

Experience on Collaborative Practice between Special  
Educators and Occupational Therapists at Special  
School: A Qualitative Study



By

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## **Statement of Authorship**

Except where it is made in the text of the thesis, this thesis contains no material published elsewhere or extracted in whole or in part from a thesis presented by me for any other degree or seminar. No other person's work has been used without due acknowledgement in the main text of the thesis. This thesis has not been submitted for the award of any other degree in any other tertiary institution. The ethical issue of the study has been strictly considered and protected. In case of dissemination of the findings of this project for future publication, the research supervisor will be highly concerned, and it will be duly acknowledged as an undergraduate thesis.

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## List of Abbreviations

ADA= American Disabilities Act

BHPI= Bangladesh Health Professions Institute

CRP= Centre for the Rehabilitation of the Paralysed

DACAC= Dream Angels Centre for Autistic C

EHA= Education for All Handicapped Children Act

IEP= Individualized Educational Plan

MDT=Multi-Disciplinary Team

OT= Occupational Therapy

OT= Occupational Therapist

SE= Special Educator

SWAC= Society for the Welfare of Autistic Children

MDT=Multi-Disciplinary Team

## Abstract

**Background:** Collaboration describes the unity in professionalism among the members of health care services. Collaboration is an important part of special education because it allows for different professionals to share their expertise and knowledge about working with students with disabilities. Studies have been conducted in the past on a variety of topics, including how special educators and occupational therapists view one another, their distinct roles on children, work habits, burnout, and the attitudes and expertise of multi-disciplinary team members. The main gap was founded by the researcher to focus on the collaborative experience of these professionals while working together at special schools. It also provides opportunities for Special Educators and Occupational Therapists to generate ideas of each other and come up with creative solutions to different problems.

**Aim:** The aim of this study is to explore the experience in collaborative practice between Special Educators and Occupational Therapist at special school.

**Method and Materials:** This study has been conducted in qualitative research design with purposive sampling. A total of 10 participants have been selected, 5 people each from 2 professions. A self-developed interview guide has been developed to conduct the interview which includes 17 separate in-depth questions for each professional. This questions were the best suitable to gain the answers that meets researchers aim. Thematic analysis has been approached to analyze the data of this study.

**Result:** According to thematic analysis, six main theme along with sub-themes has been generated throughout the interviews of the participants. The main themes are- 1) Occupational Therapists and Special Educators role at special school, 2) The Harmony, 3) IEP Formulation, 4) Best Experience, 5) Worst Experience, and 6) Expectations. These themes are the best options to describe the words of professionals, their overall experiences of how they collaborate, cope with barriers and balances their ups and down in such a great way.

**Conclusions:** This study has been able to explore the experiences of both occupational therapists and special educators within their same working area and also able to know about their coping criteria of difficult and challenging situation.

**Keywords:** Collaborative Practice, Special Educator, Occupational Therapist, Special School.

## CHAPTER I: INTRODUCTION

### 1.1 Background

Collaboration is emphasized as it relates to many activities within special education programming, including co-teaching, problem solving, and consultation. Collaborative efforts focus on the involvement of interaction between consultant as OT and consultee as these professionals seek to improve the learning and development for the students they share. Research suggests that a collaborative approach between professionals leads to improved client and student outcomes (Kelly and Tincani 2013; Juliet E. and Hart Barnett 2015) and here both special educators and OTs express their desire for increasing collaboration (Boshoff and Stewart 2013). Effective communication and interaction skills are essential to successfully build and maintain collaborative relationships (Friend and Cook 2013; Juliet E. and Hart Barnett 2015).

When OT and teachers co-led a handwriting program, students demonstrated improvements in writing legibility, speed, and fluency compared to a control group of students who did not receive the same intervention (Case-Smith, Holland, Lane, & White, 2012; Case Smith, Weaver, & Holland, 2014). Another study found similar student improvements in fine and visual-motor skills when OTs co-taught with the teacher to embed a fine motor intervention into the daily class schedule (Ohl et al., 2013). An occupational therapist is a health care professional who assists and supports individuals to

participate fully in daily activities including self-care, leisure, independent living and work through therapies which target skills that they may face issues in. In a school setting, an OT's role is to support students towards academic achievement and encourage positive behaviors that are necessary for learning.

The main objective of school-based OT is to support the students to master academic skills in mathematics, reading and writing as well as non-academic skills such as social interaction, behavior management and participation in sport (Nurul Nabilah Zaid; Rosilah Wahab 2021). Collaboration between special educators and occupational therapists are a hot cup of tea nowadays as it has a great benefit on achieving success and better outcome into a child's development, improvement and helping out to be more active and independent. The culture of the educational environment supports the use of occupation as a guiding factor in current school-based practice. Working with a child in his or her natural context offers the opportunity to address the challenges faced by the child in the educational setting. The team members, in particular the teacher, were identified as a key component to the successful integration of OT into the classroom. The team members, in particular the teacher, were identified as a key component to the successful integration of OT into the classroom. Occupation-based model are best natural fit in the context of academic satisfaction by making the occupation-focused intervention throughout the service. Occupation-based models are perceived as having an academic importance but not a clinical relevance. They also identified practice-based models, such as sensory integration or motor learning, as influencing current practice. When asked specifically about

*occupation-based models*, most participants were unable to identify a model by name (Benson 2016). Previous studies were done over different types of perceptions about SE's and OT's towards each other, their individual role on child, working pattern, burnout, attitude and knowledge of MDT team members etc. Previous studies were done over different types of perceptions about SE's and OT's perception towards each other, their individual role on child, working pattern, burnout, attitude and knowledge of MDT team members etc. So, here is the researcher's scope to find out the gap as what about their experiences only between a SE and OT while doing collaborative work towards same child within same organization.

Researcher identifies that an interview guide with relevant questions in a qualitative research way will be the most beneficial way to learn about SE's and OT's in school settings in broad and also know about their experiences through sharing their thoughts, perception to each other, good or bad times, advantages, disadvantages, way to improve collaboration more, scopes to make collaboration and so on. This study will help further to the SE's and OT's who are going to be the part of collaboration and also who are already in collaboration as they will get an overview of how SE and OT perform their activities, implement their individual role in the special school, how they collaborate with each other, IEP planning, limitations, advantage, disadvantage, good/bad experiences while collaborating with each other and so on. In future, researcher may find their informative data throughout this study and may implement for searching the ways of how to improve collaboration to next level then now.



## **1.2 Justification of the study:**

Many of studies have been done about SE's and OT's. To my knowledge this is going to be the first study where their experiences will be shared as an interview where their perception, thoughts, respect and values towards each other's job, knowing about each other's roles and responsibilities will be analyzed to serve for better collaborative working strategies.

OT has been working with the special children all over in inclusive, mainstream and specialized schools and children with disabilities are being benefited through this. To ensure the best education, IEP is the best option for special children. Through the collaborative team work, an OT and SE ensures for the best service planning for individual child. Collaboration primarily takes place in IEP meetings. Frequent collaboration has supported prioritization of sensory-motor programming for both the student and the classroom equally.

This study will invent a new era of finding the current status of collaboration between SE's and OT's and further success of OT in special schools by knowing the pros-cons, team work facilities and barriers which will help future researchers in their way to develop and improve the quality of collaborative team work.

Thus this study is going to help for both SE's and OT's to be succeed in their role and grade their profession to next level, also with ensuring best outcome of special children at their learning experience.

### **1.3 Operational Definition**

**Special School:** A special school is a school catering for students who have special educational needs due to learning difficulties, physical disabilities, or behavioral problems. Special schools may be specifically designed, staffed and resourced to provide appropriate special education for children with additional needs.

**Occupational Therapy:** Occupational Therapy is a client-centred health profession concerned with promoting health and well-being through occupation. The primary goal of OT is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement.

**Special Education:** Special education is the practice of educating students in a way that accommodates their individual differences, disabilities, and special needs. This involves the individually planned and systematically monitored arrangement of teaching procedures, adapted equipment and materials, and accessible settings.

**Collaboration:** In special education, the term "collaboration" refers to a team teaching approach. In addition to the regular classroom teacher and the special education teacher, a collaborative team may also include speech, occupational, and/or physical therapists.

#### **1.4 Research Question, Aim and Objectives**

**Overarching Question:** What kind of experience in collaborative practice does Special Educators and Occupational Therapist have at special school?

**Aim:** The study aimed to explore the experience in collaborative practice between Special Educators and Occupational Therapist at special school.

**Objectives:**

- To identify the individual role of Special Educators and Occupational Therapists at special school.
- To explore the way they implement their individual role to the students.
- To know the perception of Special Educators and Occupational Therapists towards each other about their role.
- To know the perception of Special Educators and Occupational Therapists about collaboration.
- To identify the activities that requires collaboration at special school.
- To know how they plans for Individual Education Plan (IEP) for individual student through collaboration.
- To know which factors facilitates their collaboration.
- To know which factors are the barriers toward their collaboration.
- To identify the advantages and disadvantages of collaboration.
- To know about their perception about enhancing collaboration in future.

## CHAPTER II: LITERATURE REVIEW

This chapter includes the information regarding special educators and occupational therapists experience at special schools. The findings over this topic has been listed according to the existing literature relatable with this study. It includes information about role of SE's and OT's, their perception about each other's role, their understanding of collaborative practice, duplication of work, activities at special school, IEP, facilitators and barriers of collaboration, advantage and disadvantage of collaboration and ways of enhancing collaboration. Some keywords have been set to allocate literature associated with this study. They are- Legislative background of special education and related services, individual role OT and SE, collaborative practices and strategies to facilitate collaborative practices.

### **2.1 Legislative Background of Special Education and Related Services**

Being a student is one of a child's most important jobs. According to Case-Smith & O'Brien (2015), the first piece of legislation in the United States to address the requirements of students with disabilities was the EHA. The IDEA, which was passed in 1990 and "required states and public educational agencies to provide free appropriate public education to students with disabilities in the least restrictive environment," came after the EHA. L. 108–446). The ADA was passed in the same year to prevent disability-based discrimination in schools. The foundation for educational services for students with disabilities was laid by these legislative acts.

IDEA contains a list of the conditions that a student must meet in order to be eligible for specialized services, in addition to laying the groundwork for the special education system: Deafness, emotional disturbance, intellectual disability, multiple disabilities, orthopedic impairments, other health impairment, specific learning disability, and language or speech disorders (Pub. L. 108–446). All eligible students must have IEP's and parents must participate in decision-making processes under IDEA. To address educationally related objectives, these students may also receive related services like OT (Pub. L. 108–446). Each student has a number of professionals on their IEP team, including parents, SE's and OT's , behavioral therapists, speech therapists, and others if related services are included. Collaboration results in the best educational outcomes for students, so the IEP team should collaborate when making decisions and implementing programs (Martin, 2005). However, it is difficult to collaborate effectively and meaningfully because many team members frequently have large student caseloads and must travel to multiple schools. Because it is required by IDEA, many professionals only meet at the annual IEP meeting. There is no established practice model for how IEP team members should collaborate successfully, despite the fact that this is an essential part of special education. (Blanke, Pentek, Katherine Sadoff, 2018)

## **2.2 Individual Role**

A special education expert's jobs incorporate those of a conventional study hall educator and of a help specialist cooperation. The contrast between a special education proficient and a standard instructor is that the custom curriculum proficient plays out all obligations

with and for understudies with differing levels of inability and not all obligations are connected with educating. All educators should know about regulations that control the training climate, yet custom curriculum experts should likewise know about the regulations relating to individuals with handicaps. As we examine custom curriculum experts, we ought to initially talk about their obligations to their understudies as weak people. This section covers the information of two professional's role and that is about role of OT and role of SE.

### **2.2.1 Role of Occupational Therapist at Special School**

OT's work for individuals that he become independent in every aspect of his life. OT's facilitates the participation of a student with disability in their student role activities along with self-care, productivity, leisure and play (Benson, 2016). OT's are referred by teachers from school as they are the best for implementing their service at educational environment like participation in academic educational activities (e.g., math, reading); nonacademic educational activities (e.g., recess, lunchroom, hallway); extracurricular activities (e.g., cheerleading, sports, band, dances); and prevocational and vocational activities etc. (B. Tiffany and P. Lyndi, 2019). School-based OT practitioners provides the most effective therapy services within the real context for a student as it differs from individual room based therapeutic approach and pulls out most effective session in classroom, canteen, gymnasium etc. OT's work for individuals that he become independent in every aspect of his life.

### **2.2.2 Role of Special Educator at Special School**

Specifically, special preceptors are working over these two issues they're (a) collaborator, interventionist, fingerprint, director) ;( b) within each crucial part, in what actions do special preceptor substantiation most constantly;( c) educational practices that are used most constantly by the special preceptor; and (d) educational practices used by special preceptors aligned with effective educational practices that have been linked in the empirical literature. (Belinda B Mitchell, 2011). Special education preceptors in moment's plant must show "capability at tutoring everything. They work in different settings, tutoring and conforming content across all situations. Added to this complexity are reform sweats that are driving major changes in the entire special education system, including service delivery models and schoolteacher places. (Leah Wasburn, 2005). Research suggests that a cooperative approach between professionals leads to bettered customer and pupil issues( Kelly and Tincani 2013) and that both educational professionals and OTs express a desire for increased collaboration (Bose and Hinojosa 2008; Boshoff and Stewart 2013).

The special education schoolteacher in moment's seminaries plays a veritably critical part in the proper education of exceptional scholars. The school teacher is unique in that he she can fit numerous different places in the educational terrain. Still, each of these distinct places involves a variety of liabilities and functions. Understanding these liabilities can only help the special preceptor come more familiar with the part and increase the chances for success.

1- A schoolteacher in a tone- contained special education classroom in a general education academy: This part would involve working with a certain number of impaired scholars in a special education setting. This type of setting allows for the use of mainstreaming, the involvement of an impaired child in a general education classroom for a part of the regular academy day, as an educational tool when a pupil is ready for this type of transitional fashion. The schoolteacher in a tone- contained classroom is generally supported by a tutoring adjunct.

2- The resource schoolteacher in a categorical or non-categorical resource room: A resource room in a special academy which deals with only one type of exceptionality is called a categorical resource room. Anon-categorical resource room is a resource room generally set up in the regular mainstream academy where children with varied exceptionalities are educated at one time. This type of part necessitates close involvement with each child's homeroom schoolteacher and the transfer of practical ways and suggestions to grease the child's success while in the general education setting.

3- An educational annotator on the Child Study Team (CST): The CST is an academy grounded support platoon that discusses and makes recommendation on high- threat scholars. The part of an educational annotator on this platoon requires a complete and professional understanding of testing and evaluation procedures, and opinion and interpretation of test results.

4- A member of the IEP Committee( depending on the state may also be appertained to as the Committee on Special Education or IEP Committee): The IEP Committee is a quarter



grounded commission commanded by Civil law whose liabilities include the bracket, placement and evaluation of all impaired children within the quarter. This part involves interpreting educational test results, making recommendations, and diagnosing strengths and sins for the Individual Educational Plan, a list of pretensions, requirements and objects needed for every impaired pupil.

5- A member of a multidisciplinary tutoring platoon educating secondary scholars in a departmentalized program: This type of program is fairly new to secondary seminaries where the scholars with a disability follow a departmentalized program like other scholars but all their classes are tutored by special education preceptors.

6- An adviser schoolteacher: This is a special education schoolteacher assigned to work with a child with a disability right in the mainstreamed class. There are times when the IEP Committee may decide that it would be in the stylish interests of the child to admit services within his/ her own classroom rather than leave to go to a pull- eschewal program like a resource room. This may do when a child has problems with fragmentation, a situation where the schedule may beget him her to leave the class to go to the resource room in the middle of one assignment and returns in the middle of another. This fragmentation can produce severe confusion for some children.

7- An ambulatory school teacher: This is a special education schoolteacher employed by an agency hired to visit colorful seminaries in several sections and work with children with disabilities. This provides each child with the needed supplementary services and allows a quarter to meet conditions without having a program of their own.

8- An Addition schoolteacher in a partial addition program or full addition program (for an explanation of the different types of addition settings: An addition class is a mainstream class with a population of children with and without disabilities. This classroom will correspond of a general education schoolteacher and a special education schoolteacher working as a platoon.

9- A schoolteacher in a tone- contained special education classroom in a special academy: This part would involve working with a certain number of further seriously impaired scholars in a special education setting. The schoolteacher in this setting is generally supported by a tutoring adjunct as well as helpers because of the soberness of the disabilities displayed by this population of scholars.

10- As a private practitioner: In this position preceptor would be involved with the evaluation and remediation of children as a supplementary service after academy. (AASEP, 2021)

### **2.3 Collaborative Practice**

Instructors with additional inspirational perspectives towards consideration were accounted for by their understudies to have homeroom conditions with more noteworthy degrees of fulfillment and cohesiveness and lower levels of contact, seriousness and trouble than for those with educators who held more negative mentalities. Instructor perspectives towards incorporation expanded with more noteworthy saw sufficiency of both interior and outside help. Instructors were less ready to incorporate students with conduct hardships than understudies who had the option/gifted or had actual troubles, independent of

mentality to consideration (Jeremy J. Monsen, Donna L. Ewing, Maria Kwoka, 2014). Word related treatment specialists need to survey how the calling fits inside these new models of care and should be engaged with concentrating on the effect of these new models on key medical services results connected with the "Triple Point" of bringing down costs, working on quiet insight, and dealing with the soundness of populaces (AOTA, 2014). Specialists in school-put together practice have customarily centered with respect to a 1:1 help conveyance model with a greater weakness based center. Notwithstanding, school-based word related advisors ought to grow their job to advance psychological wellness of school-matured kids and help executives in carrying out reaction to mediation programs. These administrations are expected to guarantee fruitful instructive results for a custom curriculum understudies, as well as understudies in the overall training populace. To work on broad wellbeing and prosperity of all understudies, word related specialists should move past an immediate help model methodology and investigate substitute assistance conveyance models. Word related specialists are outfitted with regulative help and support from the calling to renew the job of school-based word related treatment (Maria A. Ball, 2018)

Joint effort between associations on various main lands can raise issues of financial turn of events, wellbeing, the climate, risk sharing, inventory network proficiency and human asset the executives.

An action can address pretty much every part of business and public activity. In this remarkable text, the creators join thorough hypothesis with reasonable guides to make a

valuable, useful, one-stop asset covering subjects, for example, the standards of the hypothesis of cooperative benefit overseeing points participation designs and elements issues of character utilizing the hypothesis. The vital elements of the book incorporate rich hypothesis, drawn straightforwardly from training, made sense of in straightforward language, and a rationally evolved comprehension of the difficulties of coordinated effort, in light of cautious exploration. This huge text will be an important reference for all understudies, scholastics and administrators examining or working in joint effort (Huxham, C., and Vangen, S. (2004).

Cooperation in schooling is viewed as a legitimate order, best practice in educator practice, and important for the consideration of kids with exceptional requirements. Throughout the long term, there have been various transformative manifestations of the cooperative model, each having different fixings recognized as significant, in the event that not fundamental, parts of an effective expert relationship.(Hernandez, 2013)

#### **2.4 Strategies to Facilitate Collaborative Practice**

According to Boshoff and Stewart (2013), collaboration is an essential part of providing OT services, particularly to children with ASD in inclusive educational settings. Inter-professional collaboration has been defined as an approach for direct interaction between at least two co-equal parties voluntarily participating in shared decision making as they work toward a common objective (Friend and Cook, 2013), despite the fact that numerous operational definitions of collaboration exist across disciplines.

Teaching, problem-solving, and consultation are just a few of the many special education programming activities where collaboration is emphasized. Regarding consultation, the interaction between consultants (such as occupational therapists) and consultees (such as early childhood teachers) is frequently the focus of collaborative efforts as these professionals strive to enhance the learning and development of their respective students. According to Kelly and Tincani (2013), research shows that a collaborative approach improves client and student outcomes, and educational professionals and occupational therapists both express a desire for increased collaboration (Bose and Hinojosa 2008; Stewart and Boshoff, 2013). In order to make it easier for occupational therapists and educators to work together, we've put together some concrete ideas. By doing this, we hope to foster supportive, respectful relationships among school professionals, which are the foundation of productive collaborative partnerships and boost student outcomes (Blue-Banning et al.). 2004). Communicate well as a Committed Team Member Strong interpersonal and communication skills are necessary for establishing and maintaining productive working relationships (Friend and Cook, 2013). Effective communication is the first step in establishing successful collaboration between occupational therapists and early childhood classroom teachers.

The ongoing monitoring of the impact of the collaboration can be aided by assigning preparation tasks and establishing timelines and priorities. For productive collaboration, co-planning should be done at least once per week (Friend and Cook, 2013).

To arrange for fruitful co-arranging, OTs and educators ought to use a gathering plan. According to Friends and Cook (2013), effective communication and collaboration between OT's and teachers necessitates purposeful co-planning, which is supported by an agenda. Co-planning to meet the needs of all students takes work. According to Friends and Cook (2013), it must be deliberate, structured, and ongoing. According to Kelly and Tincani (2013), research shows that a collaborative approach improves client and student outcomes, and educational professionals and OT's both express a desire for increased collaboration (Bose and Hinojosa 2008; Stewart and Boshoff, 2013). According to Kelly and Tincani (2013), research shows that a collaborative approach improves client and student outcomes, and educational professionals and occupational therapists both express a desire for increased collaboration (Bose and Hinojosa 2008; Stewart and Boshoff, 2013)

## CHAPTER III: METHOD

### 3.1 Study Design

#### Method

Qualitative research begins with assumptions and the use of interpretive/theoretical frameworks that inform the study of research problems addressing the meaning individuals or groups ascribe to a social or human problem. This design was used to explore the experience at special school about special educators and occupational therapists role implementation, knowledge about each other's role and responsibilities, coping with barriers, advantage of working collaboratively, IEP planning and so on. It involves collecting and analyzing non-numerical data to understand concepts, opinions, or experiences. Qualitative research can be used to gather in-depth insights.

#### Approach

To conduct this study, investigator followed the phenomenological approach of qualitative research design. Because the focus of a phenomenological study is in uncovering and interpreting the inner essence of the participants' cognitive processing regarding some common experience. Thus the final product of a phenomenological inquiry is a description that presents the essence of the phenomenon (Michael Worthington, 2013). It is common research methodology in health profession. The objective of phenomenology is to understand human experience. It originated within a philosophical movement that, since the early 20th century, has endeavored to make sense of the lived experience (Wilson,

Anthea, 2015). Investigator found this phenomenological study design best suitable to explore and understand the experience of special educators and occupational therapists as how they work collaboratively at their working institute.

### **3.2 Study Settings**

The student researcher performed the interview at 5 selected special school of Dhaka sequentially named Prottasha Centre for Autistic Care, Dream Angel Centre for Autistic Children (DACAC), Society for the Welfare of Autistic Children (SWAC), Ingenious Care Limited, Autism Welfare Foundation (AWF).

#### **3.2.1 Study Period:**

- The study was conducted from April, 2022 to March, 2023.
- The data collection time started from 24<sup>th</sup> October, 2022 to 28<sup>th</sup> November, 2023.

### **3.3 Study Participants**

The student researcher selected her study participants through purposive sampling process to collect the data. The purposive sampling technique, also called judgment sampling, is the deliberate choice of a participant due to the qualities the participant possesses. It is a nonrandom technique that does not need underlying theories or a set number of participants (Ilker Etikan, Sulaiman Abubakar Musa, Rukayya Sunusi Alkassim, 2016). Investigator asked for if the participant meets the need according to inclusion criteria and free from excluded criteria.



### **3.3.1 Situational Bias**

Investigator is a student researcher. Student researcher selected 5 schools of Dhaka city because it was too tough to bear the expenses to move far from Dhaka city and the way she completed data collection the travelling cost was convenient enough for her.

## **3.4 Inclusion and Exclusion Criteria**

### **3.4.1 Inclusion Criteria**

- Selected special schools employed with both special educators and occupational therapists.
- Both male and female were eligible to be the participant.
- All participants had more than 06 month of work experience within same organization.

### **3.4.2 Exclusion Criteria:**

- Interns and trainees were not included as participants.
- Newly recruited staffs were excluded for interview.
- Participants who had severe illness or maternal leave was out of selection.

### **3.4.3 Participants Overview**

In this study, all participants were selected according to inclusion criteria. . A self-developed semi-structured questionnaire was used to explore the experience of the participants. Researcher selected 5 participant from both special educator and occupational therapist professionals.

Questionnaire for the interview contains 2 part where part A contains socio-demographic questions for the participants and part B is with 17 questions to explore the experience of collaborative practice between special educators and occupational therapists.

Here are the overview of participants according to part A questions of occupational therapists and special educators as follows:

**3.4.4 Table 1: Participants Overview (Occupational Therapists)**

| <b>Pseudo Name</b> | <b>Age</b>  | <b>Gender</b> | <b>Educational Qualification</b>      | <b>Name of School (In short)</b> | <b>Experience of Work at this School</b> |
|--------------------|-------------|---------------|---------------------------------------|----------------------------------|--|
| Firoza             | 34<br>years | Female        | B.Sc. in OT                           | Prottasha                        | 4 years                                  |
| Noha               | 42<br>Years | Female        | M.Sc. in<br>Rehabilitation<br>Science | DACAC                            | 10 years                                 |
| Arafat             | 36<br>years | Male          | M.Sc. in<br>Public Health             | SWAC                             | 6 years                                  |
| Tahsin             | 28<br>years | Male          | B.Sc. in OT                           | Ingenious Care<br>Ltd.           | 8 years                                  |
| Eva                | 37<br>years | Female        | M.Sc. in<br>Rehabilitation<br>Science | AWF                              | 12 years                                 |

**3.4.5 Table 2: Participants Overview (Special Educators)**

| <b>Pseudo Name</b> | <b>Age</b>  | <b>Gender</b> | <b>Educational Qualification</b> | <b>Name of School (In short)</b> | <b>Experience of Work at this School</b> |
|--------------------|-------------|---------------|----------------------------------|----------------------------------|--|
| Borhan             | 24<br>years | Male          | B.B.A<br>(Honors)                | Prattasha                        | 2 years                                  |
| Lubna              | 36<br>Years | Female        | B.S.Ed.                          | DACAC                            | 6 years                                  |
| Noman              | 32<br>years | Male          | B.S.Ed.                          | SWAC                             | 4 years                                  |
| Sonia              | 29<br>years | Female        | B.S.Ed.                          | Ingenious Care<br>Ltd.           | 3 years                                  |
| Rifa               | 40<br>years | Female        | B.S.Ed.                          | AWF                              | 18 years                                 |

### **3.5 Ethical Consideration**

Ethical clearance no. : CRP/BHPI/IRB/09/22/634

- At first student researcher has taken permission from Institutional Ethical Review Board of Bangladesh Health Professions Institute (BHPI) through Department of OT, BHPI.
- The student researcher informed the participants about the study through information sheet and started to take interview by signing the consent form.
- Student researcher informed the participants about recording the interview before conduct.

- Participants were informed about the withdrawal process. Any interviewees could withdraw their participation before starting the data analysis.
- Student researcher ensured and maintained confidentiality of the participants. Only the student researcher and the supervisor had access to the interviews, and this was clearly stated in the information sheet.
- There was no bias in selecting participants, as the study participants was selected based on inclusion and exclusion criteria.
- There was no risk and beneficence of the participants for providing the information.
- The student researcher was available to any study related questions or inquiries from the participants.

### **3.6 Data Collection Method**

To conduct this study, student investigator conducted in-depth semi-structured interview via face to face conversation. In-depth semi-structured process of interview is also effective method for collecting qualitative open-ended data, to explore participant's thoughts, feelings and belief about a particular topic, to delve deeply into personal and sensitive issue (Jamshed, 2014). The entire interview was conducted in Bengali. The investigator explained all the question in Bengali which was helpful to understand for the participant.

At first student researcher explained the reason for study, aim and objectives and then explained about how the interview will be proceed. The interview took time with an average of 15 to 25 minutes. It was a face to face conversation.

Student researcher went to the working area in which special school participants are working at. Among 10 participant 's 9 of interviewees interview has been conducted at their school but only 1 participant from OT gave her data at her residence as she could not attend her organization due to some familial issues. Before starting the interview student researcher informed the participant about consent form and information sheet. Participants was also informed about withdrawal if they are not willing to be the part of this study at any time before data analysis. After that investigator collected the demographic information from the participant. Once it had been completed, the student researcher asked questions according to the "Interview Guide" through the in-depth semi-structured interview. Interview was recorded by mobile phone recorder for further analysis.

### **3.6.1 Participant Recruitment Process**

At first student researcher selected five schools where at least one of Occupational Therapist is present along with Special Educators. Then called the school authority if the interview could be taken. Confirmed through call conversation with occupational therapists of the selected special schools and informed about the research needs, inclusion-exclusion criteria and how the interview will be conducted. Then student researcher was given a specific date and time to conduct her interview.

### **3.6.2 Data Collection Instrument**

- Self-developed interview guide was used to collect the data. Self-developed interview guide contains semi-structured in depth questions. Questionnaire

contains two parts of it. Part A is about participants socio-demographic contents and Part B contains 17 questions emerged from objectives to meet student researchers needs for study information.

- Researcher conducted the interview by face to face conversation at participants working place.
- Recorded the interview via mobile phone recorder with participants consent.

### **3.7 Data Management and Analysis**

Investigator collected the data from participant by taking interview with self-developed semi-structured questionnaire. Data were recorded over phone for further analysis. At first investigator got familiarized with the data by taking interview, transcription data verbatim by listening interview recordings and translated them into English. Then, she thoroughly read first to last to understand the meaning and pattern of data. In second step student researcher generate initial codes by highlighting the interesting topic about participant. Next from the initial code student researcher search theme in the third step. This theme was based on the common code among all participants. In fourth step student researcher reviewed the theme. In this step investigator refined and reviewed the theme by justifying enough data. Then the student investigator created subtheme under the main theme. At the fifth step student researcher defined and named the theme. By the name of the theme reader can get an idea what are explained in the theme. At the sixth and last step student researcher produced the result according to the theme.

According to Braun and Clarke, there are six steps of thematic analysis and those are Step 1: Become familiar with the data, Step 2: Generate initial codes, Step 3: Search for themes, Step 4: Review themes, Step 5: Define themes, Step 6: Write-up. So these steps are much appropriate for the investigator to analyze the data for thematic analysis. The purpose of thematic analysis is to find out participants views, opinions, knowledge, experience about something (Clarke & Braun, 2016). Since the student researcher explored the experience of collaborative practice between special educators and occupational therapists at special school, thematic analysis was the proper way of analyzing the data.

### **3.8 Trustworthiness and Rigor**

Trustworthiness was maintained by follower methodological rigor and interpretive rigor (Fossey et. al, 2002).

The steps are mentioned in the bullet points:

- As the aim of this study was to identify lived experience, phenomenological approach of qualitative design was a perfect fit to achieve the aim and objectives.
- Student researcher become familiar with the context by verbal communication with the participants.
- As this study was on exploring the experiences of special educators and occupational therapists it was more applicable to conduct this research in qualitative study design. So investigator selected 10 participants altogether by selecting 5 from both special educator and occupational therapist professionals. Reasoning behind

selecting the participants from only Dhaka city has been explained at situational bias.( 3.3.1 Situational Bias)

- Participants of this research were selected according to aim and objective of the research topic.
- Participant's views and voice were presented in verbatim quotation which represented the originality of data.
- Data are analyzed by Braun and Clarke's six step.
- The supervisor was involved in every step of data analytic process which provided a multiple view in the data and there was no chance of biasness.



## CHAPTER IV: RESULTS

Data analysis from the responses of participants brought to light with five key themes. They are- 1) Occupational Therapists and Special Educators role at Special School, 2) The Harmony, 3) IEP Formulation, 4) Best Experience, 5) Worst Experience, and 6) Expectations.

**Table 3: Overview of Result**

| <b>Themes</b>                                   | <b>Sub-Themes</b>   |
|---|---|
| <b>1. OT's and SE's role at Special School.</b> | <b>I) Combined Assessment</b><br><hr/> <b>II) Individual Practice</b><br><hr/> <b>III) Classroom-Based Activities</b> |
| <b>2. The Harmony</b>                           | <b>I) The Collaborator</b><br><hr/> <b>II) Mutual Decisions</b><br><hr/> <b>III) Scheduled Updates</b>                |
| <b>3. IEP Formulation</b>                       | <b>I) Planning of IEP</b><br><hr/> <b>II) Implementing IEP</b>  |
| <b>4. Best Experience</b>                       | <b>I) OT's Best Experiences</b><br><hr/> <b>II) SE's Best Experiences</b>   |
| <b>5. Worst Experience</b>                      | <b>I) OT's Worst Experiences</b><br><hr/> <b>II) SE's Worst Experiences</b>   |

| Themes          | Sub-Themes                                    |
|-----------------|---|
| 6. Expectations | I) OT's Expectations<br>II) SE's Expectations |

#### **4.1 Theme One: OT's and SE's role at Special School.**

Occupational Therapists and Special Educators are the vital role in a special school. They shared about how they implement their individual role and responsibilities towards the students with disabilities. As per their statement, assessment is the base of collaboration service for every student with disabilities for better result. Most of the professionals follows MDT assessment form or else school-based assessment form for assessing student with disabilities, their strength and weakness etc. The theme "OT's and SE's role at Special School" described accordingly through 3 different sub-themes as follows:

##### **4.1.1 Sub-theme one: Combined Assessment**

Assessment in school settings is the most important part of service providing. Both OT's and SE's assess the child as it is the first and foremost part to identify the problems and way of finding solutions of them. Our OT participant Firoza from Prottasha Centre for Autism Care stated that,

"After receiving a child at school, firstly we MDT team members like me or any occupational therapist, special educators and speech and language therapists check out the suggestions or prescription form of doctors as we don't have any personal doctor at our institute and then assess the child as per their needs. We then identify

our each role of what are lacks or needs of this child and according to that we decide what type of service we each have to give to treat the child.”

Whereas the SE of Prottasha Centre for Autism Care did not mention anything over assessment particularly.

Another OT, Noha from Dream Angle stated that they assess the child in a “Multidisciplinary Team”.

“First of all when we get a child we complete an assessment where there are two parts, one is for parents where there are some questions for parents view and other history about child and the second part is our OT based assessment where we assess a child’s sensory level as many of them are autistic children, functional activities, and their academic cognitive level, doctor’s suggestion, medical reports and etc.

OT Tahsin from Ingenious Care Ltd. said that,

“When a child first comes here, we do an assessment and then identify the problems. I identify his capabilities and according to that if I think he needs it, then I make a treatment plan for him and provide treatment accordingly and through the cognitive level of the child and other observations, if the child needs a special school, then I refer there.

OT Eva said that,

“We perform our assessment through MDT approach and on this part me, as an occupational therapist complete the assessment on that part containing fine motor, gross motor, ADL skill, cognitive skill, and play skill and so on.”

#### **4.1.2 Sub-theme two: Individual practice**

Every professional at special school has their own individual and unique pattern of role and responsibilities towards their student. Occupational therapists and special educators also implement their best service at their individual part of service. OT's mainly provides students with fine motor and gross motor improving therapies, play therapy, group therapy with peer, sensory integration, parent counselling, writing improvement, behavioral management and many more. Special educators mainly focuses on academic activities of the child and practices with the guided activities of therapists as well as ADL activities.

OT Noha said that,

“Here I mainly follow OT roles to provide the early intervention to the child within 5 to 6 years and for the older ones, the vocational activities, peer group intervention and socialization is also a part of my role.”

OT Firoza said that,

“According to the assessment form, I plan for the child if he is in need of any sensory integration, behavioral management, classroom management as well as I make him to sit classroom based activities also on what he can or cannot perform.”

OT Arafat said that,

“ As an OT , I am providing therapy to the students with fine and gross motor issues, behavioral issues, writing skill improvement, sitting habit, peer interaction, group therapy and also with the needs of individual students and their educators preference.”

SE Rifa said that,

“Here now I am working with the adult students and now am providing them mainly vocational training beside their academic participation.”

#### **4.1.3 Sub-theme three: Classroom-Based Activities**

Participants stated their classroom based activities where all the special educators of all schools plays their role mostly at classroom. OT from all schools mostly implement their role at their personal room of service. They do not serve or stay at class but they observe the classroom activities if there is any necessary and urgently serves through SE's updates over child.

SE Rifa from AWF School said that,

“Usually I work with child at classroom, but I also hold up a meeting twice in a month with the parents of child”.

OT Eva from the same AWF School said that,

“I often visit their classroom to observe their behavior, writing skill, socialization, peer interaction...If educators complains any problem about the child about classroom activities then I go for it”.

## **4.2 Theme two: The Harmony**

Participants reported that communication and collaboration between the educator and occupational therapist was good enough. The OT participants reported that they directly interacts with the educators and students on twice or thrice in a weekly basis and attend meetings with the team members, parents and that there always remains good communication/ collaboration between occupational therapists and educator. Methods of communication and the nature of contact with the occupational therapist and special educator varied. Participants reported occupational therapists to be in one of five categories related to contact with the teacher: (a) The Collaborator (b) Mutual Decisions (c) Scheduled Updates.

### **4.2.1 Sub-theme one: The Collaborator**

The occupational therapists and special educators works along to develop and implement a plan for the student. The participants reported this could be in the form of the therapist and educator having a conversation and discussing strategies that could be tried in the classroom, working together to manage schedules for students, and having frequent conversations. From Prottasha School,

OT Firoza said that,

“Obviously we are getting a better feedback from our students and their guardian otherwise this huge amount of child could not ever come to our school for intervention. They are getting benefitted through our collaborative services and thus parents are relying on us. This school is being famous day by day through its good achievement and parents are eager to admit their child for betterment.”

SE Noman from SWAC said that,

“From my personal point of view, I am learning a lot of outside work. Learning a lot from OT’s and able to practice students at my tuition and school also. So it could not be able to learn such a thing if I had not work collaboratively with OT”

So that collaboration is really worthy enough to each professionals in special school. SE and OT finds collaboration effective enough and having benefit indeed.

#### **4.2.2 Sub-theme two: Mutual Decisions**

The occupational therapist provides consultation services to the teacher by providing input and strategies to solve a problem. These consultation services can be through email, phone calls, face-to-face communication, being present at the IEP meetings, providing services within the classroom, completing quick “check-ins” on students, parent counselling, pulling children from the classroom, and giving suggestions for the classroom to the occupational therapist or special educator to each other to enhance student success.

OT Firoza said that,

“When a child first comes to school, the first thing I see is whether he has sensory needs or not, his level of intelligence, level of fine motor activities and hand dexterity...As per my base I can give the pre-writing guidelines or IEP plans, but according to that working with the child's pre-writing ...it's totally up to a special educator. For this, I keep regular updates on child's classroom activities from the class teacher.”

So here she made a plan of how to progress the child's improvement and that's why she consulted with other members and explains about SE's consultation on these term who serves the same child and also gave counselling to the mother of that child.

#### **4.2.3 Sub-theme three: Scheduled Updates**

The occupational therapist provides a quarterly update on progress and adjustments to plan of care. The participants reported that this could be in the form of providing progress monitoring of IEP goals, coordinating schedules for conferences and students, and sending one email per marking period with updates on the student. Whereas a special educator works on IEP thoroughly and always have an update over that. Maximum special educators are the main member of the MDT team who writes up the most parts of an IEP because they are the person who serves the child at special school with the whole aspect like academic performances, fine and gross motor activities, ADL activities, socialization, mannerism, classroom activities, peer interaction activities etc.



OT Arafat from SWAC said that,

“Collaborative practice at our school is quite good as we always have our sharing to each other about the child along with child and their parents. We share with each from our individual perspective...child’s educator shared with me about this problem and we again planned urgently to increase her sensory improvement activities. So collaboration is a must thing if we want to improve a child in a whole.”

SE Borhan said that,

“Almost always Ma'am updates our work and if we get stuck or don't understand something we inform Ma'am. We handle it collaboratively if the child needs a change in work or a change in work pattern.”

### **4.3 Theme three: IEP Formulation**

IEP is the most important for a special school and this is greatest via of collaboration. All MDT members that means an occupational therapist and special educators have a great chance here to implement their role in the best way.

#### **4.3.1 Sub-theme one: Planning of IEP**

OT Firoza said that,

“I told you earlier that Special Educators focus on child’s academic capacity, their writing ability, fine motor skills. A child who cannot hold a pen or pencil when assessment will be done they will observe on that child about his problems and I

will observe too. Then according to our individual observation we individually will plan for our parts of activities in IEP.”

SE Borhan said that,

“If the occupational therapist does not identify a child's problems, then we cannot plan for further academic work.”

OT Noha said that,

“The role of Special Educator is to ensure the child's academic and educational side. As example, if he can rhyme. What kind of rhyme can he say? How many rhymes? Can he write? What stage of writing is he at? Does he have prewriting skills? Does he have pre-verbal skills? One more thing to see is how the child works at home? It is seen along by the OT, SLT and the teacher.”

So in most case IEP is the base of all students with disabilities as it contains a whole year plan with an exact goal for each term whether it is about child’s academic or sensory development or about vocational training.

#### **4.3.2 Sub-theme two: Implementation of IEP**

SE Lubna said that,

“Every child needs OT. Yes, physiotherapist may not be suitable for all children, it depends on the child's needs, but every child needs OT. Therefore, since IEP is our madam who guides us and plans it, it is impossible to do IEP without OT. Otherwise, how will we know the child's problems?”

OT Arafat said that,

Of course, there is need of special educator on IEP, since I am the only occupational therapist and whereas teacher in this school, it is 1:2 for each child. It is not possible for me alone to provide equal services to all children. In that case, an educator practices the child along with the academic services as per the guidelines shown by me.

SE Noman said that,

“We need OT for IEP, because CP children have problems in walking. They have physical problems, you know. And if you observe children with autism, they have sensory problems... We discuss with the occupational therapists about what kind of procedure to follow if there is any problem while following IEP based practice and also if the child needs to be taught something new. We consult with them when any new problem arises.

Both OT and SE finds it the best to communicate and collaborate with each other because no other than communicating and collaborating with each other will lead to success of child's better improvement.

#### **4.4 Theme Four: Best Experiences**

When the participants were asked to describe a positive experience they had with an occupational therapist and special educator, the majority of the participants offered

insights. This sub-theme stated over participants working pattern, their perception and satisfaction to each other as a team member.

#### **4.4.1 Sub-theme one: OT's Best Experiences**

When the participants were asked to describe a positive experience they had with an occupational therapist and special educator, the majority of the participants offered insights. This sub-theme stated over participants working pattern, their perception and satisfaction to each other as a team member.

OT Firoza said that,

“Well like I have a kid here name is Sabbir he is still there we will divert him to normal school but his mother wants him to be better then let's go. He had many problems with his speech, his facial movements were not good. Could not eat all kinds of food. Due to his fine motor problems, he could not attend normal school. Later I planned for him along with me, the Occupational Therapist and Speech and Language Therapist and Special Educator... Then I will send him to normal school...we want his adaptive skills to increase. If he is more normal, he might do better. It took him a year and a half to come to this state and then his parents extended it for another 6 months because he will not become like a normal child at once and in this short time there is a visible change as a result of our collaboration”.

SE Borhan said that,

“I think OT is most important in special schools...if his attention is not at class, then academic activities are not possible. In that case, an occupational therapist gives therapy to increase the child's attention and other ancillary learning performance. Therefore, occupational therapists are definitely needed in special schools.”

SE Lubna said that,

“A child named Zara came here. She was three to three and a half years old. Came at a very young age. But the kid was very hyper. I mean, it didn't matter to her that she easily can make table turned upside down. When we got her, she couldn't say a word. I mean, she said very little...She became like a normal child. And Alhamdulillah working with her, he improved so much that her parents admitted him to direct class one. And now she is studying in class five of normal school.”

SE Sonia said that,

“One child shifted from Qatar to here who was really bright in educational sector but he was so hyper. Then, we worked together with an OT (main streaming) and by God's grace that child is not at school right now. For these kind of cases, the criteria's we prefer because of an OT's advice that particular child can reach to main streaming.”

#### **4.4.2 Sub-theme two: SE's Best Experiences**

The participants were asked to describe a negative experience they had with an occupational therapist. No occupational therapist complained about any kind of negativities they had with special educator while collaborating. Only two participant from special educators had some sharing on this topic.

SE Sonia said that,

“I think, timing is a hindering factor. Such as: to work in a time frame of a month was convenient for me but for other reasons or due to my reason adjusting time is difficult sometimes with OT's.”

OT Eva stated that,

“All teachers are not equal. It appears that they sometimes do something that they call it is their practice! ... Do not do this guys. (Angry emotions).Practice your own terms rather than ours and it could be beneficial for all of us...This malpractice I think creates a lot of work duplication.

#### **4.5 Theme Five: Worst Experiences**

While working together in similar profession, it is common to have some clashes or work duplication. Though they all had a great experiences of working together with each other, some of them left with some negative experiences.

#### **4.5.1 OT's Worst Experiences**

Most of OT's shared that they never had such a worst experience to focus on except this one.

OT Firoza said that,

“No actually I have not had any such worst experience of duplication till now. Yes but it feels bad when they continue our practices as their own. Then the parents come and say why you should do it because the teacher already did it. So these are the things and I will say so that they should do their own work and the office secretariats should set a written program profession wise.”

OT Eva stated that,

“All teachers are not equal. It appears that they sometimes do something that they call it is their practice! ... Do not do this guys. (Angry emotions). Practice your own terms rather than ours and it could be beneficial for all of us... This malpractice I think creates a lot of work duplication.

#### **4.5.2 SE's Worst Experiences**

Having a negative experience for the SE's also a common thing. Here how one of the SE participant shared her feelings.

SE Rifa said that,

“I will not say that I never faced any bad. When we are collaboratively working together with the OT we know about each other's roles and we know we are working

on the reasoning. Actually the problem is with the parents because they think that the OT might not be doing the same thing or both are doing the same thing. We have to face a little problem to make understand the parents. But by the grace of Allah, we never had any problem with it.”

#### **4.6 Theme Six: Expectations**

The final theme Expectations was related to wanting “more!” The educators want the occupational therapist to be more directly involved in the school and interacting with educators/students on a regular basis so as occupational therapist also. Participants want from each other to spend more time in their building/classroom, spend more time with the students, and have more flexibility in their schedules. They think collaboration must be extended, as it brings an enlighten path to the child with disability along with facilities of both OT and special education at a time in school. No one can deny the benefit of collaboration and nowadays the importance and need for collaborative practice has urged into a high demand. Special schools are moving forward for improving their service and fame by collaborating special educators and occupational therapists. Parents also demanding for their child’s fast progress as they are getting both service in a parallel way through collaborative practice at special school.



#### **4.5.1 Sub-theme one: OT's Expectations**

OT Firoza said that,

“If you tell me to sit and practice studying for an hour and a half but I can't do that...A special educator has a big role for a child...A teacher has a role to play in a child's need for a service after a service. I have a different role. Like I am teaching discrimination to a child; sensory discrimination or visual discrimination, but a special educator is also teaching...It is never possible to improve the overall development of a child alone. SE is an expert in his own role...Hence, collaborative practice is essential for a child's overall development.”

OT Tahsin stated that,

“What I told you is to increase communication. My suggestion to both OTs and Special Educators is to be respectful of each other's work. What else is it to reduce the communication gap and ask each other without hesitating if you need a suggestion on a problem? These are enough I think for the collaboration of two professionals.”

#### **4.5.2 Sub-theme two: SE's Expectations**

Collaboration increases the possibility of improvement of a child with disability in every aspect of life like academic, self-care, productive life, socialization, interaction towards family, self-management etc.

SE Borhan said that,

“Every school should have a combination of occupational therapists and special educators working on an MDT. For example, the IEP plans when the service is provided and our work is done by planning as no special educator or occupational therapist can do. A four-month IEP is planned for a child and then no updates are made, leaving no feedback from the child and no coordination between us professionals who work together. As in our school, Ma'am takes a new feedback of IEP every four months and checks the update improvement of each child through weekly visits and observations. I think we should talk about updates. In this way, if you work through co-operation, the work of collaboration can be increased.”

SE Noman stated that,

“When a child has problems in sensory or behavioral issue or if there is any physical problem, we Special Educators cannot give any specific solution for them. But an occupational therapist with experience in this field he is expert to deal with this situation and give proper treatment. In that case we definitely need to consult him for the development of our children and I suggest that everyone in special school, both OT and SE should collaborate in this way.”

## CHAPTER V: DISCUSSION

The main aim of this study was to know about the experience on collaborative practice between special educators and occupational therapists at special school. Teachers have been identified as a key component in the successful integration of OT strategies to support student success in a school context (Benson, 2013). The findings from this study concur, showing that the educator-therapist relationship is vital to promoting success for children with disabilities in the school environment. Casillas (2014) found that more shared collaboration and communication are needed between occupational therapists and teachers. The first theme is about implementing occupational therapists and special educator's role towards the students of special school. Through this topic, it is made very evident how each party is controlling their particular sector while collaborating flawlessly. Occupational therapists primarily offer ADL exercises, behavioral management, pre-writing abilities, fine and gross motor development, and sensory integration (Hernandez, S.J, 2013). They acknowledged that special educators are the ones that interact with the student the most. At the special school, there are just a few occupational therapists and a large workload, making it impossible to provide each kid the individualized attention they require. This is the outcome of working with special educators to help them manage the high workload and lack of occupational therapists by having the children practice their OT skills at school. Through this theme it is explained clearly about how they are managing their individual sector along with a perfect collaboration. Occupational therapists mostly providing sensory

integration, behavioral management, pre-writing skills, fine and gross motor skills, ADL activities etc. They admitted that special educators are the one who spends most of the time with the student. As there is high caseload against a few occupational therapists at special school, it is totally impossible to treat an individual child with hundred percent. So here is the result of collaboration with special educators as they are coping with the lacking of occupational therapists and minuses the burden of high caseload by practicing the child with the OT activities at school. A major theme that emerged from this study was also communication and collaboration. The results of this study indicate that collaboration and communication between special educators and occupational therapists is amazing and they cordially needs more improvement. It is the fact that educators and occupational therapists understandings of each other's role and scope of practice improves through experience and knowledge within the school system (Barnett, J. E. H., O'Shaughnessy, K. L, 2015). In this study, the participants reported that therapists and educators communication frequency varied from maximal contact as a consultant to providing regular updates on the student's progress to a collaborative relationship with the special educator and occupational therapist. Even though a high percentage of respondents reported that regular updates were given on a twice or thrice in a weekly basis. Evidence suggests that as the occupational therapist and special educator collaboration increases, according to the teacher's perception the student progress also increases (Benson 2016). For school-based occupational therapists, it is vital to engage in school-based best practice to develop a collaborative relationship with the educator. Another outcome of the study was educators and

occupational therapists and perception of the role of the occupational therapist and special educator on the IEP team. The participants viewed each other's as a valuable member of the IEP team for contributing to the meetings, giving suggestions that support classroom performance, and helping educators and child's parents to understand the role of special educators and occupational therapists. But according to the fourth theme about the best and the worst experience participants had while collaborating with each other, participants cited limitations of the system as a limitation in the occupational therapist-educators relationship about their work duplication. Nowadays it is a concerning subject that there are some malpractice happening by special educators as they are practicing occupational therapists activities. So it may arise a negative impact on whole collaborative practices. OT is a great contribution to the special education. Students with disabilities are getting OT service along with fulfilling their academic service. Occupational therapists are preparing the students to be eligible for academic performances and also ensures with fastest re-correction and new addition in activities as they are present at special school as a MDT team member. Parents are also trusting over those special schools who have both OT's and special educators rather than the schools without OT. So special educators must admit that OT's are great team member and best service provider ensuring the improvement and forwarding their helping hand towards the special education. The current findings indicate that the participants regarded occupational therapists and special educators as valuable team members who facilitate success for students in the classroom, but the demands on the occupational therapist within school based practice leave the educators wanting more as well as OT's

also recommending for increasing more special educators as it may balance over 1:1 on educator-student ration. The special educators cited a high caseloads and the occupational therapists' itinerant status as a barrier to best practice. School programs are at rising demand for special educator and OT services, and increasingly, occupational therapists' fast-growing workloads include greater demands for their consultation in this environment. Occupational therapists need to consider how services are provided in the school context. Teachers and other members of the IEP team, not the occupational therapist, largely determine the specific activities that constitute the role of the student and by extension the role of special education OT. Till then it will be incomplete if occupational therapists role and contribution is not understood. One aspect of school-based-OT services is to support educational participation. Supporting educational participation can occur through direct service provision or via consultation with the team. Weaver and Case-Smith (2014) suggest the importance of creating a balance between direct services and teacher supports to help the child. The school-based occupational therapist needs to create a role that includes balance in the relationship with the teacher in support of student progress. This study, along with past research, indicates that the occupational therapist-educator collaboration as a focus of student outcomes is an important piece of school-based practice. (Rens, L., & Joosten, A., 2014). This study contributes to the conversation regarding the occupational therapists and special educators role in making that happen. Although school-based OT is an important part of the team, the occupational therapist and educator needs to assume the leadership role in facilitating the process. The educators recognize OT as a strong

contributor to student outcomes, also they are seeking the support of the each other. The school-based occupational therapist needs to advocate for the therapist's place on the team and contribution to student outcomes. Special educators must have to address OT role and needs in the progress of child with disability in every aspect.

## CHAPTER VI: CONCLUSION

### 6.1 Strength and Limitations

#### 6.1.1 Strength

As a student researcher it was not so easy to communicate with professionals. But investigator made it smoothly. The best part of this study is participants were much helpful and eager enough to provide information about their activities and as investigator used an open-ended questionnaire, they easily expressed their emotions. It was an open platform to share about their collaboration, pros and cons, what things are bounding their professionalism, their good and bad experience and so many. The main point to highlight on this study is participants out looked their and their team members malpractice and gap on their practice. So the last question of the interview was effective enough for them to outburst their thought towards enhancing collaboration.

#### 6.1.2 Limitations

The sample size and bias are the current study's shortcomings. Due to the sample being restricted to a single geographic area in Dhaka city, the study exhibits limited generalizability. Since Dhaka City's educational system is distinct from others', the outcomes ought to be seen in that light. It is essential that further study be conducted on this subject in order to increase generalizability by having a larger sample size in terms of both participant quantity and inclusion of a larger geographical area where special



education is offered and foremost rights for the enormous number of students with disabilities. If the investigator could schedule the interview with additional people, it might be much better.

## **6.2 Implication for practice**

Potential clinical implications from this research study focus on the need for occupational therapists and special educators to improve the ability to work effectively and collaboratively as MDT team members. The results of this study indicate that school-based occupational therapists and special educators can do the following to enhance their practice:

- Educating teachers about the specific role of the occupational therapist on MDT team and in the school context.
- Asking the educators and occupational therapists what communication style and frequency they prefer.
- Establish a collaborative relationship by having a physical presence in the school and in both formal and informal meetings, parent counselling, modification.
- Expand the role of occupational therapist on the IEP team as appropriate by explaining OTs' domain of practice and giving appropriate suggestions for each child.
- Advocate for system change related to workload. Time to support the IEP team process should be an expectation not a luxury.

- Addressing each other's role and responsibilities and implementing only own role at school settings along with private practice.

### **6.3 Conclusion**

Enhancing collaboration is the greatest demand for this present time. Both special educators and occupational therapists utmost cherish that improvement in OT, SE collaboration may bring the special education to a next level of success. The results of this study highlight the importance of communication and collaboration between OT and SE. Teachers indicate that OT is an important part of the process of ensuring student success, yet teachers express frustration related to the limitations of the system and therefore the limitations of the occupational therapist. As well as occupational therapists also thinks that there is urgently in need of teachers training on OT role and new interventions to handle child with disabilities. Typically, school-based occupational therapists have high workloads and little flexibility, which contributes to a reduced level of communication. To provide the best services in an educational context the occupational therapist needs to advocate for the profession. It is crucial for school-based occupational therapists to have a voice in the educational system, therefore, allowing for improvement in communication and collaboration among team members. School-based occupational therapists and special educators should educate the teachers, administration, and parents about the individual role of OT and special educators in schools. As awareness of the role of OT and special education increases, system change becomes a possibility. Collaboration and dynamic

teaming is within the reach of the school-based practitioner, but we need to advocate for system change in support of the students and profession served.

## LIST OF REFERENCE

The American Journal of OT, 2014, Vol. 68(5), 500–505.

Association, A. O. T. (2014). *OT Practice Framework: Domain & Process*.

American OT Association.

Barnett, J. E. H., & O’Shaughnessy, K. L. (2015). Enhancing Collaboration between Occupational Therapists and Early Childhood Educators Working with Children on the Autism Spectrum. *Early Childhood Education Journal*, 43(6), 467–472. <https://doi.org/10.1007/s10643-015-0689-2>

Benson, J. D., Szucs, K. A., & Mejasic, J. J. (2016). Teachers’ perceptions of the role of occupational therapist in schools. *Journal of OT, Schools, & Early Intervention*, 9(3), 290-301.

Blue-Banning, M., Summers, J. A., Frankland, H. C., Nelson, L. M., & Beegle, G. (2004).

Dimensions of Family and Professional Partnerships: Constructive Guidelines for Collaboration. *Exceptional Children*, 70(2), 167–184. <https://doi.org/10.1177/001440290407000203>

- “Board Certification in Special Education.” *American Academy of Special Education Professionals: American Academy of Special Education Professionals*, 3 June 2021, [aasep.org/](http://aasep.org/).
- Bolton, T., & Plattner, L. (2020). OT role in school-based practice: Perspectives from teachers and OTs. *Journal of OT, Schools, & Early Intervention*, 13(2), 136-146.
- Boshoff, K., & Stewart, H. (2013). Key principles for confronting the challenges of collaboration in educational settings. *Australian OT Journal*, 60(2), 144–147. <https://doi.org/10.1111/1440-1630.12003>
- Braun, V., Clarke, V., & Gray, D. (2017). *Collecting Qualitative Data: Practical Guide to Textual, Media and Virtual Techniques*. Cambridge University Press.
- Case-Smith, J., & O'Brien, J. C. (2014). *OT for children and adolescents-e-book*. Elsevier Health Sciences.
- Case-Smith, J., Weaver, L., & Holland, T. (2014). Effects of a classroom-embedded occupational therapist–teacher handwriting program for first-grade students. *The American Journal of OT*, 68(6), 690-698.

- Case-Smith, J., Holland, T., Lane, A. E., & White, S. W. (2012). Effect of a Coteaching Handwriting Program for First Graders: One-Group Pretest–Posttest Design. *American Journal of OT*, 66(4), 396–405. <https://doi.org/10.5014/ajot.2012.004333>
- Cook, L., & Friend, M. (2010). The state of the art of collaboration on behalf of students with disabilities. *Journal of Educational and Psychological Consultation*, 20(1), 1-8.
- Etikan, I., Musa, S. I., & Alkassim, R. (2016). Comparison of Convenience Sampling and Purposive Sampling. *American Journal of Theoretical and Applied Statistics*, 5(1), 1. <https://doi.org/10.11648/j.ajtas.20160501.11>
- Fossey, E., Harvey, C., McDermott, F., & Davidson, L. (2002). Understanding and Evaluating Qualitative Research. *Australian and New Zealand Journal of Psychiatry*, 36(6), 717–732. <https://doi.org/10.1046/j.1440-1614.2002.01100.x>
- Hernandez, S. J. (2013). Collaboration in special education: its history, evolution, and critical factors necessary for successful implementation. 3(6), 480-498.  
<https://eric.ed.gov/?id=ED544122>
- Huxham, C., & Vangen, S. (2004). Doing things collaboratively: realizing the advantage or succumbing to inertia? *IEEE Engineering Management Review*, 32(4), 11–20. <https://doi.org/10.1109/emr.2004.25132>

- Huxham, C., & Vangen, S. (2013). *Managing to Collaborate*. In *Routledge eBooks*. <https://doi.org/10.4324/9780203010167> Individuals with Disabilities Education Improvement Act. (2004). Pub. L. No. 108 446, 118 Stat. 2647.
- Jacob, J., Boshoff, K., Stanley, R. M., Stewart, H., & Wiles, L. (2017). Interprofessional collaboration within teams comprised of health and other professionals: a systematic review of measurement tools and their psychometric properties. *The Internet Journal of Allied Health Sciences and Practice*. <https://doi.org/10.46743/1540-580x/2017.1631>
- Kelly, A. C., & Tincani, M. (2013). Collaborative Training and Practice among Applied Behavior Analysts who Support Individuals with Autism Spectrum Disorder. *Education and Training in Autism and Developmental Disabilities*, 48(1), 120–131. <https://dialnet.unirioja.es/servlet/articulo?codigo=4161880>
- Marchesi, Á. Martín, E., Sarrionandia, G. E., & Pérez, E. M. D. (2005). Assessment of special educational needs integration by the educational community in Spain. *European Journal of Special Needs Education*, 20(4), 357–374. <https://doi.org/10.1080/08856250500270615>
- Meyers, S. K. (2010). *Community Practice in OT: A Guide to Serving the Community*. Jones & Bartlett Publishers.

- Mitchell, B. (2011). Examining the Role of the Special Educator in a Response to Intervention Model. *Learning Disabilities: A Contemporary Journal*, 10(2), 53–74. <http://files.eric.ed.gov/fulltext/EJ998225.pdf>
- Monsen, J.J., Ewing, D.L. & Kwoka, M., (2014), Teachers' attitudes towards inclusion, perceived adequacy of support and classroom learning environment. *Learning Environ Res* 17, 113–126 (2014). <https://doi.org/10.1007/s10984-013-9144-8>
- Moyers, P. A., & Metzler, C. A. (2014). Interprofessional collaborative practice in care coordination. *The American Journal of OT*, 68(5), 500-505.
- O'Brien, J. C., & Kuhaneck, H. (2019). *Case-Smith's OT for Children and Adolescents – E-Book*. Elsevier Health Sciences.
- Pentek, B. (2018b). *Collaborative Practices in Special Education: An Exploratory Study*
- Register, U. S. O. O. T. F. (2005). *An Act, To Reauthorize the Individuals with Disabilities Education Act, and for Other Purposes . . . , December 3, 2004, Public Law 108-446, \**.
- Truong, V., & Hodgetts, S. (2017). An exploration of teacher perceptions toward OT and OT practices: A scoping review. *Journal of OT, Schools, & Early Intervention*, 10(2), 121-136.



Wasburn-Moses, L. (2005). Roles and responsibilities of secondary special education

teachers in an age of reform. *Remedial and special education*, 26(3), 151-158.


Yüksel, P., & Yıldırım, S. (2015). Theoretical frameworks, methods, and procedures for

conducting phenomenological studies in educational settings. *Turkish online journal of qualitative inquiry*, 6(1), 1-20.

Zaid, N. N., Wahab, R., Kamaralzaman, S., Toran, H., & Ilias, K. Perceptions of

Special Educators towards OT Trainees in a School Setting.

## Appendix A 1: IRB approval letter.



**বাংলাদেশ হেল্থ প্রফেশন্স ইনস্টিটিউট (বিএইচপিআই)**  
**Bangladesh Health Professions Institute (BHPI)**  
 (The Academic Institute of CRP)

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Ref: \_\_\_\_\_ Date: \_\_\_\_\_

CRP/BHPI/IRB/09/22/634 28<sup>th</sup> September, 2022

Saima Hossain  
 4<sup>th</sup> Year B.Sc. In Occupational Therapy  
 Session: 2017-2018 Student ID: **122170283**  
 BHPI, CRP, Savar, Dhaka-1343, Bangladesh

**Subject: Approval of the thesis proposal "Experience on collaborative practice between Special Educators and Occupational Therapists at special school" by ethics committee.**

Dear Saima Hossain  
 Congratulations.  
 The Institutional Review Board (IRB) of BHPI has reviewed and discussed your application to conduct the above-mentioned dissertation, with yourself, Nayan Kumer Chanda as thesis supervisor. The Following documents have been reviewed and approved:

| Sr. No. | Name of the Documents             |
|---------|-----------------------------------|
| 1       | Thesis Proposal                   |
| 2       | Questionnaire                     |
| 3       | Information sheet & consent form. |

The purpose of the study is to determine the experience on collaborative practice between Special Educators and Occupational Therapists at special school. The study involves use of a self-developed interview guide to explore the experience on collaborative practice between Special Educators and Occupational Therapists that may take 60 to 90 minutes to answer the questionnaire and there is no likelihood of any harm to the participants in the study and this studies can explore new information about collaborative practice between Special Educators and Occupational Therapists which will help to formulate new practice to improve our profession to next level. The members of the Ethics committee have approved the study to be conducted in the presented form at the meeting held at 8.30 AM on 27<sup>th</sup> August, 2022. at BHPI (32<sup>nd</sup> IRB Meeting).

The institutional Ethics committee expects to be informed about the progress of the study, any changes occurring in the course of the study, any revision in the protocol and patient information or informed consent and ask to be provided a copy of the final report. This Ethics committee is working accordance to Nuremberg Code 1947, World Medical Association Declaration of Helsinki, 1964 - 2013 and other applicable regulation.

Best regards,

Muhammad Millat Hossain  
 Associate Professor, Dept. of Rehabilitation Science  
 Member Secretary, Institutional Review Board (IRB)  
 BHPI, CRP, Savar, Dhaka-1343, Bangladesh

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সিআরপি-চাপাইন, সাভার, ঢাকা-১৩৪৩, বাংলাদেশ। ফোন: +৮৮ ০২ ২২৪৪৪৫৪৬৪-৫, +৮৮ ০২ ২২৪৪৪১৪০৪, মোবাইল: +৮৮ ০১৭৩০ ০৫৯৬৪৭  
 CRP-Chapain, Savar, Dhaka-1343, Bangladesh. Tel: +88 02 224445464-5, +88 02 224441404, Mobile: +88 01730059647  
 E-mail : principal-bhpi@crp-bangladesh.org. Web: bhpi.edu.bd

## Appendix A 2: Permission letters from study settings

Date:

To

Anima Das Nupur,

Executive Director and Senior Occupational Therapist,

Dream Angels Centre for Autistic Children (DACAC),

House No-18-19, Siddique Bhaban, Avenue, Road No. 4, Dhaka 1216

**Subject:** An application for seeking permission for collecting the data to conduct the research at your institute.

Dear Sir,

With due respect and humble submission to state that I am Saima Hossain, student of 4<sup>th</sup> year, B.Sc. in Occupational Therapy at Bangladesh Health Professions Institute (BHPI), the academic institute of Centre for the Rehabilitation of the Paralysed (CRP). I am sincerely seeking permission for collecting the data to conduct my research as the part of fulfillment of the requirements of the degree of B.Sc. in Occupational Therapy at your institute. The title of my research is "Experience on collaborative practice between Special Educators and Occupational Therapists at special school."

The aim of this study is to explore experience on collaborative practice between Special Educators and Occupational Therapists at special school.

I, therefore, pray and hope that you would be kind enough to grant my application and give me permission of collecting the data from the Special Educator and Occupational Therapist of your institute and will help me to complete a successful study as a part of my course.

Sincerely Yours,

*Saima Hossain*

Saima Hossain

Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

*Date: 13.11.22*  
*Received*  
  
*13 NOV -22*

*Forwarded for your kind consideration  
 and permission for data collection  
 to conduct her research.*

*Saima Hossain*  
*05/11/2022*  
 S.K. Moniruzzaman  
 Associate Professor & Head  
 Dept. of Occupational Therapy  
 BHPI CRP Savar Dhaka 1343

Date:

To

Anima Das Nupur,

Executive Director and Senior Occupational Therapist,

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Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

Date: 13.11.22  
 Received  
 4-11-22  
 GM  
 DACAC  
 13 Nov -22

Forwarded for your kind consideration  
 and permission for data collection  
 to conduct her research.

S. M. M. M. M.  
 05/11/2022  
 Ssk. Moniruzzaman  
 Associate Professor & Head  
 Dept. of Occupational Therapy  
 BHPI (CRP) Savar, Dhaka 1343

Date:

To

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Saima Hossain

Saima Hossain

Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

DATE: 13.11.22  
Received  
FM  
DACAC  
13 NOV - 22

Forwarded for your kind consideration  
and permission for data collection  
to conduct her research.

S. M. M. M. M.  
05/11/2022

Ssk. Moriruzzaman  
Associate Professor & Head  
Dept. of Occupational Therapy  
BHPI (CRP) Savar, Dhaka 1343

Date: 28.11.22

To

Chairperson,

Autism Welfare Foundation (AWF),

Moddher Char, Shamlapur, Keranigonj Model Thana, Dhaka- 1312

**Subject:** An application for seeking permission for collecting the data to conduct the research at your institute.

Dear Sir,

With due respect and humble submission to state that I am Saima Hossain, student of 4<sup>th</sup> year, B.Sc. in Occupational Therapy at Bangladesh Health Professions Institute (BHPI); the academic institute of Centre for the Rehabilitation of the Paralysed (CRP). I am sincerely seeking permission for collecting the data to conduct my research as the part of fulfillment of the requirements of the degree of B.Sc. in Occupational Therapy at your institute. The title of my research is "Experience on collaborative practice between Special Educators and Occupational Therapists at special school."

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Sincerely Yours,

Saima Hossain

Saima Hossain

Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

*Foris 28.11.22*  
DR. ROHMAN HATEZ  
CHAIRPERSON  
AUTISM WELFARE FOUNDATION

*Forwarded for your kind  
consideration & permission  
for data collection to  
conduct her research.*

*Su. Masud  
22/11/22*

Sk. Mohiruzzaman  
Associate Professor & Head  
Dept. of Occupational Therapy  
BHPI, CRP, Savar, Dhaka-1343

Date:

To

Principal,

Prottasha Centre for Autism Care,

CRP, Savar, Dhaka-1343

**Subject:** An application for seeking permission for collecting the data to conduct the research at your institute.

Dear Sir,

With due respect and humble submission to state that I am Saima Hossain, student of 4<sup>th</sup> year. B.Sc. in Occupational Therapy at Bangladesh Health Professions Institute (BHPI); the academic institute of Centre for the Rehabilitation of the Paralysed (CRP). I am sincerely seeking permission for collecting the data to conduct my research as the part of fulfillment of the requirements of the degree of B.Sc. in Occupational Therapy at your institute. The title of my research is "Experience on collaborative practice between Special Educators and Occupational Therapists at special school."

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Sincerely Yours,

*Saima Hossain*

Saima Hossain

Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

*Forwarded for your kind consideration  
and permission for data collection  
to conduct her research.*

*Nazmun Nahar Naz*

*N.N.*  
*07.11.2022*

*clinical occupational therapist*

*S. M. Nazmun*  
Sk. Nazmun  
Associate Professor & Head  
Dept. of Occupational Therapy  
BHPI, CRP, Savar, Dhaka-1343

Date: 13.11.22

The Chairperson,

Society for the Welfare of Autistic Children,

House- 279, Road-1, Baitul Aman Housing Society, Dhaka 1207

**Subject:** An application for seeking permission for collecting the data to conduct the research at your institute.

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Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

Forwarded for your kind consideration  
and permission for data collection  
to conduct her research,

Signed  
05/11/2022

Sk. Moniruzzaman  
Associate Professor & Head  
Dept. of Occupational Therapy  
BHPI, CRP, Savar, Dhaka-1343

Saima  
13.11.22



Date:

To

Principal,

Ingenious Care Limited,

Block-A, House-108 Rd 4, Dhaka 1216

**Subject:** An application for seeking permission for collecting the data to conduct the research at your institute.

Dear Sir,

With due respect and humble submission to state that I am Saima Hossain, student of 4<sup>th</sup> year, B.Sc. in Occupational Therapy at Bangladesh Health Professions Institute (BHPI); the academic institute of Centre for the Rehabilitation of the Paralysed (CRP). I am sincerely seeking permission for collecting the data to conduct my research as the part of fulfillment of the requirements of the degree of B.Sc. in Occupational Therapy at your institute. The title of my research is "Experience on collaborative practice between Special Educators and Occupational Therapists at special school."

The aim of this study is to explore experience on collaborative practice between Special Educators and Occupational Therapists at special school.

I, therefore, pray and hope that you would be kind enough to grant my application and give me permission of collecting the data from the Special Educator and Occupational Therapist of your institute and will help me to complete a successful study as a part of my course.

Sincerely Yours,

*Saima Hossain*

Saima Hossain

Roll: 22

Session: 2017-2018

4<sup>th</sup> year, B.Sc. in Occupational Therapy,

Bangladesh Health Professions Institute (BHPI)

CRP, Chapain, Savar, Dhaka-1343.

*Approved*  
*Nazmul Huda*  
Nazmul Huda  
Managing Director  
Ingenious Care Limited

*Forwarded for your kind consideration & permission for data collection to conduct her research.*

*Summe*  
*22/11/2022*  
Sk. Moniruzzaman  
Associate Professor & Head  
Dept. of Occupational Therapy  
BHPI, CRP, Savar, Dhaka-1343

**Appendix B: Information sheet and consent form (English version)****Bangladesh Health Professions Institute (BHPI)****Department of OT**

CRP- Chapain, Savar, Dhaka-1343. Tel: 02-7745464-5, 7741404, Fax: 02-774506

Code no.: .....

**Information sheet, Consent & Withdrawal Form for the research participants**

**Title:** Experience on collaborative practice between Special Educators and Occupational Therapists at special school.

**Investigator:** Saima Hossain, 4th year student of B.Sc. in OT, Session: 20172018, Bangladesh Health Professions Institute (BHPI) CRP- Savar, Dhaka1343. Supervisor: Nayan Kumer Chanda, Assistant Professor, Bangladesh Health Professions (BHPI), CRP, Chapain, Savar, Dhaka-1343.

**Place:** The researcher will gather data from special schools of Dhaka city.

## **Information Sheet**

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### **Introduction**

I am Saima Hossain, under medicine faculty of Dhaka University I am continuing my 4th year (session 2017-2018) B.Sc. in OT of Bangladesh Health Professions Institute (BHPI). A thesis work is conducted under thesis supervisor, Nayan Kumer Chanda. By this information sheet investigator presented detailed information about the study purpose, data collection process, ethical issues. If you are interested to participate in this study, then clear information about the study will help you to easily make decision. Now you do not have to decide whether you will participate in the research or not. Before you decide, you can talk to your relatives, friends or anyone feel comfortable with about the research. If this consent form contains some words that you do not understand, please ask me to stop. I will take time to explain. Information about the study participants will be kept confidential and the aim of the study will be informed to the participants. If you cannot understand any part of the investigation, investigator will help you to understand.

### **Background and the purpose of the study**

You are being invited to be a part of this research because special schools at Bangladesh are being developed day by day and this schools ensures a bright future for the special child. Occupational Therapists and Special Educators works together to provide with not only the academic service but also with proper grooming about daily living activities and

others survival skills to make child independent as much as possible. This area has been researched in many ways and helped me to identify the limitations where I can work at. By this research the investigator will be able to identify the overall experience of Special Educators and Occupational Therapists about collaboration in special school. After knowing about their experiences with advantage, disadvantage, facilities and barriers it will be easier to other Special Educators and Occupational Therapists to know how to overcome barriers and make use of facilities to enhance the collaboration furthermore.

### **Research related information**

The research related information will be discussed with you throughout the information sheet before taking your signature on consent form. After that participants will be asked to answer an open-ended, self-developed questionnaire which may need approximately 30 to 60 minutes to end. In this questionnaire there will be questions on socio-demographic factors (for example: organization name, participant name, age, sex etc.). It will also contain some open-ended questions.

The data collection period is two months followed by the date of approval. During that time, the investigator will come to you and do face to face interview. If you do not wish the questions included in the survey, you may skip them and move on to the next question. The information recorded is confidential, your name is not being included on the forms,

only a number will identify you, and no one else except Nayan Kumer Chanda, Supervisors of the study will have access to this survey.

### **Voluntary participation**

The choice that you make will have no effect on your community and corporate lifestyle. You can change your mind at any time of the data collection process even throughout the study period. You have also right to refuse your participation even if you agreed earlier.

### **Right to refuse or withdraw**

I will give you an opportunity at the end of the interview of your remarks, and you can ask to modify or remove portions of those, if you do not agree with my notes or if I did not understand you correctly.

### **Risk and benefit**

By participating in this study, you may not have any direct benefit. But we are expecting that, finding from the study will be helpful for the Special Educators and Occupational Therapists from different schools. It will be expecting that there is no risk in this study. Information for this study will be collected without hampering the everyday activities and co-relation with others person in your working area.

**Confidentiality of the study**

Information about you will not be shared to anyone outside of the research team. The information that we collect from this research project will be kept private. Any information about you will have a number on it instead of your name. Only the researchers will know what your number is, and we will lock that information up with a lock and key. It will not be shared with or given to anyone except Nayan Kumer Chanda, study supervisor.

**Information about publication of the study findings**

The findings from this study will be published in social site, web site, conference, and journal.

**Participant's wage**

Participants will not get any wages for participating in this study.

**Source of money for this study**

All money that will be needed for this study will collected from investigator own source. This study will be conduct in a small range and any external source is not available for this research.

## **How to contact**

If you have any questions, you can ask me now or later. If you wish to ask questions later, you may contact the student investigator Saima Hossain, Bachelor of Science in OT, Department of OT. By using this e-mail: [hossainsayma788@gmail.com](mailto:hossainsayma788@gmail.com), contact number: +8801747950966. This proposal has been reviewed and approved by Institutional Review Board (IRB), Bangladesh Health Professions Institute (BHPI), CRP-Savar, Dhaka-1343, Bangladesh, which is a committee whose task is to make sure that research participants are protected from harm. If you wish to find about more about the IBR, contact Bangladesh Health Professions Institute (BHPI), CRP-Savar, Dhaka1343, and Bangladesh. You can ask me any more questions about any part of the research study if you wish to. Do you have any questions?

## **Can you withdraw from this study?**

You can cancel any information collected for this research project at any time. After the cancellation, we expect permission from the information whether it can be used or not.

## Participants Consent Form

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### Statement by Participants

I have been invited to participate in research titled Experience on collaborative practice between Special Educators and Occupational Therapists at special schools. I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions I have been asked I got satisfactory answer. I consent voluntary to be a participant in this study.

Name of the participant: .....

Signature of participant: .....

Date:

.....

### Statement by the researcher taking consent

I have accurately read out information sheet to the potential participant, and to the best of my ability made sure that the participant understands that the following will be done:

1. All information will be used for study
2. All information should be kept confidential



3. Do not published the name and identity of the participants

I confirm that the participant was given an opportunity to ask questions about the study, and all the question asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been forced into giving consent, and the consent has been given freely and voluntary.

**A copy of information sheet and consent form has been provided to the participant**

Name of investigator: .....

Signature of investigator: .....

Date: .....

## Withdrawal Form

---

Participants Name

.....

Reason of Withdraw: .....

.....

.....

Participants Signature: .....

Date .....

## Appendix B: Information sheet and consent form (Bangla Version)

বাংলাদেশ হেলথ প্রফেশন্স ইন্সটিটিউট (বিএইচপিআই)

অকুপেশনাল থেরাপী বিভাগ

সিআরপি-চাপাইন, সাভার, ঢাকা-১৩৪৩

টেলিঃ ০২-৭৭৪৫৪৬৪-৫, ৭৭৪১০৪, ফ্যাক্সঃ ০২-৭

কোড  
নংঃ..  
....

### অংশগ্রহণকারীদের তথ্য ও সম্মতিপত্র

**গবেষণার বিষয়ঃ** বিশেষ বিদ্যালয়ে শিক্ষকগণ ও অকুপেশনাল থেরাপীস্টদের মধ্যে সহযোগীতামূলক অনুশীলনের অভিজ্ঞতা।

**গবেষকঃ** সায়মা হোসেন, বি এস সি ইন অকুপেশনাল থেরাপী (৪র্থ বর্ষ), সেশনঃ ২০১৭-২০১৮ ইং  
, বাংলাদেশ হেলথ প্রফেশন্স ইন্সটিটিউট (বিএইচপিআই), সাভার, ঢাকা-১৩৪৩

**তত্ত্বাবধায়কঃ** নয়ন কুমার চন্দ, সহকারী অধ্যাপক, অকুপেশনাল থেরাপী বিভাগ, বাংলাদেশ হেলথ প্রফেশন্স ইন্সটিটিউট (বিএইচপিআই)

**গবেষণার স্থানঃ** ঢাকার অধীনস্থ বিশেষ বিদ্যালয়সমূহ।

## তথ্যপত্র

### পরিচিতি

আমি সায়মা হোসেন, ঢাকা বিশ্ববিদ্যালয় চিকিৎসা অনুষদের অধীনে বাংলাদেশ হেলথ প্রফেশন্স ইন্সটিটিউটে বি.এস.সি ইন অকুপেশনাল থেরাপী ৪র্থ বর্ষের শিক্ষার্থী হিসেবে স্নাতক শিক্ষাকার্যক্রম (২০১৭-২০১৮ ইং), সেশনে অধ্যয়নরত আছি। বিএইচপিআই থেকে অকুপেশনাল থেরাপি বি.এস.সি শিক্ষাকার্যক্রমটি সম্পন্ন করার জন্য একটি গবেষণা প্রকল্প পরিচালনা করা বাধ্যতামূলক। এই গবেষণা প্রকল্পটি অকুপেশনাল থেরাপী বিভাগের সহকারী অধ্যাপক নয়ন কুমার চন্দ এর তত্ত্বাবধায়নে সম্পন্ন করা হবে। এই অংশগ্রহণকারী তথ্যপত্রের গবেষণা প্রকল্পের উদ্দেশ্য, উপাত্ত সংগ্রহের প্রণালী ও গবেষণাটি সাথে সংশ্লিষ্ট বিষয় কিভাবে রক্ষিত হবে তা বিস্তারিত ভাবে আপনার কাছে উপস্থাপন করা হবে। যদি এই গবেষণায় অংশগ্রহণ করতে ইচ্ছুক থাকেন সেক্ষেত্রে গবেষণা সম্পৃক্ত বিষয় সম্পর্কে স্বচ্ছ ধারণা থাকলে সিদ্ধান্তগ্রহণ সহজতর হবে। অবশ্য এখন আপনার অংশগ্রহণ আমাদের নিশ্চিত করতে হবে না। যেকোনো সিদ্ধান্ত গ্রহণের পূর্বে যদি চান তাহলে আপনার আত্মীয়-স্বজন, বন্ধু অথবা আস্থাজনন যে কারো সাথে এই ব্যাপারে আলোচনা করে নিতে পারেন। অপরপক্ষে, অংশগ্রহণকারী তথ্যটি পড়ে যদি কোনো বিষয়বস্তু বুঝতে সমস্যা হয় অথবা যদি কোন কিছু সম্পর্কে আরও বেশি জানার প্রয়োজন হয়, তবে নির্দিধায় প্রশ্ন করতে পারেন।

### গবেষণার প্রেক্ষাপট ও উদ্দেশ্য

আপনাকে এই গবেষণার অংশ হওয়ার জন্য আমন্ত্রণ জানানো হচ্ছে কারণ বাংলাদেশে বিশেষ স্কুলগুলি দিনে দিনে গড়ে উঠছে এবং এই স্কুলগুলি বিশেষ শিশুর উজ্জ্বল ভবিষ্যত নিশ্চিত করে। অকুপেশনাল

থেরাপিস্ট এবং বিশেষ শিক্ষকগণ একসাথে কাজ করে শুধুমাত্র একাডেমিক সেবাই প্রদান করতে নয় বরং দৈনন্দিন জীবনযাত্রার ক্রিয়াকলাপ এবং অন্যদের বেঁচে থাকার দক্ষতা সম্পর্কে যথাযথ প্রস্তুতির সাথে সাথে শিশুকে যতটা সম্ভব স্বাধীন করে তুলতে পারে। এই বিষয়টি বিভিন্ন উপায়ে গবেষণা করা হয়েছে এবং আমি যেখানে কাজ করতে পারি সেই সীমাবদ্ধতাগুলি সনাক্ত করতে আমাকে সাহায্য করেছে। এই গবেষণার মাধ্যমে গবেষক বিশেষ স্কুলে সহযোগিতার বিষয়ে বিশেষ শিক্ষাবিদ এবং অকুপেশনাল থেরাপিস্টদের সামগ্রিক অভিজ্ঞতা সনাক্ত করতে সক্ষম হবেন। সুবিধা, অসুবিধা, সুযোগ-সুবিধা এবং প্রতিবন্ধকতা নিয়ে তাদের অভিজ্ঞতা সম্পর্কে জানার পর অন্যান্য বিশেষ শিক্ষাবিদ এবং অকুপেশনাল থেরাপিস্টদের কাছে কীভাবে বাধাগুলি অতিক্রম করতে হয় এবং সহযোগিতাকে আরও উন্নত করতে সুবিধাগুলি ব্যবহার করতে হয় তা জানা সহজ হবে।

### ঐচ্ছিক অংশগ্রহণ

আপনি যে পছন্দটি করবেন তা আপনার সম্প্রদায় এবং কর্পোরেট জীবনধারার উপর কোন প্রভাব ফেলবে না। আপনি ডেটা সংগ্রহের প্রক্রিয়ার যেকোন সময় এমনকি পুরো অধ্যয়নের সময় জুড়ে আপনার মন পরিবর্তন করতে পারেন। আপনি আগে সম্মত হলেও আপনার অংশগ্রহণ প্রত্যাখ্যান করার অধিকার আপনার আছে।

### অংশগ্রহণের সুবিধা ও ঝুঁকিসমূহ কি?

গবেষণা প্রকল্পটিতে অংশগ্রহণের জন্য আপনি সরাসরি কোন সুবিধা পাবেন না। এই গবেষণায় অংশগ্রহণের ফলে আপনার দৈনন্দিন কাজের সাময়িক অসুবিধা হতে পারে। তবে আমি আশাবাদী যে এই গবেষণার প্রাপ্ত ফলাফলের মাধ্যমে সংঘটিত সমস্যা ও অসুবিধা গুলোর সমাধান হবে। যে সমস্ত প্রশ্নের মাধ্যমে আপনার পরিচয় সম্পর্কে অন্যরা জানতে পারে, সে বিষয়ে উদ্বিগ্ন না হওয়ায়

জন্য অনুরোধ করা হচ্ছে অংশগ্রহণকারীর নাম, ঠিকানা উপাত্ত বিশ্লেষণের সফটওয়্যারে উল্লেখ না করে পরিচয় উন্মুক্ত হবার ঝুঁকি কমানো হবে।

### অধ্যয়নের গোপনীয়তা

আপনার সম্পর্কে তথ্য গবেষণা দলের বাইরে কারো সাথে শেয়ার করা হবে না। এই গবেষণা প্রকল্প থেকে আমরা যে তথ্য সংগ্রহ করি তা গোপন রাখা হবে। আপনার সম্পর্কে যেকোনো তথ্য আপনার নামের পরিবর্তে একটি নম্বর থাকবে। শুধুমাত্র গবেষকরা জানতে পারবেন আপনার নম্বর কী, এবং আমরা সেই তথ্যটি একটি তালা এবং চাবি দিয়ে লক করে দেব। এটি অধ্যয়নের তত্ত্বাবধায়ক নয়ন কুমার চন্দ ছাড়া অন্য কারো সাথে শেয়ার করা বা দেওয়া হবে না।

### গবেষণার ফলাফল প্রকাশের তথ্য

এই গবেষণার ফলাফলগুলি সামাজিক সাইট, ওয়েব সাইট, সম্মেলন এবং জার্নালে প্রকাশিত হবে।

### অংশগ্রহণকারীর পারিশ্রমিক

অংশগ্রহণকারীরা এই গবেষণায় অংশগ্রহণের জন্য কোনো পারিশ্রমিক পাবেন না।

### গবেষণা পরিচালনায় ব্যয়কৃত অর্থের উৎসঃ

এই গবেষণার জন্য প্রয়োজনীয় সমস্ত অর্থ তদন্তকারীর নিজস্ব উৎস থেকে সংগ্রহ করা হবে। এই গবেষণাটি একটি ছোট পরিসরে পরিচালনা করা হবে এবং এই গবেষণার জন্য কোনও বাহ্যিক উৎস উপলব্ধ নেই।

**আমাদের সাথে কিভাবে যোগাযোগ করবেন?**

যদি আপনার কোন প্রশ্ন থাকে, আপনি এখন বা পরে আমাকে জিজ্ঞাসা করতে পারেন। আপনি যদি পরে প্রশ্ন করতে চান, তাহলে আপনি শিক্ষার্থী গবেষক সায়মা হোসেন, ব্যাচেলর অফ সায়েন্স ইন অকুপেশনাল থেরাপি, অকুপেশনাল থেরাপি বিভাগের সাথে যোগাযোগ করতে পারেন। এই ই-মেইলটি ব্যবহার করে: [hossainsayma788@gmail.com](mailto:hossainsayma788@gmail.com), যোগাযোগ নম্বর: +8801747950966। এই প্রস্তাবটি ইনস্টিটিউশনাল রিভিউ বোর্ড (IRB), বাংলাদেশ হেলথ প্রফেশন্স ইনস্টিটিউট (BHPI), CRP-সভার, ঢাকা-1343, বাংলাদেশ দ্বারা পর্যালোচনা ও অনুমোদিত হয়েছে, যা একটি কমিটি যার কাজ হল গবেষণায় অংশগ্রহণকারীদের ক্ষতি থেকে সুরক্ষিত করা নিশ্চিত করা। . আপনি যদি IRB সম্পর্কে আরও জানতে চান, তাহলে Bangladesh Health Professions Institute (BHPI), CRP-Savar, Dhaka-1343, Bangladesh-এ যোগাযোগ করুন। আপনি যদি চান তবে গবেষণা অধ্যয়নের যেকোনো অংশ সম্পর্কে আমাকে আরও প্রশ্ন করতে পারেন।

আপনি কি কিছু জানতে চান?

**আপনি এই গবেষণা থেকে প্রত্যাহার করতে পারেন?**

আপনি যেকোনো সময় এই গবেষণা প্রকল্পের জন্য সংগৃহীত তথ্য বাতিল করতে পারেন। বাতিল করার পরে, আমরা তথ্য থেকে অনুমতি আশা করি এটি ব্যবহার করা যাবে কি না।

## অংশগ্রহণকারীদের সম্মতি ফর্ম

### অংশগ্রহণকারীদের বিবৃতিঃ

বিশেষ স্কুলে বিশেষ শিক্ষক এবং পেশাগত থেরাপিস্টদের মধ্যে সহযোগিতামূলক অনুশীলনের অভিজ্ঞতা শীর্ষক গবেষণায় অংশগ্রহণের জন্য আমাকে আমন্ত্রণ জানানো হয়েছে। আমি পূর্বোক্ত তথ্য পড়েছি, বা এটি আমাকে পড়া হয়েছে। আমি এটি সম্পর্কে প্রশ্ন জিজ্ঞাসা করার সুযোগ পেয়েছি এবং আমাকে যে কোন প্রশ্ন জিজ্ঞাসা করা হয়েছে আমি সন্তোষজনক উত্তর পেয়েছি। আমি এই গবেষণায় অংশগ্রহণকারী হতে স্বেচ্ছায় সম্মতি দিচ্ছি।

অংশগ্রহণকারীর নাম: .....

অংশগ্রহণকারীর স্বাক্ষর: .....

তারিখ: .....

### সম্মতি গ্রহণকারী গবেষকের বিবৃতি

আমি সম্ভাব্য অংশগ্রহণকারীর কাছে তথ্য পত্রটি সঠিকভাবে পড়েছি, এবং আমার সর্বোত্তম ক্ষমতা নিশ্চিত করেছি যে অংশগ্রহণকারী বুঝতে পারে যে নিম্নলিখিতগুলি করা হবে:

১. সমস্ত তথ্য অধ্যয়নের জন্য ব্যবহার করা হবে

২. সমস্ত তথ্য গোপন রাখা উচিত

৩. অংশগ্রহণকারীদের নাম ও পরিচয় প্রকাশ করবেন না



আমি নিশ্চিত করছি যে অংশগ্রহণকারীকে অধ্যয়ন সম্পর্কে প্রশ্ন জিজ্ঞাসা করার সুযোগ দেওয়া হয়েছিল এবং অংশগ্রহণকারীর দ্বারা জিজ্ঞাসা করা সমস্ত প্রশ্নের সঠিকভাবে এবং আমার ক্ষমতার সেরা উত্তর দেওয়া হয়েছে। আমি নিশ্চিত করছি যে ব্যক্তিকে সম্মতি দিতে বাধ্য করা হয়নি, এবং সম্মতি অবাধে এবং স্বেচ্ছায় দেওয়া হয়েছে।

তথ্য পত্রের একটি অনুলিপি এবং সম্মতি ফর্ম অংশগ্রহণকারীকে প্রদান করা হয়েছে

তদন্তকারীর নাম: .....

তদন্তকারীর স্বাক্ষর: .....

তারিখ: .....

## প্রত্যাহার ফর্ম

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অংশগ্রহণকারীদের নাম

.....

প্রত্যাহারের কারণ: .....

.....

.....

অংশগ্রহণকারীদের স্বাক্ষর: .....

তারিখ .....

**Appendix C 1: Self-developed questionnaire (English version)****Self-Developed Questionnaire****For Occupational Therapist:****PART-A: Socio-demographic questions**

1. Participants Name:
2. Age:
3. Gender:
4. Educational Qualification:
5. Organization Name:
6. Working experience in this organization:

**PART-B: Semi-structured in-depth questionnaire**

All these questions are developed according to researcher's objective and purpose. Researcher set these questions in a self-directed way and with help of associated articles.

1. What is your role in this special school? How do you implement your individual role for the students?
2. How much you know about Special Educators role and responsibilities? Is there any necessity of Special Educator to treat a child with disability?

3. What is your own understanding about collaborative practice? How do you practice of collaboration with Special Educators in your organization?
4. How does it supports if you and Special Educator treat the same child? Is that worthy enough?
5. Tell me some advantages of collaboration with Special Educators.
6. Can you tell me about how the timing and schedules for collaborative practices are decided?
7. Is there any changes of collaborative working pattern according to disability types, age range or other associated factor?
8. What types of opportunities you get to collaborate with Special Educators at your institute and outside also?
9. What about Individualized Education Plan (IEP) at your institute? How do you plan OT Intervention on IEP through collaboration?
10. When trying to collaborate about the plan of IEP of a child with a Special Educator, do you think that Special Educators presence is must there? What do they really serves for?
11. Can you tell me about things you have experienced that have been facilitators to collaboration with a Special Educator? Any case/ examples?
12. What kind of barriers did you face while collaborating with each other? Had any experience/Case?
13. Is there any disadvantage of collaboration? Any experience to share?

14. Do you ever feel that there may have been conflicting or duplication of OT services with Special Educators?
15. If you ever had any duplication of work how did you managed or you will manage in future? Is there any suggestion for preventing this situation?
16. Do you think our collaboration with Special Educators should be increased more? Why? Why not?
17. What do you think it should be done to increase collaboration between Special Educators and Occupational Therapists? Share your valuable suggestion towards both Occupational Therapists and Special Educators.

**For Special Educators:****PART-A: Socio-demographic questions**

1. Participants Name:
2. Age:
3. Gender:
4. Educational Qualification:
5. Organization Name:
6. Working experience in this organization:

**PART-B: Semi-structured in-depth questionnaire**

All these questions are developed according to researcher's objective and purpose. Researcher set these questions in a self-directed way and with help of associated articles.

1. What is your role in this special school? How do you implement your individual role for the students?
2. How much you know about occupational therapists role and responsibilities? Is there any necessity of occupational therapists to treat a child with disability?
3. What is your own understanding about collaborative practice? How do you practice of collaboration with occupational therapists in your organization?
4. How does it supports if you and occupational therapist treat the same child? Is that worthy enough?

5. Tell me some advantages of collaboration with occupational therapist.
6. Can you tell me about how the timing and schedules for collaborative practices are decided?
7. Is there any changes of collaborative working pattern according to disability types, age range or other associated factor?
8. What types of opportunities you get to collaborate with occupational therapists at your institute and outside also?
9. What about Individualized Education Plan (IEP) at your institute? How do you plan for special education on IEP through collaboration?
10. When trying to collaborate about the plan of IEP of a child with a occupational therapist, do you think that occupational therapists presence is must there? What do they really serves for?
11. Can you tell me about things you have experienced that have been facilitators to collaboration with a occupational therapist? Any case/ examples?
12. What kind of barriers did you face while collaborating with each other? Had any experience/Case?
13. Is there any disadvantage of collaboration? Any experience to share?
14. Do you ever feel that there may have been conflicting or duplication of special education services with occupational therapists?

15. If you ever had any duplication of work how did you managed or you will manage in future? Is there any suggestion for preventing this situation?

16. Do you think our collaboration with occupational therapists should be increased more? Why? Why not?

17. What do you think it should be done to increase collaboration between Special Educators and Occupational Therapists? Share your valuable suggestion towards both Occupational Therapists and Special Educators.



## Appendix C 2: Self-developed questionnaire (Bangla version)

### স্ব-উদ্ভাবিত প্রশ্নাবলী

#### অকুপেশনাল থেরাপিস্ট এর জন্যঃ

প্রথম অংশঃ

অকুপেশনাল থেরাপিস্টঃ

বয়সঃ

লিঙ্গঃ

শিক্ষাগত যোগ্যতাঃ

প্রতিষ্ঠানের নামঃ

বর্তমান প্রতিষ্ঠানে কাজের অভিজ্ঞতাঃ

#### দ্বিতীয় অংশঃ

১. এই বিশেষ বিদ্যালয়ে আপনার ভূমিকা কি? আপনি কিভাবে ছাত্রদের জন্য আপনার ব্যক্তিগত ভূমিকা

বাস্তবায়ন করেন?

২. আপনি একজন বিশেষ শিক্ষক এর পেশাগত কার্যক্রম এবং দায়িত্ব সম্পর্কে কতটা জানেন? প্রতিবন্ধী

শিশুর চিকিৎসার জন্য কি বিশেষ শিক্ষকের প্রয়োজন আছে?

৩. সহযোগিতামূলক কার্যক্রম সম্পর্কে আপনার নিজের উপলব্ধি কি? আপনি কীভাবে আপনার প্রতিষ্ঠানে বিশেষ শিক্ষক এর সাথে সহযোগিতামূলক কার্যক্রম সম্পন্ন করেন?
৪. একই শিশুকে আপনি এবং একজন বিশেষ শিক্ষক সেবা প্রদান করছেন, এ ব্যাপারটি আপনি কীভাবে সমর্থন করেন? এটি কি যথেষ্ট যোগ্য?
৫. বিশেষ শিক্ষক এর সাথে সহযোগিতার কিছু সুবিধা আমাকে বলুন।
৬. সহযোগিতামূলক অনুশীলনের সময় এবং সময়সূচী কীভাবে নির্ধারণ করা হয়?
৭. অক্ষমতার ধরন, বয়সসীমা বা অন্যান্য সংশ্লিষ্ট কারণ অনুযায়ী সহযোগিতামূলক কাজের ধরণে কোন পরিবর্তন আছে কি?
৮. আপনার প্রতিষ্ঠানে এবং বাইরে বিশেষ শিক্ষক এর সাথে সহযোগিতা করার জন্য আপনি কী ধরনের সুযোগ পান?
৯. আপনার প্রতিষ্ঠানের ইন্ডিভিজুয়লাইজড এডুকেশনাল প্ল্যান (IEP) সম্পর্কে কিছু বলুন? সহযোগিতার মাধ্যমে আপনি কীভাবে IEP-তে বিশেষ শিক্ষক এর কার্যক্রম পরিকল্পনা করবেন?

১০. যখন একজন বিশেষ শিক্ষক এর সাথে একটি শিশুর IEP পরিকল্পনা সম্পর্কে সহযোগিতামূলক কাজ করা হয়, তখন আপনি কি মনে করেন যে সেখানে বিশেষ শিক্ষক এর উপস্থিতি আবশ্যিক? তারা মূলত কি কাজ করে থাকেন এ ক্ষেত্রে?

১১. একজন বিশেষ শিক্ষক এর সাথে কাজের ক্ষেত্রে আপনার কোন অভিজ্ঞতা আছে কি বলার মত যা আপনাদের সহযোগিতামূলক কাজে সাহায্য করেছে?কোন ঘটনা বা উদাহরণ বলতে পারেন কি?

১২. একে অপরের সাথে সহযোগিতামূলক কাজ করার সময় আপনি কোন ধরনের বাধার সম্মুখীন হয়েছেন? কোন অভিজ্ঞতা/উদাহরণ?

১৩. সহযোগিতামূলক কাজের কোন অসুবিধা আছে কি?কোন অভিজ্ঞতা বা উদাহরণ থাকলে বলতে পারেন?

১৪. আপনি কি কখনও মনে করেন যে বিশেষ শিক্ষকদের সাথে অকুপেশনাল থেরাপীর পরিষেবাগুলির বিরোধিতা বা অনুলিপি হতে পারে?

১৫. যদি কখনও কাজের কোনো ডুপ্লিকেশন থাকে তাহলে আপনি তা কীভাবে পরিচালনা করেছেন বা ভবিষ্যতে এ সমস্যা সমাধান করবেন? এই পরিস্থিতি প্রতিরোধ করার জন্য আপনার কোন পরামর্শ আছে কি ?

১৬. আপনি কি মনে করেন বিশেষ শিক্ষকদের সাথে আপনাদের সহযোগিতামূলক কাজ আরও বাড়ানো

উচিত? কেন? কেন না?

১৭. বিশেষ শিক্ষাবিদ এবং অকুপেশনাল থেরাপিস্টদের মধ্যে সহযোগিতা বাড়ানোর জন্য কী করা উচিত

বলে আপনি মনে করেন? অকুপেশনাল থেরাপিস্ট এবং বিশেষ শিক্ষক উভয়ের প্রতি আপনার মূল্যবান

পরামর্শ শেয়ার করুন।

## বিশেষ শিক্ষক এর জন্যঃ

প্রথম অংশঃ

বিশেষ শিক্ষকঃ

বয়সঃ

লিঙ্গঃ

শিক্ষাগত যোগ্যতাঃ

প্রতিষ্ঠানের নামঃ

বর্তমান প্রতিষ্ঠানে কাজের অভিজ্ঞতাঃ

## দ্বিতীয় অংশঃ

১. এই বিশেষ বিদ্যালয়ে আপনার ভূমিকা কি? আপনি কিভাবে ছাত্রদের জন্য আপনার ব্যক্তিগত ভূমিকা

বাস্তবায়ন করেন?

২. আপনি একজন অকুপেশনাল থেরাপিস্ট এর পেশাগত কার্যক্রম এবং দায়িত্ব সম্পর্কে কতটা জানেন?

প্রতিবন্ধী শিশুর চিকিৎসার জন্য কি বিশেষ শিক্ষকের প্রয়োজন আছে?

৩. সহযোগিতামূলক কার্যক্রম সম্পর্কে আপনার নিজের উপলব্ধি কি? আপনি কীভাবে আপনার প্রতিষ্ঠানে

অকুপেশনাল থেরাপিস্ট এর সাথে সহযোগিতামূলক কার্যক্রম সম্পন্ন করেন?

৪. একই শিশুকে আপনি এবং একজন অকুপেশনাল থেরাপিস্ট সেবা প্রদান করছেন, এ ব্যাপারটি আপনি কীভাবে সমর্থন করেন? এটি কি যথেষ্ট যোগ্য?
৫. অকুপেশনাল থেরাপিস্ট এর সাথে সহযোগিতার কিছু সুবিধা আমাকে বলুন।
৬. সহযোগিতামূলক অনুশীলনের সময় এবং সময়সূচী কীভাবে নির্ধারণ করা হয়?
৭. অক্ষমতার ধরন, বয়সসীমা বা অন্যান্য সংশ্লিষ্ট কারণ অনুযায়ী সহযোগিতামূলক কাজের ধরণে কোন পরিবর্তন আছে কি?
৮. আপনার প্রতিষ্ঠানে এবং বাইরে অকুপেশনাল থেরাপিস্ট এর সাথে সহযোগিতা করার জন্য আপনি কী ধরনের সুযোগ পান?
৯. আপনার প্রতিষ্ঠানের ইন্ডিভিজুয়লাইজড এডুকেশনাল প্ল্যান (IEP) সম্পর্কে কিছু বলুন? সহযোগিতার মাধ্যমে আপনি কীভাবে IEP-তে অকুপেশনাল থেরাপির কার্যক্রম পরিকল্পনা করবেন?
১০. যখন একজন অকুপেশনাল থেরাপিস্ট এর সাথে একটি শিশুর IEP পরিকল্পনা সম্পর্কে সহযোগিতামূলক কাজ করা হয়, তখন আপনি কি মনে করেন যে সেখানে অকুপেশনাল থেরাপিস্ট এর উপস্থিতি আবশ্যিক? তারা মূলত কি কাজ করে থাকেন এ ক্ষেত্রে?

১১. একজন অকুপেশনাল থেরাপিস্ট এর সাথে কাজের ক্ষেত্রে আপনার কোন অভিজ্ঞতা আছে কি বলার

মত যা আপনাদের সহযোগীতামূলক কাজে সাহায্য করেছে?কোন ঘটনা বা উদাহরণ বলতে পারেন কি?

১২. একে অপরের সাথে সহযোগীতামূলক কাজ করার সময় আপনি কোন ধরনের বাধার সম্মুখীন হয়েছেন?

কোন অভিজ্ঞতা/উদাহরণ?

১৩. সহযোগীতামূলক কাজের কোন অসুবিধা আছে কি?কোন অভিজ্ঞতা বা উদাহরণ থাকলে বলতে পারেন?

১৪. আপনি কি কখনও মনে করেন যে অকুপেশনাল থেরাপিস্টদের সাথে বিশেষ শিক্ষকদের পরিষেবাগুলির

বিরোধিতা বা অনুলিপি হতে পারে?

১৫. যদি কখনও কাজের কোনো ডুপ্লিকেশন থাকে তাহলে আপনি তা কীভাবে পরিচালনা করেছেন বা

ভবিষ্যতে এ সমস্যা সমাধান করবেন? এই পরিস্থিতি প্রতিরোধ করার জন্য আপনার কোন পরামর্শ আছে

কি ?

১৬. আপনি কি মনে করেন অকুপেশনাল থেরাপিস্টদের সাথে আপনাদের সহযোগীতামূলক কাজ আরও

বাড়ানো উচিত? কেন? কেন না?

১৭. বিশেষ শিক্ষাবিদ এবং অকুপেশনাল থেরাপিস্টদের মধ্যে সহযোগিতা বাড়ানোর জন্য কী করা উচিত বলে আপনি মনে করেন? অকুপেশনাল থেরাপিস্ট এবং বিশেষ শিক্ষক উভয়ের প্রতি আপনার মূল্যবান পরামর্শ শেয়ার করুন।



## Appendix D: Supervision Schedule Sheet

Bangladesh Health Professions Institute  
Department of Occupational Therapy  
4<sup>th</sup> Year B. Sc in Occupational Therapy  
OT 401 Research Project

Thesis Supervisor- Student Contact; face to face or electronic and guidance record

Title of thesis: Experience on Collaborative Practice between Special Educators and Occupational Therapists at Special School: A Qualitative Study

Name of student: Saima Hossain

Name and designation of thesis supervisor: Nayan Kumer Chanda, Assistant Professor, Department of Occupational Therapy, Bangladesh Health Professions Institute (BHPI)

| Appointment No | Date     | Place        | Topic of discussion             | Duration (Minutes/Hours) | Comments of student                     | Student's signature | Thesis supervisor signature |
|----------------|----------|--------------|---------------------------------|--------------------------|---|---------------------|-----------------------------|
| 1              | 18.08.22 | BHPI         | Research topic title            | 30 min                   | Explanation about research idea         | Saima               | Nayan                       |
| 2              | 24.08.22 | BHPI         | Research topic title correction | 30 min                   | New idea for research title development | Saima               | Nayan                       |
| 3              | 25.08.22 | BHPI Library | Research title finalised        | 1 hr                     | clearing title                          | Saima               | Nayan                       |

|    |          |               |  |        |                                  |       |       |
|----|----------|---------------|--|--------|----------------------------------|-------|-------|
| 4  | 27.08.22 | BHPI building | Proposal presentation<br>Feedback            | 1 hour | Feedback of presentation         | Saima | Nayan |
| 5  | 28.08.22 | BHPI building | Proposal document submission                 | 1 hour | final correction                 | Saima | Nayan |
| 6  | 17.09.22 | BHPI building | Research Proposal 1 <sup>st</sup> submission | 1 hour | Refining final research proposal | Saima | Nayan |
| 7  | 14.09.22 | BHPI building | Research proposal correction                 | 1 hour | Literature review correction     | Saima | Nayan |
| 8  | 26.09.22 | BHPI building | Research proposal correction                 | 1 hour | Methods correction               | Saima | Nayan |
| 9  | 27.09.22 | BHPI building | Proposal correction                          | 1 hour | Methods re correction            | Saima | Nayan |
| 10 | 08.10.22 | BHPI building | Proposal Correction                          | 1 hour | Introduction submission          | Saima | Nayan |
| 11 | 16.10.22 | BHPI building | Research Draft                               | 1 hour | Literature Submission            | Saima | Nayan |
| 12 | 19.10.22 | BHPI building | Research draft re correction                 | 1 hour | Result submission                | Saima | Nayan |
| 13 | 26.10.22 | BHPI building | Research draft re correction                 | 1 hour | Result, feedback                 | Saima | Nayan |
| 14 | 06.11.22 | BHPI building | draft re correction                          | 1 hour | Discussion submission            | Saima | Nayan |

|    |          |               |                               |        |                                 |       |     |
|----|----------|---------------|-------------------------------|--------|---------------------------------|-------|-----|
| 15 | 09.11.22 | BHPT building | Research 2nd draft            | 1 hour | Methodology discussion          | Saima | Not |
| 16 | 16.11.22 | BHPT building | Research 2nd draft            | 1 hour | Methodology discussion          | Saima | Not |
| 17 | 21.12.22 | BHPT building | Questionnaire submission      | 30 min | Questionnaire develop           | Saima | Not |
| 18 | 9.12.22  | BHPT building | Questionnaire feedback        | 30 min | Reconstruction of questionnaire | Saima | Not |
| 19 | 12.12.22 | BHPT building | Data input process discussion | 1 hour | Effective feedback              | Saima | Not |
| 20 | 24.12.22 | BHPT building | Variable/setup Participant    | 1 hour | Effective feedback              | Saima | Not |
| 21 | 27.12.22 | BHPT building | Data analysis                 | 1 hour | Effective feedback              | Saima | Not |
| 22 | 28.12.22 | BHPT building | Theme select                  | 1 hour | Effective feedback              | Saima | Not |
| 23 | 29.12.22 | BHPT building | Sub-theme select              | 1 hour | Need clear explanation          | Saima | Not |
| 24 | 31.12.22 | BHPT building | Introduction and literature   | 1 hour | Discussion                      | Saima | Not |
| 25 | 01.01.23 | BHPT building | Introduction connection       | 1 hour | Discussion                      | Saima | Not |

|    |          |               |                                  |        |                         |       |     |
|----|----------|---------------|----------------------------------|--------|-------------------------|-------|-----|
| 26 | 03.01.23 | BHPT building | Results discussion and feedback  | 1 hour | Effective               | Saima | Not |
| 27 | 08.01.23 | BHPT building | Same as above                    | 1 hour | Effective               | Saima | Not |
| 28 | 16.01.23 | BHPT building | Methodology                      | 1 hour | Need more supervision   | Saima | Not |
| 29 | 21.01.23 | BHPT building | Methodology                      | 1 hour | Effective               | Saima | Not |
| 30 | 23.01.23 | BHPT building | Participant recruitment          | 1 hour | Need more clear concept | Saima | Not |
| 31 | 30.01.23 | BHPT building | Ethical consideration            | 1 hour | Effective               | Saima | Not |
| 32 | 06.02.23 | BHPT building | Inclusion and exclusion criteria | 1 hour | Reconstruction needed   | Saima | Not |
| 33 | 02.02.23 | BHPT building | Theme table discussion           | 1 hour | Prep for theme setup    | Saima | Not |
| 34 | 11.02.23 | BHPT building | Same as above                    | 1 hour | Effective               | Saima | Not |
| 35 | 13.02.23 | BHPT building | Referencing                      | 1 hour | Effective               | Saima | Not |
| 36 | 02.05.23 | BHPT building | Conclusion discussion            | 1 hour | Need correction         | Saima | Not |

|    |          |               |                                       |        |                      |       |     |
|----|----------|---------------|---------------------------------------|--------|----------------------|-------|-----|
| 37 | 08.05.23 | BHPT building | Appendix discussion                   | 1 hour | Effective discussion | Saima | Not |
| 38 | 13.05.23 | BHPT building | Thesis final PPT draft submission     | 1 hour | Need more discussion | Saima | Not |
| 39 | 15.05.23 | BHPT building | Thesis presentation and book feedback | 1 hour | Need correction      | Saima | Not |
| 40 | 2.06.23  | BHPT building | Final feedback of book submission     | 1 hour | Effective feedback   | Saima | Not |

1. Appointment number will cover at least a total of 40 hours; applicable only for face-to-face contact with the supervisors.
2. Students will require submitting this completed record during submission your final thesis.