

## **Opening the Door to Collaborative Practice**

**By Patricia Karasoff**

There is no doubt that this is the decade of collaboration. In an environment of rapidly changing public policies, integrated services are emerging at a time when state, county, and local education and human service agencies are struggling to serve their communities with scarce resources. Joining forces to establish integrated and collaborative services models is a viable approach for many communities and education, health, and human service providers in the 1990s. These newly-configured service systems are designed to improve outcomes for children and youth, their families, and their communities.

These models strive to reduce fragmentation and duplication by delivering a broad range of education, health, social services, and mental health services in a coordinated system on or near school sites. These programs are characterized by a service system that strives to be flexible, prevention-oriented, family- and child-centered, comprehensive, and holistic (Melaville & Blank, 1991; Schorr, 1989; Ad Hoc Working Group on Integrated Services, 1994).

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In California, many counties are engaged in collaborative reform initiatives. These efforts focus on development of county-wide interagency councils and, ultimately, strategic plans for comprehensive integrated services for children and family services. Many of California's school-linked efforts are sup-

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ported in part by the state Healthy Start Support Services Act of 1992, which provides funding to "school districts and county offices of education and consortia to create innovative, collaborative partnerships to meet the health, mental health, social service, and academic support needs of low-income children, youth, and their families." This initiative has provided funding to more than 800 schools in California, delivering services to more than 600,000 students and their families. Many other states have service integration initiatives, including: New Jersey, Kentucky, Connecticut, Kansas, North Carolina, Missouri, Georgia, Washington, Maryland, and Michigan. Within each of these states, hundreds of county and local collaboratives are being designed to meet their communities' needs.

The service providers and policymakers within these states are attempting to craft new responses to increasingly complex problems with fewer resources. They must change the status quo and acknowledge the shortcomings of the past in order to design systems that are integrated and collaborative. The process of altering policies and practices to support change is challenging to all involved. Moving from a crisis orientation to a preventive one, from a specialist to a team approach, from a deficit orientation to a strength-based approach—all these approaches require a paradigm shift. This shift takes time and, like all change, can be a difficult process.

These interagency efforts require that educators, social workers, nurses, psychologists, and other human service providers work collaboratively, which for many professionals is antithetical to their training and experience. Collaboration is hard work, particularly in the bureaucracy of education and human services agencies. The work that occurs across agency and disciplinary lines is new and often difficult due to long-standing differences in agency culture, education, philosophy, and professional "turf." This situation creates a gap for most professionals between the training received and the skills necessary to work in these collaborative service systems.

This gap is precisely what the Integrated Services Specialist Program (ISSP) at San Francisco State University is designed to address. Almost all practitioners, administrators, and policymakers were prepared in highly specialized, isolated, and discipline-specific programs in postsecondary settings. Therefore, as these new service delivery systems are emerging, the provision of interprofessional education to human service professionals and educators is urgently needed at institutions of higher education (IHEs). In fact, in a report on integrated and collaborative services published by the Office of Education Research and Improvement and the American Educational Research Association (1995), interprofessional education was identified as one of the major components of this reform initiative. The report underscored the importance of leadership with the skills needed to implement integrated and collaborative services, as well as the urgent need for program development in this area.

A comprehensive review of the literature indicates that there is a growing movement emerging across the country to revise and develop university-based training programs to be more responsive to systems reform (Lawson & Hooper-Briar, 1994; Jivanjee, Moore, Schultze & Friesen, 1995; Gardner et al, 1998).

Results of a survey indicate that approximately 50 interprofessional/interdisciplinary training programs exist nationally. Most of these university-based programs are less than four years old (Jivanjee et al., 1995). Like the ISS program, these programs are interdisciplinary and generally focus on developing skills that enable professionals to provide services through collaborative partnerships by schools and public and private agencies. Generally, the curricula emphasize acquiring practice skills that are strength-based, prevention-oriented, child-centered, family-focused, and culturally responsive (Casto, 1994; Knapp, Barnard, Brandon, Gehrke, Smith & Teather, 1994; Lawson & Hooper-Briar, 1994; Wilson, Karasoff & Nolan, 1994; Tellez & Schick, 1994; Jivanjee et al., 1995; Brandon & Meuter, 1995; Gardner, George, Gil de Gibaja, Jordan-March, Lind, McCrosky, Taylor, Taylor-Dinwiddie, & Zlotnik, 1998; McCrosky, in press; Smith, Culbert, & Deiro, in press).

Essentially, two basic strategies for program reform have emerged from the literature. Programs that are providing a distinct "interprofessional education" training program and those that are infusing "interprofessional" content across professional preparation programs.

In one of the most recent papers on interprofessional education, Gardner et al. contend that "there is a growing need for a different kind of professional—or a different kind of professional competence *in addition to specialized skills in a profession or discipline....*" (p. 1). Many advocate for this comprehensive reform of personnel preparation programs for all professionals rather than designing training that is considered an add-on after discipline-specific training or creating a new profession (Knapp et al., 1994; Casto, 1994; Lawson & Hooper-Briar, 1994; Melaville et al., 1993; USDOE, 1995; Gardner, George, Gil de Gibaja, Jordan-March, Lind, McCrosky, Taylor, Taylor-Dinwiddie, & Zlotnik, 1998). This approach requires revising all professional preparation programs to ensure that common interprofessional content is delivered across all programs. This can be accomplished, while still maintaining the integrity of the individual disciplines, by including common content across the programs and by providing cross-training opportunities on the common content. The strength of this approach is that all students are trained interprofessionally from the start. Others support revising the curriculum for a specific discipline, such as teacher education, by infusing interprofessional material into teacher education courses (Bucci & Reitzammer, 1992; Tellez & Schick, 1994).

The majority of interprofessional programs, however, provide distinct courses of study, and very few infuse material across the curriculum (Jivanjee et al., 1995). The provision of a distinct interprofessional education program is a supplemental or add-on approach. This method provides a forum for interdisciplinary training after or concurrent with discipline-specific training. The weakness of this approach is that it may not affect the curriculum offered by traditional disciplines. Its strength, however, is that it can meet an immediate training need. The ISS program at San Francisco State exemplifies a program that uses both an add-on and an infusion

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approach to interprofessional education. Training is made available at the post-graduate level or concurrent with graduate-level training.

### **Profile of the Integrated Services Specialist Program**

The ISS Program was designed to respond to the immediate need created by the emergence of integrated services in California in the 1990s, most notably as a result of passage of the Healthy Start Support Services Act in 1992. As a result there was an urgent need for a cadre of education and human service professionals skilled in collaboration. The ISS program acted swiftly to provide a comprehensive training program within the existing university structure. With the support federal funds from the U.S. Office of Special Education Programs (OSEP) a new graduate program was developed using an existing university program option—the graduate certificate. San Francisco State's graduate certificate programs offer a coherent set of academic courses that focus on a substantial area of study. Courses are practically oriented toward skills and/or occupations. The programs are especially designed for students who have a limited time to learn specific subjects.

The specialist certificate approach enabled curricular changes without affecting the integrity of other program offerings and minimized the potential turf battles so often associated with collaborative programs. The certificate revolves around a 19-unit, three-semester sequence of courses and field experiences in which students acquired competencies related to the delivery of comprehensive school-based or school-linked services for students at risk and with disabilities in the public school system. Furthermore, with the support of funding from the Stuart Foundation the program has also just begun a process of incorporating the ISS course offerings into master degree programs across the Colleges of Education, Behavioral and Social Sciences, and Health and Human Services.

The certificate program requires students to take three core courses (3 units each), two fieldwork experiences (3 units each), and two student support groups (2 units each). Coursework and fieldwork are devoted to acquiring interprofessional competencies. The program requirements are outlined in Table 1.

**Table 1**  
**Certificate for Integrated Services Course Requirements**

ED/BSS 703\* - Changing Roles of School Professionals (3 units)  
ED/BSS 803 - Integrated and Collaborative Services for Children (3 units)  
SPED 788 - Public Policy and Legal Rights of Persons with Disabilities (3 units)  
SPED 801\* - Diversity in Special Education: Family, Resources, and Culture (3 units)  
SPED 821 - Practicum in Integrated Services (Advanced Problems in Special Ed) (3 units)  
SPED 831 - Internship in Integrated Services (Internship in Special Ed) (3 units)  
SPED 711 - Student Support Seminar (2 units) (repeated second and third semesters)

\*Students may choose to take either ED/BSS 703 or SPED 801 based on advisement from the Director of Training.

### **Student Body**

Service integration is by definition interdisciplinary, so the program admits students from a wide range of human service fields such as education (special and general), social work, psychology, nursing, counseling, public administration, and other relevant fields. Eligibility requirements for the program include: a minimum graduate G.P.A. of 3.0; the possession of, or current work toward, a master degree from a related education or human service field; and prior training or experience in special education or a related field.

These requirements were designed to attract the professionals who were most likely to assume leadership roles in integrated services. Therefore, the ISSP student body has been composed of individuals with a tremendous breadth of knowledge and a wide range of experiences, often with the very agencies involved in interagency collaboration. The students enrolled in the program have been seasoned professionals with an average of 13 years of experience and an average age of 37. This may suggest that a certain level of experience and, frankly, frustration with the current system is required before an individual is motivated to explore alternative models of service delivery. The relatively complex work of interagency collaboration is perhaps a factor also. In addition, McCrosky (in press) found that maturity and personality were more important factors than educational status in her discussion of the Inter-Professional Initiative at the University of Southern California.

During the past five years special educators constituted more than a third of the student body. Social workers represented the next largest group in the program, and students from the counseling/psychology field were the third largest group. These numbers suggest that individuals from these disciplines represent the type of professional most likely to pursue employment in service integration initiatives linked to or based in schools. This correlates with a review of job announcements conducted by the program over the past five years for positions in integrated services, which indicates that employers are seeking individuals from these disciplines to assume leadership positions. Therefore, these are the professionals most likely to seek additional training in the area of integrated and collaborative services. In addition to the diversity of disciplines represented in the program, the students who attended the program were a culturally diverse group, with 42 percent of the 72 program participants reflecting non European backgrounds.

### **Program Development**

The ISS program can be characterized as a collaborative venture among multiple partners with a common vision—to improve outcomes for vulnerable children, youth, and their families. These partners recognized that certain common goals could not be accomplished by any one individual or agency. Also, all partners were willing to share responsibility by using the expertise of each partner. These

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two components are critical in developing an effective partnership (Melaville & Blank, 1991).

Given that "collaboration" and "integrated services" represented the course of study, the educational approach taken by the ISS program was, as was stated earlier an interprofessional one. Interprofessional education, as defined by Casto (1994), involves professionals and organizations with diverse expertise, experience, and resources joined together to create solutions to mutual problems.

Therefore, to design and implement the curriculum to ensure that it was state-of-the-art and met the needs of the field, a critical step was the formation of partnerships with community collaboratives in the Bay Area. Such relationships are fundamental to interprofessional practice (Lawson & Hooper-Briar, 1994; Brandon & Meuter, 1995, McCroskey, in press). While placing students in the community to learn and practice skills is certainly not a new concept to professional development, the interprofessional approach differs in that it necessitates a two-way learning relationship with a community collaborative. The site and the university are engaged in a mutual learning and problem-solving process—each informing the other of critical issues and suggested strategies to resolve problems (Lawson & Hooper-Briar, 1994).

### **Community Learning Partners**

The program has worked in partnership with more than 25 community placements in integrated services from 1992 to 1997. The placement sites represent the Bay Area's ethnic and socioeconomic diversity. Each site is already implementing school-linked or school-based models of service delivery, and the majority are California Healthy Start grantees. As a result, these sites are already implementing new collaborative service delivery models designed to produce better outcomes for disadvantaged and at-risk children, youth, and families. Community learning partners include public schools, county offices of education, health, and human services; community-based organizations located in communities characterized by high levels of poverty. The sites used a variety of strategies to integrate services, including collaborative governance structures, interagency agreements, innovative financing, case management, interdisciplinary teams, single point of contact, and co-location of services.

These learning partnerships were based on two mutual goals: improving outcomes for vulnerable children and youth with and without disabilities and their families; and enhancing the knowledge and capacity of professionals working in integrated and collaborative service settings.

To accomplish these goals, each ISSP student is required to complete two field placements as part of the ISSP curriculum: an internship (three units, 120 hours), and a practicum (three units, 120 hours). The internships are aimed at application-level skills. The practicum is designed to give the student knowledge and skill-

building opportunities by offering a broad view of the collaborative environment and its workings.

In both internships and practica, students develop an action plan in conjunction with the community site which specify mutual goals. Then, these plans outlined how goals would be reached in partnership with the site by specifying shared roles and responsibilities for achieving goals and outcomes. The students are actively engaged in solving problems that had emerged within the community collaborative sites.

The ISS program provided each student with a stipend which enabled the student to take off one day a week from his or her current job to work in the community collaborative. It is interesting to note that the need for some type of incentives for program participation emerged as a key lesson from the interprofessional efforts at USC (McCroskey, in press). In addition, within the ISS program, the collaborative provides the student with the in-kind resources necessary to accomplish the goals of the action plan. Supervision is a shared responsibility of the university and the community collaborative.

The partnership among the student, the community learning site, and the ISS program provides an excellent opportunity for cross-training, given the interdisciplinary nature of the student body and the collaborative. Therefore, each community site uses the expertise of each partner to accomplish the goals of the learning partnership.

### **Teaching Partners**

A central tenet of the interprofessional education model is acknowledging that the university cannot act in isolation from the community, nor can it provide a responsive program if it is too narrowly focused (Lawson & Hooper-Briar, 1994; Brandon & Meuter, 1995; Gardner, 1996). In fact the tremendous benefit of this linkage is cited as one of the major lessons from the IPI at USC (McCroskey, 1998). Therefore, the ISS program partners with representatives from the "interagency collaboration" community and university faculty and programs representing numerous education and human service disciplines to develop and teach coursework focused on "integrated and collaborative services" and "school reform" (courses ED/BSS 803 & ED/BSS 703).

The teaching partnerships ensure that: the course syllabi address current and emerging issues; the courses themselves incorporate state-of-the-art literature and reference materials; issues are addressed from an interdisciplinary point of view; and the courses include the voice and experience of a culturally diverse community.

The basis of the teaching partnerships are the mutual goals of enhancing the knowledge and capacity of professionals working in integrated and collaborative services settings, and of revising university curriculum to be more responsive to the needs of collaborative service settings. To accomplish these goals, teaching partnerships have been established with individuals representing various disci-

plines (e.g., social work, psychology, special education, public policy, and administration) who were working in collaborative partnerships at the direct service, administrative, and policy-making levels and with consumers. These individuals contributed knowledge and expertise by teaching one component of the three unit course on "Integrated and Collaborative Services" (ED/BSS 803) offered each year. They are not typical guest lecturers. These professionals and community members return year after year and are deeply invested in the goals of the program. The continuity provided over the years has been critical to an emerging university curriculum on integrated services.

In addition, early on a partnership was established with a San Francisco State University program known as the Bay Area School Development Program. This program was itself a partnership between the University and three Bay Area school districts implementing a model of school reform based on the work of James Comer (Haynes & Comer, 1993). The result of this relationship was the development of a new interdisciplinary seminar addressing school-linked service issues and school reform. The three unit course, "Changing Roles of School Professionals" (ED/BSS 703), was developed in concert with an interdisciplinary curriculum group made up of faculty representatives from nursing, elementary and secondary education, social work, psychology, special education, sociology, and administration and interdisciplinary studies. Approval for this new course was accomplished without resistance because all of the key stakeholders were involved in the process from the start—a key principal in partnership development (Melaville, Blank & Asayesh, 1993).

Roles and responsibilities are shared by establishing an interdisciplinary team-teaching approach. The two team members are a professor of sociology from the College of Behavioral and Social Sciences who was the former co-director of the School Development Program, and the director of training for the ISS program who is also a lecturer from special education, College of Education. As a team, they developed the syllabus using the expertise of each partner and the input from the curriculum group and taught the course together each year. The instructors provide a model for what the course itself required of the students— to work in interdisciplinary teams using a consensus decision-making model to accomplish the course objectives. Shared resources are necessary to support the course; therefore, both colleges (Education and Behavioral and Social Sciences) support the salary for their respective faculty members. In addition, the course has been cross-listed at the college rather than department level.

### **Competencies for Integrated Services**

The coursework and fieldwork just described are devoted to acquiring the skills, knowledge, values, attitudes, and orientation needed by individuals to work in a collaborative environment. The ISS program is focused on the acquisition of 24 competencies all of which can be found in the emerging literature base on

interprofessional education. The ISSP competencies fall within the following seven best practice areas: collaborative group process; teamwork; advocacy; collaborative case management; interagency program planning; leadership; and public relations.

To assess the program's effectiveness, an Integrated Services Competency Assessment form is completed by each student at the start (pre) and the conclusion (post) of their program. The pre-competency assessment data collected thus far (n=72) on entry to the program revealed that, despite the fact that students entered the program from many different disciplines and professions, students as a group rated their competency levels similarly. The one area in which students across the past five years felt least prepared (and thus rated themselves as having little competence) was interagency program planning. This included such skills as developing interagency agreements, facilitation of interprofessional groups, facilitation of community and consumer involvement, knowledge of critical issues in forming interagency groups, evaluation skills, knowledge of other systems, and strategies for stakeholder involvement. This indicates that, regardless of prior training, some skills and areas of knowledge unique to integrated and collaborative service delivery are new to professionals from all disciplines. This finding also suggests the need for coursework and fieldwork focused on the unique content of services integration and collaborative partnerships.

Furthermore, pre- and post-data have been analyzed to determine whether the program has successfully increased the competency level of students. The pre- and post-data available at this time are limited to a very small sample (n=16). The results of this analysis indicate that the program does increase competencies in all major areas (Karasoff, 1997).

### **Postgraduate Evaluation**

During the past five years postgraduate evaluation data have been collected three months after a student completed the program using interviews with students and employers. These interviews consisted of a series of open-ended questions, guided by an interview protocol that allowed graduates and their employers to provide feedback about the relationship of knowledge gained through the ISS program and their current job.

Postgraduate data from 35 students indicated that program graduates have successfully secured employment in the field and have been promoted. The data indicate that 46 percent of the students are employed at integrated services settings, 43 percent are facilitating integrated services from their current jobs, and 11 percent are engaged in doctoral studies (Karasoff, 1997).

### **Barriers to Implementation**

Barriers are inherent in the implementation of any new program. Those experienced in the ISS Program are characteristic of most interprofessional educa-

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tion efforts. Barriers have emerged within three major areas: supervision, accreditation, and bureaucracy.

Placing students in community collaborative placements under the supervision of a professional with a specialization different from their own is a central practice of interprofessional training. This strategy is in direct opposition to the traditional model of supervision used for licensing and credentialing purposes wherein the integrity of the discipline is paramount. The supervision required under a license-driven model is a barrier to training for integrated services. Therefore, the ISS program offers a specialist certificate to individuals already possessing their discipline-specific license or credential. In this way, the ISS program provided cross-training without resistance from licensing or credentialing boards.

Furthermore, the content standards and structured requirements outlined by state accreditation boards can function to create barriers to interdisciplinary program development. The result is that curriculum offered by different disciplines is often duplicative and serves to perpetuate the discipline-specific rather than interprofessional approach to learning. Therefore, the ISS program has created coursework that is cross-listed, enabling students from numerous professional programs to earn credit within the college of their choice. For the most part, the course offerings were offered to ISSP students as required courses and to other students as optional courses.

Finally, the university bureaucracy itself can be a barrier. Departmental structures serve to reinforce and preserve specialization and separateness, and the reward structure within which university faculty members operate provides a disincentive for interdisciplinary work. However, when funds are available specifically to support interprofessional work, the barriers are often eliminated. In this area, the flexibility that external funding provides has clearly facilitated some of the successful university-level collaborations across the colleges.

### **Sustainability: The Challenge for Institutionalization**

An analysis of the context within which the ISS program developed sheds light on the challenges inherent in sustaining any interprofessional education program. The particular challenges faced by the ISS program fall into the following areas: responding to a non mandated versus a mandated need; program development within a climate of fiscal austerity; responding to an emerging job market; curriculum development within a new and emerging knowledge base; and providing responsive professional development for multiple audiences. Each of these challenges is addressed below.

Integrated and collaborative services are not mandated; rather, they represent a method of delivering services. Therefore, training focused on collaboration and interagency services is not formally recognized through a state-approved credential or license. Since university training programs are generally driven by such forces,

a program based on a set of competencies not tied to an individual discipline or a particular legislative mandate simply has no anchor in the university system. As a result, while it is considered critically important to provide training in integrated services, who sanctions the program? What department, college, discipline, or combination of these owns the program?

Clearly, any attempt to expand program offerings in a climate of severe fiscal austerity is a challenge. The ISS program faced this challenge as it approached the end of its Federal funding. Furthermore, several changes—such as leadership at departmental, college, and university levels—occurred during this time which adversely affected the continuity of the process. The program anchored itself within the department of special education, but without grant funds and a clear mandate to provide the training, the department would not allocate resources to support the course offerings. However, because the program also cross-listed courses, the responsibility of sustaining one of the two courses has been retained by the colleges.

The job market is another challenge connected to the non mandated nature of the integrated and collaborative services. Throughout the term of federal funding (1992-1997) a very specific job market emerged for individuals capable of assuming responsibilities as coordinators, directors, and family advocates in community collaboratives. Typically, employers are seeking individuals with a credential or license in a specific discipline with particular expertise in collaborative services. However, the majority of these programs are funded by external grant funds so they did not represent a stable job market. As a result, convincing the university to sustain a graduate program to meet an emerging job market is a challenge.

Developing a curriculum focused on integrated and collaborative services presented several challenges. A new training program was being created at the same time as the field of community collaboration was becoming established in the literature and practice. When the program began reaching out to establish community learning sites, there were many individuals who were reluctant to assume the role of mentor in this emerging field. Some professionals felt they were just learning themselves, because they had not received the ISS program's formal training. Therefore, partnership members clearly stated that all members were learning about collaboration together. Also, all program resources were made available to mentors.

Finally, the ISS program had to meet an immediate need for professionals with new skills in integrated and collaborative services. We responded to the need by circumventing the licensing and accreditation process and creating instead a certificate of graduate study that recognized the acquisition of a new body of knowledge.

### **Emerging Issues for Interprofessional Education**

Our experience during the past five years reveals several fundamental questions regarding the best method for reforming the curriculum to deliver

interprofessional training. Is this a new profession or a new way of training all professionals? Is there a common core of learning that constitutes interprofessional education? Do these competencies cut across all disciplines? Is this entirely new information for all professionals?

A final question concerns the role of discipline-specific expertise in contributing to collaborative process outcomes. Is it possible to have an effective collaboration among a team in which individual members bring to the table only their collaborative teaming skills? Is depth in specific content areas, such as health services or mental health or special education teaching strategies, valuable or necessary? These questions remain unanswered, although the ISS program's requirement that students already hold a master degree is worth remembering while reviewing the program and its outcomes.

Clearly, there are several different approaches to interprofessional education. Preservice programs vary depending on the philosophy of the institution, their unique context, and the level of students being prepared (i.e., undergraduate or graduate, credentialed or licensed, etc.). Most efforts will involve activities in areas such as curriculum and field placement review and revision, university systems reform, in-service education and extended education, technical assistance, evaluation, and policy research (Gardner, 1996; Brandon & Meuter, 1995). Challenges are inherent in all change efforts and the reform of university-based programs is certainly no exception. Based on the experience of the ISS and several other university programs, those IHEs seeking to develop interprofessional education program should expect challenges in following areas: external pressures from accreditation, licensing and credentialing bodies (Knapp et al., 1994; Wilson et al., 1994; Gardner, 1996); the disciplines themselves and their respective intellectual cores (Knapp et al., 1994; Wilson et al., 1993); cross-training and fieldwork supervision (Knapp et al., 1994; Wilson et al., 1993); faculty involvement in the reform (Knapp et al., 1994; California State University (CSU) Conference Proceedings, 1996b); university bureaucracy (Wilson et al., 1993; CSU, 1996b); and funding (CSU, 1996b).

### **Policy Implications**

For interprofessional education programs to move beyond the project stage, in to truly institutionalized programs, many of the challenges described earlier must be addressed at the programmatic as well as the policy level.

The existing policies regarding accreditation, licensing, and credentialing are a prime area for revision. These policies need to be amended in order to remove barriers to interprofessional education, and to provide clear language which supports and encourages the interdisciplinary courses and field work experiences which are the core of these programs. More specifically, the standards set forth by national and state level boards and commissions, should include standards for

interprofessional education. These changes would advance the work of infusing the curriculum significantly. Recent efforts by the Council on Social Work Education's Project—Accreditation Strategies for Effective Interprofessional Education—have begun the necessary work to explore these critical issues.

The California State University System (CSU) has an opportunity to play a very significant role in the advancement of interprofessional education. The CSU system itself is composed of 23 campuses with approximately 335,000 students. Over 10,000 of these students graduate from education and human service programs a year (Gardner, 1993). In order to produce graduates who are prepared to work in California's reforming education and human services systems, these students must have some interprofessional coursework built into their programs. Therefore, the faculty who are responsible for these programs must have an incentive to provide such a curriculum. To increase faculty participation the policies regarding Retention, Tenure and Promotion (RTP) should be redefined to include interprofessional as a valued activity. Policies regarding interdisciplinary team teaching should be amended to remove any disincentives associated with distribution of FTE's. Finally, the CSU Chancellor's office should issue a policy in support of interprofessional education activities and make resources available to support them.

### Conclusion

Collaborative partnerships are the wave of the future. As a result, the training programs offered by IHEs must prepare themselves for a new way of doing business. The ISS program is an approach to professional development that has successfully addressed the training needs associated with these emerging integrated and collaborative service delivery systems. By bringing together partners from different disciplines and public and private educational and human services agencies, and supporting this effort through external funds, a program has been created that prepared professionals to meet the multifaceted needs of children and families in a comprehensive and holistic manner.

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