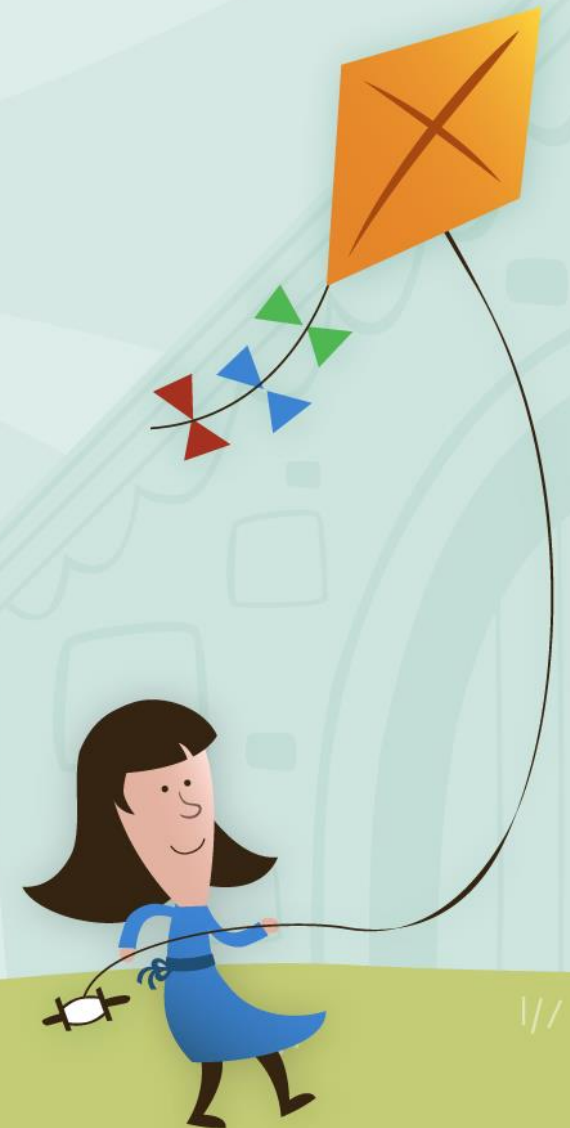


The Scoop on the Scope:

Comparing OT Services in School Based and Community Based Settings



Course Objectives:



- Explain the distinction between the medical model and the educational model of pediatric occupational therapy services.
- Identify when OT services are best delivered through a school-based model or community-based model.
- Discuss the Joint Statement on Interprofessional Collaborative Goals in School-Based Practice.
- Brainstorm ideas for increasing collaboration between service providers as part of best practice guidelines.



MEDICAL VS. SCHOOL





Special
Education

Related
Services

Therapy





Taking the Medical Model to School: Clinical Practice

- Medically necessary; address medical continuum of needs including impairments and functional limitations
- Therapist sets goals and directs episode of care
- Services are usually delivered individually
- Focus is based on components of movement and functional outcomes
- Assist a child to achieve functional intervention goals that enhance performance at home and/or in the community



http://www.kcusd.com/cms/lib07/CA01001070/Centricity/Domain/240/Occupational_Therapy.pdf

Physical Therapy for Educational Benefit; APPT Fact Sheet



School-based Practice

- Educational progress is primary focus
- Intervention is directed toward facilitating educational progress by focusing on functional skills and adaptations that promote the attainment of educational goals
- Services are collaborative- much of the time is spent communicating with other service providers
- When appropriate, responsibilities are delegated to educational personnel or parents
- Work in the educational setting- LRE; services integrated into classroom or school activities
- Address post-secondary transition goals



http://www.kcusd.com/cms/lib07/CA01001070/Centricity/Domain/240/Occupational_Therapy.pdf

Physical Therapy for Educational Benefit; APPT Fact Sheet



School-based Practice

- IEP team decides by consensus the need and scope of PT services, with consideration of school-based PT's recommendation
- Physician may be a part of the IEP team, but physician referral alone does not drive decisions



Similarities Between School-based and Clinic-based PT services

- Adhere to state licensure laws, regulations, and professional standards
- Apply the best evidence and best practices in pediatric physical therapy
- Help children accomplish functional goals at the activity and/or participation dimensions of the ICF
- Work collaboratively with other team members- goal settings, planning interventions, monitoring progress
- Educate and empower patient, family, and other caregivers with diagnosis specific information, HEP, health promotion and wellness



Similarities

- Provide episodes of care with clear exit and reentry criteria. Termination of PT services is not the end of a therapist's involvement. Resumption of services is possible, *if needed*.
- Provide services based on the needs of the child
- May be reimbursed for services



Let's Test Your Knowledge

- Episode of care
- Contextual based services
- Collaborative Goals
- IDEA
- IEP
- LRE

What does this mean?





Contextual Based



Push In



TIDES ARE CHANGING-----

School Based
Therapy Services

BIG CONCEPT

- It's just not about location

- *Contextual is joining the student in the naturally occurring activity in the naturally occurring location*



BENEFITS OF CONTEXTUALLY BASED SERVICES

- Increased active student participation
- Increased student learning
- Increased the likelihood that learned skills will be generalized
- Increased opportunity for collaboration and meaningful decision making
- Therapist's and teacher's job satisfaction
- Promotes non-recognition of SPED students
- Increase carryover due to therapist modeling intervention, modification, and accommodation
- Shared decision making and responsibility for measuring progress and achieving student outcomes
- Improved understanding of OT's role and value
- Least restrictive environment is always better



Purpose of Special Education

Is to prepare students for further education, employment and independent living.



How the Law Defines OT within the school system

Ensures that all children with disabilities have available to them a “free and appropriate public education” that emphasizes special education and related services

Ensures that the rights of children with disabilities and their parents are protected

IDEA 2004

Free and Appropriate Public Education.
(FAPE)

Helps states, localities, education service agencies, and federal agencies provide for the education of all children with disabilities

Assess and ensure the effectiveness of efforts to educate children with disabilities



State of Tennessee

Public Chapter No. 695

Senate Bill No. 503

- (a) For the purposes of providing services in a school setting pursuant to a child's individualized education program (IEP), the following healthcare providers licensed pursuant to this title may refer or order services within their scope of practice as part of a child's IEP
- (b) (b) An order or referral made in accordance with this section may be evidenced by the signature of the healthcare provider in the student's IEP; provided, that the child has been appropriately evaluated and assessed by the provider making the referral or order. SECTION 2. This act takes effect July 1, 2022, the public welfare requiring it.



Fixing the student is not
our role in the schools.

We provide supportive
services to facilitate
access and participation



WHICH IS BEST PRACTICE?



Workload

- Everything that benefits students directly and indirectly
- Can help the OT to develop the work patterns needed to optimize effectiveness and impact
- It helps to ensure that practitioners are using their time efficiently and providing appropriate services that support students

Caseload

- Only takes into consideration the number of students served by an occupational therapist
- Can often result in high unmanageable caseloads
- Can lead to frequent staff turnover



<https://www.aota.org/-/media/corporate/files/practice/children/apta-asha-aota-joint-doc-workload-approach-schools-2014.pdf>



Joint Statement on Interprofessional Collaborative Goals in School-Based Practice

- Collaboration is a process in which team members share their unique knowledge, expertise and skills to identify and address the needs of students.
- Collaborative goals can be defined as IEP goals written by IEP team members working together to engage in *mutual* problem solving and decision making to identify and prioritize student needs



<https://www.asha.org/siteassets/ipp/joint-statement-on-interprofessional-collaborative-goals-in-school-based-practice-2022.pdf>



Joint Statement on Interprofessional Collaborative Goals in School-Based Practice

- Interprofessional collaboration in education and practice leads to greater understanding of other roles and enhances outcomes.
- Collaborative goal writing incorporates the best practices and considers how multiple service providers can facilitate a student's achievement of goals.
- The approach focuses on functional skills in the typical school environment to facilitate participation throughout the school day



<https://www.asha.org/siteassets/ipp/joint-statement-on-interprofessional-collaborative-goals-in-school-based-practice-2022.pdf>



Example Collaborative Goal Writing

Educational Impact: Student is having difficulty independently completing more than 10% of a 1-page written assignment (e.g., 1 of 10 short answers or fill-in-the blank answers)

Present Levels (based on evaluation data): Cannot sit up in a chair for more than 5 minutes without leaning on the desk due to low muscle tone and fatigue Decreased ability to write due to poor fine motor skills, inattention, literacy level, and working memory Difficulty following instructions and asking for help due to expressive and receptive language, short-term memory, and sequencing problems. Busy classroom environment with music playing, students talking, and movement around the room

In Groups: Collaborate and create a goal for this student

Discuss how each discipline would support the student

PT, OT, ST, General Education teacher, Special Education teacher



Collaborative Goal

Student will demonstrate improved participation in classroom activities with his peers by independently completing 50% of a written assignment in the same amount of time used by his classmates, at least 3 out of 4 opportunities per week, for 4 consecutive weeks as measured by teacher/service provider report, classroom observations, and work samples.



How is the Goal Being Addressed

- **General Education Teacher:** develop grade-level-appropriate activities; provide modification to only complete 50% of each writing assignment; use visual supports throughout instructional day; incorporate movement, self-regulation, and strengthening activities
- **Special Education Teacher:** implement specially designed instruction related to literacy development; collaborate with general education teacher to set expectations for modified assignments; integrate self-regulation and strengthening activities; instruct in the use of assistive technology; facilitate communication across team members



<https://www.asha.org/siteassets/ipp/joint-statement-on-interprofessional-collaborative-goals-in-school-based-practice-2022.pdf>



How is the Goal Being Addressed

- **PT:** provide adaptive seating, work with classroom teacher on incorporating core strengthening activities into daily movement breaks, collaborate with PE teacher on core strengthening exercises
- **OT:** provide assistive technology support for using voice-to-text and other technology to promote work completion and demonstration of knowledge; work with student and teachers to integrate self-regulation strategies throughout the school day; provide visual supports for sequencing assignments and organizing materials; establish quiet spaces for working
- **SLP:** provide expressive and receptive language activities linked to the classroom curriculum and themes; coach in the use of compensatory strategies (e.g., lists for sequencing and short-term memory; create visual supports for assignment instructions)

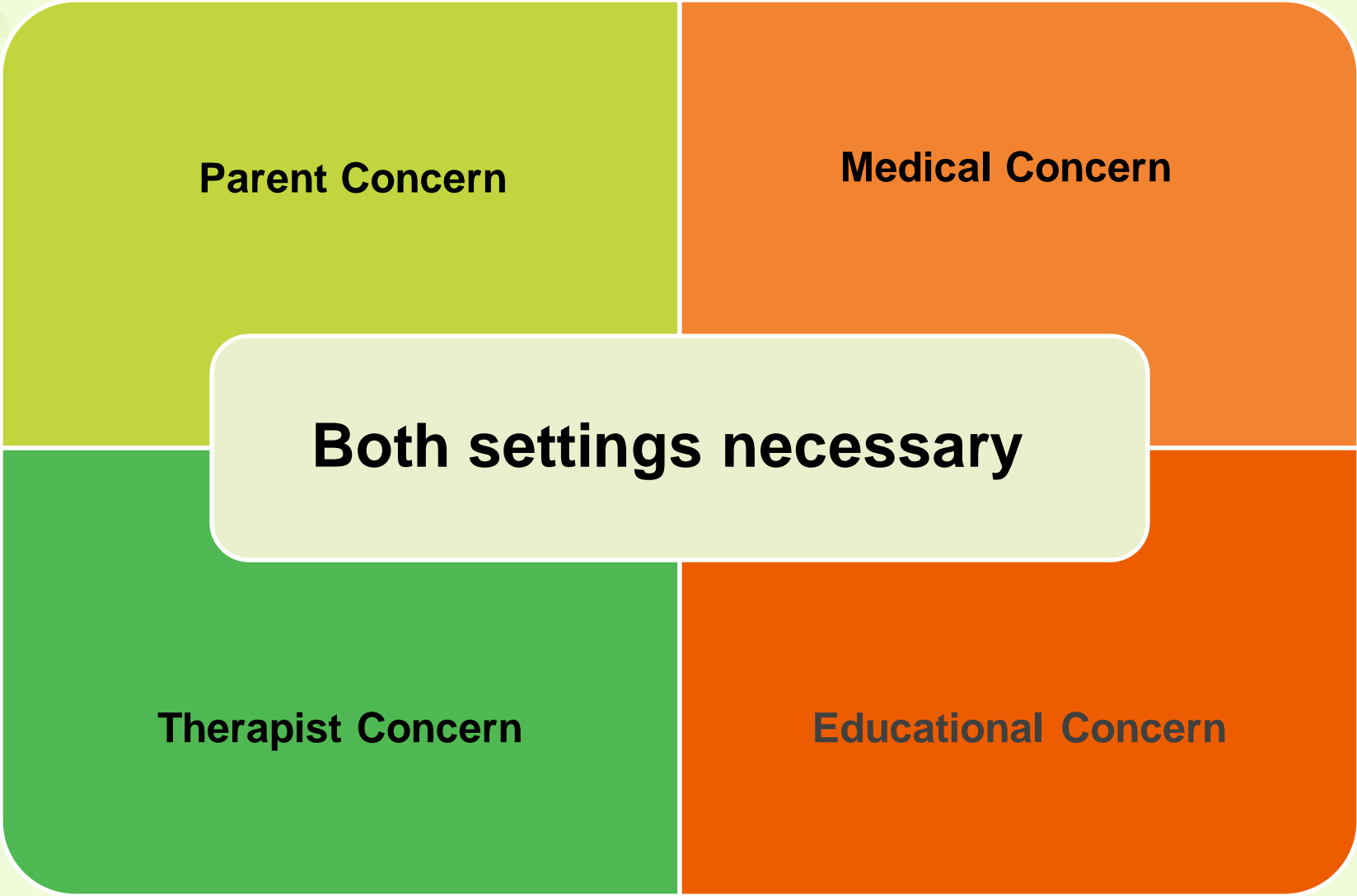


Community Based Therapy Services

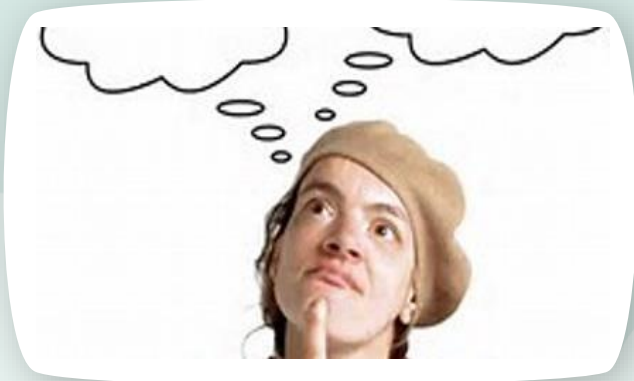
- Addresses the medical continuum of needs, including impairments and functional limitations
- Improve access in the home or community environment
- Physician referral is required in Tennessee, at least for reimbursement
- Therapist sets goals and writes the plan of care
- Reimbursement may be limited by insurance coverage



How to decide where to provide therapy services



Discuss some of the concerns of each team member of where therapy services should be provided



Brainstorm ideas for increasing collaboration between service providers as part of best practice guidelines.

Discussion in groups



QUESTIONS



References

Clark G, Chandler B, ed. Best Practices for Occupational Therapy in Schools. Bethesda, MD: American Occupational Therapy Association; 2013.

Physical Therapy for Educational Benefit. <https://pediatricapta.org/includes/fact-sheets/pdfs/15%20PT%20for%20Educational%20Benefit.pdf>. Accessed September 13, 2016.

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