation of an RTI model, which consists of three distinct tiers, with clear SLT roles at each tier. In contrast, Te Tūāpapa is viewed as a continuum of support, with students who require the most intensive supports also benefiting from the supports provided at the universal and targeted levels, and each level of support viewed as having equal importance. It is stated that this model enables practitioners to intervene early, support developing systemic responses across early learning services and schools, support the development of individualised approaches, and use adaptation and differentiation for group and individuals within settings (Ministry of Education, 2024).

Defining Collaborative Practice

Just as there is a lack of consistency in the ways that speech and language therapy services are delivered or levels of provision for service users are determined, there is wide variation in how to conceptualise collaborative healthcare and education practices. Collaborative Practice is referred to by many names within the literature,

such as Interprofessional Practice (IPP), multidisciplinary, transdisciplinary, multi-professional, interdisciplinary, teamwork, multi-agency, or integrated working, amongst others (Quigley & Smith, 2022). This plethora of terminology is consistent with a lack of agreed definition of collaborative practice. Definitions put forward by the World Health Organisation (WHO, 2010), American Speech-Language-Hearing Association (ASHA, n.d.), Jago and Radford (2017), and Morley & Cashell (2017) among others, share common features, such as stating that collaboration occurs between individuals from “different backgrounds” (WHO, 2010) or “other disciplines” (ASHA, n.d.), with a focus on sharing understanding, values, responsibility or goals (WHO, 2010; Jago & Radford, 2017; Morley et al., 2017; ASHA, n.d.).

Amongst the speech and language therapy literature, common themes emerge when defining collaborative practice, the most prevalent of which is *sharing* – sharing knowledge and skills (Jago & Radford, 2017; Klatte et al., 2024; Quigley & Smith, 2022), and sharing responsibility and power (Gallagher et al., 2019b; Hartas, 2004; Klatte et al., 2024; Quigley & Smith, 2022). Quigley and Smith (2022) applied an epistemological perspective to interprofessional collaboration, using an action research methodology to address the challenges experienced by teachers and SLTs in a mainstream primary school in Ireland. Epistemology is a branch of philosophy that examines types, limitations, and justifications of knowledge (Hathcoat et al., 2019). Within this study, they identified four key features of collaboration across the literature:

1. Collaboration involves those from different professional backgrounds working together.
2. Collaboration focuses on shared goals related to improving outcomes for service users.

3. Collaboration is dynamic and includes the sharing of knowledge and practices.
4. Collaboration is non-hierarchical, involving negotiation, cooperation and consensus.

Watts et al. (1994) proposed levels of collaboration within their report on the educational and vocational guidance available to young people and adults in the European community. These levels are as follows:

- *Communication* – where working patterns remain unchanged, but information is shared between services and professionals to aid understanding of what each other offers.
- *Co-operation* – where two or more services, agencies, or individuals from different professional backgrounds, work co-operatively on a shared task.
- *Co-ordination* – where two or more services, agencies, or individuals from different professional backgrounds alter their working patterns to more closely align with each other, while remaining within existing professional boundaries.
- *Cross-fertilization* – where efforts are made to encourage those from different services or professional backgrounds to share and exchange skills, and to work across professional boundaries in ways that are likely to alter those boundaries.
- *Integration* – where the collaborative process is advanced to a point at which professional boundaries between services have disappeared altogether.

This education-focused typology of collaboration is consistent with the common features of collaboration identified by Quigley and Smith almost three decades later (Quigley & Smith, 2022), focusing on sharing of information between professionals, and working together to share knowledge and skills.

Across these different definitions, common themes emerge, such as the inclusion of participants from various professions, shared purpose and knowledge, power and responsibility, and shared outcomes. For the sake of clarity and shared understanding, the following definition has been adopted for the current research:

- Collaborative practice occurs when two or more individuals from different professional backgrounds work together to create a shared understanding (WHO, 2010:36) and for a common purpose (Hornby, 1993:11). Collaborative practice involves sharing of knowledge, skills, responsibility and power, with the objective of improving outcomes for students or service users.

Collaborative Practice in Policy

Over recent decades, calls for collaborative practice in healthcare and education for those with SEND have been increasingly embedded into both international and national policy (Department for Education & Department for Health, 2015; Health and Care Professions Council, 2016; Royal College of Speech and Language Therapists, n.d.-b; World Health Organization, 2010, 2011). The SEND Code of Practice (DfE, 2015) states that “if children and young people with SEN or disabilities are to achieve their ambitions and the best possible educational and other outcomes, including getting a job and living as independently as possible, local education, health and social care services should work together to ensure they get the right support” (p. 24). In their guidance to meet the Health and Care Professions Council (HCPC) standards, the Royal College of Speech and Language Therapists (RCSLT) calls for SLTs to “cooperate and collaborate with colleagues in all aspects of service users’ and carers’ management, within and across settings, sectors and professions in the best

interests of service-users” (RCSLT, Work with Colleagues, para. 1) and “work in partnership with other services, putting the service users’ interests first” (RCSLT, Work with Colleagues, para. 4). The HCPC is the UK regulatory body for allied health professionals, including SLTs and requires that SLTs “work in partnership with colleagues, sharing your skills, knowledge and experience where appropriate, for the benefit of service users and carers.” (HCPC, 2024, 2.6). These policy statements, whilst ambitious, do not provide practical advice and guidance on how to action this collaboration. Despite this, numerous efforts have been made to investigate collaborative practices between teachers and other professionals.

Interprofessional Collaboration in Education

Collaboration between teachers and other professionals has gained some attention in recent decades, as shifts in attitudes and therefore policies related to special education have taken place, such as the SEND Code of Practice (2015). Indeed, CYP with SEND may have more professionals involved in their care, such as educational psychologists, disability social workers, SLTs, OTs, physiotherapists, or Child and Adolescent Mental Health Services (CAMHS) among others, with implications for the complexity of collaborative practice. For example, recent shifts toward integrated practice and a multi-tiered system of supports within the field of occupational therapy has triggered some recent research into collaborative practices between teachers and OTs.

Barnes and Turner (2001) defined collaborative practice between OTs and teachers as formal and informal interactive practices between parties for the purposes of planning, development and monitoring of interventions. This US-based study utilised

a survey and record review methods to examine the experiences of 40 teachers of students who received OT support. The researchers found that teachers and OTs were using a range of collaborative practices such as developing joint goals and objectives, jointly monitoring interventions and reviewing student progress, and collaborating within the classroom. However, this same study found that participants found scheduling team meetings to be difficult, and found that, as the number of formal meetings increased, the proportion of achieved IEP targets decreased. The researchers theorised that increased formal meetings led to increased scrutiny of the targets and student progress. However, it was also stated that teachers reported a positive correlation between OT input and student skill development, and participants believed that frequent meetings were beneficial to students, despite the decreased IEP target attainment (Barnes & Turner, 2001).

A recent qualitative study investigating collaboration between student OTs and a Kindergarten teacher in the adaptation of a Social-Emotional Learning (SEL) curriculum in the USA (Benevides et al., 2022) stated that interprofessional collaboration raises delivery of services to a level where professionals work as equal partners towards common goals and outcomes. For this study, the researchers trained a kindergarten teacher and two OT students in the implementation and adaptation of a SEL curriculum and then analysed interview information from post-implementation. The researchers identified several factors that influenced collaboration between the parties. These factors included communication, limited role understanding, and the contextual factors of the school setting, such as system-level barriers of time and last-minute directives placed on the teacher by the school district. In particular, the student OTs stated that communication between professionals was hindered, but that they felt

increasing communication would have been too much for the teacher, given the teacher's existing workload. Additionally, the student OTs reported difficulties in involving the teacher in planning, due to the pressures placed on the teacher. These researchers suggest directions for pre-service interprofessional education to develop understanding of roles; reducing barriers to collaboration such as time limitations and communication barriers; and addressing system challenges that conflict with collaboration.

A small number of studies have also been conducted investigating the nature of collaboration within multi- or transdisciplinary teams (Phoenix et al., 2021; Sisti & Robledo, 2021). Phoenix et al. (2021) investigated the experiences of a transdisciplinary team that included an SLT, OTs, and Special Education Resource Teachers in Ontario, working within two schools. The researchers described several factors that supported collaboration, such as frequent team meetings and classroom visits, as well as personal attributes of team members. Positive personal attributes included being knowledgeable, flexible, responsive, creative, approachable, and resilient. Several barriers to collaboration were also described, including service fragmentation as a result of some transdisciplinary team members being employed by external service providers; lack of time as a result of absences, changes in staffing, retraining, and holidays; and difficulties providing small-group work within the classroom settings. Challenges related to student need and team member workload were also described, with differing levels of experience working within tiered systems of support listed as a contributing factor. Participants recommended increased clarity regarding expectations and shared understanding when implementing multi-tiered system of supports.

Sisti and Robledo (2021) explored special education teachers' perspectives of working with multiple service providers in the US, through surveys and interviews. In this study, teachers reported that they collaborated most frequently with SLTs and OTs, and this collaboration most often occurred in the areas of assessment and goal development. It was reported that collaboration most frequently occurred when service providers were full time within the school and there was low staffing turnover. Reasonable caseload sizes were described as allowing teachers and service providers time to meet as a team, and respectful long-term relationships fostered close collaboration. Participants also reported that it was important to increase communication to solve problems together while sharing resources, knowledge of students, and expertise.

Several factors that influence collaboration are evident across this body of research, including time availability of professionals, communication, understanding of each other's roles, and personal attributes of the collaborative team members. These factors are echoed and expanded in literature exploring collaboration specifically between teachers and SLTs.

Collaboration Between Teachers and Speech and Language Therapists

Collaboration between teachers and SLTs has received some attention in the literature over the past 25 years. Table 1 outlines contextual information related to a number of studies that have explored this topic, including participants and the education contexts examined. Much of the research has focused on mainstream primary settings. It is also evident that those studies using a survey methodology had significantly higher participant numbers than those using interview or action research

methodologies. However, despite differences in methodologies and participant numbers, many of these studies identified a range of consistent factors that influence collaboration, including: (1) Time commitment and constraints; (2) Communication; (3) Personal attributes and quality of relationships; (4) Understanding of each other's roles and responsibilities; and (5) Organisational structure.

Time commitment and constraints

Adequate time is found to be both a supporting and limiting factor for engaging in collaborative practices (Glover et al., 2015; Hartas, 2004; Quigley & Smith, 2022; Wright & Kersner, 1999, 2004). Indeed, Armstrong et al. stated in their 2023 systematic review that time was “overwhelmingly” (Armstrong et al., 2023, p. 1370) identified as a key influencer of collaboration, across studies. They go further to indicate that the lack of time experienced by both SLTs and teachers impacted on opportunities for co-planning, communicating, building relationships, attending meetings, providing assistance in classrooms, and working together.

Quigley and Smith (2022) used an action research methodology to examine the experiences of three teachers and one speech and language therapist in a mainstream primary school in Ireland. The researchers identified dedicated time was a key factor in facilitating effective collaboration. The participants in this study were given “protected time away from the busy demands of daily school life,” (p. 139) and the researchers claimed that this is the foundation on which successful collaboration was built.

Wright and Kersner (2004) interviewed five pairs of teachers and SLTs across mainstream and special primary schools, and found that one of the barriers to collaboration was the lack of availability of staff at mutually convenient times, which

echoes the findings of Hartas (2004), whose survey of 25 teachers and 17 SLTs in one special school for children with SLCN in the UK

Table 1*Studies examining collaboration between teachers and SLTs*

Citation	Year	Country	Study Methodology	Sample Size and Participant Characteristics	Educational Cohort (pre-primary / primary / secondary; mainstream / specialist)
Armstrong et al.	2023	Australia, using international sources	Mixed Methods Systematic Review	18 studies included in systematic review.	Mainstream class teachers and SLPs; mixed primary and secondary.
Baxter et al.	2009	UK	Survey	25 schools; 95 educationalists responded.	Mainstream primary.
Forbes & McCartney	2010	UK	Cross-Cutting Analysis	Not specified	Not specified
Gallagher et al.	2019a	Ireland, using international sources	Integrative Review	81 papers across SLT and education.	Primary school, mainstream or special not specified.
Gallagher et al.	2019b	Ireland	Semi-structured interviews	8 SLTs, 5 teachers, 9 parents, 7 children with DLD.	Children aged 10-13 in mainstream and specialist settings.
Gallagher et al.	2020	Ireland	Delphi Survey	10 parents 8 practitioners (4 SLTs, 4 education professionals) 8 researchers	Mainstream, primary and secondary.
Glover et al.	2015	Australia	Mixed methods – 1. Questionnaire; 2. Focus group.	14 teachers; 6 SLTs.	Mainstream primary.

(Greenstock & Wright, 2011) Greenstock & Wright	2011	UK	Interview	Teachers = 15 EYPs = 22 SLTs = 16	Early Years Foundation Stage, mainstream
Hadley et al.	2000	US	Experimental design	Teachers = 4 SLTs = 1 Children = 86	Primary, mainstream
Hartas	2004	UK	Survey	25 teachers, 17 SLTs.	One special school for children with SLCN (no age range given).
Jago & Radford	2017	UK	Semi-structured interviews	10 newly qualified SLTs.	8/10 in mainstream primary; 2/10 in child development teams.
Lofthouse et al.	2016	UK	Action research	Not specified	Not specified
Mathers et al.	2024	UK	Scoping review	14 papers in total, 5 with collaboration as the primary focus.	Mainstream primary.
McCartney	1999	UK	Systems approach	Not specified	Not specified
McKean et al.	2017	UK	Qualitative case-study	33 participants across professional groups (teachers, SLTs, SENCOs etc.)	Mainstream primary.
McKenna et al.	2021	US	Survey	567 SLTs	Preschool through to secondary. Mainstream not specified.
Pfeiffer et al.	2019	US	Survey	474 SLTs	Preschool through to secondary. Mainstream not specified.

Quigley & Smith	2022	Ireland	Action research methodology	1 mainstream primary school – 3 teachers and 1 SLT.	Mainstream primary.
Ramirez & Lynch	2024	Ireland	Semi-structured interview	5 special education teachers.	Children in special education setting, aged 4-18 years.
Starling et al.	2012	Australia	Randomised Controlled Trial	7 teachers 1 SLP	Secondary, mainstream.
Suleman et al.	2013	Canada	Mixed – surveys and collaborative case study.	55 SLP students 52 student teachers	Not specified
Suleman et al.	2014	Canada	Mixed – surveys and collaborative case study.	55 SLP students 52 student teachers	Not specified
Tollerfield	2003	UK	Video / transcript analysis and group interviews	Group interviews: 7 SLTs, 8 teachers.	Classroom-based investigation undertaken in an infant class of a school for children with physical disabilities. SLTs in interviews worked across specialist and mainstream settings. All teacher participants worked in the education setting from the classroom investigation.
Watson et al.	2020	US	Survey	323 reading teachers	Preschool to secondary; mainstream not specified.
Wilson et al.	2015	NZ	Survey	58 student primary teachers; 37 student SLTs.	Primary; unclear whether mainstream / specialist both included.
Wilson et al.	2016a	New Zealand	Quasi-experimental design; case-based instructional planning and guided discussion.	18 student teachers 27 student SLTs	Primary mainstream.

Wilson et al.	2016b	New Zealand	Case study, interviews, survey.	4 student SLTs 4 student teachers	Primary mainstream.
Wright & Kersner	1999	UK	Survey	62 teachers; 27 SLTs.	Primary and secondary; specialist.
(Wright & Kersner, 2004)	2004	UK	Interview	5 pairs of teachers and SLTs.	Primary and pre-school aged; mostly mainstream, one special school included.

Furthermore, Pfeiffer et al.'s (2019) survey of 474 SLTs working across pre-school to secondary age in the USA found that one of the most frequently cited barriers to SLTs' participation in collaboration was time constraints or scheduling difficulties.

Taken together, these research findings indicate that scheduling time to collaborate, at a mutually convenient time, is important to enable both professionals to work together effectively.

Communication

Armstrong et al. (2023) described communication as a critical component of collaboration, emerging from their systematic review of the literature. Indeed, "collaboration cannot happen without communication skills" was identified as a key subtheme across the literature. This review indicated that effective communication was found to influence teachers' willingness to engage in further collaboration, and communication was found to be a facilitator of interprofessional relationships.

In contrast, insufficient or poor communication emerged as a significant barrier to effective collaboration, including when profession-specific terminology, or jargon was used. Indeed, Greenstock and Wright's (2011) study into the experiences of early years teachers in collaborating with SLTs stated that collaborative practice involving practitioners from more than one professional background is highly dependent on explicit communication between those practitioners. This is a continuation of an early theme identified by Wright and Kersner (2004), in which difficulties interpreting reports containing profession-specific terminology was found to be a barrier to effective collaboration.

In their 2016 study, Wilson et al. used a quasi-experimental design to investigate interprofessional education (IPE) between student teachers and student SLTs in New Zealand, which was then followed up by participant interview to evaluate changes in inter-disciplinary knowledge and perceptions as a result of the IPE. Analysis of the interviews identified “communication skills to support shared decision making” as a key theme, with participants reporting challenges in collaboratively making shared decisions, due to a lack of negotiation and discussion skills.

It is clear across the literature that strong communication skills are essential to enabling effective collaboration. This is closely linked with the importance of personal attributes and quality of relationships in influencing the success of collaboration.

Personal attributes and quality of relationships

Armstrong et al. (2023) identified that the importance of building and maintaining relationships is a key theme emerging in the literature. This systematic review goes on to indicate that it is not just the relationship between the SLT and the teacher that is important, but also relationships between SLTs and administrative or leadership staff as well as parents.

Gallagher et al. (2019a) conducted focus groups with teachers, SLTs, and parents, as well as semi-structured interviews with children with developmental language disorder (DLD) in Ireland and found that parents describe their ideal service as including the service user (parent and child), and service providers (SLTs and teachers). Furthermore, participants described their ideal service as one in which strong relationships are needed between families, schools, and SLTs, and focus needs to be placed on strengthening these.

Ramirez and Lynch (2024) conducted semi-structured interviews with five special education teachers working with children aged 4-18. Participants indicated that effective relationships were a “cornerstone” of collaboration, with positive relationships serving as an enabler of effective collaboration. In contrast, participants indicated that the absence of a good working relationship could influence negative perceptions of therapy and result in hierarchical attitudes.

Similarly, Jago and Radford (2017) conducted interviews of 10 newly qualified SLTs in Ireland, investigating their beliefs about collaborative practice and found that these participants viewed positive interpersonal relationships as an enabler of collaboration. However, only one participant in this research considered the influence of her own personality in the collaborative relationship, with this participant reflecting on the need to adapt to manage interpersonal barriers.

Armstrong et al. (2023) state that personal attributes are needed to collaborate effectively, including strong interpersonal skills, adaptability, flexibility, openness to others’ suggestions, time management skills, teamwork skills, and organisational skills.

This is not a new phenomenon. As far back as 2004, Hartas identified the perceived importance of chemistry and personality when it comes to individuals’ contributions to collaboration, which included factors such as similar age and sense of humour, as well as compatibility of values and beliefs. Hartas’ (2004) survey data revealed that positive personality traits such as a willingness to listen and a desire to work collaboratively were seen as essential for effective collaboration.

Greenstock and Wright (2011) described several personal skills that are essential for collaboration, including diplomacy, compromise, negotiation, suggestion and flexibility. It seems likely that strong interpersonal skills identified within the

literature, such as willingness to listen, flexibility, and openness to other's suggestions could serve as an enabler for building positive relationships, thereby influencing the success of the collaborative process.

Understanding of each other's roles and responsibilities

Armstrong et al. (2023) identified that a shared understanding of roles is necessary to enable effective collaboration, with a lack of understanding acting as a barrier and shared understanding facilitating collaboration.

Baxter et al. (2009) surveyed education staff working in 25 schools in one English town. This survey identified that teachers may have limited understanding of SLT procedures, such as how to refer to the service and how to contact the SLT service. The researchers also found that teachers have varied perceptions of joint working which may result in differing expectations. Baxter et al. (2009) suggested that discussion needs to take place between professionals providing SLT services and staff working within schools.

Wilson et al. (2015) conducted a survey of 58 student primary teachers and 37 student SLTs in New Zealand, the results of which indicated that teaching and SLT students have little understanding of each other's expertise in literacy curriculum and spoken language concepts. That study also found that both student teachers and student SLTs were less accepting of SLTs taking on a direct instructional role within classrooms. This is despite the fact that such highly collaborative practice aligns closely with SLTs' professional responsibilities to support with enhancing general classroom instruction with regard to language and literacy difficulties. Wilson et al. suggested that these challenges could be addressed through increased opportunities for

interprofessional education between student teachers and student SLTs, including through the development of interprofessional curricula content.

Interview participants in Jago & Radford's 2017 study identified understanding of roles and responsibilities as a barrier to collaboration, with all participants agreeing that opportunities to work with other student professionals at university would be beneficial to learning about collaborative practice, particularly in learning about others' roles. Indeed, Greenstock and Wright (2011) stated that collaborative implementation of interventions needs to be based upon a shared understanding of roles in this process.

Suleman et al. (2014) conducted a survey and collaborative case studies in which 55 student SLTs and 52 student teachers in Canada participated in an interprofessional education opportunity, focused on knowledge and application of models of service delivery. The results of this study indicated that, following the interprofessional education opportunity, the participants were not only exposed to the concept of sharing roles in different models of service delivery, but also that they were much more willing to engage in sharing roles and responsibilities.

It is evident across the literature that a shared understanding of each other's roles and responsibilities serves to effectively enable collaboration. Indeed, much of the literature goes further in suggesting interprofessional education as a mechanism for developing this shared understanding.

Organisational structure

Armstrong et al. (2023) identified factors beyond professional control, such as the impact of organisational functioning, as influential to the success of collaboration.

Indeed, a key finding was the impact of differing patterns of employment for SLTs and teachers on collaborative practice. For example, SLTs being employed by contracted agencies or private entities separate to the schools may have been subject to different working conditions and organisational goals to professionals working in schools. In addition, this literature review indicated that certain system-level factors can present a barrier to successful collaboration, such as confidentiality practices making it difficult for professionals to share information, or financial considerations across different agencies. The identification of organisational structure as a barrier to effective collaboration by Armstrong et al. (2023) aligns with the results of Gallagher et al. (2019b), who found that parents, teachers and SLTs described the ideal service as one which promotes collaboration by allowing for flexibility, innovation, and responsiveness.

Quigley and Smith's 2022 action research project trialled a proposed system for collaborative working, to identify key factors that influence the collaborative process. From this study, they identified that protected time and space is a key factor in the success of collaboration. However, they went on to state that, for many professionals, the request for the necessary time and space would require negotiation with management, including agreement on the foundations required for collaboration, adjustments to timetables, and changes so that indicators of productivity and success are focused on quality rather than quantity. They indicated that, essentially, effective collaboration requires an organisation that values it, beyond the level of the individuals involved in the collaborative process. Over 20 years ago, Hartas' (2004) survey similarly found that the organisational structure plays a crucial part in clearly defining roles and responsibilities, setting clear objectives, and putting systems in place to encourage and value collaboration.

Evidence across the body of literature indicates that organisational structure has an important role to play in enabling collaboration between teachers and SLTs, including a top-down valuing of collaboration, ensuring systems are set up to enable collaboration, and allowing for flexibility between professionals.

While much of the research has espoused the importance of collaborative working and identified a range of factors that influence the success of this collaboration, researchers also note the implementation gap between literature and practice (Hartas, 2004; Klatte et al., 2024). This implementation gap is also documented as a wider clinical and healthcare research issue with significant practice implications (Grimshaw et al., 2012). Furthermore, this researcher has been unable to identify much research examining collaborative practice between teachers and SLTs within specialist education settings, and particularly targeted at the secondary or Post-16 age groups. This means that professionals within these settings have little research evidence to guide them on how to collaborate effectively to support young adults with SLCN.

Chapter 3: Methodology

This chapter describes the study's methodology, beginning with the research questions and the theoretical basis of the research approach and design. The research methods will then be outlined, including descriptions of the instruments used, the data collection and analysis procedures, and the process of integrating the results from each phase. Lastly, ethical considerations will be discussed.

Research questions

The aim of the study was to explore teachers' and SLTs' experiences of collaborative practice in Post-16 SEND settings. This study examined the following questions:

- What are the experiences of teachers and SLTs related to collaborative practice?
- What are teachers' and SLTs' perspectives on the purpose, advantages, and disadvantages of collaborative practice?
- What are teachers' and SLTs' perspectives on the factors that influence the success of collaborative practice?

Research approach

This study was conducted using a mixed methods research (MMR) approach. This approach involves the collection of both quantitative and qualitative data (Creswell, 2014). Quantitative research is the study of variables that can be quantified or measured, using methods such as randomised controlled trials or cross-sectional surveys (Fisher & Bloomfield, 2019). The purpose of quantitative research is to select a sample of the population, measure the variables of interest, and use the findings to make judgements about the wider population, which means that the participant sample must be representative of the population. In contrast, qualitative research aims to gain an in-depth understanding of human behaviour. Methods used in qualitative research often involve interviews or observations and smaller sample sizes (Fisher & Bloomfield, 2019).

Quantitative and qualitative research methods each have their respective strengths and limitations, and it can be argued that the strengths of each research type

can be combined using a MMR approach, thus potentially reducing some of their individual limitations (Creswell, 2014; Creswell & Plano Clark, 2011). This combining of research methods provides a richer understanding of the phenomenon being investigated, as it helps to answer questions that cannot typically be researched by either method alone (Creswell & Plano Clark, 2011). Indeed, Greene (2012) posits that a MMR approach provides multiple lenses and therefore multiple perspectives on a phenomenon. Consequently, the MMR approach was selected for the current study to take advantage of the several lenses through which to explore the perspectives of teachers and SLTs in relation to their collaborative practices within Post-16 SEND settings, to gain a deeper understanding of this complex subject.

Research design

Creswell (2014) identifies three basic types of MMR design: convergent parallel mixed methods, exploratory sequential mixed methods, and explanatory sequential mixed methods. In the case of convergent parallel MMR design, the researcher gathers both quantitative and qualitative data simultaneously, analyses the data separately, and then compares the results to determine whether the outcomes confirm or disconfirm each other. The data collection methods could take the form of, for example, a quantitative method such as a survey, and a qualitative method such as a semi-structured interview. It has been posited that a convergent parallel MMR design can provide a more detailed and nuanced understanding of the data than either of the data collection methods in isolation (Alele & Malau-Aduli, 2023).

In contrast, an exploratory sequential MMR design is one in which qualitative data is collected in the first phase, followed by quantitative data in the second phase

(Creswell, 2014). The second phase of data collection is supposed to build on the information gathered in phase one. The intended purpose is to gather information from a few individuals (in the qualitative phase) and then determine whether these results can be generalised to a larger population. Alele and Malau-Aduli (2023) explain that this approach is useful in developing and testing new data collection instruments. The initial phase can be used to identify emerging patterns of the thoughts and opinions of a small sample of participants, to then guide the development of the quantitative instrument.

The third and final basic MMR design is an explanatory sequential design, in which the research is also conducted in two phases (Creswell, 2014). The first phase is dedicated to the collection of quantitative data, which is then analysed and used to plan or design the second, qualitative, phase of data collection. According to Alele and Malau-Aduli (2023), the goal is to use the qualitative findings to explain and interpret the results of the quantitative data.

For the current study, teachers' and SLTs' experiences and perceptions of collaboration were examined through an explanatory sequential MMR design, conducted in two phases. Phase one consisted of an online predominantly quantitative survey, while phase two consisted of semi-structured interviews, with questions and discussion based on the findings of phase one. This design was deemed appropriate because it allowed the researcher to gather data from a reasonably sized sample of the target population, to analyse the data to determine key findings which warranted further exploration, and to invite a smaller sample of participants for deeper enquiry into these themes, thereby providing context for the data obtained through the survey.

Participants

This section describes the target population for the study, recruitment process, and sampling procedures.

Target Population

The SEND Code of Practice (DfE, 2015) requires that education, health and social care professionals must work together to ensure CYP with SEND get the right support to get the best possible outcomes in areas such as education, employment, and independent living. This study aimed to examine collaborative practices between teachers and SLTs working in Post-16 SEND settings. For this reason, the target population is teachers and SLTs who have worked in Post-16 SEND settings within the last two years. Two years was deemed a reasonable timeframe to ensure that the potential participant pool was widened, while ensuring that respondents had recent experience of collaborative practice to support young adults with SEND and a rich understanding of the topic.

Participant Sampling and Recruitment

Online Survey

When conducting online survey research, there are many approaches to participant sampling, depending on the nature and purpose of the study. For example, a simple random sampling approach means that every member of the population has an equal chance of being selected for the research. While this method has strengths in reducing bias within the research, a key disadvantage is that the researchers may not target enough people with the knowledge and experiences being examined (Noor et al., 2022). Accidental, or convenience, sampling is another common method of identifying

participants within survey research. This is a non-random sampling method, in which the researcher approaches those most accessible and convenient to them, such as friends or acquaintances. This approach is not typically deemed suitable for published research due to the potential for research bias, however, it is often used for piloting a survey prior to distribution (Hahn, 2025). For the present study, a purposive sampling approach was used. Using this approach, population samples are specifically chosen to reflect a particular characteristic (Bullard, 2024) – in this case, teachers and SLTs who have experience working in Post-16 SEND settings. Providing comprehensive information about the sought-after target population ensured a criterion-based approach to purposeful sampling (Onwuegbuzie & Collins, 2007). This target population was selected in order to obtain insights into the phenomenon of collaboration between teachers and SLTs from participants who have relevant and recent experience to contribute to understanding of the topic (Onwuegbuzie & Collins, 2007).

The researcher recruited survey participants using several approaches over a three-month period. First, the primary researcher shared information about the survey on a personal LinkedIn social media account. The researcher also used a list of Post-16 SEND institutions available on the Department for Education website to create an email address list, to distribute an email containing a brief description of the study (Appendix A). This distribution list was comprised of email addresses for 80 different Post-16 SEND settings. The email invited these organisations to share this information with teachers and SLTs. Second, the researcher contacted the Chief Executive of Natspec, the membership association for organisations that provide specialist education for 16–25-year-old students with SEND via email, which is included in Appendix B. Natspec agreed to share information about the survey with member organisations in their March

briefing communications, and the Chief Executive also shared the researcher's social media post via LinkedIn. The Participant Information Sheet, included in Appendix C, was attached to both the email to Post-16 SEND settings and to Natspec. Lastly, the primary researcher used a list of Clinical Excellence Networks (CEN) on the Royal College of Speech and Language Therapists website to create an email address list of relevant CENs, to invite them to share the survey information with their members. Teachers and SLTs interested in participating could access the phase one survey through a link or QR code included in the email and social media posts.

Focus Groups

Recruitment to the focus groups was conducted on a voluntary basis following completion of the survey, with all survey respondents asked to indicate their interest and provide a contact email address.

Research Methods: Phase 1

This section provides detail relevant to the research methods used in designing and carrying out the online survey in phase one of the present study.

Survey Methodology

Surveys are typically used as a quantitative method of data collection, taking an objectivist approach to examining social phenomena (Owen, 2017). Owen (2017) posits that, although the phenomena studied may be subjective, such as beliefs, attitudes or opinions, survey research aims to understand them by assessing them objectively. The key feature of surveys is that they are used to make inferences or draw conclusions about a particular population, based on information collected from a sample of that population, including collecting sufficient demographic information to ensure that the

correct population is targeted. According to Sheppard (2020), surveys are seen as a reliable method of inquiry due to the standardisation of the questions. The exact same questions, phrased in the same way, are given to all participants, which is seen as increasing the reliability of the responses. For this reason, a survey was used in the present study to examine teachers' and SLTs' experiences and perspectives of collaborative practice in Post-16 SEND settings.

Survey Design

A cross-sectional survey design was used. Cross-sectional surveys can be administered at a particular point in time to offer a 'snapshot' of the phenomena being investigated. These types of surveys help researchers to gain an understanding of a phenomena for respondents at the specific time of administration, rather than making observations over time, such as in the use of longitudinal studies (Sheppard, 2020). Survey research can be used to gather both quantitative and qualitative data. As such, a critical feature of survey research is a well-designed questionnaire.

According to Owen (2017), questionnaires are usually highly structured and consist mostly of closed questions, questions which have a single or a limited number of potential responses. Owen (2017) recommends that questions need to be easy for participants to understand and unambiguous. This is a result of the method of distribution, as participants typically complete a questionnaire alone, with no one to clarify any ambiguous questions.

In the present study, the questionnaire was designed to consist of a range of both closed- and open-ended questions, with 24 questions for teachers and 25 questions for SLTs (SLTs had one extra question about caseload size). The questionnaire contained 19

closed questions, using a mix of multiple choice and Likert scales. The rest of the questions were open-ended. Please see Appendix D for details of the online questionnaire. Questions 1-9 for teachers and 1-10 for SLTs focused on demographic data, such as age, type of qualification, role, and work setting. Questions 10-24 for teachers and 11-25 for SLTs focused on current practices and perceptions with regards to collaboration.

The questionnaire was developed in line with recommendations from Sheppard (2020), who proposes that researchers should:

- Identify what they want to find out,
- Ensure questions are succinct and clear,
- Make sure that questions are relevant to the target population,
- Avoid questions that might confuse participants because they contain double negatives, culturally specific terms, or pose more than one question in the form of a single question,
- Consider the feelings evoked by the wording or topic of questions,
- Get feedback from people who resemble the target population.

The questionnaire was formulated by the researcher after examination of the existing research into collaborative practice between teachers and SLTs. A number of questions were adapted from those asked by Hartas in the 2004 study of teachers' and SLTs' experiences within one UK special primary school. Examples of adaptations to the questions posed by Hartas included changing open-ended questions to multiple-choice ones and modifying wording so that questions were clear to teachers and SLTs with varying degrees of experience in collaborative working. Additional questions were developed by the researcher, to address themes identified within the existing literature

examining collaboration within mainstream or primary settings, such as an open-ended question asking participants to describe their ideal speech and language therapy service, similar to that posed by Gallagher et al. (2019a).

The questionnaire was reviewed and piloted before distribution for data collection. This was completed in two ways:

1. Rigorous review by the primary researcher and research supervisors,
2. A qualified teacher and SLT, both with prior experience in Post-16 SEND settings, were asked to pilot the survey and provide feedback on timing, content, and operational issues.

Piloting or pre-testing questionnaires has been described as an ‘essential’ part of the survey research process, to allow for feedback to identify and fix any issues or ambiguities (Owen, 2017; Sheppard, 2020). These processes enabled the researcher to incorporate feedback from the teacher and SLT who piloted the survey. Feedback from the pilot SLT indicated that the questions would likely be clear to other SLT respondents, which is understandable, given that the primary researcher and both supervisors are from an SLT background. Feedback from the pilot teacher indicated that some changes to terminology and question response methods were required to make the questions accessible to both professions. The teacher provided a more accurate and specific list of teacher qualifications within the demographics section and advised that a question asking participants to specify percentages of time that SLTs spend on specific activities may be difficult for teachers to answer with confidence or accuracy. This led to a change from percentages to a ranking response method. Feedback from the teacher also led to changes to the order of questions to improve survey flow.

Survey Distribution

The survey was developed and distributed via Qualtrics, an online survey platform. Through the survey design process, the researcher used testing functions within the platform to ensure that the questions were compatible with both web browser and mobile phone access methods. Participants were able to access the survey through a link and QR code included in the researcher's LinkedIn post or in the email sent. The introduction section of the survey also included a link to a Participant Information Sheet. The use of an online survey platform affords researchers a range of benefits, including faster distribution, greater access to geographically widespread populations, increased convenience and ease of access for participants, and more efficient response analysis (Regmi et al., 2016).

Data Analysis

The survey data was exported from Qualtrics into a Microsoft Excel document. Given that the survey elicited both quantitative and qualitative data, from closed and open questions, different types of data analysis were used. Since the research had a small sample size, the quantitative data was analysed using descriptive statistics, as well as some tables and graphs to aid visualisation of the information.

Inductive content analysis (Locsin, 2024) was employed to examine the qualitative data from the online survey. The researcher exported the open-ended questions into NVivo 14 to facilitate data analysis. The researcher read each response and identified any meaningful or frequently used terms or phrases in an open coding process. These were then sorted and grouped into higher level categories and subcategories when appropriate. This followed an inductive data analysis approach, in

which data is gathered first and then codes or themes are generated from this data.

Bingham (2023) describes inductive analysis as a key strength of qualitative research, as codes are not pre-determined by the researcher, but are developed as the researcher becomes familiar with the data.

Research Methods: Phase 2

This section details the research methods pertaining to the semi-structured focus groups undertaken in phase 2 of the project.

Focus Group Design

A focus group is a small group of participants with shared characteristics who can serve as a representative sample of a specific population (Dziak, 2024). Focus group participants are asked to share their opinions, perceptions, and thoughts on a particular topic (Dziak, 2024; Onwuegbuzie et al., 2009).

Onwuegbuzie et al. (2009) discuss multiple benefits to the use of focus groups in qualitative research, including the ability to gather data from numerous people at the same time, which makes them efficient and economical; the social environment which can feel less threatening to participants, allowing them to share information safely; and prompting thoughts or reflections from participants as they hear each other's contributions.

A key stage in preparing for a focus group is in development of the interview questions, and a semi-structured interview was selected for this study. Jamshed (2014) describes interviewing as the most common format of qualitative research. In qualitative research, there are three key interview structures (Harvard Library, 2025). Structured interviews are those in which the researcher has a formal questionnaire

structure which is adhered to throughout the interview. The high level of structure increases reliability of the data, but decreases responsiveness to the participants within a focus group (Deakin Library, 2025). In comparison, unstructured interviews are those in which the researcher has topics to address, without predetermining questions (Deakin Library, 2025). This allows maximum flexibility and responsiveness to participants, but has the least reliable data due to the conversational nature (Deakin Library, 2025; Jamshed, 2014). Semi-structured interviews form the middle ground between these two interview types (Deakin Library, 2025). In semi-structured interviews, the researcher has predetermined questions, which can be asked flexibly, in different ways with different participants (Deakin Library, 2025; Jamshed, 2014). The benefit of semi-structured interviews is the ability to respond flexibly to participants, while keeping participants on topic.

Semi-Structured Focus Group Guide Development

The initial analysis of the survey data allowed the researcher to identify key themes to explore further within the focus groups. Some themes were of interest to the researcher because of the high frequency with which they appeared in the survey data, while others were of interest because of their novelty. The researcher used the recommendations of Shepard (2020) to develop a semi-structured interview guide containing only open-ended questions (Appendix E) and discussed this with the research supervisors.

Focus Group Procedure

At the end of the online survey, participants were given the option to choose to participate in an online focus group by providing their name and a contact email

address. Following closure of the online survey, the researcher contacted those who had expressed interest in the focus groups and provided a link to an online scheduling platform, Doodle Poll, to coordinate participants. The focus groups were carried out in two sessions, to accommodate the availability of participants. Session One contained two participants; Session Two contained three participants. The focus groups took place via the online video conferencing platform, Zoom. At the beginning of each focus group, participants were reminded of their rights, which included checking that the participants consented to video recording of the sessions using the Zoom recording function. The researcher also discussed group etiquette, including respecting and valuing other's opinions and equal contributions.

Online virtual interviewing has gained increased attention since the COVID-19 pandemic, highlighting particular advantages of the online format, including flexible scheduling, access for geographically dispersed groups, and access to recording functions (Keen et al., 2022). In the present study, the researcher was able to access participants from across the UK, and schedule the sessions flexibly based on responses from the participants. However, Keen et al. (2022) also discuss some limitations of online interview research, including limited familiarity with interview data if automatic transcription functions are used, and increased participant fatigue associated with video calling. Within the current project, the researcher made efforts to circumvent these drawbacks. Firstly, the focus group sessions were limited to 45 minutes to avoid participant fatigue. Secondly, the researcher manually transcribed the focus group discussions from the video recordings, thereby increasing familiarity with the data.

Data Analysis

The researcher used a reflexive and inductive thematic analysis, based on the guidelines of Braun and Clarke (2006, 2021, 2022) to analyse the data gathered through the focus groups. Thematic analysis is an umbrella term used to describe methods used in qualitative research to identify patterns within a data set (Braun & Clarke, 2021; Miller, 2024). Reflexive and inductive thematic analysis is an approach in which data is coded in an organic way, without a coding framework, and the subsequent themes are viewed as an outcome of the coding. In reflexive and inductive thematic analysis, coding and theme development follows an iterative process (Braun & Clarke, 2006, 2021). This is in contrast to other thematic analysis approaches, in which specific themes are created early on in the analysis, or before analysis takes place, and data is coded against these pre-determined themes in a more deductive way (Braun & Clarke, 2021). With an inductive approach, the researcher develops themes based on the specific data gathered, using codes as an analytic tool that represent a single observation from the data, which can then generate themes that capture multiple related observations (Braun & Clarke, 2006, 2021). One of the benefits of thematic analysis is that it is a highly flexible approach, which can allow for a rich account of qualitative data (Braun & Clarke, 2006). It was this flexibility that led the researcher to using a reflexive and inductive thematic analysis approach for the current study.

As the first phase of reflexive and inductive thematic analysis, the research dedicated time to data familiarisation. This consisted of verbatim transcription of the focus group recordings, followed by reading and re-reading these transcripts before creating codes and themes. The researcher then completed initial coding and theme development, reviewed this with research supervisors, then continued with refining and

naming the themes. The researcher created a codebook, in Appendix G, to provide definitions and examples of the key themes.

Integrating quantitative and qualitative data

Bryman (2006) conducted an examination of the ways in which data is integrated in MMR, and found that, often, the rationale for given MMR approaches does not align with how the data is used to answer the research questions. It is recommended that researchers need to be explicit about the rationale for using MMR and how the quantitative and qualitative data are both used to answer the research questions (Bryman, 2006).

Guetterman et al. (2015) describes integration as an intentional process used by researchers to bring quantitative and qualitative data together.

In the present study, the researcher intended to integrate the quantitative and qualitative data by presenting them side-by-side within the data analysis section, using the focus group responses to give richer context and enhance understanding of the survey data. However, there was a low teacher response number within the survey and lack of teacher participants in the focus groups. Integration of focus group responses throughout data analysis was likely to result in too much weighting given to the SLT voice, potentially ‘drowning out’ the perspectives of the teachers. As such, the focus group data was not integrated with the survey data and was instead processed sequentially in a way that echoed the explanatory sequential MMR design. As such, the qualitative data from focus group responses can provide further explanation and interpretation of the quantitative data from SLT responses, while also allowing space for the voice of the teacher respondents.

Ethical considerations

The study was deemed to be low risk, and a low-risk notification was submitted to the Massey University Human Ethics Committee (MUHEC), included in Appendix F. According to Massey University's Code of Ethical Conduct for Research, Teaching and Evaluations Involving Human Participants (2017), there are a number of universal ethical principles to consider when undertaking any research involving human participants.

Autonomy

Massey University's Code of Ethical Conduct (2017) describes autonomy as the ability to make decisions on the basis of one's own beliefs and values. Autonomy includes the concept of informed consent, ensuring that participants have the necessary information to make an accurate decision about whether or not to participate. As such, all participants were provided with, and asked to read, the Participant Information Sheet before completing the survey. This information was then reiterated by the researcher at the beginning of the Focus Group sessions.

Avoidance of Harm

According to Massey University's Code of Ethical Conduct (2017), harm can include both physical and psychological harm, as well as damage to an individual's or organisation's reputation, dignity and/or relationships with others. The researcher avoided causing harm to participants by ensuring each participant's rights to withdraw consent and refuse to answer questions were clearly communicated in the Participant Information Sheet and were upheld throughout the process, including by requesting

that Focus Group participants preserve their own and other's anonymity by refraining from naming specific organisations, colleagues, or service users.

Benefit

In research that includes human participants, there are broadly two different types of benefits, benefits for individual research participants and scientific benefits through gaining knowledge and developing interventions (Van Rijssel et al., 2024). In survey-based research, benefits for individual research participants typically involve financial incentives in the form of money, vouchers, or entry into prize draws. However, financial incentives have raised questions among research ethics committees about the risks of coercion or undue influence (Singer & Couper, 2008). As such, no financial incentives were given as part of the initial recruitment phase for the online survey. As a result of low survey response numbers, a decision was made to offer a £15.00 online gift card to those who had already volunteered for the focus groups, to aid retention of these participants. For this, an amendment to the original low-risk ethics application was submitted and subsequently approved. The Participant Information Sheet made it clear to participants that the benefits of contributing to the study were in enhancing knowledge of collaborative practice, potentially contributing to improved educational and communication outcomes for young adults in Post-16 SEND settings.

Justice and Equity

The Massey University Code of Ethical Conduct (2017) asks researchers to consider the extent to which the benefits and risks of the research are fairly distributed. As previously described, the present study does not involve benefits for any individual research participants. Any potential research benefits can be considered to be fairly

distributed and are not considered to particularly benefit one group of professionals over another.

Special Relationships

There are many different forms of relationship, including those between individuals, organisations, and communities. The Massey University Code of Ethical Conduct (2017) requires researchers to consider whether, and to what extent, any special relationships that the researcher has could influence the research or generate conflicting requirements. Conflicts of interest occur when there is a risk that professional judgments regarding a researcher's primary interest, for example, their study, will be disproportionately influenced by external influences, such as financial gain or personal relationships (Romain, 2015). Conflicts of interest in research can result in both conscious and unconscious bias on the part of the researcher, and have the potential to compromise the research findings or mislead others, which can therefore risk eroding professional and public trust in the results of the research (Koocher & Page, 2021; Romain, 2015). According to Koocher and Page (2021), scientific integrity relies on researchers actively addressing conflicts of interest, whether these are real or perceived.

The researcher took several steps to eliminate undue secondary influences in the study, including ensuring anonymity of participants in responding to the online survey. Anonymity of participants ensures that ethical norms as a researcher are honoured. The participant information sheet also clearly stated that participation in phase two, the focus groups, meant that personal details such as names and email addresses were required. As such, the researcher's current employment within a Post-

16 SEND setting could be perceived as a potential conflict of interest if employees of this organisation were to participate in the focus groups. To mitigate this, SLTs and teachers employed by the primary researcher's employing organisation were excluded from participation in the focus groups.

Cultural and Social Responsibility

The Massey University Code of Ethical Conduct (2017) also asks researchers to act in culturally and socially responsible ways, by considering whether the research treats people with cultural sensitivity and upholds the dignity and respect of all participants. Measures taken by the primary researcher included developing an interview guide for the focus groups which actively promoted respecting the views and values of all participants, allowing different response methods within the online focus groups such as spoken and typed contributions via chat functions, active discussion of the need to listen and constructively respond to other focus group participants, and through the use of video recording to accurately capture participants' views.

Chapter 4: Results

The aim of this study was to examine teachers' and SLTs' perspectives and experiences on collaborating with each other. Chapter 3 has described the explanatory sequential MMR design that was used. The initial survey data collection formed the basis for the focus group design. As such, the structure of this Results chapter aligns with the sequential nature of the project, in that the predominantly quantitative data of the survey is presented first, followed by the richer context that the qualitative focus group data provides.

The online survey data is presented in three sections: (1) demographic data; (2) perceptions of collaboration; (3) planning the ideal service. Throughout the survey, all questions except for Likert scales had an 'Other' response option for text entry. During analysis of the survey responses, it was found that these 'other' responses fell into two categories: those which add new information; and those which explain why a particular answer was given or are similar to the available answers, for example, this response to the question about main purposes of collaboration: *"Being able to target the students' EHCP outcomes in a more holistic way, where we're not duplicating what each other does, and we use each professionals' skillsets to the best advantage."* As such, descriptions are provided by the researcher when an 'other' response was deemed to add new information.

The focus group data is presented in the following sections: focus group demographic data; Theme 1, SLTs' understanding and implementation of collaborative practice is vague and varied; Theme 2, Understanding of roles influence collaboration at an individual and organisational level; Theme 3, Barriers to collaborative practice occur

at profession, organisation, and individual levels; and Theme 4, Participants' attempts or suggestions to improve collaborative practices within their own settings.

Online Survey

Demographic Data

The recruitment efforts outlined in the previous chapter garnered 19 complete, usable responses to the online survey. In total, 23 initial responses were received; however, two SLTs and two teachers did not complete the survey beyond basic demographic information, therefore, were excluded from analysis. Of the 19 respondents, one teacher and one SLT did not respond to the last eight questions, three of which were open-ended.

Four of the respondents were teachers. Table 2 outlines their demographic data supplied, including age, type of qualification, years working as a teacher, and years working in Post-16 SEND. One teacher stated that they had no formal teaching qualification and did not state how many years they have been working as a teacher. In the UK, it is not necessary to have a teaching qualification to hold a teaching post in Post-16 SEND settings. The other teachers have over 11 years' experience as teachers, as well as over 11 years' experience working in Post-16 SEND.

Table 3 contains demographic data from the 15 SLTs. Four described holding multiple qualifications – two a BSc and MSc in Speech and Language Therapy, one a BSc in Speech and Language Therapy and an MSc in Profound and Multiple Learning Disabilities, and one a BSc in Speech and Language Therapy and is a board-certified behaviour analyst. Twelve of the SLTs indicated that they have been practising for 11 or

more years. The SLTs' years of experience in Post-16 SEND ranged from 3-5 years to 20+ years.

Table 2

Teacher Demographic Information

Age	<i>n</i>	Teacher qualification	<i>n</i>	Years working as Teacher	<i>n</i>	Years working in Post-16 SEND	<i>n</i>
18-24	0	Qualified Teacher Status (QTS)	0	0-2	0	0-2	1
25-34	0	PGCE	2	3-5	0	3-5	0
35-44	2	No formal teaching qualification	1	6-10	0	6-10	0
45-54	2	Other	1	11-20	3	11-20	3
55-64	0			20+	0	20+	0
65+	0						

Table 3

SLT Demographic Information

Age	<i>n</i>	SLT qualification	<i>n</i>	Years working as SLT	<i>n</i>	Years working in Post-16 SEND	<i>n</i>	Caseload size	<i>n</i>
18-24	0	BSc	8	0-2	0	0-2	0	1-19	2
25-34	1	PGDip & Other	1	3-5	2	3-5	4	20-39	5
35-44	5	MSc	2	6-10	1	6-10	5	40-59	5
45-54	5	BSc & MSc	2	11-20	4	11-20	4	60-79	2
55-64	4	BSc & Other	1	20+	8	20+	2	80-99	0
65+	0	Other	1					100+	1

The respondents also provided information about their Post-16 SEND settings, summarised in Table 4. Ten respondents stated that their setting uses a secondary

model, in which teachers are subject specialists (i.e., English teacher, Drama teacher), four stated that their setting uses a primary model, in which students have one core teacher who teaches all subjects. Five selected 'other', and described education models including both primary and secondary, 'vocational residential specialist college for performing arts, hospitality, horticulture and retail,' 'vocational tutors,' 'mixture of secondary model with person-centred curriculum tailored to students. Teachers are SEN specialists but not always subject specialists,' and 'one class teacher for functional skills maths and English.'

With regard to the speech and language therapy services on offer in settings, 14 respondents described 'in-house,' in which the SLT is employed directly by the organisation, two described 'external' speech and language therapy services, in which SLTs are employed by another organisation, such as NHS, and visit the setting. 'Other' responses included a mixture of both in-house and external speech and language therapy services, 'employed by external provider but work full time,' and 'none.' In describing the size of settings, 10 respondents indicated their settings have over 100 students, and 14 respondents listed the average class size as 6-10 students.

Perceptions of Collaboration

Participants were asked 12 closed questions related to their current perceptions of collaboration within the online survey, including multiple choice, Likert scales, and rank order question formats.

Respondents indicated different levels of understanding in each other's role, as displayed in Figure 1 ($N = 19$, teachers = 4, SLTs = 15). SLTs tended to indicate a greater level of understanding of the teacher role, with 14 of 15 respondents indicating that they

Table 4*Post-16 SEND setting information*

Education model	<i>n</i>	Speech and Language Therapy service	<i>n</i>	Number of students in setting	<i>n</i>	Average class size	<i>n</i>
Primary	4	In-house	14	0-19	0	1-5	3
Secondary	10	External	2	20-39	1	6-10	14
Other	5	Other	3	40-59	4	11-20	2
				60-79	3		
				80-99	1		
				100+	10		

have a ‘good’ or ‘excellent’ understanding. In contrast, three out of four teachers indicated that they have ‘some’ understanding of the SLT role, and one indicated an ‘excellent’ level of understanding.

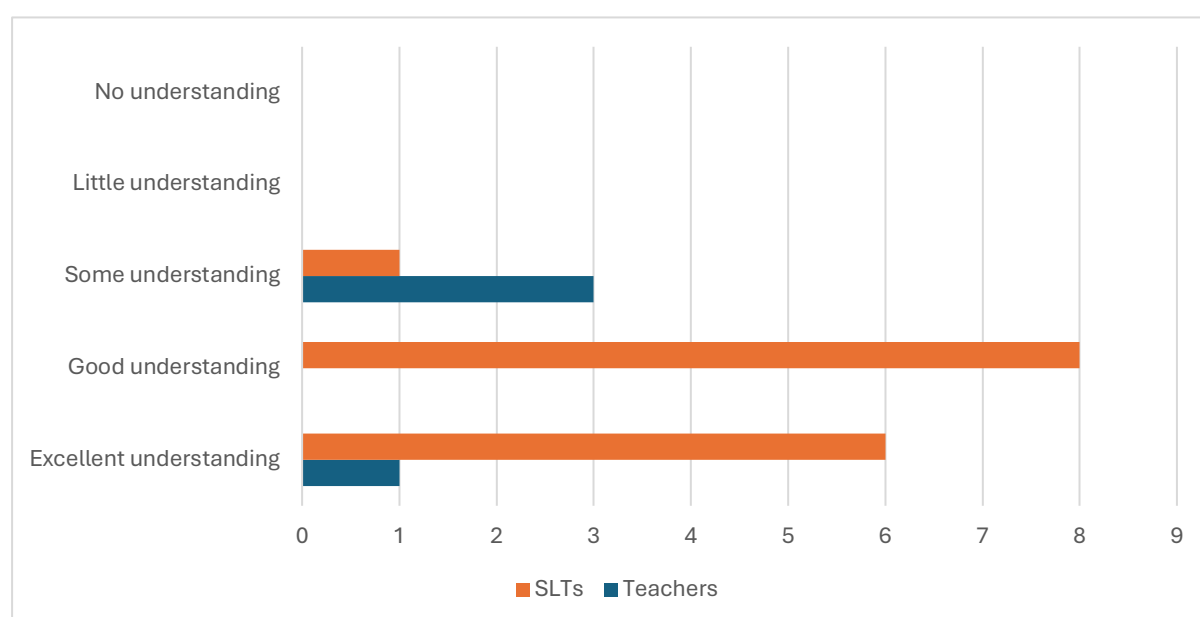
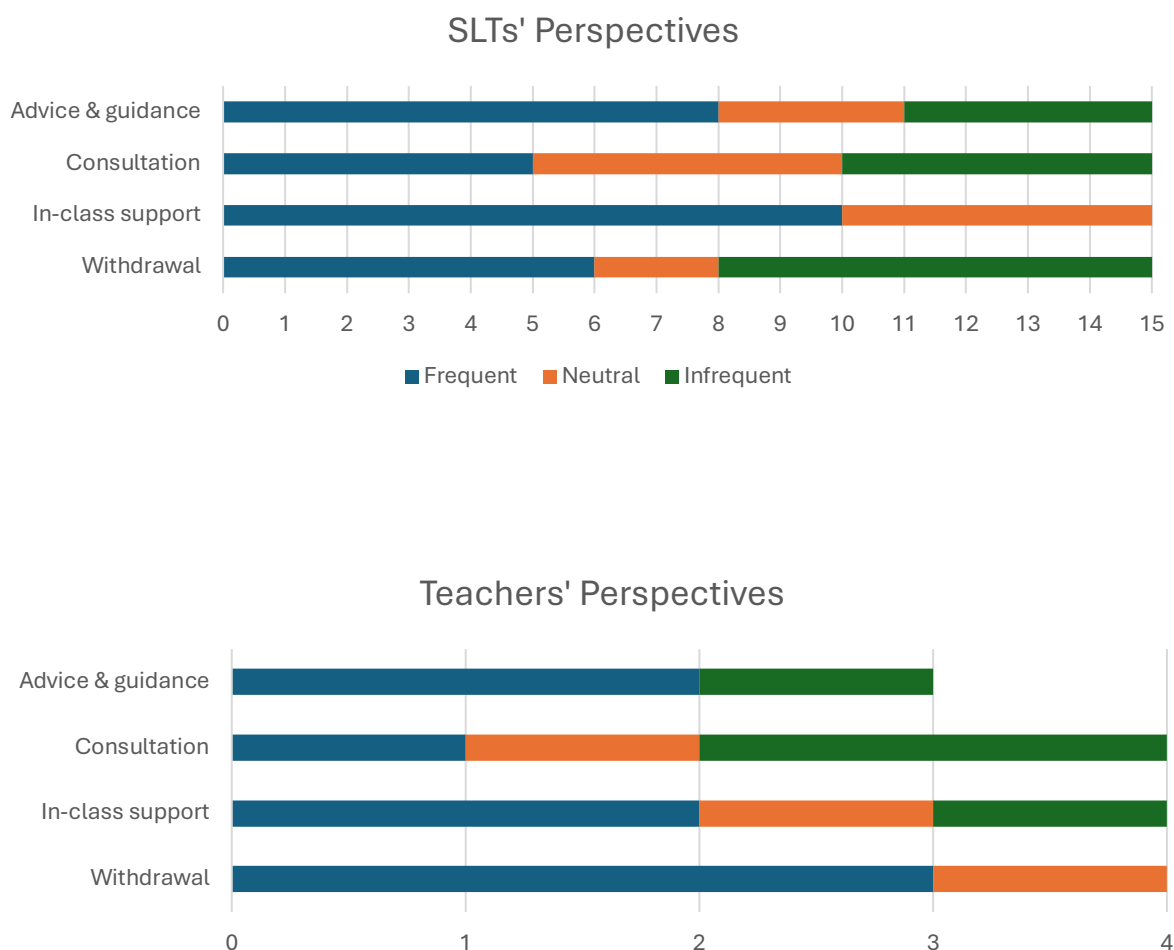
Figure 1*Understanding of each other's role*

Figure 2 shows how teachers and SLTs view the frequency of SLT activities ($N = 19$, teachers = 4, SLTs = 15). This question revealed noticeable differences in perspectives between the two professional groups. SLTs were more likely to state that ‘withdrawal’ sessions with individual students are infrequently used ($n = 7$). In contrast, most teachers ($n = 3$) said that ‘withdrawal’ is frequently used. SLTs described ‘advice & guidance’ ($n = 10$) and ‘in-class support’ ($n = 8$) as the most frequent activities.

Figure 2

Frequency of SLT activities

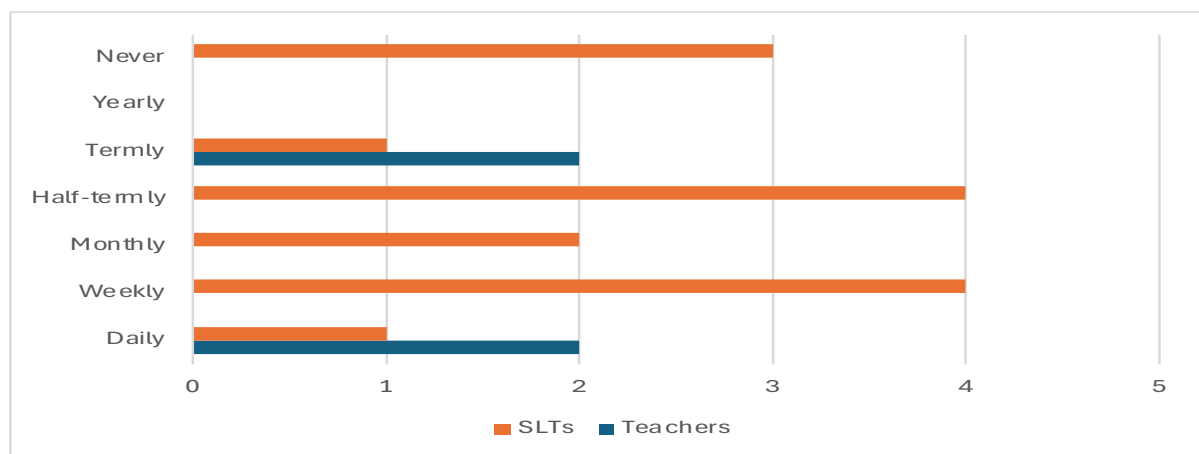


Participants were asked how frequently they are given formal opportunities to collaborate ($N = 19$, teachers = 4, SLTs = 15). SLTs’ responses, as shown in Figure 3,

revealed a high level of variation across different organisations in how frequently they have opportunities to collaborate with teachers. However, half-termly and weekly were the most frequently selected. In contrast, the teacher responses were more consistent, with two of four saying that opportunities were given on a termly basis, and the other two indicating that these opportunities are daily.

Figure 3

Frequency of opportunities for formal collaboration



Participants were asked their views on the main purposes of collaboration, with five options, ‘information sharing, resource sharing, resource development, improving educational outcomes for students, and preparing for formal inspections, e.g., Ofsted.’ As shown in Table 5, there was a high level of agreement across the professional groups ($N = 19$, teachers = 4, SLTs = 15). Almost all respondents (18 of 19) indicated that ‘information sharing’ and ‘improving educational outcomes for students’ are key reasons for collaboration. Similarly, 16 of 19 indicated that ‘resource development’ and

‘resource sharing’ are key purposes. In contrast, only nine of the 19 indicated that ‘preparing for formal inspections, e.g. Ofsted’ is a key reason for collaboration.

Table 5

Main purposes of collaboration

	Teachers	SLTs	Total
Information sharing	4	14	18
Improving educational outcomes for students	4	14	18
Resource sharing	4	12	16
Resource development	3	13	16
Preparing for formal inspections, e.g., Ofsted	1	8	9
Other	0	1	1

Participants were asked to share the main types of collaboration used in their settings. The options given were ‘individual planning meetings,’ ‘co-planning lessons,’ ‘co-delivering lessons,’ ‘attendance at informal training sessions,’ and ‘ad-hoc, incidental opportunities.’ As Table 6 indicates, there was a lot of consistency in response between the two professions ($N = 19$, teachers = 4, SLTs = 15). Most respondents indicated that ‘individual planning meetings with a focus on individual students’ targets or strategies’ ($n = 17$), ‘attendance at informal training sessions’ ($n = 16$) and ‘ad-hoc, incidental opportunities, e.g., corridor conversations’ ($n = 15$) are used in their settings. ‘Co-planning lessons’ ($n = 6$) and ‘co-delivering lessons’ ($n = 10$) were used less frequently. Other responses included one SLT who described ‘co-planning longitudinal assessments,’ one SLT who described ‘joint training in training weeks, full staff training, support offsite with job coaches’, and one SLT who stated, ‘teachers joining in or observing our sessions as additional collaborative activities.’

Table 6*Main types of collaborative activities*

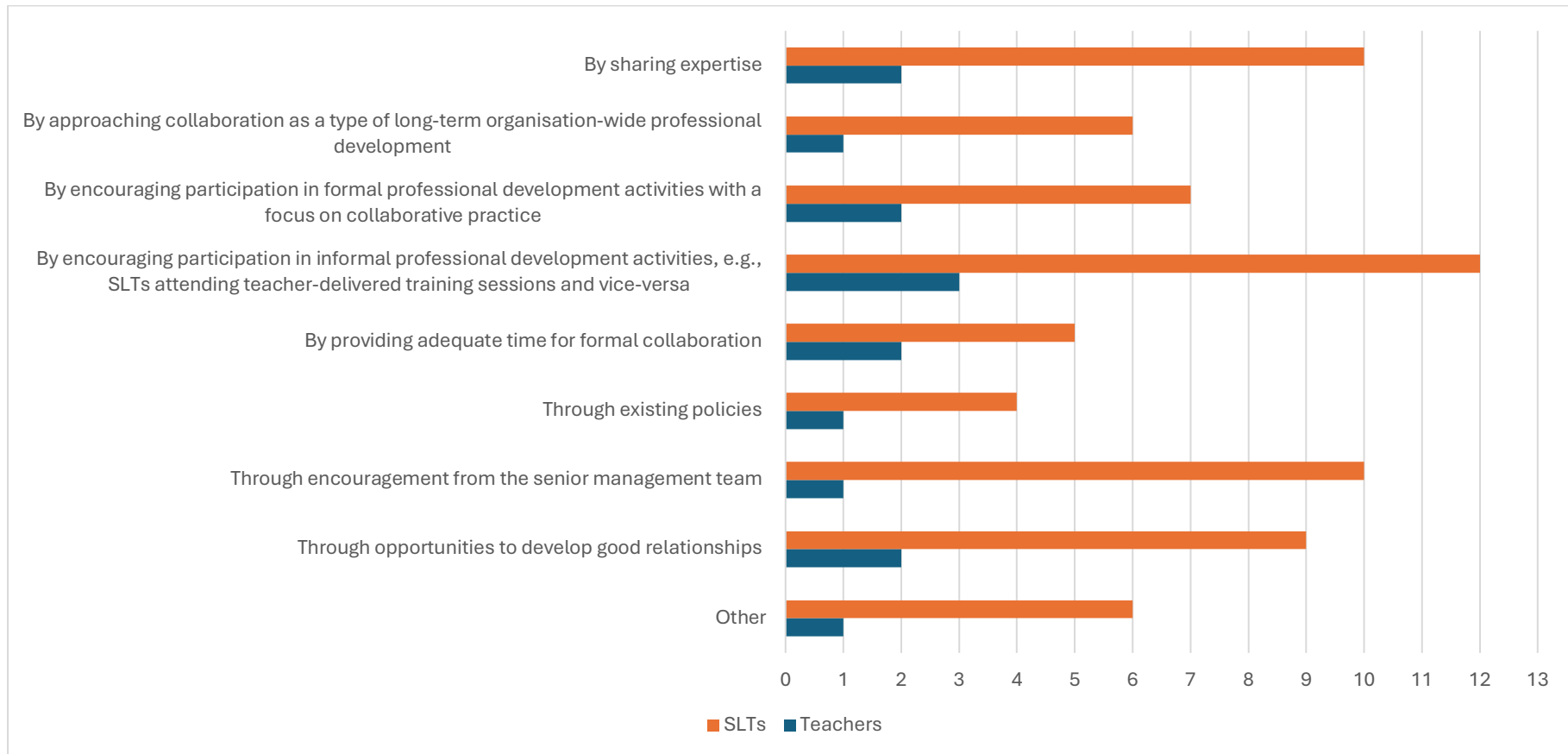
	Teachers	SLTs	Total
Individual planning meetings with a focus on individual students' targets or strategies	3	14	17
Attendance at informal training sessions	3	13	16
Ad-hoc, incidental opportunities, e.g., corridor conversations	3	12	15
Co-delivering lessons	1	9	10
Co-planning lessons	1	5	6
Other	1	3	4

Participants were also asked to indicate how their organisations support collaboration between teachers and SLTs ($N = 19$, teachers = 4, SLTs = 15). Most ($n = 15$) respondents indicated that their organisation supports collaboration 'by encouraging participation in informal professional development activities, e.g., SLTs attending teacher-delivered training sessions and vice-versa.' In contrast, only 5 respondents indicated that their organisation uses policies to encourage or support collaboration between teachers and SLTs. However, Figure 4 highlights where there was also a role-based difference in some responses, with 10 SLTs indicating that they have 'encouragement from the senior management team,' while only one teacher indicated that this is in place in their organisation, and nine SLTs indicating that they are provided with 'opportunities to develop good relationships,' and two teachers indicating the same. Amongst SLTs, three used the 'other' option to explain that there is little or no support from their organisation, such as this example: 'not much support on collaboration, teachers have very little time to liaise due to other demands from senior leadership.'

Participants shared their perspectives on the benefits of collaboration between

Figure 4

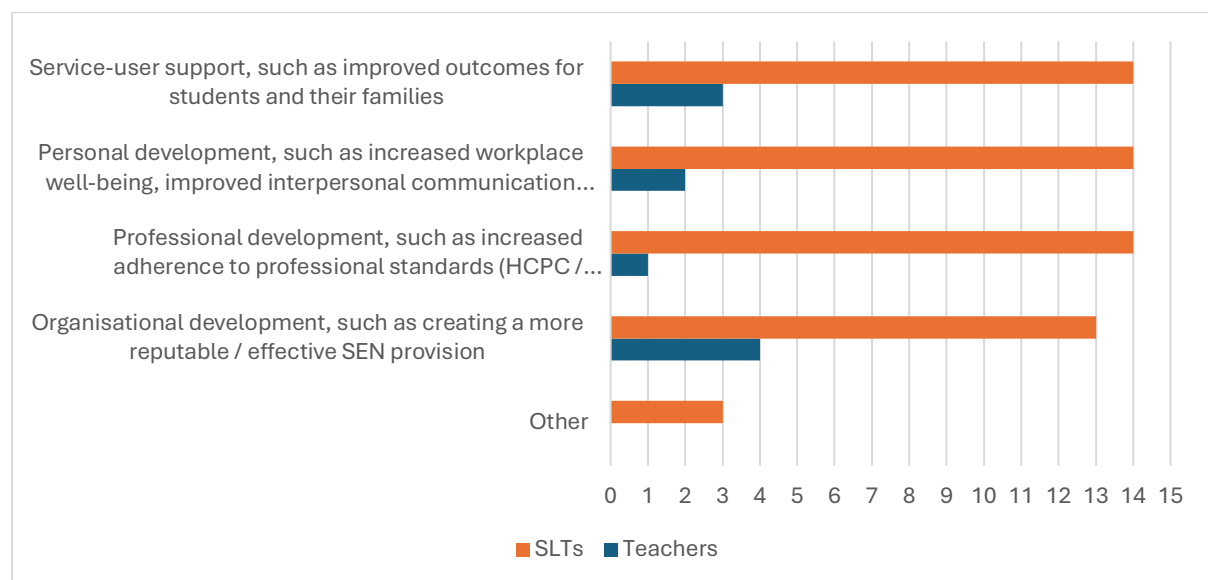
How organisations support collaboration



teachers and SLTs, as shown in Figure 5 ($N = 19$, teachers = 4, SLTs = 15). Almost all respondents ($n = 17$) indicated that ‘organisational development, such as creating a more reputable/effective SEN provision’ and ‘service-user support, such as improved outcomes for students and their families’ are benefits of collaboration. Interestingly, almost all SLTs ($n = 14$) indicated that ‘professional development, such as increased adherence to professional standards (HCPC/Teachers' Standards), improved classroom management, increased awareness of evidence-based practice’ is a benefit of collaboration, while only one teacher indicated the same. ‘Other’ responses included ‘creates a more transdisciplinary team, where we integrate all our aims and approaches and improved emotional well-being through being part of a team.’

Figure 5

Benefits of collaboration

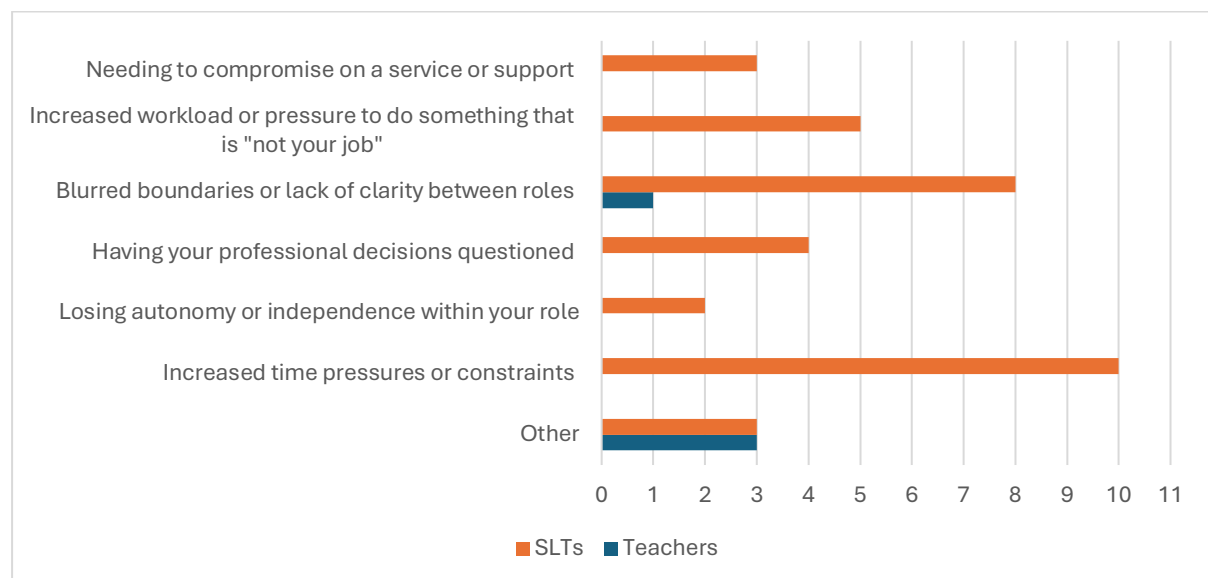


Participants were asked to share their perspectives on the downsides or challenges of collaboration. Figure 6 reveals significant differences in responses between the two professions ($N = 19$, teachers = 4, SLTs = 15). SLTs were much more

likely to indicate any downside or challenge to collaboration, including ‘increased time pressures or constraints’ ($n = 10$), and ‘blurred boundaries or lack of clarity between roles’ ($n = 8$) the most frequently selected. In contrast, three of the teachers used the ‘other’ option to indicate that they perceive no downsides or challenges in collaboration, and one teacher indicated ‘blurred boundaries or lack of clarity between roles’ was the only downside or challenge.

Figure 6

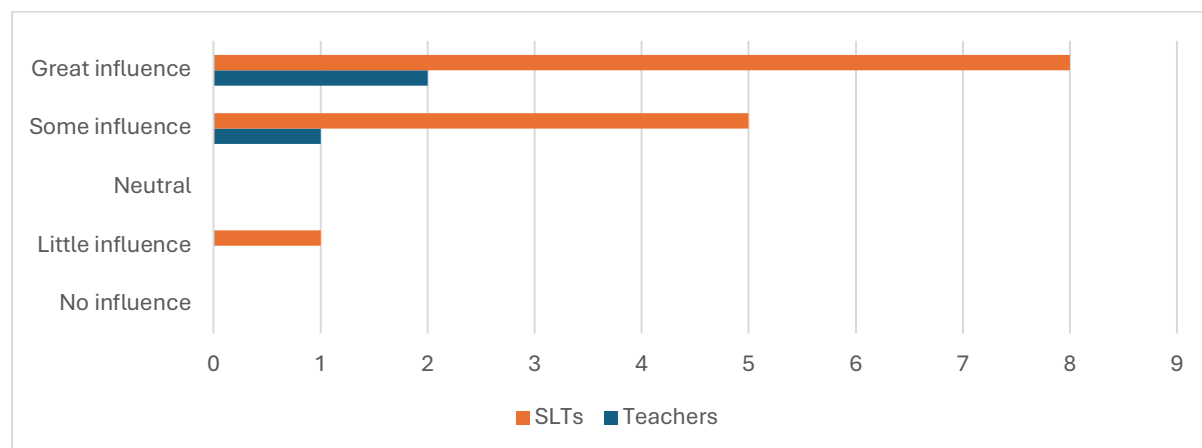
Downsides and challenges of collaboration



Participants were asked to share their perspective on the influence of personal characteristics, e.g., interpersonal communication skills, sense of humour, age, personality, or values, on the success of collaboration ($N = 17$, teachers = 3, SLTs = 14). As seen in Figure 7, most respondents (16 of 17) indicated that personal characteristics had ‘some’ or ‘great’ influence on the success of collaboration. However, one SLT indicated that personal characteristics have ‘little’ influence on the success of collaboration.

Figure 7

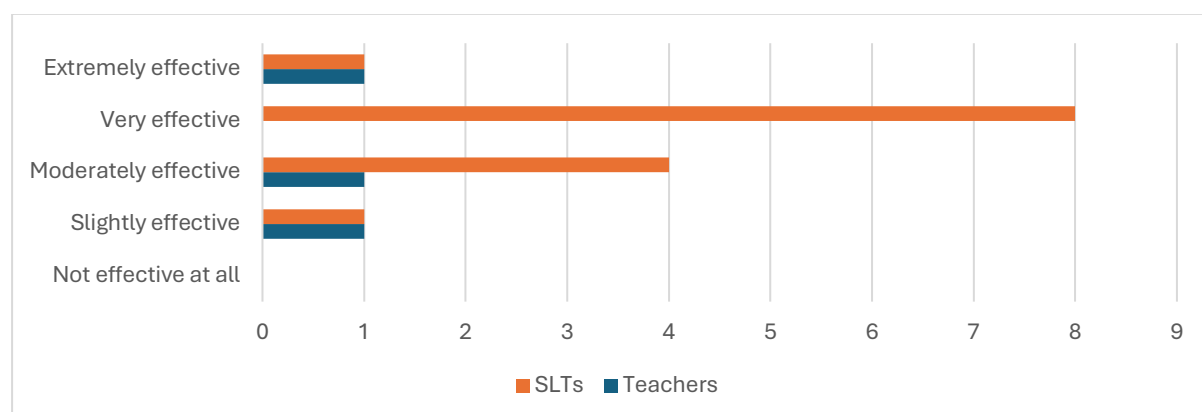
Influence of personal characteristics on success of collaboration



When rating the effectiveness of their organisations' collaborative processes in improving educational outcomes, most SLTs (12 of 14) said that their processes were 'moderately' or 'very effective,' ($N = 17$, teachers = 3, SLTs = 14). Teachers' responses were varied, as seen in Figure 8, with each of three teachers giving a different response, including 'slightly,' 'moderately,' or 'very' effective.

Figure 8

Effectiveness of collaborative processes in improving educational outcomes



Participants were asked to indicate the factors that hinder effective collaboration, from a selection of eight factors, shown in Table 7 ($N = 17$, teachers = 3, SLTs = 14). Most participants (13 of 17) indicated that ‘lack of time’ hinders collaboration, and 12 indicated that ‘inadequate staffing levels’ also have a negative impact on collaboration. Only six respondents indicated that ‘unclear professional boundaries’ hinder effective collaboration.

Table 7

Factors that hinder collaboration

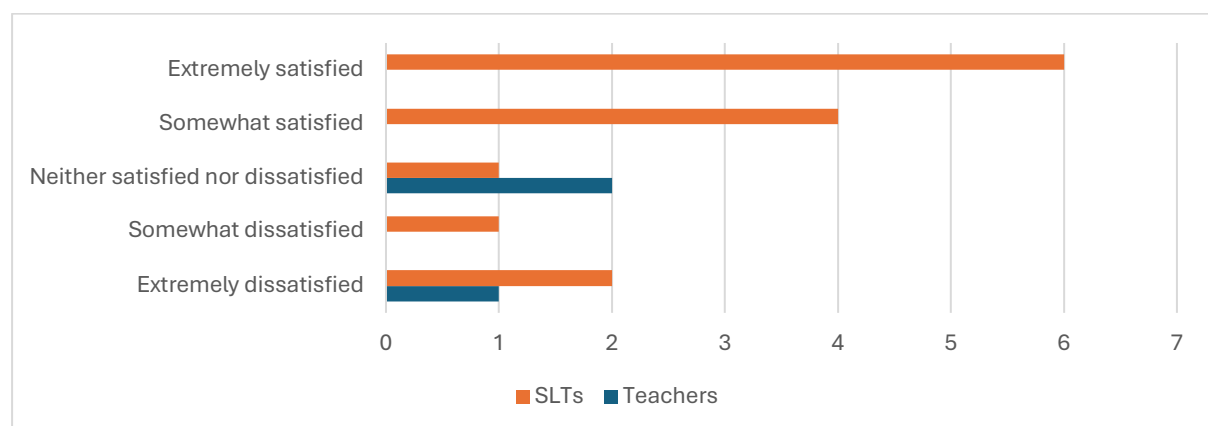
	Teachers	SLTs	Total
Lack of time	2	11	13
Inadequate staffing levels	1	11	12
Lack of support from senior management	1	10	11
Limited value placed on collaboration within your organisation	2	9	11
Poor working relationships	0	9	9
Inadequate training	0	8	8
Unclear roles and responsibilities	1	7	8
Unclear professional boundaries	0	6	6
Other	0	2	2

Participants were also asked to indicate the factors that support effective collaboration, outlined in Table 8 ($N = 17$, teachers = 3, SLTs = 14). All who responded ($n = 17$) agreed that ‘value placed on collaboration within your organisation’ supports effective collaboration. Most also indicated that ‘adequate time for formal collaboration’ ($n = 16$), ‘support from senior management’ ($n = 16$) and ‘adequate staffing levels’ ($n = 15$) support effective collaboration.

Table 8*Factors that support collaboration*

	Teachers	SLTs	Total
Value placed on collaboration within your organisation	3	14	17
Adequate time	3	13	16
Support from senior management	2	14	16
Adequate staffing levels	2	13	15
Close working relationships	2	11	13
Adequate training	1	12	13
Clear roles and responsibilities	1	9	10
Clear professional boundaries	2	8	10
Other	1	1	2

In the final closed question, participants were asked to rate their satisfaction with their organisations' culture of collaboration ($N = 17$, teachers = 3, SLTs = 14). SLTs were more likely to have a positive view of the culture of collaboration, with 10 indicating they were 'somewhat' or 'extremely' satisfied. As Figure 9 shows, teachers were less likely to have positive opinions, with two indicating a neutral response, and one teacher indicating extreme dissatisfaction alongside two SLTs.

Figure 9*Satisfaction with organisational culture of collaboration*

Planning the Ideal Service

Participants were asked three open-ended questions. Each open-ended question was answered by nine SLTs and three teachers. These answers provide insight into their experiences and suggestions for improving collaborative practices. As described in the Methods chapter, the researcher completed an inductive content analysis of these questions. Key repeated words, phrases, or topics were identified from this content analysis, to form the following categories:

- Joint activities,
- Understanding of roles,
- Time,
- Staffing.

This content analysis revealed a common category of **joint activities** the respondents had carried out with the other profession, with six SLTs and one teacher listing specific joint activities. Examples included ‘joint lesson planning,’ ‘working together with a teacher to run Word Aware sessions,’ and ‘working to develop executive function skills in learners with ASC and LD, collaboration on resources etc.’ In addition, three respondents made suggestions for **joint activities** that could better support collaboration, such as ‘provide opportunities for therapists to work with teachers on how to make sessions inclusive to all students.’ Interestingly, one SLT respondent also made a clear suggestion for support from senior leadership, ‘Senior leadership need to really promote it and communicate with the therapists to understand what we need from them too.’

Understanding of roles was another apparent category of SLT responses, with four of the nine SLTs specifically referencing the importance of understanding roles, for

example, ‘...shared understanding of ultimate roles and responsibilities that allowed for the blurring of role boundaries,’ and ‘working alongside a teacher who understood the role of a speech and language therapist and was really positive about the support we could give.’

Time was third common category, with eight SLTs and two teachers specifically referencing the need for more time to collaborate, for example, ‘free up more time for teachers to spend planning with SLTs,’ ‘time to be given for regular meetings with SLT,’ and ‘designated time to work together to develop realistic outcomes in EHCPs...’ Other suggestions for the ideal service also related to increased **time** for collaboration, such as ‘like the one we have, but with more time.’

The most consistent recommendation for an ideal service, suggested by six respondents, related to increasing **staffing** or aiding staff retention, within both SLT and Teaching teams, such as ‘team of SLTs with manageable caseloads where they hold those caseloads for the whole placement,’ ‘enough SLTs that caseloads were low,’ and ‘staff would be trained to see the difference they make, and rewarded for good communication skills, and hence retained.’

Summary

Analysis of the survey responses revealed some key differences in the perspectives of teachers and SLTs, such as SLTs’ perspectives on the downsides or challenges that collaboration can present. However, the results also indicate some key areas of agreement between the two professions, including the need for more time to work together. As described in the Methods chapter, analysis of this survey data led to

creation of a topic guide for the Focus Groups, the results of which will be described in the rest of this chapter.

Focus Groups

Demographic Data

Focus Group data was collected across two sessions. SLTs A and B attended the first focus group; SLTs C, D, and E attended the second focus group. Demographic data for these SLTs is displayed in Figure 11.

Figure 10

Demographic data for focus group participants

Participant Code	Age	SLT qualification	Years working as SLT	Years working in Post-16 SEND	Caseload size
A	45-54	BSc & MSc	20+	6-10	29
B	55-64	BSc	20+	11-20	30
C	45-54	BSc & Other	20+	11-20	30
D	25-34	BSc	3-5	3-5	65
E	55-64	PGDip & Other	20+	20+	15

Themes

As described in the previous chapter, Braun and Clarke's process for reflexive and inductive thematic analysis (2006, 2021, 2022) was used to identify themes in the data. Following this process, four key themes were identified: 1) SLTs' understanding and implementation of collaborative practice is vague and varied; 2) Understanding of roles influence collaboration at an individual and organisational level; 3) Barriers to

collaborative practice occur at profession, organisation, and individual levels; and 4) SLTs' attempts or suggestions to improve collaborative practices within their own settings. These themes relate to the initial research question and will be discussed in the rest of this chapter.

Theme 1: SLTs' Understanding and Implementation of Collaborative Practice is Vague and Varied.

This theme relates to how the SLTs described what collaboration is and how it happens in their organisation, the ways in which collaborative activities vary across different organisations, as well as measures that SLTs have taken to try to make collaboration easier. All participants were in consensus that collaboration between SLTs and teachers is essential to good practice, however, they described variability in how this collaboration takes place, at both individual and organisational levels. The most consistently cited collaborative activity was goal setting, with three of the five participants specifically referencing this task:

It's still the aim – we do still collaborate, but we don't get into the room at the same time. So, the expectation is still there that we set targets jointly... (SLT B).

However, the SLTs did not elaborate on the nature of their target-setting processes, whether this is viewed as a space for informing the teacher about 'communication' targets, or for working closely with the teacher to agree on shared targets.

Other examples of collaborative activities shared by the SLTs were joint planning, collaborative review, going into sessions to model, and supporting problem-solving. However, sometimes, participants' descriptions of how collaboration takes

place were unclear and non-specific, such as that of SLT A; *“It’s more ad hoc, you know when you sort of strike up a conversation with a teacher or develop that sort of professional relationship with them and realise you could work together.”*

The SLTs described a range of different attempts they have made to clarify these expectations and make collaboration more effective. SLTs B, C, and D described organisational-level strategies that enable collaboration, such as SLT B’s experience of a clear record keeping system, *“...one thing that worked better for collaboration... is having a system where we can see what the teachers are recording against our communication outcomes, so we can see what they’re written...”*

SLT C’s experience of reflective practice forums highlighted the importance of opportunities to support and guide problem-solving, *“it was a chance to just go, “this is going really well,” or “this is terrible,” and just, between us, think it through,”* and SLT D described creating channels of communication, to make collaboration more efficient *“...we also had like a drop in email system where you could ask for support specifically.”*

The varied responses from the participants seem to indicate that there is inconsistency in how SLTs across the Post-16 SEND sector collaborate with teachers, how their settings enable or expect them to do so, and the actions individual practitioners take to make collaboration more effective.

Theme 2: Understanding of Roles Influences Collaboration at an Individual and Organisational Level

This theme focused on understanding SLT, teacher and senior leadership roles and was characterised by rich descriptions of the specific activities that SLTs perceive to fit within the scope of these different professional groups.

In describing their understanding of their own roles, the SLTs listed specific activities they consider fundamental to working in Post-16 SEND, particularly activities related to assessment, advocacy, and advising, as described by SLT B: “... *trying to get things addressed or changed or updated...So, our role is definitely to advise and write a report and attend annual reviews... to plan the outcomes...it’s only to tell them [teachers] what strategies to use for...their subjects.*”

In UK specialist SEND settings, it can be common for different types of curricula to be used for different needs. For example, some settings will have a tailored curriculum for students with Profound and Multiple Learning Disabilities (PMLD) and may have a curriculum that is closely aligned to the National Curriculum for students with less complex SEND. SLT B described the SLT role within her setting, in which several different levels of curriculum are offered:

We have managed to hold onto our role as advisors about which level of education..., but we have managed to argue to keep that... role as assessors of what type of education do they need and which then does mean they get a much more communication targeted curriculum. (SLT B).

SLT D described aspects of the role that go beyond what traditionally sits within speech and language therapy. These included counselling, active listening, empathy, and understanding. SLT D described these aspects as critical to the role, given the complexity of the individuals who attend her setting. In SLT D’s experience, whilst some SLTs enjoy these broader elements of the role, others consider them outside the scope of practice:

...sometimes I think in a Post-16 we can become counsellors, we can become tutors, we can become TAs in the classroom, and our role is not just a speech

and language therapist..., which I personally enjoy but some people don't. (SLT D).

Whilst SLTs had a clear understanding of their own role in Post-16 SEND, they perceived that teachers' understanding of the SLT role was less clear. SLTs particularly perceived that teachers do not fully understand the broader aspects of communication relevant to Post-16 SEND settings, and how SLTs can support the development of functional skills, life skills, transitioning to adulthood, and interview skills:

People don't actually think "oh that could be a speech and language role to support this"... they don't understand the breadth of our role and that we can do a lot more than that." (SLT A).

SLT B described how particular aspects of the SLT role may contribute to this lack of understanding: "...when you're in the classroom I think it's hard for them to know what you're doing but when you're in a training delivery, it's putting a face to all of these ideas, isn't it?" However, SLTs also noted that they can use opportunities to deliver training to take an active part in increasing teachers' understanding of the SLT role.

The SLTs also reflected on the limitations in their own knowledge around teachers' roles, particularly in relation to managing a classroom, understanding the curriculum, and having a shared language with teaching colleagues:

...there's [sic] certain things that I have no understanding of as a speech and language therapist about the pressures of teaching ... they have to think of so many different things and our bag is one element. (SLT D)

In reflecting on understanding of roles, the SLTs also discussed the role that senior leaderships team have in understanding and enabling collaboration between SLTs and teachers. The SLTs agreed that this is a particularly influential role, viewing

senior leadership teams as responsible for knowing exactly what is required to collaborate and providing adequate time for teachers and SLTs to work together. Three SLTs shared their experiences of working with senior leadership teams who didn't seem to understand the role of SLTs or how collaboration between SLTs and teachers should happen.

She's [Head Teacher] just maybe got this well-meaning idea that we want you to collaborate, but I think if senior leadership don't even know what it looks like, that's possibly a big problem that they can't promote it, they just say "go work in the classroom," but then you just become a TA. You're just sitting there and you're not actually doing anything useful. (SLT A)

SLT D described her perception that the experience and knowledge of the senior leadership team contribute to their support for collaboration, particularly noting that those who had moved from working in mainstream settings into Post-16 SEND *"...had no idea, [had] never worked with a speech and language therapist..."*

The SLTs also described settings where SLT services are seen by senior leadership teams as an obligation, not a valuable support. Often, senior leadership teams view SLT contributions as something procedural, dictated by an EHCP, rather than something that could benefit individuals or improve educational outcomes:

...it's fundamental, unless you have that buy in and that support. I can think of places where I have that totally, and other places where they're like, "oh you're just a fluffy bit, I have to call you in because it says so on the EHCP." You can tell the difference." (SLT E)

As a result of this, SLTs highlighted the negative impact that this lack of understanding can have on SLTs' ability to carry out their role, including missing out on

opportunities to support in different areas of the curriculum, as demonstrated by SLT D:

“...it meant that there were so many opportunities missed for us to work in employability... and because he didn’t understand our role, we couldn’t get the opportunity.”

These descriptions illustrate the breadth of the SLT role in Post-16 SEND and the related conflicts in understanding that role, from the individual practitioner, right through to settings’ senior leadership teams. SLTs in Post-16 SEND appear to be working within complex professional relationships, with a number of external pressures and expectations. The remainder of this chapter will discuss the final two themes that illustrate the main factors that influence collaboration, the SLTs’ suggestions for improving collaborative practice and the consequences of both successful and unsuccessful collaborative experiences.

Theme 3: Barriers to Collaborative Practice Occur at Profession, Organisation, and Individual Levels

Throughout the focus groups, the SLTs discussed a range of factors that they perceived as barriers to effective collaboration, including the erosion of services, funding constraints impacting on good practice, time constraints making collaboration difficult, staffing issues across professions, personal characteristics influencing collaboration, and differing expectations between professionals.

At the level of the SLT profession, participants shared experiences of practices and services becoming eroded over time. SLTs gave examples of particular responsibilities that had been taken away completely or significantly reduced. Examples included removal from teacher appraisal processes, the loss of reflective

practice forums to share practice around supporting individual students, reduction in time allocated to delivering training, and loss of position within senior leadership teams.

“We would be part of the appraisal process and anything that came up relating to supporting students’ communication would be... it’s just all stuff that we’ve lost, so it’s frustrating.” (SLT B)

The SLTs shared a variety of reasons for this erosion of practice and scope, including changes to funding processes or changes of ownership or organisational restructures that resulted in the loss of senior leadership responsibilities:

I was sort of therapy lead and a member of the senior leadership team... then a new Head came in... She basically cut it to her and her Deputy Head and Safeguarding Head... the therapy leads and the others were just sort of downgraded a bit. (SLT A)

SLTs described the pressures of funding and how these can impact efforts to make collaboration happen. These funding pressures were described as coming from both the SEND sector through the constraints of the EHCP system, and specific organisations. This meant that these higher-level policy and funding bodies influenced the way in which SLTs enacted their role and the types of supports they provided.

I think then we’re beginning to be more and more expected to meet the requirements of the funders, which is to offer the hours in the EHCP. And we are desperately trying to resist that because we’ve tried to rewrite the EHCPs in terms of what that young person needs for their... the rest of their life... I do feel we’re really constrained by funding and the EHCP system in actually providing what is useful. (SLT B)

SLTs also described the conflict between SLTs trying to support individual learners, and the leaders trying to run their college as a sustainable business.

...I think it comes from the umbrella body who is trying to make money out of our college... who are just looking at it as businesspeople, so they just see this much money coming in, going “where’s it going? Do you have to provide that? If so, why does it cost that much? Why are we not charging this much?” It seems to just come down to numbers. (SLT B)

SLTs also reflected on the personal impact of these barriers to collaboration. For example, when reflecting on the reduction in training delivery time from two weeks a year 10 years ago, SLT B stated:

...So, it sort of gave us a different status that we’ve since lost. Now we’re just another person who swans in and swans out, or runs a little group, or does that little something-or-other, but it feels very little in comparison to running the two weeks of training.

Time constraints and staffing issues were also frequently cited as barriers to successful collaboration. Many stated that the time pressure was felt in the inability to coordinate time to meet, rather than a lack of willingness, as described by SLT A: *“It’s just the time constraints and everyone is working so hard... They’re teaching all day and then they have their meetings or whatever after school... and it’s just finding that time to sit down together is really tricky.”*

SLTs frequently highlighted the frustrations of these time pressures, and the lengths they needed to go to ensure effective collaboration could happen. However, SLTs also shared the perspective that these time constraints can lead to SLTs changing the way they work, to best utilise their time, as demonstrated by SLT B:

So, as a therapist we tend to invest time where we know it's going to have an effect and be listened to. And then when we're occasionally exposed to... certain other members of staff, give recommendations to them, there's a tendency to think "oh I'll just send them an email because I know they're not going to do it." I'm not going to spend extra time trying to explain how to do what we're thinking should happen." (SLT B)

When discussing staffing issues, the SLTs described problems ranging from high levels of staff turnover amongst teachers and SLTs, to the nature of Further Education [FE] settings and coordinating large staff teams around learners. SLT A's statement that *"...staff turnover means a lot of them have gone and it hasn't carried on"* when describing time-intensive efforts to roll out an approach highlighted a key frustration and was reiterated by SLT B: *"...changes in staff is always... you have to start again each time."*

SLT D's perception is that these staffing issues are also found within the SLT profession; *"I think it's quite tricky coming into a Post-16 setting, there's been a high turnover of speech therapists where I've worked because I do think it's a certain personality. It's quite a difficult job in a lot of ways..."*

The SLTs also described how the individuals involved in the collaborative relationship influence the success of that collaboration, with negative experiences appearing to serve as a barrier. Indeed, SLT B highlighted that a willingness to collaborate depends on individual professionals:

... it does depend on individuals, so there are a few individuals who seek us out, use our advice, share ideas, you know, say "I want to do this with this person" and we can, again, learn but also shape that. And others who seem to almost

avoid us and also are the ones that we know don't change even when we tell them what to do."

At the individual level, SLTs further described the differing expectations of those within the collaborative partnership. According to SLT A *"...maybe they [teachers] feel like, I don't know, like we're coming in to take over or to tell them they're doing something wrong..."* SLT A went on to share how this lack of shared understanding negatively influences collaboration

...it's been in my mind that the teacher's going to do it with me but then they, in their head, they're like "oh I can go and sit and do my emails for half an hour," and it's like "no, no, that wasn't the idea." It can be tricky to get that sort of balance I think, and that understanding between the teachers."

This was consistent with the experiences of SLT B, who stated that *sometimes they [teachers] feel like either you're treading on their toes or that you're just giving them a free half an hour when they can do something else. I'm not sure that it's clear they're supposed to be taking on what you're suggesting.*

These differences in expectations appeared to exist not just within the collaborative relationship between teachers and SLTs but the relationship with senior leadership teams, as described by SLT A:

I think there's probably a different expectation, as in, from senior leadership compared to teachers. So, senior leadership are expecting us to write all the annual review reports and spend a lot of time on that, and the teachers don't realise that we're doing all that...

The experiences of the participants highlight many factors that make collaboration difficult. Time constraints, funding pressures, and a lack of understanding

of roles appear to cause significant frustration and result in unclear and inconsistent collaborative practices. However, the SLTs shared some creative suggestions to address these barriers.

Theme 4: SLTs' Attempts or Suggestions to Improve Collaborative Practices Within Their Own Settings

Beyond simply experiencing barriers to collaboration within their settings, the SLTs shared ideas on how to address these. Across both focus groups, SLTs shared a range of attempts that they had previously made to make collaboration easier or more successful. A key strategy shared by many was delivering training for staff, as exemplified by SLT C: *"the SLT department where I work are lucky in that we always get a slot on the induction training for new staff. All our staff, regardless of where they work in the college, go through the same induction."*

SLT A gave an example of trying to influence a cultural or attitudinal change within the setting by challenging the current understanding of roles: *"...that was something we tried to change a few years ago. Actually, sort of saying to teachers, "look, in their EHCP, so-and-so needs speech and language this many times a week," or whatever it said on their EHCP, and we said to them "how are you meeting that need?""*

SLTs also specifically described efforts they had made to address the barrier that time poses to collaboration, such as SLT B's description of working more flexibly with teachers,

We have tried to get more time in actual classrooms, or session rooms as we call them, so that we're not expecting the teacher to take extra time out and to go in and either run a small group or take part in a session.

Or SLT D's efforts to provide physical resources in new ways:

...we've tried to be more efficient with how we provide the support. So, in one place, we made a whole communication pack with blank Talking Mats and stuff about Blank's levels and Zones keyrings... we made all of those, with instructions, that we handed out to every single class.

Alongside describing attempts already made to improve collaboration, the SLTs made suggestions for other strategies they feel could address the difficulties, such as SLT A's call for more opportunities to deliver training; *"...just being able to raise awareness, training opportunities, talking to all the staff, would be really helpful."*

SLT D echoed SLT A's sentiment in suggesting more opportunities to deliver training:

I think that dedicated time in training and not having to constantly ask all year, "can we have time for this training to be delivered, we want to do communication needs, we want to do AAC, we want to do Zones of Regulation... please give us some time!"

SLT B also called for SLTs to be more involved in senior leadership within settings, *"I think including speech and language therapists somewhere near, if not on, the senior leadership team, it would actually make a massive difference."* As well as more formal opportunities for collaboration with teachers: *"Some sort of forum, like a multi-disciplinary team meeting between teachers and therapists about outcomes."*

Four of the SLTs' suggestions encompassed the role that they feel senior leadership teams should play in supporting collaborative practice, including placing more value on the role of the SLT in the classroom, encouraging a culture of shared responsibility, holding staff accountable for following SLT recommendations,

signposting teachers toward SLT support, sharing their priorities for the education setting, and ‘bridging the gap’ (SLT D) between teachers and SLTs, as highlighted by this statement from SLT A:

“I think senior leadership [should be] promoting the therapists within the classroom and not seeing us as just somebody to tick off an EHCP target or somebody just as you know... “the student’s got speech and language on their EHCP,” you know, “therapist you go and deal with it... I think perhaps a culture of leadership saying that every... all parts of the EHCP are everyone’s responsibility.”

Throughout the focus groups, some of the participants touched on benefits or downsides to their role. An exchange between SLTs A and B described the perceived personal and professional benefit that comes from successful efforts to collaborate with teachers to introduce a new strategy in the classroom: *“It boosts your role, doesn’t it? They see that you’re useful and you have knowledge that they can use, which is what you want them to understand.” (SLT B)* and *“...it’s really nice when you get the keen teachers going “we’re really looking forward to you coming in,” and that boosts your enjoyment of the job.” (SLT A).*

It is apparent that the attempts and suggestions to address the difficulties of collaboration between teachers and SLTs are just as varied and wide ranging as the difficulties themselves. However, the fact that the majority of SLTs highlighted the additional support senior leadership teams could provide indicates that SLTs are aware these challenges go beyond their individual power to address.

This chapter has described SLTs’ understanding of collaborative activities, how participants in the collaborative relationships understand their roles and

responsibilities, SLTs' perceived barriers to collaboration and their efforts and suggestions to address.

In the next chapter, the researcher will discuss how the data in the present study fits within the wider literature on collaboration between teachers and SLTs, and how the data answers the research questions posed at the beginning of this thesis.

Chapter 5: Discussion

This study explored the perceptions and experiences of professional collaboration between teachers and SLTs in Post-16 SEND settings. It addressed three research questions:

- What are the experiences of teachers and SLTs related to collaborative practice?
- What are teachers' and SLTs' perspectives on the purpose, advantages, and disadvantages of collaborative practice?
- What are teachers' and SLTs' perspectives on the factors that influence the success of collaborative practice?

This chapter will discuss the key findings for each research question in relation to existing literature and practice documents related to collaboration between teachers and SLTs.

Experiences of Collaborative Practice

This study examined teachers' and SLTs' experiences of collaborative practice, finding many shared experiences between the two professional groups, as well as a few key areas in which experiences or perceptions differed. Currently, there is no research examining collaboration between teachers and SLTs in Post-16 SEND settings, and while there is a significant body of literature examining collaboration between teachers and SLTs in mainstream primary settings, these studies have tended to focus on abstract conceptual elements such as perceptions about the challenges of collaborating, rather than examining specific activities that teachers and SLTs carry out when collaborating. In their 2023 systematic review of collaboration between teachers and SLTs, Armstrong et al. revealed significant variation in the ways that collaboration happens, with some

studies indicating that joint assessment, goal setting, and joint planning are frequent collaborative activities, while others indicated that these were largely conducted by SLTs in isolation or poorly communicated. The survey in the present study explored teachers' and SLTs' experiences of the key collaborative activities that are carried out in Post-16 SEND settings. There was high agreement between teachers and SLTs in that most participants reported engaging in individual planning meetings that focus on students' targets and strategies, attendance at informal training sessions, and ad-hoc opportunities such as e.g., corridor conversations. Fewer participants indicated that they engage in co-delivering lessons or co-planning lessons. When further explored within the online focus groups in phase two of the research, joint target setting and training were also the most frequently cited collaborative activities. These results align with the guidance of the SEND Code of Practice (Department for Education & Department for Health, 2015), which focuses on joint target setting and delivery of training as examples of different professional groups working together to improve outcomes for children and young people with SEND.

Purposes, Advantages, and Disadvantages of Collaboration

To develop a deeper understanding of how teachers and SLTs understand collaboration, the survey investigated participants' views on the main purposes of collaboration, finding that most teachers and SLTs agree that information sharing, improving educational outcomes for students, resource sharing, and resource development are the main reasons to work together. Most participants did not agree with the statement that the main purpose of collaboration is to prepare for formal inspections, e.g., Ofsted. This implies that teachers and SLTs do not feel an obligation to

collaborate to meet ongoing inspection requirements, instead managing to prepare for these inspections in other ways. This aligns with Jago and Radford's (2017) study, which found that most of their participants focused on the purpose of collaboration, rather than the process. The participants in that study considered collaboration to be important in information sharing, information gathering, and goal setting.

As well as examining the main purposes of collaboration, the online survey explored teachers' and SLTs' perceptions of the advantages of collaboration. Much of the national policy and guidance for SLTs regarding collaboration highlights the advantages of collaboration in improving services for those with SLCN (Department for Education & Department for Health, 2015; Health and Care Professions Council, 2016; Royal College of Speech and Language Therapists, n.d.-b). Indeed, most of the survey respondents reported improved outcomes for students and their families as an advantage. However, most also stated that organisational development, such as creating a more reputable SEN provision; and personal development, including increased workplace wellbeing, were advantages of collaboration. SLTs elaborated further by sharing specific examples of the personal boost in job satisfaction as a result of successful collaboration. This aligns with Hartas' (2004) findings, in which most SLTs and teachers perceived collaboration as a process that influenced them at an individual level through increasing their sense of support, at a client level through improving outcomes, and at an organisational level. Interestingly, while the vast majority of SLTs listed professional development, including increased adherence to professional standards such as HCPC, as a benefit of collaboration, only one of the surveyed teachers agreed with this statement. Perhaps this is a result of the differences in registration expectations for SLTs and teachers working in Post-16 SEND. Teachers in the

UK only need qualified teacher status (QTS) to work in maintained primary, secondary and special schools. QTS is not a requirement for those working in any type of FE setting, including Post-16 SEND settings (Department for Education, n.d.-b). As such, none of the teachers surveyed hold QTS. However, SLTs must hold HCPC registration in order to practise in the UK and are provided with clear guidance about working with others by their professional bodies (Health and Care Professions Council, 2016; Royal College of Speech and Language Therapists, n.d.-b). This only goes some way to explain the differences, as all professionals working with children and young people with SEND must adhere to the SEND Code of Practice, which requires professionals to work together to achieve the best outcomes (Department for Education & Department for Health, 2015).

This study also examined the downsides or disadvantages that teachers and SLTs experience as a result of collaboration, which was also explored by Hartas (2004). In the present study, three out of the four teachers stated that they had not experienced any downsides or disadvantages in collaborating. One teacher and eight SLTs experienced blurred boundaries or lack of clarity between roles as a result of collaboration. In contrast, all of the SLTs shared that they had experienced some form of challenge or disadvantage in collaborating with teachers, including 67% ($n=10$) who reported increased time pressure and constraints. Surprisingly, losing professional autonomy, having professional decisions questioned, increased workload, and needing to compromise on a service or support were not revealed to be significant downsides or challenges from either participant group. In contrast to this, Hartas' (2004) survey asked teachers and SLTs about the sacrifices that they have to make when collaborating, with the researchers positioning these sacrifices as 'worries' or 'stresses' (p. 45), therefore

likely experienced as disadvantages or challenges. In that survey, the researcher found that a significant proportion of SLTs and teachers (82% of SLTs and 79% of teachers) experienced time constraints as a sacrifice, and that many teachers and SLTs also found having their professional decisions questioned was a sacrifice.

Factors that Influence the Success of Collaboration

Much of the existing literature examines factors that act as facilitators or barriers to effective collaboration. The present study further examined these in relation to teachers' and SLTs' experiences within Post-16 SEND settings. This section will discuss the factors that were found to be influential within the present study, including time commitment and constraints, personal attributes and quality of relationships, understanding of each other's roles and responsibilities, and organisational structure. This section will also explore how these align with the existing literature.

Time commitment and constraints

The present study explored teachers' and SLTs' perspectives on the factors that influence the success of collaboration. Both the online survey and focus groups revealed that time commitment and constraints are perceived as a significant barrier to successful collaboration. Of the 17 SLTs and teachers who responded to this survey question, 75% ($n=13$) reported that lack of time hinders collaboration, and 94% ($n=16$) stated that being provided with adequate time supports effective collaboration. Time constraints were also a frequent barrier cited by SLTs within the focus groups; SLTs often reported that both SLTs and teachers are willing to collaborate but struggle to find the time to do this. Indeed, SLTs reported that they had to ask for time with teachers to make collaboration happen and often used the term 'protected time' to denote time

that they wanted senior leadership teams to specifically allocate for this purpose. This aligns with much of the literature examining collaboration between teachers and SLTs in mainstream education over recent decades (Armstrong et al., 2023; Glover et al., 2015; Hartas, 2004; Pfeiffer et al., 2019; Quigley & Smith, 2022; Wright & Kersner, 1999, 2004). Indeed, Armstrong et al. (2023) described just how significantly a lack of time can influence collaboration, affecting a wide range of collaborative activities, such as time to effectively communicate and time to build strong working relationships.

Given the relatively extensive body of literature, including the present study, citing time as a significant barrier to effective collaboration, it seems reasonable to state that providing adequate time is one of the fundamental factors in improving collaboration between teachers and SLTs. Without this ‘protected time,’ it seems unlikely that collaborative efforts will improve in a meaningful way.

Communication

In the wider body of literature, communication is frequently cited as an influential factor in the success of collaboration (Armstrong et al., 2023; Greenstock & Wright, 2011; Wilson et al., 2016; Wright & Kersner, 2004). In these studies, effective communication was found to influence teacher willingness to engage in further collaboration and facilitate professional relationships, while ineffective communication was a barrier to collaboration when jargon was used. However, communication did not emerge as a significant factor within the online survey or focus groups of the present study. It is unclear why this may be the case, although the researcher speculates that a key difference is the nature of the service provision. Many previous studies have examined collaboration between teachers and SLTs in mainstream settings, in which it

is much more likely that the SLT will be an externally employed professional who visits the school. Some research has indicated that this model can position the SLT as a visiting ‘expert’ who arrives to advise school staff, rather than partnering to provide support (Law et al., 2002; Mathers et al., 2024). In contrast, 74% of participants in the present study indicated that their SLT teams are employed by and work solely within the same Post-16 SEND setting. It may be the case that professionals working within the same organisation naturally have more shared understanding of internal policies and practices, potentially leading to better communication than those working for different employers, such as NHS SLTs entering a number of schools.

Personal attributes and quality of relationships

A key theme within the existing collaborative practice literature is the importance of personal attributes and quality of relationships in enabling effective collaboration (Armstrong et al., 2023; Gallagher et al., 2019; Greenstock & Wright, 2011; Hartas, 2004; Jago & Radford, 2017; Ramirez & Lynch, 2024). Indeed, in the present study, almost all participants agreed that compatibility of characteristics (e.g., interpersonal communication skills, sense of humour, age, personality, values) influenced the success of collaboration. Similarly, the majority of survey participants indicated that close working relationships enable effective collaboration. However, only 60% of SLTs and 50% of teachers in the present study indicated that they are provided with opportunities to develop good relationships. Further to this, focus group participants shared experiences of times when individual teachers’ lack of willingness to collaborate had significantly impacted efforts to work together. This compatibility of characteristics, including communication skills and shared values, make the

collaborative process easier, while a lack of compatibility can significantly hinder the process.

Understanding of each other's roles and responsibilities

A key theme identified through the focus groups was the importance of understanding each other's roles and responsibilities. When asked explicitly to rate their understanding of each other's roles, SLTs were generally confident in their understanding of the teacher's role. In contrast, the teachers appeared less confident, with most teachers stating they had *some understanding* of the SLT role. Around 60% of participants listed *clear understanding of roles and responsibilities* as a factor that supports effective collaboration. Indeed, when asked to describe a time they had experienced successful collaboration, around half of the SLTs specifically referenced good understanding of roles as a reason for this success.

During the focus group discussions, the importance of understanding roles and responsibilities was even more evident. SLTs described their understanding of their own role, demonstrating variation across different colleges about the scope of practice for SLTs in Post-16 SEND. Given this variation, it is not surprising that many of the SLTs highlighted times when teachers or senior leadership teams demonstrated poor understanding of the SLT role, and how this led to different expectations from across the professional groups.

This is consistent with previous research, which has emphasised the importance of a shared understanding of roles and responsibilities (Armstrong et al., 2023; Baxter et al., 2009; Greenstock & Wright, 2011; Jago & Radford, 2017; Suleman et al., 2014; Wilson et al., 2015). Indeed, Baxter et al. (2009) also found that teachers'

limited understanding of SLT procedures may result in differing expectations from those of SLTs, such as professional differences in understanding the key purposes of joint working, with some understanding joint-working to be a reciprocal exchange of information such as intervention methods, targets, and concerns. For others, they understood joint working to be a flow of information from the SLT to the teacher only, in which the SLT shared strategies and provides feedback on how to implement them correctly.

To address this barrier, researchers have proposed open discussion between teachers and SLTs about roles, responsibilities, and scope of practice (Baxter et al., 2009), as well as providing interprofessional education opportunities (Jago & Radford, 2017; Suleman et al., 2014; Wilson et al., 2015). This researcher also suggests that both open discussion and interprofessional education opportunities should be encouraged for SLTs and teachers working in Post-16 SEND settings.

Organisational structure

Recent research into collaboration between teachers and SLTs has highlighted the importance of organisational structure in enabling or hindering collaboration, particularly emphasising the factors that sit outside individual SLTs' control, such as allocated time and staffing (Armstrong et al., 2023; Gallagher et al., 2019b; Quigley & Smith, 2022). In the present study, the online survey asked participants to indicate how their organisations support collaboration, with fewer than half indicating they are provided with adequate time to collaborate, and only around 60% indicating that senior leadership teams provide encouragement to collaborate. Indeed, three of the SLTs explicitly indicated that they are given little or no organisational support to collaborate.

When exploring this topic further within the focus group, SLTs shared the perspective that senior leadership teams do not seem to have a clear idea of what collaboration should look like, and that encouragement to collaborate is vague or without the necessary operational factors, such as time and staffing. Additionally, SLTs in the focus group appeared frustrated that their previous positive experiences of closer links to or presence on senior leadership teams were no longer the case and shared perspectives on how this had negatively impacted collaborative practice within their settings.

It is interesting to note that over 20 years ago Hartas (2004) surveyed teachers and SLTs and found very similar perspectives. In particular, Hartas noted that the organisational structure can play a crucial part in putting systems in place to encourage and value collaboration.

Given that research spanning the last 20 years has found the same or similar barriers at play, and many of these barriers are now also found for SLTs and teachers working in Post-16 SEND settings, it is important to consider why these barriers may be so entrenched. One potential explanation for this lack of movement in reducing barriers to collaboration is the increased pressure within the SEND system, with increasing numbers of children and young people requiring SEN Support or EHCPs (Crane, 2024; Sibieta & Snape, 2025; Van Herwegen, 2022). Sibieta and Snape (2025) also highlight the fact that, although funding for high needs support has increased by 50% since 2018, this has not kept pace with what Local Authorities are actually spending on SEND support. In the present study, SLTs who participated in the focus groups indicated that these funding pressures are felt by organisations and are being passed on to SLTs, with

increased scrutiny on what SLTs are spending their time doing and reduced staffing levels across teaching and SLT teams.

Many of the suggestions for improving collaboration, across both survey and focus group respondents, were a direct response to the perceived barriers. For example, when inadequate time to collaborate was perceived as a barrier, then increasing staffing within the SLT teams to reduce caseload sizes was proposed as a solution. Where lack of clarity in roles or lack of strategic support to collaborate was the barrier, more active roles or closer communication with senior leadership teams was a suggested solution. Participants also frequently suggested more training opportunities as a strategy to improve collaboration. However, given the fact that staff turnover was cited as a frequent issue, it is questionable whether this would have the desired impact. While the previous research has indicated that many organisational factors in enabling effective collaboration are outside the control of individual SLTs, the current 'SEND crisis' (Sibieta & Snape, 2025) likely means that increasing staffing and providing adequate time to enable effective collaboration may ultimately sit outside the control of individual organisations.

Chapter 6: Conclusion

This final chapter summarises the purpose and rationale of the study and discuss how the rigor and trustworthiness of the research was ensured. A discussion of the limitations of the study, directions for future research, and implications for practice will follow. The conclusion of this study will be presented at the end of this chapter.

Purpose and Rationale of the Study

This study examined teachers' and SLTs' experiences of collaborative practice in Post-16 SEND settings. Although there is a healthy body of literature examining collaboration between teachers and SLTs in primary-aged mainstream and special education settings, there is a general paucity of research into SLT practice in the later school years. The present study contributes to this field by presenting the views of both teachers and SLTs with regard to working collaboratively in Post-16 SEND settings, gathering information about current experiences of collaborative practice; their perceptions about the purpose, advantages and disadvantages of collaboration; and their views on factors that influence the success of collaboration. It was anticipated that the study findings could inform and shape best practice in Post-16 SEND settings.

This research has filled a gap in the literature by gathering the views of both teachers and SLTs in Post-16 SEND settings, a significantly under-studied area of practice, while also aligning with wider research on the challenges of collaborating between teachers and SLTs.

Research Strengths

Ensuring the trustworthiness of qualitative research is essential in adding credibility and reliability to the research findings (Ahmed, 2024). According to Ahmed (2024), there are four key components that establish the trustworthiness of research: *credibility, transferability, dependability, and confirmability*. This section will discuss a number of factors and strategies that were considered to ensure the quality of the present study.

Credibility

Credibility refers to the degree to which the reported findings accurately reflect the experiences of participants (Ahmed, 2024). Reflexivity and triangulation are two strategies that researchers can use to develop credibility. Reflexivity is the ability of the researcher to acknowledge personal biases and how these may impact the research process (Ahmed, 2024). As an SLT practising within Post-16 settings and regularly collaborating with teachers, the researcher was aware of potential biases towards this topic. Ongoing reflection with research supervisors, as well as strategies such as development of the semi-structured interview guide ahead of the focus groups, were used to ensure that the findings from this study were an accurate reflection of the participants' views and not a reflection of the researchers' experiences and perspectives.

Triangulation, in which multiple data sources are utilised, is another method of developing credibility (Ahmed, 2024). In the present study, predominantly quantitative data was collected in the online survey, followed by qualitative data collected through the focus groups. Through collecting data from both of these sources, the researcher

was able to verify the findings of the survey through collecting more in-depth views within the focus group discussions.

Transferability

Transferability refers to the degree to which research findings can be applied to other contexts and situations, which researchers can facilitate by providing detailed contextual information, including descriptions of the environment, participants, and procedures (Ahmed, 2024). In the present study, detailed descriptions of study participants and sampling strategies have been provided. Additionally, thick descriptions have been provided within the results sections, from the quantitative data, as well as the content analysis and thematic analysis, to allow readers to assess the transferability of the findings to their own contexts and situations.

Dependability

Dependability describes the degree to which research findings remain accurate across time. This is achieved through comprehensive and methodical documentation of research approaches, including the processes of gathering and analysing data, as well as carefully recording key decisions made throughout the process (Ahmed, 2024). In the case of the present study, the researcher spent a significant amount of time designing and piloting the online survey and carefully documented the changes that were made in response to feedback from the pilot participants. In addition, the researcher documented decisions that pertained to the analysis and integration of the quantitative and qualitative data, including the decision to analyse this data separately in order to preserve the voice of teachers, and providing definitions and examples of themes within

the codebook. The documentation of these steps provides the opportunity for the study to be reproduced, thus ensuring the dependability of the results.

Confirmability

The impartiality and objectivity of research findings is key in qualitative research, and is referred to as *confirmability* (Ahmed, 2024). This means that any biases, opinions, or personal experiences of the researcher do not affect the research findings. In the present study, the lead researcher engaged in reflective practice to acknowledge personal investment in the research topic and described this for readers. In addition, throughout the research process, the researcher engaged in peer debriefing in the form of consultation with research supervisors. Within peer debriefing, the research supervisors reviewed the semi-structured interview guide, focus group transcriptions and codebook, to discuss interpretations of the data and key findings in order to minimise researcher bias. These regular opportunities for discussion reduced researcher bias and helped to maintain objectivity through the entire research process.

Research Limitations

Despite best efforts to ensure a rigorous research process, it must be acknowledged that there are several limitations in the present study. Firstly, while a number of methods were employed to recruit participants to the study, these efforts resulted in only a very limited sample size, particularly in teacher participants. Not only does this small sample size impact the generalisability of the online survey results, but it also resulted in the inability to recruit teachers to the focus groups. The original aim of the focus groups was to facilitate collaborative discussions between the professional groups, to generate an in-depth exploration of their perspectives. Without teacher

participants, the researcher was only able to present details of SLTs' perspectives and experiences, thereby limiting the scope and application of the results.

It must also be recognised that in studies where participation is voluntary, there is potential for self-selection bias. This refers to a phenomenon whereby participants agree to take part in research due to an inherent interest in the topic, which can manifest in the expression of strong opinions, whether negative or positive, that may not reflect the views of the target population more generally (Nikolopoulou, 2022). The small sample size, particularly in focus group participation, increases the possibility that those who agreed to participate had an inherent interest, and therefore stronger positive or negative opinions, about collaboration between teachers and SLTs. This, when taken in combination with the lack of teacher participants in the focus groups, is likely to impact the generalisability of the research findings.

Clinical Implications and Practical Applications

The findings of this study present teachers' and SLTs' current experiences of collaboration, the views on its purposes, advantages, and disadvantages, and the factors that influence the success of collaboration.

This study indicates that collaboration frequently occurs through joint target setting, attending training, and ad-hoc opportunities. Beyond this, there is little consistency or clarity on the other ways in which teachers and SLTs can and should collaborate. This study further highlighted a lack of clarity and limited understanding of the SLT role within Post-16 SEND. Teachers indicated little confidence in their understanding of the SLT role, and SLTs reported that teachers and senior leadership team members tend to underestimate the broad scope of SLT practice. It is likely that

this lack of understanding of the SLT role has an impact on the opportunities for collaboration that are made available. Thus, SLTs should prioritise advocating for their profession and increasing other professional groups' understanding of the SLT scope of practice within Post-16 SEND. Indeed, prior research has espoused interprofessional education between teachers and other professionals, including SLTs and OTs, as an avenue for increasing shared understanding of collaborative practice (Benevides et al., 2022; Jago & Radford, 2017; Suleman et al., 2014; Wilson et al., 2015).

This study also indicated a general consensus from participants that time commitments and constraints impact the success of collaboration. The findings highlighted participants' frequent calls for more dedicated time to collaborate, which sits outside the control of individual practitioners, and is directly influenced by the organisational structure and priorities of senior leadership teams. This study makes clear the significant role that senior leadership teams can play in advocating for and advancing the cause of collaborative practices within their settings.

In the context of the well-documented increasing pressures and challenges in the UK SEND sector (Crane, 2024; Sibieta & Snape, 2025; Van Herwegen, 2022), it is imperative that the teacher and SLT professional groups advocate for a focus on effective collaboration in Post-16 SEND and strive to address challenges through open acknowledgment and discussion of these.

Directions for Future Research

This study was limited in scope, collecting quantitative and qualitative data to examine the views of teachers and SLTs working in Post-16 SEND settings and the project was non-experimental in nature. While this provides much-needed information

about practitioners' experiences and recommendations for the ideal SLT service in these settings, the researcher is unable to provide definitive recommendations for improving practice. Experimental studies, such as an action research project comparing different models of collaboration in practice, could enhance the body of literature for teachers and SLTs practice in Post-16 SEND, providing much-needed guidance on how collaboration could happen and the required time to enact it effectively.

Further research is also needed to understand how collaboration between teachers and SLTs translates into meaningful outcomes for service users. International and national policies, as well as professional guidance, call for collaboration between professional groups (Department for Education & Department for Health, 2015; Health and Care Professions Council, 2016; Royal College of Speech and Language Therapists, n.d.-b; World Health Organization, 2010, 2011), and this study indicated a general consensus that the main purpose of collaboration is to improve educational outcomes. However, the general paucity of research into SLT practice within Post-16 SEND settings means that there is little or no information about the effect that collaboration has on improving educational outcomes for students in these settings. Future research should endeavour to explore how the direct impact of collaboration on educational outcomes can be meaningfully measured.

Conclusion

This study examined the experiences of teachers and SLTs when collaborating in Post-16 SEND settings. The teachers and SLTs views were united in understanding the purpose of collaboration and in highlighting many of the same influential factors. These findings aligned with broader research into collaboration between teachers and SLTs in

primary school settings. SLTs were more upfront about their experiences of the downsides or disadvantages of collaboration, highlighting key challenges in making this happen effectively. SLTs also shared different approaches they have attempted to increase collaboration, as well as their suggestions for improving collaborative practices in their settings. These views highlight the importance of senior leadership teams in making collaboration happen, and the personal benefits that SLTs feel when their experiences of collaboration are successful.

References

- Ahmed, S. K. (2024). The pillars of trustworthiness in qualitative research. *Journal of Medicine, Surgery, and Public Health*, 2, 1-4.
<https://doi.org/https://doi.org/10.1016/j.glmedi.2024.100051>
- Alele, F., & Malau-Aduli, B. (2023). *An Introduction to Research Methods for Undergraduate Health Profession Students*. James Cook University.
<https://doi.org/10.25120/fh2z-yva8>
- Armstrong, R., Schimke, E., Mathew, A., & Scarinci, N. (2023). Interprofessional practice between speech-language pathologists and classroom teachers: a mixed-methods systematic review. *Language, Speech and Hearing Services in Schools*, 54, 1358-1376. https://doi.org/https://doi.org/10.1044/2023_LSHSS-22-00168
- Barnes, K. J., & Turner, K. D. (2001). Team collaborative practice between teachers and occupational therapists. *The American Journal of Occupational Therapy*, 83-89.
<https://doi.org/https://doi.org/10.5014/ajot.55.1.83>
- Baxter, S., Brookes, C., Bianchi, K., Rashid, K., & Hay, F. (2009). Speech and language therapists and teachers working together: Exploring the issues. *Child Language Teaching and Therapy*, 25(2), 215-234.
<https://doi.org/https://doi.org/10.1177/0265659009102984>
- Benevides, T. W., Barker, K. S., Lamb, M., Knight, D., Long, T. H., Bloder, M., Crews, T., & Su, S. (2022). Teachers and occupational therapists as interprofessional teammates: implementation of an adapted social-emotional learning curriculum. *Journal of Interprofessional Education and Practice*, 29, 1-7.
<https://doi.org/https://doi.org/10.1016/j.xjep.2022.100573>
- Bingham, A. J. (2023). From data management to actionable findings: a five-phase process of qualitative data analysis. *International Journal of Qualitative Methods*, 22, 1-11. <https://doi.org/10.1177/16094069231183620>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101. <https://doi.org/10.1191/1478088706qp0630a>
- Braun, V., & Clarke, V. (2021). One size fits all? What counts as quality practice in (reflexive) thematic analysis? *Qualitative Research in Psychology*, 18(3), 328-352. <https://doi.org/10.1080/14780887.2020.1769238>
- Braun, V., & Clarke, V. (2022). Toward good practice in thematic analysis: Avoiding common problems and be(com)ing a knowing researcher. *International Journal of Transgender Health*, 24, 1-6.
<https://doi.org/https://doi.org/10.1080/26895269.2022.2129597>
- Bronfenbrenner, U. (1979). *The Ecology of Human Development: Experiments by Nature and Design*. Harvard University Press.
<https://doi.org/https://doi.org/10.2307/j.ctv26071r6>
- Bryman, A. (2006). Integrating quantitative and qualitative research: how is it done? *Qualitative Research*, 6. <https://doi.org/10.1177/1468794106058877>
- Buckland, R. (2024). *The Buckland Review of Autism Employment: Report and Recommendations*. D. f. W. a. Pensions;.
- Catts, H. W., Fey, M. E., Zhang, X., & Tomblin, J. B. (2001). Estimating the risk of future reading difficulties in kindergarten children: A research-based model and its

- clinical implementation. *Language, Speech and Hearing Services in Schools*, 32, 38-50. [https://doi.org/https://doi.org/10.1044/0161-1461\(2001/004\)](https://doi.org/https://doi.org/10.1044/0161-1461(2001/004))
- Council for Disabled Children. (n.d.). *What is an Education Health and Care Plan*. Retrieved 14 August from <https://councilfordisabledchildren.org.uk/about-us-0/networks/information-advice-and-support-programme/useful-resources-publications/what-2#:~:text=What%20is%20an%20Education%2C%20Health,they%20would%20like%20to%20achieve.>
- Crane, L. (2024). *Record investment has been announced for SEND... but is it really enough?* University of Birmingham. Retrieved October 2024 from <https://birmingham.ac.uk/news/2024/record-investment-has-been-announced-for-send.but-is-it-really-enough>
- Creswell, J. W. (2014). *Research Design: Qualitative, Quantitative and Mixed Methods Approaches* (4th Edition ed.). Sage.
- Creswell, J. W., & Plano Clark, V. L. (2011). *Designing and Conducting Mixed Methods Research* (Second ed.). SAGE.
- Deakin Library. (2025, 13 October 2025). *Interviews*. Deakin University. Retrieved 17 November 2025 from <https://deakin.libguides.com/qualitative-study-designs/interviews>
- Department for Education. (2015, 30 August 2024). *Independent special schools and post-16 institutions*. Retrieved 16 September 2024 from <https://www.gov.uk/government/publications/independent-special-schools-and-colleges#full-publication-update-history>
- Department for Education. (2025a, January 2026). *Education, health and care plans*. Department for Education. Retrieved 17 February from <https://explore-education-statistics.service.gov.uk/find-statistics/education-health-and-care-plans/2025>
- Department for Education. (2025b, 30 June 2025). *High needs funding: 2025 to 2026 operational guide*. Retrieved 19 January 2026 from <https://www.gov.uk/government/publications/high-needs-funding-arrangements-2025-to-2026/high-needs-funding-2025-to-2026-operational-guide#:~:text=5.2%20Top%20Dup%20funding,participate%20in%20education%20and%20training.>
- Department for Education. (2025c, October 2025). *Special educational needs in England*. Department for Education. Retrieved 17 February from <https://explore-education-statistics.service.gov.uk/find-statistics/special-educational-needs-in-england/2024-25#dataBlock-30ab09b1-c1d2-49c1-b88d-bc871859967a-charts>
- Department for Education. (n.d.-a). *Teach in Further Education*. Retrieved 7 December 2025 from https://www.teachinfurthereducation.education.gov.uk/?gclid=Cj0KCQiA6NTJBhDEARIsAB7QHD0iEl8QKbkYKwP77dTE2_MyKBCtfkO7K3m7bqlzme6bRHOBNRIEuloaAoHAEALw_wcB
- Department for Education. (n.d.-b). *What qualifications do I need to be a teacher?* Retrieved 7 December 2025 from <https://getintoteaching.education.gov.uk/train-to-be-a-teacher/qualifications-you-need-to-teach>

- Department for Education, & Department for Health. (2015). *Special educational needs and disability code of practice: 0 to 25 years*. Retrieved from https://assets.publishing.service.gov.uk/media/5a7dcb85ed915d2ac884d995/SEND_Code_of_Practice_January_2015.pdf
- Dziak, M. (2024). Focus group. In *Salem Press Encyclopedia*: Salem Press.
- Ebbels, S. H., McCartney, E., Slonims, V., Dockrell, J. E., & Frazier Norbury, C. (2019). Evidence-based pathways to intervention for children with language disorders. *International Journal of Language & Communication Disorders*, 54(1), 3-19. <https://doi.org/10.1111/1460-6984.12387>
- Education Committee. (2025). *Solving the SEND Crisis*. House of Commons
- Fisher, M. J., & Bloomfield, J. (2019). Understanding the research process. *Journal of the Australasian Rehabilitation Nurses' Association*, 22(1), 22-27.
- Fuchs, D., & Fuchs, L. S. (2006). Introduction to Response to Intervention: What, why, and how valid is it? *Reading Research Quarterly*, 41(1). <https://doi.org/https://doi.org/10.1598/RRQ.41.1.1>
- Gallagher, A. L., Murphy, C.-A., Conway, P., & Perry, A. (2019). Consequential differences in perspectives and practices concerning children with developmental language disorders: an integrative review. *International Journal of Language & Communication Disorders*, 54(4), 529-552. <https://doi.org/https://doi.org/10.1111/1460-6984.12431>
- Gallagher, A. L., Murphy, C. A., Conway, P. F., & Perry, A. (2019b). Engaging multiple stakeholders to improve speech and language therapy services in schools: an appreciative inquiry-based study. *BMC Health Services Research*. <https://doi.org/https://doi.org/10.1186/s12913-019-4051-z>
- Gascoigne, M. (2006). *Supporting children with speech, language and communication needs within integrated children's services* (RCSLT, Ed.).
- Glover, A., McCormack, J., & Smith-Tamaray, M. (2015). Collaboration between teachers and speech and language therapists: Services for primary school children with speech, language and communication needs. *Child Language Teaching and Therapy*. <https://doi.org/https://doi.org/10.1177/0265659015590844>
- Greenstock, L., & Wright, J. (2011). Collaborative implementation: working together when using graphic symbols. *Child Language Teaching and Therapy*, 27(3), 331-343. <https://doi.org/https://doi.org/10.1177/0265659011415377>
- Grimshaw, J. M., Eccles, M. P., Lavis, J. N., Hill, S. J., & Squires, J. E. (2012). Knowledge translation of research findings. *Implementation Science*, 7(1), 50. <https://doi.org/10.1186/1748-5908-7-50>
- Guetterman, T. C., Fetters, M. D., & Creswell, J. W. (2015). Integrating Quantitative and Qualitative Results in Health Science Mixed Methods Research Through Joint Displays. *The Annals of Family Medicine*, 13(6), 554-561. <https://doi.org/10.1370/afm.1865>
- Hartas, D. (2004). Teacher and speech-language therapist collaboration: being equal and achieving a common goal? *Child Language Teaching and Therapy*. <https://doi.org/https://doi.org/10.1177/0265659004041985>
- Harvard Library. (2025, 11 September 2025). *Library Support for Qualitative Research*. Retrieved 17 November 2025 from <https://guides.library.harvard.edu/qualitative>

- Hathcoat, J. D., Meixner, M., & Nicholas, M. C. (2019). Ontology and Epistemology. In P. Liamputtong (Ed.), *Handbook of Research Methods in Health Social Sciences* (pp. 99-116). Springer.
- Health and Care Professions Council. (2016). Standards of conduct, performance and ethics. <https://www.hcpc-uk.org/standards/standards-of-conduct-performance-and-ethics/>
- Independent Provider of Special Education Advice. (n.d.). *Types of schools and other settings*. Retrieved June 2024 from <https://www.ipsea.org.uk/types-of-schools-and-other-settings>
- Jago, S., & Radford, J. (2017). SLT beliefs about collaborative practice: Implications for education and learning. *Child Language Teaching and Therapy*, 33(2), 119-213. <https://doi.org/https://doi.org/10.1177/0265659017696500>
- Jamshed, S. (2014). Qualitative research method - interviewing and observation. *Journal of Basic and Clinical Pharmacy*, 5(4), 87-88. <https://doi.org/https://doi.org/10.4103/0976-0105.141942>
- Keen, S., Lomeli-Rodriquez, M., & Joffe, H. (2022). From challenge to opportunity: Virtual qualitative research during COVID-19 and beyond. *International Journal of Qualitative Methods*, 21, 1-11. <https://doi.org/10.1177/16094069221105075>
- Kersner, M., & Wright, J. A. (1998). *Supporting Children with Communication Problems: Sharing the Workload*. Routledge. <https://doi.org/10.4324/9781315067971>
- Klatte, I. S., Bloemen, M., De Groot, A., Mantel, T. C., Ketelaar, M., & Gerrits, E. (2024). Collaborative working in speech and language therapy for children with DLD—What are parents’ needs? *International Journal of Language & Communication Disorders*, 59(1), 340-353. <https://doi.org/10.1111/1460-6984.12951>
- Koocher, G. P., & Page, K. V. (2021). Addressing conflicts of interests in behavioural science research. In S. Panicker & B. Stanley (Eds.), *Handbook of Research Ethics in Psychological Science*. American Psychological Association. <https://doi.org/doi.org/10.1037/0000258-005>
- Koski, K. (2014). *Indirect speech and language therapy for individuals with profound and multiple learning disabilities: an ecological perspective*. The Finnish Association on Intellectual and Developmental Disabilities FAIDD.
- Law, J., Lindsay, G., Peacey, N., Gascoigne, M., Soloff, N., Radford, J., & Band, S. (2002). Consultation as a model for providing speech and language therapy in schools: a panacea or one step too far? *Child Language Teaching and Therapy*, 18(2), 145-163. <https://doi.org/https://doi.org/10.1177/026565900201800203>
- Law, J., Lindsay, G., Peacey, N., Gascoigne, M., Soloff, N., Radford, J., Band, S., & Fitzgerald, L. (2000). *Provision for Children With Speech and Language Needs in England and Wales: Facilitating Communication Between Education and Health Services*. (Research Report 239).
- Law, J., Reilly, S., & Snow, P. C. (2013). Child speech, language and communication need re-examined in a public health context: a new direction for the speech and language therapy profession. *International Journal of Language & Communication Disorders*, 48(5), 486-496. <https://doi.org/10.1111/1460-6984.12027>
- Locsin, R. C. (2024). Qualitative research methods, inductive and deductive: Valuable approaches to nursing knowledge development for practice. *Nursing & Health Sciences*, 26(2), 1-3. <https://doi.org/https://doi.org/10.1111/nhs.13128>

- Mathers, A., Botting, N., Moss, R., & Spicer-Cain, H. (2024). Collaborative working between speech and language therapists and teaching staff in mainstream UK primary schools: a scoping review. *Child Language Teaching and Therapy*, 40(2), 120-138. <https://doi.org/https://doi.org/10.1177/02656590241237193>
- McLeod, S., Harrison, L. J., McMahon, C., Wang, C., & Evans, J. R. (2025). Parent-reported speech and language in early childhood is an early indicator of Indigenous Australian children's literacy and numeracy outcomes. *Language, Speech and Hearing Services in Schools*, 56, 730-746. https://doi.org/https://doi.org/10.1044/2025_LSHSS-23-00200
- Miller, S. P. (2024). Thematic Analysis. In *Salem Press Encyclopedia*.
- Ministry of Education. (2024). *Flexible and Integrated Supports*. Retrieved 9 September 2024 from <https://hepikorua.education.govt.nz/how-we-work/flexible-tailored-model-of-support>
- Ministry of Education. (n.d.). *Our Story - purpose of He Pikorua*. Ministry of Education. Retrieved 19 January 2026 from <https://hepikorua.education.govt.nz/Our-Story/#:~:text=He%20Pikorua%20links%20to%20key,and%20well%2Dbeing%20of%20mokopuna>.
- Money, D. (2023). *Position Paper: Learning Disabilities (children, young people and adults)*.
- NHS England. (n.d.). *Special education needs and disability (SEND)*. Retrieved June 2024 from <https://www.england.nhs.uk/learning-disabilities/care/children-young-people/send/>
- Nikolopoulou, K. (2022, November 16 2022). *What is self-selection bias? Definition and example*. Scribbr. Retrieved January 12 2026 from [https://www.scribbr.co.uk/bias-in-research/self-selection-bias-explained/#:~:text=Self%2Dselection%20bias%20\(also%20called,self%2Dselection%20bias%20to%20occur](https://www.scribbr.co.uk/bias-in-research/self-selection-bias-explained/#:~:text=Self%2Dselection%20bias%20(also%20called,self%2Dselection%20bias%20to%20occur).
- Noor, S., Tajik, O., & Golzar, J. (2022). Simple Random Sampling. *International Journal of Education and Language Studies*, 1(2), 78-82.
- Onwuegbuzie, A. J., & Collins, K. M. T. (2007). A typology of mixed methods sampling designs in social science research. *Qualitative Report*, 12(2), 281-316.
- Onwuegbuzie, A. J., Dickinson, W. B., Leech, N. L., & Zoran, A. G. (2009). A qualitative framework for collecting and analyzing data in focus group research. *International Journal of Qualitative Methods*, 8, 1-21. <https://doi.org/https://doi.org/10.1177/160940690900800201>
- Owen, C. (2017). *Designing Research in Education: Concepts and Methodologies* (J. Swain, Ed.). SAGE Publications Ltd. <https://doi.org/10.4135/9781529622775>
- Pfeiffer, D. L., Pavelko, S. L., Hahs-Vaughn, D. L., & Dudding, C. C. (2019). A national survey of speech-language pathologists' engagement in interprofessional collaborative practice in schools: identifying predictive factors and barriers to implementation. *Language, Speech and Hearing Services in Schools*, 50, 639-655. https://doi.org/https://doi.org/10.1044/2019_LSHSS-18-0116
- Phoenix, M., Dix, L., DeCola, C., Eisen, I., & Campbell, W. (2021). Health professional-education collaboration in the delivery of school-based tiered support services: a qualitative case study. *Child Care Health Development*, 47, 367-376. <https://doi.org/https://doi.org/10.1111/cch.12869>

- Preston, A. I., Wood, C. L., & Stecker, P. M. (2016). Response to Intervention: Where it came from and where it's going. *Preventing School Failure*, 60(3), 173-182. <https://doi.org/10.1080/1045988X.2015.1065399>
- Quigley, D., & Smith, M. (2022). Achieving effective interprofessional practice between speech and language therapists and teachers: An epistemological perspective. *Child Language Teaching and Therapy*, 38(2), 126-150. <https://doi.org/https://doi.org/10.1177/02656590221077006>
- Ramirez, S., & Lynch, Y. (2024). "Feeling our way around in the dark" AAC team collaboration in the context of service change: Special education teachers' perceptions. *Child Language Teaching and Therapy*, 40(1), 39-55. <https://doi.org/https://doi.org/10.1177/02656590231205863>
- Regmi, P. R., Waithaka, E., Paudyal, A., Simkhada, P., & van Teijlingen, E. (2016). Guide to the design and application of online questionnaire surveys. *Nepal Journal of Epidemiology*, 6(4), 640-644. <https://doi.org/https://doi.org/10.3126/nje.v6i4.17268>
- Romain, P. L. (2015). Conflicts of interest in research: looking out for number one means keeping the primary interest front and center. *Curr Rev Musculoskelet Med*, 8, 122-127. <https://doi.org/10.1007/s12178-015-9270-2>
- Royal College of Speech and Language Therapists. (2023). *Autism - guidance*. Retrieved 19 January 2026 from <https://www.rcslt.org/members/clinical-guidance/autism/autism-guidance/#section-12>
- Royal College of Speech and Language Therapists. (n.d.-a). *Collaborative Working*. RCSLT. Retrieved January 12 2026 from <https://www.rcslt.org/members/collaborative-working/#section-5>
- Royal College of Speech and Language Therapists. (n.d.-b). *RCSLT guidance to meet HCPC standards*. <https://www.rcslt.org/speech-and-language-therapy/rcslt-guidance-to-meet-hcpc-standards/#section-5>
- Royal College of Speech and Language Therapists. (n.d.-c). *Where SLTs work - education*. Retrieved 17 February from <https://www.rcslt.org/speech-and-language-therapy/where-slts-work/education/>
- Sheppard, V. (2020). *Research Methods for the Social Sciences: An Introduction*. BC Campus.
- Sibieta, L., & Snape, D. (2025). *England's SEND crisis: costs, challenges and the case for reform*. Institute for Fiscal Studies. Retrieved January 2026 from <https://ifs.org.uk/articles/englands-send-crisis-costs-challenges-and-case-reform>
- Singer, E., & Couper, M. P. (2008). Do Incentives Exert Undue Influence on Survey Participation? Experimental Evidence. *Journal of Empirical Research on Human Research Ethics*, 3(3), 49-56. <https://doi.org/10.1525/jer.2008.3.3.49>
- Sisti, M. K., & Robledo, J. A. (2021). Interdisciplinary collaboration practices between education specialists and related service providers. *The Journal of Special Education Apprenticeship*, 10(1-19).
- Suleman, S., McFarlane, L.-A., Pollock, K., Schneider, P., Leroy, C., & Skoczylas, M. (2014). Collaboration: More than "Working Together" An exploratory study to determine effect of interprofessional education on awareness and application of models of specialized service delivery by student speech-language pathologists

- and teachers. *Canadian Journal of Speech-Language Pathology and Audiology*, 37(4), 298-307.
- Te Kete Ipurangi. (n.d.). *Understanding Collaborative Planning for Learning*. Retrieved 9 September 2024 from <https://inclusive.tki.org.nz/guides/collaborative-planning-for-learning/understanding-collaborative-planning-for-wellbeing-and-learning/>
- Tong, P., & An, I. S. (2024). Review of studies applying Bronfenbrenner's bioecological theory in international and intercultural education research. *Frontiers in Psychology*, 14. <https://doi.org/10.3389/fpsyg.2023.1233925>
- Van Herwegen, J. (2022). *Why has there been a rise in number of SEN children, especially in the early years?* Centre for Educational Neuroscience. Retrieved October 2024 from <http://www.educationalneuroscience.org.uk/2022/04/01/why-has-there-been-a-rise-in-number-of-sen-children-especially-in-the-early-years/>
- Van Rijssel, T. I., Van Thiel, G. J. M. W., Gardarsdottir, H., & Van Delden, J. J. M. (2024). Which Benefits Can Justify Risks in Research? *The American Journal of Bioethics*, 1-11. <https://doi.org/10.1080/15265161.2023.2296404>
- White, S., & Spencer, S. (2018). A school-commissioned model of speech and language therapy. *Child Language Teaching and Therapy*, 34(2), 141-153. <https://doi.org/https://doi.org/10.1177/0265659017751238>
- Wilson, L., McNeill, B., & Gillon, G. T. (2015). The knowledge and perceptions of prospective teachers and speech language therapists in collaborative language and literacy instruction. *Child Language Teaching and Therapy*, 31(3). <https://doi.org/https://doi.org/10.1177/0265659015574919>
- Wilson, L., McNeill, B., & Gillon, G. T. (2016). Inter-professional education of prospective speech-language therapists and primary school teachers through shared professional practice placement. *International Journal of Language & Communication Disorders*, 52(4), 426-439. <https://doi.org/10.1111/1460-6984.12281>
- World Health Organization. (2010). Framework for Action on Interprofessional Education & Collaborative Practice. https://iris.who.int/bitstream/handle/10665/70185/WHO_HRH_HPN_10.3_eng.pdf?sequence=1
- World Health Organization. (2011). World Report on Disability. <https://www.who.int/teams/noncommunicable-diseases/sensory-functions-disability-and-rehabilitation/world-report-on-disability>
- Wright, J. A., & Kersner, M. (1999). Teachers and speech and language therapists working with children with physical disabilities: Implications for inclusive education. *British Journal of Special Education*, 26(4), 201-205. <https://doi.org/https://doi.org/10.1111/1467-8527.00139>
- Wright, J. A., & Kersner, M. (2004). Short-term projects: the Standards Fund and collaboration between speech and language therapists and teachers. *Support for Learning*, 19(1), 19-23. <https://doi.org/https://doi.org/10.1111/j.0268-2141.2004.00313.x>

Appendix A

Recruitment email to settings



Participation in Speech and Language Therapy Research

Hello,

I am a speech and language therapist (SLT) working at a specialist college in the south of England. I am originally from New Zealand, which is where I trained as a speech and language therapist. I am currently completing a Masters of Speech and Language Therapy through Massey University in New Zealand.

You are receiving this email as your setting is on a list of Specialist Post-16 Institutions, available [here](#).

I am very interested in collaborative practice between teachers and SLTs in post-16 SEND settings in the UK and my Masters research project aims to explore the perspectives of teachers and SLTs regarding collaboration, through an online survey and focus group discussion. It is important to understand factors that teachers and SLTs perceive to positively or negatively affect collaboration in post-16 SEND settings, to understand the unique complexities of these settings and to make recommendations for developing good collaborative practice within organisations.

I have attached an information sheet and flyer which provide further details about the project, including the aims, procedures, benefits and risks to participants. For those who wish to participate in the online survey, here is a link: https://massey.au1.qualtrics.com/jfe/form/SV_b1xJ2uzeu2yUWfY

I am now seeking participants for the online survey. Could you please forward this email to the head of your setting, so that it can be distributed to staff?

I appreciate your support with this research project.

Kind regards,
Amber Dampney

Appendix B

Recruitment email to Natspec



Participants for Speech and Language Therapy Research

Hello Clare,

I am a speech and language therapist (SLT) working at a specialist college in the south of England. I am originally from New Zealand, which is where I trained as a speech and language therapist. I am currently completing a distance Masters of Speech and Language Therapy through Massey University of New Zealand.

I am very interested in collaborative practice between teachers and SLTs in post-16 SEND settings and my Masters research project aims to explore the perspectives of teachers and SLTs regarding collaboration, through an online survey and focus group discussion. It is important to understand factors that teachers and SLTs perceive to positively or negatively affect collaboration in post-16 SEND settings, to understand the unique complexities of these settings and to make recommendations for developing good collaborative practice within organisations.

I have attached an information sheet and flyer which provide further details about the project, including the aims, procedures, benefits and risks to participants.

I am now entering the recruitment stage of my project and am seeking participants for the online survey. Would Natspec consider sharing the information sheet and flyer, containing links to the survey, with member organisations and / or on social media sites such as LinkedIn, to support participant recruitment? In anticipation of this being possible, I have included the following attachments to simplify distribution via email and on social media:

For distribution via email	• PNG of flyer • PDF of Information Sheet • Text to be emailed to participants
For distribution via social media, such as LinkedIn	• PNG of flyer (please post as main image) • Text to be posted online

Please contact me if you have any questions about this project. I look forward to hearing from you.

Kind regards,
Amber Dampney

Appendix C

Participant information sheet



Teachers' and Speech and Language Therapists' Perceptions of Collaborative Practice in Post-16 SEND Settings

INFORMATION SHEET

Who am I?

My name is Amber Dampney. I work as a speech-language therapist (SLT) in a specialist college in the United Kingdom. I am originally from New Zealand but have worked in the United Kingdom for over 4 years. I am currently undertaking a research project as part of my Master of Speech and Language Therapy degree in the Institute of Education at Massey University in New Zealand. The focus of my project is to explore teachers' and SLTs' experiences and perceptions of collaborative practices in post-16 special education needs and disabilities (SEND) settings in the United Kingdom.

My project is being supervised by Associate Professor Sally Clendon and Dr Lisa Furlong. We are recruiting teachers and SLTs who have worked in specialist post-16 SEND settings within the last 2 years.

The purpose of this letter is to invite you to be part of my research project.

What is this research about?

This project will investigate the perspectives of teachers and SLTs on the purpose, benefits and factors that influence collaborative working when supporting young adults with speech, language and communication needs (SLCN) in post-16 specialist settings. Current research into collaborative practice in speech and language therapy tends to focus on support for students in primary school. There is limited research on collaborative practices for supporting young adults with SLCN who are still accessing formal education. This research aims to address the following questions:

- What are teachers' and SLTs' experiences of collaborative practice?
- What are teachers' and SLTs' perspectives on the purpose, advantages, and disadvantages of collaborative practice?
- What are teachers' and SLTs' perspectives on the factors that influence the success of collaborative practice?

Why am I being asked to take part?

I am asking you to take part because you meet one of the following criteria:

- You are a teacher who is currently working in a post-16 SEND setting, or has worked in a post-16 SEND setting within the last 2 years, or
- You are an SLT who is currently supporting students attending post-16 SEND settings, or who has supported students in post-16 SEND settings within the last 2 years.

What benefits will the research bring?

This research aims to provide insight into teachers' and SLTs' perceptions of collaboration and to identify influential factors that support or hinder collaboration. This will enhance knowledge of collaborative practice and ways to facilitate this, which might contribute to improved educational and communication outcomes for young adults with complex communication needs in post-16 SEND settings.

What will I be asked to do?

This research project consists of two phases. Phase one is an online, anonymous survey. Upon completion of phase one, you will be invited to participate in phase two, an online focus group.

Phase One: It is anticipated that the online survey will take approximately 15 to 20 minutes to complete. The survey consists of 25 closed- and open-ended questions and can be completed on a web browser or mobile device. In the online survey, you will be asked to provide some demographic information (e.g., age range, number of years since qualifying) and respond to questions about your educational background, work settings, professional development, and perceptions of collaborative practice. Your survey responses will be anonymous. At the end of the survey, you will be invited to participate in phase two of the study which is an online focus group discussion. Participation in phase two is completely voluntary. To indicate your interest, you will need to enter your contact details at the end of the online survey; by doing this, your survey responses will no longer be anonymous to the researchers.

Phase Two: This involves participation in one online focus group, consisting of a small group (approximately five participants). The focus groups will be specific to professions, i.e., one focus group for teachers and one for SLTs. It is anticipated that the focus group discussion will take approximately 40 minutes. This will be completed at a time that is convenient to participants and the researcher. The purpose of the focus group is to further explore your responses provided in the online survey. For those who choose to participate in phase two, survey responses will not be anonymous, in that the researcher will use these responses to develop a discussion guide for the focus group. In the focus group, your individual survey responses will not be made known to others within the focus group, rather, we will explore the survey responses collectively as part of the focus group topic guide. The focus group will be conducted via Zoom and will be video recorded. Only the audio-recording of the focus group will be used for transcription and analysis.

What will happen to the data?

The data will be used for answering my research questions, described above. Data will be safely stored on the Massey supported web-based survey platform and Massey OneDrive which are both password-protected. Data will be kept for 5 years from the end of data collection. Signed consent forms will be securely archived by my first supervisor. The focus group interviews will be transcribed either by myself or by a transcription service who have signed a confidentiality agreement. The findings will be presented in my thesis report. The findings may also be presented at conferences or published in journal articles. The information shared will not include names or other identifying details of individuals, employers or organisations. Participants can request access to a summary of the research project findings when it is concluded. Contact details for the student researcher and supervisors are provided at the end of this information sheet.

What rights do I have?

Engagement with the survey implies consent, and provision of contact details implies that you consent to me contacting you directly with regards to participating in a focus group. A consent form will be provided to you if you choose to participate in the focus group.

In following ethical procedures for research, I reassure you that you are under no obligation to consent to participate in this study. If you choose to participate, you have the right to:

- decline to answer most questions, except a question about your role;
- ask any questions about the research project at any time during participation;
- provide information on the understanding that your name will not be used;
- request access to a summary of the research project findings when it is concluded.

Survey Link If you are happy to participate in the survey for this project, please follow this link: https://massey.au1.qualtrics.com/jfe/form/SV_b1xJ2uzeu2yUWfY

Contact Information

Please do not hesitate to contact either me or my supervisors at any time if you have any questions about the project:

Student Researcher	Supervisor 1	Supervisor 2
Amber Dampney Student Speech and Language Therapy Institute of Education Massey University amber.dampney.1@uni.massey.ac.nz	Associate Professor Sally Clendon Speech and Language Therapy Institute of Education Massey University New Zealand s.clendon@massey.ac.nz	Dr Lisa Furlong Senior Lecturer Child Well-being Research Institute University of Canterbury New Zealand lisa.furlong@canterbury.ac.nz

This project has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named above are responsible for the ethical conduct of this research.

If you have any concerns about the ethical conduct of this research that you want to raise with someone other than the researcher(s), please contact Massey University Human Ethics by email: humanethics@massey.ac.nz.

Thank you for considering this request.

Yours sincerely,



Amber Dampney
Student ID: [REDACTED]

Appendix D

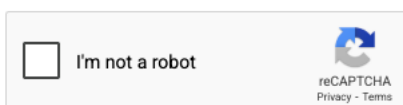
Online Survey Questionnaire



This survey is part of a Masters research project which aims to explore the perspectives of teachers and SLTs regarding collaboration in Post-16 SEND settings. The purpose is to understand factors that teachers and SLTs perceive to positively or negatively affect collaboration, to understand the unique complexities of these settings and to make recommendations for developing good collaborative practice. Upon completion of this survey, you will be asked if you would also like to participate in a focus group to further explore your perspectives.

Before starting the survey, please read [Participant Information Sheet \(1\).pdf](#), which provides further details about the project, including the aims, procedures, benefits and risks to participants.

Engagement with the survey implies consent for your responses to be used in the final research project.



What is your primary role?

☐ Speech and Language Therapist

☐ Teacher

Please select your age:

☐ 18-24

☐ 25-34

☐ 35-44

☐ 45-54

☐ 55-64

☐ 65+

Please select your type/s of qualification:

☐ BSc (Speech and Language Therapy)

☐ PGDip (Speech and Language Therapy)

☐ MSc (Speech and Language Therapy)

☐ Other

How many years have you been practicing as a Speech and Language Therapist since qualifying?

☐ 0-2

☐ 3-5

☐ 6-10

☐ 11-20

☐ 20+

How long have you worked in a Post-16 SEN setting for?

☐ 0-2 years

☐ 3-5 years

☐ 6-10 years

☐ 11-20 years

☐ 20+ years

Please indicate the education model used within your organisation:

☐ Primary Model – students have one key teacher who delivers most subjects.

☐ Secondary Model – subjects are taught by subject-specialist teachers, whom students transition to.

☐ Other – please describe

What type of speech and language therapy service is available at your place of employment?

- ☐ In-house – a service that is co-located on the same site and employed by the same organisation.
- ☐ External – SLT/s that are employed by an external provider and visit your organisation to carry out duties (e.g., NHS or private SLTs).
- ☐ Other – please describe.



Please rank these speech and language therapy activities in order of frequency, 1 being the most frequently used and 5 the least frequently.

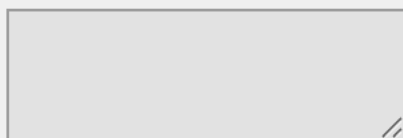
"Withdrawal" – the SLT takes students from class to deliver direct sessions to individuals or small groups.

In-class support – the SLT provides direct support to students within the classroom setting.

Consultation – the SLT provides indirect support by advising parents and professionals on how to support specific students.

Advice and guidance – the SLT advises around curriculum delivery and adaptations for all students.

Other – please specify



How many students attend your setting?

☐ 0-19

☐ 20-39

☐ 40-59

☐ 60-79

☐ 80-99

☐ 100+

Please indicate the average class size:

☐ 1-5

☐ 6-10

☐ 11-20

☐ 21-30

☐ 31+

Please indicate your approximate caseload size.

"Caseload" is defined as those for whom you provide targeted speech and language therapy support, including assessment, direct one-to-one or small group sessions, or devise speech and language therapy programmes to be delivered one-to-one or in small groups by non-allied health professional staff.

Number on caseload

How would you rate your understanding of the role of a Teacher?

☐ No understanding

☐ Little understanding

☐ Some understanding

☐ Good understanding

☐ Excellent Understanding

What is the main purpose of collaboration? (Select all that apply)

☐ Information sharing (e.g., knowledge about what other professionals are doing, sharing assessment information, making recommendations for support)

☐ Resource sharing (e.g., providing other professionals with the resources you have created or are using to support students)

☐ Resource development (e.g., working together to create resources or strategies to support students)

☐ Improving educational outcomes for students

☐ Preparation for formal inspections, e.g. Ofsted

☐ Other - please specify



What types of collaboration do teachers and speech and language therapists use the most at your place of work? (Select all that apply)

☐ Individual planning meetings (these may be called IEP meetings, multi-disciplinary meetings, or something else) with a focus on an individual student's targets or strategies

☐ Ad-hoc, incidental opportunities, e.g., corridor conversations

☐ Attendance at informal training sessions

☐ Co-planning lessons

☐ Co-delivering lessons

☐ Other - please specify

How does your organisation support collaboration between teachers and speech and language therapists? (Select all that apply)

☐ Through existing policies

☐ By approaching collaboration as a type of long-term organisation-wide professional development

☐ By encouraging participation in formal professional development activities with a focus on collaborative practice

☐ By sharing expertise

☐ By encouraging participation in informal professional development activities, e.g., SLTs attending teacher-delivered training sessions and vice-versa

☐ By providing adequate time for formal collaboration

☐ Through opportunities to develop good relationships

☐ Through encouragement from the senior management team

☐ My organisation does not support collaboration between teachers and speech and language therapists

☐ Other - please specify

How often does your organisation provide formal opportunities for collaboration?

☐ Never

☐ Daily

☐ Weekly

☐ Monthly

☐ Half-termly

☐ Termly

☐ Yearly

What do you think are the benefits when teachers and speech and language therapists collaborate? (Select all that apply)

☐ Organisational development, such as creating a more reputable / effective SEN provision

☐ Professional development, such as increased adherence to professional standards (HCPC / Teachers' Standards), improved classroom management, increased awareness of evidence-based practice

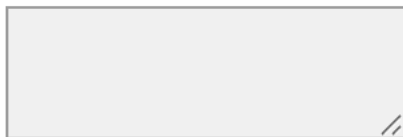
☐ Personal development, such as increased workplace well-being, improved interpersonal communication skills

☐ Service-user support, such as improved outcomes for students and their families

☐ Other - please specify

What are the downsides and challenges you have experienced as a direct result of collaborating with teachers?

- ☐ Needing to compromise on a service or support
- ☐ Increased workload or pressure to do something that is "not your job"
- ☐ Increased time pressures or constraints
- ☐ Losing autonomy or independence within your role
- ☐ Having your professional decisions questioned
- ☐ Blurred boundaries or lack of clarity between roles
- ☐ Other - please specify



To what extent do you believe that compatibility of characteristics (e.g., interpersonal communication skills, sense of humour, age, personality, values) influence the success of collaboration?

- ☐ No influence
- ☐ Little influence
- ☐ Neutral
- ☐ Some influence
- ☐ Great influence

How effective do you think your organisation's collaborative processes are at improving educational outcomes for students?

- ☐ Not effective at all
- ☐ Slightly effective
- ☐ Moderately effective
- ☐ Very effective
- ☐ Extremely effective

In your view, what factors support effective collaboration between teachers and speech and language therapists? (Select all that apply)

- ☐ Adequate time for formal collaboration
- ☐ Close working relationships
- ☐ Adequate training
- ☐ Support from senior management
- ☐ Clear roles and responsibilities
- ☐ Clear professional boundaries
- ☐ Value placed on collaboration within the organisation
- ☐ Staffing levels
- ☐ Other - please specify

In your experience, what factors hinder effective collaboration between teachers and speech and language therapists? (Select all that apply)

☐ Lack of time

☐ Poor working relationships

☐ Inadequate training

☐ Lack of support from senior management

☐ Unclear roles and responsibilities

☐ Unclear professional boundaries

☐ Limited value placed on collaboration within the organisation

☐ Inadequate staffing levels

☐ Other - please specify

Overall, how satisfied are you with the culture of collaboration within your organisation?

☐ Extremely dissatisfied

☐ Somewhat dissatisfied

☐ Neither satisfied nor dissatisfied

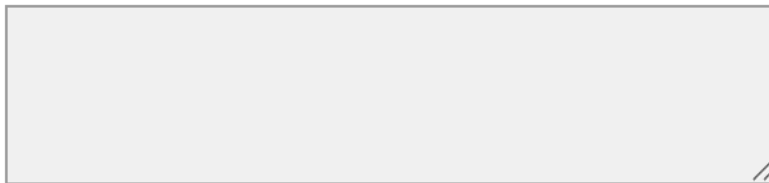
☐ Somewhat satisfied

☐ Extremely satisfied

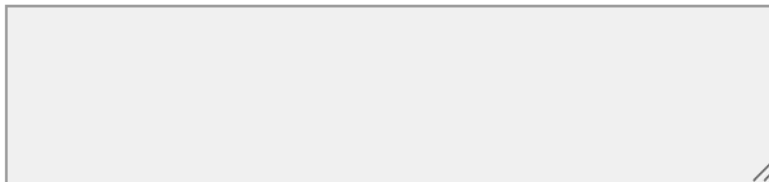
Please describe a time that you have experienced successful collaboration with a teacher. What made it successful?

A rectangular text input box with a light gray background and a thin gray border. A small double-slash icon is located in the bottom right corner.

What could your organisation do to better support collaboration between teachers and speech and language therapists?

A rectangular text input box with a light gray background and a thin gray border. A small double-slash icon is located in the bottom right corner.

Please describe your ideal speech and language therapy service within your organisation. What would this look like?

A rectangular text input box with a light gray background and a thin gray border. A small double-slash icon is located in the bottom right corner.

Are you interested in taking part in a focus group to further discuss your views on this topic?

If you select yes, you will be asked to provide your name and a contact email address.

☐ No

☐ Yes

Please provide your contact information:

First name

Last name

Email

We thank you for your time spent taking this survey.
Your response has been recorded.

0%  100%

Appendix E

Semi-structured focus group guide

Focus Groups

Request to record the session – explain that this is for transcription purposes only, to make sure I capture everyone's views accurately, and the recording will be destroyed once the study is complete.

This focus group discussion may take up to one hour. I would like to reassure you that all contributions today are valued, you can say as little or as much as you like and there are no right or wrong answers. It is okay to disagree with one another but please be empathetic and respectful of each other's contributions. Maintaining confidentiality is crucial so please remember that any contributions during this discussion today should not be shared outside of this setting. We will be video recording this focus group so that we can transcribe the discussion accurately for later analysis but only the audio file will be sent to the transcription service. This means only your voice will be heard, and your first name, by the transcriber.

If you feel distress or anxiety at any time during the focus group, or if you decide you no longer want to take part, you are free to take a break or leave the focus group discussion entirely without any consequences.

Background

- Introduce self – name and role,
- New Zealand training, work experience in New Zealand and UK; experience has led me to research collaboration between teachers and SLTs,
- Purpose of the focus group – to explore in greater depth the answers given in questionnaire.
- Before launching into our discussion, need to share some information to ensure informed consent.

Informed consent

- As previously stated, and as outlined in the participant information sheet, data from the focus group, including everyone's names and email addresses, will only be stored for the duration of this study and will then be destroyed. Stored on secure, password-protected laptop.
- In the interest of protecting anonymity as much as possible, can I ask that everyone refrain from using the names of particular organisations, colleagues, or service users / students / parents? If these are used, they will be excluded from transcription and reporting.
- I won't be referring to particular respondents' answers, however, will draw on themes or topics raised within the survey answers to guide our discussion and explore these in greater detail.
- Any questions?

Research questions (for my reference only)

- What are the experiences of teachers and SLTs related to collaborative practice?
- What are teachers' and SLTs' perspectives on the purpose, advantages, and disadvantages of collaborative practice?
- What are teachers' and SLTs' perspectives on the factors that influence the success of collaborative practice?

Topic guide

- **For the purposes of this study, I am looking specifically at collaboration between teachers and SLTs.**
- How is “collaboration” conceptualised and carried out within your organisation or how has it been in your career?
- One of the key themes emerging from the survey data was the time spent on collaboration. What are experiences of ‘time’ as a barrier? What changes would have an impact? Link with “ideal service.”
- “Understanding of roles” was a key theme – tell me about this. What impact does it have on your practice and the ability to collaborate? What about positive experiences?
- Role of senior leadership – what do you see as effective? What are senior leadership responsible for?
- Concept of “integrated approaches” – what does this mean for you? How does this currently look and how could it improve?
- What are the unique challenges or benefits to collaboration within the post-16 SEND area of practice?
- *Perceived disadvantages of collaboration – what are your experiences? If no answers, could give examples such as, loss of time, blurred lines between roles, loss of “specialism.”*

Appendix F

Low-risk ethics notification

humanethics@massey.ac.nz <humanethics@massey.ac.nz>
To: amber.dampney@gmail.com, S.Clendon@massey.ac.nz
Cc: humanethics@massey.ac.nz

Mon, Nov 4, 2024 at 4:58 PM

Kia ora,

Link to [Application](#)
HoU Review Group

Ethics Notification Number: 4000029925

Title: Teachers' and Speech and Language Therapists' Perceptions of Collaborative Practice in Post-16 Special Education Needs and Disabilities (SEND) Settings.

Thank you for submitting a low risk notification for your research/teaching/evaluation.

This email is to acknowledge receipt of the low risk notification and to inform you that the details of your project have been recorded in our database for inclusion in the annual reports to the Health Research Council Ethics Committee (HRCEC) and the Massey University Research Committee (URC).

You may proceed with your research, though it is advisable to provide a couple of weeks before commencing, as all low risk notifications are checked for completeness and clarity by a Research Ethics Advisor. You may be contacted if your application is incomplete and/or further clarification is required.

The low risk notification for this project is valid for a maximum of three years.

Please notify me if situations subsequently occur which cause you to reconsider your initial ethical analysis.

If a sponsoring organisation, funding authority (e.g., the Health Research Council) or a journal require evidence of ethical approval from a Human Ethics Committee (with an approval number), you need to complete a full Massey University Human Ethics application to be reviewed and approved by one of our Human Ethics Committees. Applications must be submitted and approved prior to the commencement of the research.

Please note that travel undertaken by students must be approved by the supervisor and the relevant Pro Vice-Chancellor and be in accordance with the Policy and Procedures for Course-Related Student Travel Overseas. In addition, the supervisor must advise the University's Insurance Officer.

Please include the following statement on all public documents (e.g., information sheet, consent form) related to your project:

This project has been evaluated by peer review and judged to be low risk. Consequently, it has not been reviewed by one of the University's Human Ethics Committees. The researcher(s) named above are responsible for the ethical conduct of this research.

If you have any concerns about the ethical conduct of this research that you want to raise with someone other than the researcher(s), please contact Massey University Human Ethics by email: humanethics@massey.ac.nz.

I wish you all the best in your research, teaching or evaluation activities and appreciate your thoughtful consideration of ethics principles and practices.

If you wish to print a copy of this letter:

1. Please login to the RIMS system (<https://rme.massey.ac.nz>).
2. In the Ethics menu, select Ethics Applications.
3. Using the Advanced option, select Ethics Applications (Area), Application ID (Search On), enter the ethics notification number in the Value area and select Find on the toolbar.
4. With the application in the Results Tab, tick the empty box on the far left of the application and select Reports from the toolbar.
5. Select the "Human Ethics - Low risk notification letter" link, this will open the report viewer.

6. Select the application code from the Report Parameters dropdown and submit. You can then select an export option from the top toolbar (Print, Save).

Ngā mihi nui,

Professor Tracy Riley
Acting Chair, Research Ethics Chairs' Committee

Appendix G

Codebook

Theme	Code	Definition	Quote
<i>SLTs' understanding and implementation of collaborative practice is vague and varied.</i>	Aim of collaboration	Participants' perspectives on the purpose of collaboration and what specific activities are involved.	• <i>"It's still the aim – we do still collaborate, but we don't get into the room at the same time. So, the expectation is still there that we set targets jointly..." (SLT B)</i> • <i>"You know, I recognised that's where you really make a difference, with classroom teachers, tutors, training them up, really time effective working." (SLT E)</i> • <i>"What does it take for us to be a capable environment, from a positive behaviour support point of view? And a lot of it is the collaboration. A lot of it is the planning, the collaborative review, the going into sessions and modelling and suggesting and problem solving..." (SLT C)</i>
	Examples of good practice	Examples shared by participants of good collaboration between SLTs and teachers or senior leadership and SLTs.	• <i>"It did work for us to have these reflective practice forums around one individual student... so all the teachers involved attend one meeting about that individual's progress and needs." (SLT B)</i> • <i>"...one thing that worked better for collaboration... is having a system where we can see what the teachers are recording against our communication outcomes..." (SLT B)</i> • <i>"...we also had like a drop in email system where you could ask for support specifically as well, so that was like set up that everybody used." (SLT D)</i>
Understanding of roles influence collaboration at an individual and organisational level.	Understanding own role	SLTs describe their understanding of their role within the	• <i>"We have managed to hold onto our role as advisors about which level of education... we have different pathways, different curricula, and we do a lot of work upfront for people applying – which is not always paid, it's not always</i>

		collaborative relationship.	<i>funded, but we have managed to argue to keep that... role as assessors of what type of education do they need and which then does mean they get a much more communication targeted curriculum.” (SLT B)</i> • <i>“...assessing people who then don’t turn up or trying to get hold of the senior leadership team, or things like that, and a lot of corridor conversations, a lot of ad hoc meetings and advice and spontaneous... trying to get things addressed or changed or updated. A lot of last-minute requests. So, our role is definitely to advise and write a report and attend annual reviews in to input into... to plan the outcomes, but it’s not to tell the teachers what to do, it’s only to tell them what strategies to use for their topic, their setting, their subjects.” (SLT B)</i> • <i>“...sometimes I think in a Post-16 we can become counsellors, we can become tutors, we can become TAs in the classroom, and our role is not just a speech and language therapist. I have found that there are a lot of things I’m doing that are probably more a different kind of therapy, you know, a talking therapy, which I personally enjoy but some people don’t. I don’t think that that’s what they went into the job for. They didn’t go in to be a kind of counsellor. But you’re working with a lot of young people who are autistic, or they have mental health issues, and I do think that the roles can get blurry.” (SLT D)</i>
	Understanding of each other’s roles	Inability to understand each other’s roles negatively impacts collaboration.	• <i>“I think specifically in the Post-16 role it’s hard, because in paediatrics, speech sounds or early language, it’s kind of obvious. Whereas here, they go, “oh well they can talk.” Even though they’ve all got a learning disability. They just couldn’t grasp how we work in employability or independence, which is kind of the main things that we do in Post-16, and where we fit into that.” (SLT D)</i>

			• “...when you’re in the classroom I think it’s hard for them to know what you’re doing but when you’re in a training delivery, it’s putting a face to all of these ideas, isn’t it?” (SLT B) • “...there’s [sic] certain things that I have no understanding of as a speech and language therapist about the pressures of teaching... I’ve worked long enough to know some of them, but I don’t have... they have to think of so many different things and our bag is one element. Even though it’s across everything, we’re banging the drum for one thing, and they have got to think about so many other things.” (SLT D)
	Role of senior leadership	Participants describe the role senior leadership teams currently play in enabling collaboration, and the role they feel they should be taking.	• “...she’s just maybe got this well-meaning idea that we want you to collaborate, but I think if senior leadership don’t even know what it looks like, that’s possibly a big problem that they can’t promote it, they just say “go work in the classroom,” but then you just become a TA. You’re just sitting there and you’re not actually doing anything useful.” (SLT A) • “...there isn’t the expectation from above is there, of how collaboration should be done.” (SLT B) • “...it’s fundamental, unless you have that buy in and that support. I can think of places where I have that totally, and other places where they’re like, “oh you’re just a fluffy bit, I have to call you in because it says so on the EHCP.” You can tell the difference.” (SLT E)
Barriers to collaborative practice occur at profession, organisation, and individual levels.	Erosion of practice and service impacts collaboration	Participants’ experiences of services being reduced or changed in ways that have negatively impacted opportunities for collaborative practice.	• “I’ve been working for a long time now and when I first joined where I’ve been working, we did have more of a structure where we had allocated times to jointly set the next year’s outcomes and then that sort of just became very difficult with the pressures of staffing to get people... in the room at the same time.” (SLT B) • “...we also used to have, but no longer have, like a reflective practice forum where all of the teachers for a particular

			student would get together and discuss what worked, what didn't." (SLT B) • "I was sort of therapy lead and a member of the senior leadership team at one point... then a new head came in and she was like, "oh no, we don't want all these extra people in the senior leadership team." She basically cut it to her and her deputy head and safeguarding head... we were all like, "oh well she doesn't want to work with us anymore," and I think that had a big impact because then we weren't able to have that communication directly with them very often." (SLT A) • "...So, it sort of gave us a different status that we've since lost. Now we're just another person who swans in and swans out, or runs a little group, or does that little something-or-other, but it feels very little in comparison to running the two weeks of training." (SLT B)
	Funding constraints impact good practice	Participants' experiences of SEND funding issues and how these influence practice.	• "I think then we're beginning to be more and more expected to meet the requirements of the funders, which is to offer the hours in the EHCP. And we are desperately trying to resist that because we've tried to rewrite the EHCPs in terms of what that young person needs for their... the rest of their life... I do feel we're really constrained by funding and the EHCP system in actually providing what it useful." (SLT B) • "...we've seen a change, we've been very collaborative and then, although there is an expectation for us to be collaborative, time has been taken away and taken away, and it's just money." (SLT C) • "...you look at the erosion of the profession... I will quite often sit with someone quite high up in the education authority and they'll say, "we have no money, we have no people, no one can do this." (SLT E)

	Time constraints make collaboration difficult	Descriptions of how a lack of shared time limits opportunity for collaborative practice.	• <i>“It’s just the time constraints and everyone is working so hard. They’re just... they’re teaching all day and then they have their meetings or whatever after school, at the end of the day, and it’s just finding that time to sit down together is really tricky...” (SLT A)</i> • <i>“Time is a big barrier, I think, finding that time to sit down together.” (SLT A)</i> • <i>“So as a therapist we tend to invest time where we know it’s going to have an effect and be listened to. And then when we’re occasionally exposed to... certain other members of staff, give recommendations to them, there’s a tendency to think “oh I’ll just send them an email because I know they’re not going to do it.” I’m not going to spend extra time trying to explain how to do what we’re thinking should happen.” (SLT B)</i>
	Staffing issues impact collaboration	Participants describe how staffing issues within the teaching team or the SLT team negatively impact opportunities for collaboration.	• <i>“...changes in staff is always... you have to start again each time.” (SLT B)</i> • <i>“It’s gone because the staff got their time cut, people are lost and they’re not replaced...” (SLT C)</i> • <i>“I think it’s quite tricky coming into a Post-16 setting, there’s been a high turnover of speech therapists where I’ve worked because I do think it’s a certain personality. It’s quite a difficult job in a lot of ways...” (SLT D)</i>
	Personal characteristics influence collaboration	Participants describe how characteristics of individual professionals affect collaboration.	• <i>“Everybody is very well meaning and wants to work together and then it’s the practicalities of making it work is tricky...” (SLT A)</i> • <i>“...it does depend on individuals, so there are a few individuals who seek us out, use our advice, share ideas... others who seem to almost avoid us and also are the ones that we know don’t change even when we tell them what to do.” (SLT B)</i>

			• <i>“I think it’s quite tricky coming into a Post-16 setting, there’s been a high turnover of speech therapists where I’ve worked because I do think it’s a certain personality. It’s quite a difficult job in a lot of ways...” (SLT D)</i>
	Differing expectations of collaboration	Participants describe how teachers and senior leadership teams may have a different understanding of the purpose of collaboration or what can and should be achieved through collaboration.	• <i>“You know, maybe they feel like, I don’t know, like we’re coming in to take over or to tell them they’re doing something wrong.” (SLT A)</i> • <i>“Sometimes they feel like either you’re treading on their toes or that you’re just giving them a free half an hour when they can do something else. I’m not sure that it’s clear they’re supposed to be taking on what you’re suggesting.” (SLT B)</i> • <i>“I think there’s probably a different expectation, as in, from senior leadership compared to teachers. So, senior leadership are expecting us to write all the annual review reports and spend a lot of time on that, and the teachers don’t realise that we’re doing all that, often in our own time because you can’t fit it in the school day, you know, trying to fit all this report writing in and stuff...” (SLT A)</i> • <i>“...well, the flipside of that can be, sometimes when you go in, and I’m particularly into literacy and numeracy...but you go in and you help someone and then quite often, you end up thinking, “I’m doing their job as well as mine.” (SLT E)</i>
Participants’ attempts or suggestions to improve collaborative practices within their own settings.	Opportunities to deliver training to education staff improves collaborative practice.	Participants describe how regular opportunities to train staff enables effective collaboration.	• <i>“The SLT department where I work are lucky in that we always get a slot on the induction training for new staff. All our staff, regardless of where they work in the college, go through the same induction.” (SLT C)</i> • <i>“We had an induction and a refresher, so one in the autumn and one later on in the year, every year, because the staff constantly change, or they’ve been there for a long time. We had a lovely system in one place, where we had lists of people and it was on a yearly or two-yearly basis when they did a refresher and that worked really well.” (SLT D)</i>

	Attempts to influence cultural change	A description of how to improve collaboration by influence changes to the culture of the organisation.	“...that was something we tried to change a few years ago. Actually, sort of saying to teachers, “look, in their EHCP, so-and-so needs speech and language this many times a week,” or whatever it said on their EHCP and we said to them “how are you meeting that need?” (SLT A)
	Good collaboration takes time so SLTs have responded by trying to work in different ways.	Participants’ awareness that high quality collaborative practice takes a large investment of time for individual professionals.	“We have tried to get more time in actual classrooms, or session rooms as we call them, so that we’re not expecting the teacher to take extra time out and to go in and either run a small group or take part in a session.” (SLT B) “...we’ve tried to be more efficient with how we provide the support. So, in one place, we made a whole communication pack with blank Talking Mats and stuff about Blank’s levels and Zones keyrings... we made all of those, with instructions, that we handed out to every single class.” (SLT D)
	Suggestions for how to improve collaborative practice	Participants’ suggestions for changes that could improve collaboration between teachers and SLTs.	“...just being able to raise awareness, training opportunities, talking to all the staff, would be really helpful.” (SLT A) “I think that dedicated time in training and not having to constantly ask all year, “can we have time for this training to be delivered, we want to do communication needs, we want to do AAC, we want to do Zones of Regulation... please give us some time!”” (SLT D)
	Changes from Senior Leadership Team can improve collaboration	Participants made suggestions related to how Senior Leadership Teams can more effectively enable collaboration between teachers and SLTs.	“I think including speech and language therapists somewhere near, if not on, the senior leadership team, it would actually make a massive difference.” As well as more formal opportunities for collaboration with teachers: “Some sort of forum, like a multi-disciplinary team meeting between teachers and therapists about outcomes.” (SLT A) “I think senior leadership [should be] promoting the therapists within the classroom and not seeing us as just somebody to tick off an EHCP target or somebody just as you know... “the student’s got speech and language on their EHCP,” you know, “therapist you go and deal with it... I think

			<i>perhaps a culture of leadership saying that every... all parts of the EHCP are everyone's responsibility." (SLT A)</i> • <i>"I think senior leadership... we've talked a lot about them listening to us and talking to us, but I think it's really important that the senior leadership talk to us about 'what are their priorities'... So, I know that's part of having a good understanding of what our role is, but they can understand and not include us, so including us in everything is really important I think." (SLT C)</i>
	Benefits of successful collaboration	Participants sharing how experiences of successful collaboration and benefited them in more personal ways.	• <i>"It boosts your role, doesn't it? They see that you're useful and you have knowledge that they can use, which is what you want them to understand." (SLT B)</i> • <i>"And it's really nice when you get the keen teachers going "we're really looking forward to you coming in," and that boosts your enjoyment of the job." (SLT A)</i>