Guidelines for Occupational and Physical Therapy in Educational Settings
Guidelines Training Video Link

Watch a recorded presentation of the guidelines training at the following link:

OT/PT Guidelines Video
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Introduction & Purpose

- These guidelines for occupational therapists and physical therapists define and explain the collaborative process of therapy services within the school environments of North Dakota.
- Inform therapists and administrators across the state about related services as stated in federal regulations and state rules. These regulations include the Individuals with Disabilities Education Act (IDEA 2004) and Section 504 of the Rehabilitation Act of 1973.
- Provide information and resources for Evidence Based Practice and team collaboration.
Audience

Occupational Therapists
Occupational Therapy Assistants
Physical Therapists
Physical Therapy Assistants
Administrators
• 300.34 Related services

• (a) General. Related services means transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services for diagnostic or evaluation purposes. Related services also include school health services and school nurse services, social work services in schools, and parent counseling and training.

• (b) Exception; services that apply to children with surgically implanted devices, including cochlear implants.
300.324 Development, review, and revision of IEP

(6) Occupational therapy—
   (i) Means services provided by a qualified occupational therapist; and
   (ii) Includes—
      (A) Improving, developing, or restoring functions impaired or lost through illness, injury, or deprivation;
      (B) Improving ability to perform tasks for independent functioning if functions are impaired or lost; and
      (C) Preventing, through early intervention, initial or further impairment or loss of function.

(g) Physical therapy means services provided by a qualified physical therapist.
Multi-Tiered System of Supports (MTSS)

### Occupational Therapy
- School mental health (including self-regulation & social participation)
- Fine motor and writing for all
- Activities of daily living
- Sensory and movement
- Educational in-services

### Physical Therapy
- Adapting environments for access and participation
- Educational in-services for staff and parents
- Demonstrate, train, and monitor effectiveness of interventions
- Use assistive technology to increase access to the general education setting and participation in curriculum
- Support safe transportation of students
| Tier 1 - Scientifically based core classroom instruction | • Teacher contacts OT/PT about what has been attempted and receive suggestions.  
• Classroom teacher and/or parent implements one intervention at a time. It should address the primary concerns (e.g. motor, attention, sensory).  
• Provides framework for in-class and home intervention to be implemented by teacher and parents.  
• Monitors student progress periodically. |
| Tier 2 - Targeted intervention and small group instruction | • Teacher requests OT/PT attendance at an MTSS meeting. OT/PT can provide suggestions for the teacher and school staff.  
• Provide intervention in small groups.  
• Collaborate with parents, teachers and other professionals to monitor OT/PT interventions and provide additional targeted intervention if needed. |
| Tier 3 - Intensive individual intervention | • Collaborate with others to determine the need for intensive intervention.  
• Provide intensive intervention with continuous data analysis to determine next steps. |
Intervention Process

Intervention Process

- General Education
  - Intervention Strategies (MTSS)

  - Successful
    - Continue interventions. Monitor Success.
  - Not Successful
    - OT/PT provide additional intervention suggestions or determine if evaluation is recommended.
    - Not Successful
      - Multi Disciplinary Team meeting: is a special education evaluation needed?
Screening is the systematic collection of information for every student. The professional(s) that review the results of the screening need to determine whether the student should be:

- Screened again at a later time
- Referred for follow-up services by the school or another agency
- Referred to special education for a comprehensive evaluation
• Is screening for instructional purposes considered evaluation?

**300.302 Screening for Instructional Purposes is Not Evaluation**

The screening of a student by a teacher or specialist to determine appropriate instructional strategies for curriculum implementation shall not be considered to be an evaluation for eligibility for special education and related services.

• Can a school delay a parents request to evaluate in order to try MTSS first?

34 CFR §300.301(b) of IDEA allows a parent to request an initial evaluation at any time to determine if their child has a disability.

OSEP Memo 11-07: A Response to Intervention (RTI) Process Cannot Be Used to Delay/Deny an Evaluation for Eligibility under the Individuals with Disabilities Education Act (IDEA).
504 Process

1. Multi Disciplinary Team meeting: is a special education evaluation needed?
   - Yes: Begin IEP Evaluation Process
   - No:
     - Evaluate for Section 504 eligibility

2. Eligible under 504?
   - Yes: Develop a 504 plan based on evaluation needs
     - Ensure plan includes accommodations
     - Implement Plan & Monitor Progress
     - Review Plan Yearly and Amend as Needed
   - No: School team considers other supports
IEP Process
Using Evaluation
IEP Process

Not During an Evaluation Year

IEP Meeting during a year without an initial or re-evaluation.

If team suspects a related service may be needed before an IEP meeting or after goals have been discussed a consent for evaluation form needs to be signed by parents. Then an evaluation will be completed by the related service provider.

Team will meet to review evaluation data documented in an Individual Diagnostic Report.

Write or amend the IEP based on this information as a team.

Once IEP goals are written the team will consider if related services are educationally necessary to make progress. If yes, related services are added to IEP.

Implement IEP as written.
MDT Members

- Parents
- Special Education Teacher
- General Education Teacher
- Representative of the Local Education Agency
- Individual who can interpret the instructional implications of the evaluation results
Additional requirements for evaluations and reevaluations.

(a) Review of existing evaluation data. As part of an initial evaluation (if appropriate) and as part of any reevaluation under this part, the IEP Team and other qualified professionals.....
Job of the Multi-Disciplinary Team is to determine the nature and extent of how the student’s suspected disability impacts:

- Student’s functional school performance
- Movement and mobility skills
- Self-regulation
- Life skills
Multi-Disciplinary Team (MDT)

The MDT has the responsibility to:
- Develop a Student Profile: Evaluation
- Develop an Assessment Plan with modifications, as needed
- Carry out the Assessment Plan
- Analyze the findings throughout the process
- Prepare an Integrated Written Assessment Report (IWAR) to summarize pertinent observational data and other relevant assessment results that will determine if the student as a disability that adversely affects education
Stand Alone Assessment

- SIGNED PARENTAL CONSENT
- PRIOR WRITTEN NOTICE (PWN) THAT INCLUDES INFORMATION ABOUT THE ASSESSMENT PLAN
- COMPLETE AN INDIVIDUAL DIAGNOSTIC REPORT (IDR) IN TIENET
Pre-School Transition IDEA C to IDEA B
OT/PT Role in Eligibility Determination

Share professional judgement based on data gathered from evaluation

If a child may be eligible in the category of Non-Categorical Delay (NCD) provide needed evaluation data to make the determination
IEP Team

The regulations suggest—at the discretion of the parents and the school district—that individuals who have “special expertise regarding the child, including related service personnel as appropriate,” be included on the team. Parents are welcome to invite other individuals with specific expertise or who may have pertinent information about their child. 34 CFR §300.321
The PLAAFP is the foundation on which the rest of the IEP is developed.

Answers the question, “What do we know about this student?”

Present Levels of Academic Achievement and Functional Performance (PLAAFP)
PLAAFP Includes

- Parent input
- Strengths and concerns
- Student preferences and interests
- How the disability impacts involvement and progress in the general education curriculum
- Description of fine motor, gross motor, and sensory interventions that have been implemented previously and their outcomes
IEP Goals Should Be…

- Functional
- Multidisciplinary
- Developmentally appropriate (outcome measures should be appropriate to the child's chronological age)
- Meaningful
- Transferring across a variety of environments
- Meeting present and/or future needs
NDDPI *Individualized Education Program Planning Guidelines* state that they are four primary components of a goal:

A. The behavior or skill being addressed
B. The desired ending level of achievement
C. The intent or purpose for accomplishment
D. Characteristics of services
Remember!

OT/PT are related services that should contribute to collaborative team goals for student-centered progress across educational environments. Services are determined by the IEP team after student-centered goals are written.
### Determining Need

Are occupational and/or physical therapy services required to assist the child to benefit from special education?

<table>
<thead>
<tr>
<th>Is the proposed related service educationally relevant? (Circle Yes or No)</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>• If NO, the service should not be considered as a related service</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• If YES, continue...</td>
<td></td>
<td></td>
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</tbody>
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<table>
<thead>
<tr>
<th>What purpose does it serve for the student? Check all that apply.</th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>___ select or maintain equipment, specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>___ make adaptations or design support programs, specify:</td>
<td></td>
<td></td>
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<tr>
<td>___ transfer information or skills to other school staff, specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>___ be a resource or support to the family, specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>___ provide services or therapies to the student, specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>___ other, specify:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>___ other, specify:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Is the service educationally necessary? Circle YES or NO for each question. If the team answers, “yes” to the following question, it is an indication that the service under consideration probably IS educationally necessary:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Will the absence of the service interfere with the student’s access to, or participation in, his or her educational program this year?</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If the team answers “yes” to any of the following questions, the service under consideration probably IS NOT educationally necessary:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>• Could the proposed service be addressed appropriately by the special educator or classroom teacher?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>• Could the proposed service be addressed appropriately through core school faculty or staff (e.g., school nurse, guidance counselor, librarian, teachers, administrator, bus drivers, cafeteria staff, or custodians)?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>• Has the student been benefitting from his or her educational program without the service?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>• Could the student continue to benefit from his or her educational program without the service?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>• Could the service be appropriately provided during non-school hours?</td>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>• Does the proposed service present any undesirable or unnecessary gaps, overlaps, or contradictions with other proposed services?</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>
The IEP team determines the amount, frequency, duration and location of the services the student will receive in order to attain the annual goal.

Considerations:

- The amount of therapy must be stated in the IEP so that the level of the agency’s commitment of resources is clear to parents and all who are involved in the IEP development and implementation.
- The amount of time per episode/session/day/week/month must be appropriate to the service.
- The amount of therapy should be based upon the student’s needs, not the availability of staff.
- The duration of service is considered the length of the IEP unless otherwise stated. When the duration is different than the rest of the IEP, the IEP should show the starting date and duration.
<table>
<thead>
<tr>
<th>Who Provides Services</th>
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</thead>
<tbody>
<tr>
<td>Occupational Therapist</td>
</tr>
<tr>
<td>Occupational Therapist Assistant (OTA)</td>
</tr>
<tr>
<td>Physical Therapist</td>
</tr>
<tr>
<td>Physical Therapist Assistant (PTA)</td>
</tr>
</tbody>
</table>
Service Methods

Direct Services

• Direct services may be offered in a variety of settings (the classroom, the cafeteria, the intervention room or other school settings)

Indirect Services

• Indirect services, or consultative services, are provided when a student’s IEP specifies support for school personnel as a part of the accommodations, modifications, or supplemental support services provided to a teacher on behalf of the student. These services include providing information and demonstrating effective instructional and facilitation procedures
Types of Direct Services

- Integrated or Push-In Therapy
- Pull-Out Therapy
Service Types

Direct – Service provider provides services individually or in groups to students.

Indirect – Indirect or consultative services provided through accommodations, modifications, or supplemental support services provided to a teacher, school staff, or parent on a student’s behalf.
Missed Minutes

- In *Letter to Balkman*, 23 IDELR 646 (OSEP 1995) and reaffirmed in *Letter to Copenhaver*, 108 LRP 33574 (OSEP 03/11/08) the court decided the only reason missed minutes for a student would not be provided is if a student is absent or school is closed (i.e., due to weather). If a student needs these services in order to receive FAPE, they need to be offered or made up if missed.

- Public Agencies are encouraged to consider the impact of a provider’s or child’s absence on the child’s progress and performance and determine how to ensure the continued provision of FAPE in order for the child to continue to progress and meet the annual goals in his or her IEP. (*Letter to Clarke*, OSEP 2007)
Regardless of the approach employed to determine the type and level of related services, IDEA 2004 requires that special education services be provided in an environment that is the least restrictive environment appropriate for the child in order to achieve the collaborative goal.
Benefits of integrated (push-in) therapy include:

- Less stigma, less being singled out
- Less disruption/lost instruction time
- Increased collaboration and consultation with teachers
- Benefits to other students
- More opportunities to practice skills in a natural setting (generalization)
- More effective problem-solving
- Peer modeling. Peers are invaluable assets - demo, modeling, motivation
- Goals and interventions are directly tied to classroom functioning
Evidence-Based Practice

3 Components of Evidence-Based Practice
- Best available evidence
- Clinician’s knowledge and skills
- Student’s wants and needs
Related services are added to a student's IEP to support specific goals. Therefore, it is the responsibility of the related service provider to report progress towards these goals as frequently as progress is reported for their peers (typically each quarter or trimester). 34 CFR §300.320(a)(3).
**EXTENDED SCHOOL YEAR SERVICE(S)** - The provision of special education and/or related services beyond the normal school year.

**REGRESSION** - A decline to a lower level of functioning demonstrated by a decrease of previously attained skills that occurs as a result of an interruption in educational programming.

**RECOUPEMENT** - The ability to recover or regain skills at the level demonstrated prior to the interruption of education programming.

**CRITICAL POINT OF INSTRUCTION OR EMERGING SKILL** - The point at which a student has almost mastered the skills in an instructional sequence. As the need for ESY service(s) is made, the IEP team must determine that a break in instructional programming would result in the loss of significant progress made toward the acquisition of a critical or emerging skill.
Will the learning that occurred during the regular school year be significantly jeopardized in ESY services are not provided?

- Consider losses in the following areas: social, behavior, academic, communication, and self-sufficiency skills

What data supports the need for ESY services?

- Lack of progress in current IEP goals and objectives (progress monitoring)
- Observation and input from the IEP team in the following areas: performance in the classroom, community based activities, family circumstances, and recent behavioral and/or medical problems
Evacuation of a person with a disability can be carried out if proper policies and techniques are implemented to:

• Train employees in methods of assisting the student

• Train employees how to effectively communicate during an emergency

• Assign specific tasks during an emergency

• Identify the specific needs of the student

• Provide a facility-specific response plan

The use of a modified evacuation plan should be documented in the adaptation section of the IEP. Train person(s) assisting student and ensure the plan is known within the building.
Discontinuation of OT/PT Services

One or more of the following criteria should be met before the discussion to discontinue the student from related services.

- The student has accomplished the IEP goals for which the therapy was necessary, and therapy will no longer have an impact on the child’s functioning in special education, i.e., services are no longer necessary to meet the remaining IEP goals.
- The student performs at a standard expected of his or her typical peers.
- The intervention no longer results in measurable benefits, regardless of multiple documented interventions.
- The student continues to make gains but there is no evidence that the related services interventions are related to the gains.
- The identified priority skills are no longer a concern within the student’s educational context.
- The student is no longer eligible for special education and therefore no longer eligible for a related service under IDEA 2004.
Steps for Dismissing a Related Service

• Do not have to conduct a reevaluation
• Document in the IEP the date of dismissal, justification supported by data and plan for recommendations.
• PWN needs to be completed noting the dismissal of the related service and given to the parents.
Transition

Birth-to-3 to Preschool

Preschool to School Age

School Age to Secondary
• OT – can provide services through Telehealth if they determine supervision definitions have been met.

• PT – can only provide consultation services as another PT must be on site with the student (in order to meet direct supervision requirements)
Daily Notes
## Educational vs. Non-Educational Settings

<table>
<thead>
<tr>
<th>EDUCATIONAL SETTING</th>
<th>NON-EDUCATIONAL SETTING</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Who is served by PT/OT?</strong></td>
<td>All ages without distinction, diagnoses within scope of practice.</td>
</tr>
<tr>
<td>Children who qualify for special education services and who require OT/PT:</td>
<td></td>
</tr>
<tr>
<td>- ECSE – 3 to 5 years</td>
<td></td>
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<tr>
<td>- School Age – 5 to 21 years</td>
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<tr>
<td>- Transitional – 18-21 years</td>
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<tr>
<td>- Students qualifying under Section 504.</td>
<td></td>
</tr>
<tr>
<td><strong>Who is not served by PT/OT?</strong></td>
<td>Resource limited per insurance, private pay, or Medicaid/Medicare.</td>
</tr>
<tr>
<td>Children with or without disabilities who do not require individual, specially designed instruction, related services or Section 504 accommodations.</td>
<td></td>
</tr>
<tr>
<td>A medical diagnosis alone is not a criteria for service.</td>
<td></td>
</tr>
<tr>
<td><strong>What is the focus of service?</strong></td>
<td>Physical and occupational therapy services are provided to maximize quality of life by promoting health and</td>
</tr>
<tr>
<td>EI / ECSE – enhance the development of toddlers with disabilities and maximize independent living</td>
<td></td>
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</tbody>
</table>
ICF Framework

Health Condition
(disorder or disease)

Body Functions & Structure

Activity

Participation

Environmental Factors

Personal Factors
Assistive Technology
Caseload vs. Workload

- Caseload – Number of students on IEPs or 504 plans the therapist works with.
- Workload – Other duties a therapist has in addition to working with students. This information should be considered when determining caseload.

Resources:

Ohio Workload Calculator
North Carolina Workload Guidance
Licensure & Certification Requirements

- North Dakota State Board of Occupational Therapy Practice
  - http://www.ndotboard.com

- North Dakota Board of Physical Therapy
  - https://www.ndbpt.org/
Adapted Physical Education
NDDPI State Guidelines
https://www.nd.gov/dpi/education-programs/special-education

State Resources