1 Who are school-based occupational therapy practitioners?

Occupational therapy practitioners are occupational therapists (OTs) and occupational therapy assistants (OTAs) who use meaningful activities (occupations) to help children and youth participate in what they need and/or want to do in order to promote physical and mental health and well-being. Occupational therapy addresses physical, cognitive, social/emotional, sensory, and other aspects of performance. In schools, occupational therapy practitioners focus on academics, play and leisure, social participation, self-care skills (ADLs, or Activities of Daily Living), and transition/work skills. Occupational therapy's expertise includes activity and environmental analysis and modification with a goal of reducing the barriers to participation.



8 How can I tell if my child is making progress?

Occupational therapy practitioners document student progress toward IEP goals using various data collection sources such as work samples, teacher records, or observed student performance. Schools send home reports of the student's progress as required by IDEA, the Individuals with Disabilities Education Act.

O Where can I learn more?

To learn more about occupational therapy, please visit our Web site at www.aota.org. The American Occupational Therapy Association (AOTA) is the professional society of occupational therapy, representing the interests of more than 140,000 occupational therapists, occupational therapy assistants, and students working in practice, science, education, and research.

Your therapist's name and contact information:



Developed by the AOTA Workgroup of Leaders in State Departments of Education 2013

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An AOTA **brochure for school administrators** on the Role of Occupational Therapy Practitioners in Schools can be found at http://www.aota.org/~/media/Corporate/Files/Practice/Children/Resources/Brochure for School administrators.ashx

What is the Role of the School-Based Occupational Therapy Practitioner?



Questions & Answers for **Parents**



2 What services do occupational therapy practitioners provide in schools?

Occupational therapy practitioners are related service professionals (specialized instructional support personnel) who provide a continuum of services and support under the Individuals with Disabilities Education Act (IDEA), the Elementary and Secondary Education Act (ESEA), and Section 504 of the Rehabilitation Act of 1973, including:

- Services for students with behavioral and learning needs in general education
- Services for individual students in special education
- Services to ensure access for students with a disability
- Training and resources for school personnel and families
- Participating on collaborative teams
- Partnering on whole school initiatives for health and wellness

3 What does occupational therapy look like in schools?

Services take place in school settings during the natural routines of the school day. Research demonstrates that students are most likely to reach success when they practice skills in the environment in which they occur.

Occupational therapy service supports academics, behavior, and functional performance. The occupational therapy practitioner collaborates with parents and school staff to create solutions, taking into account the child, the activity, and the setting. The goal is to promote participation through:

- Adapting activities and environments so students can participate (for example, modifying playground equipment, recommending bus or classroom seating, recommending lunch groups in cafeteria for social participation, offering strategies to increase participation in curricular or extracurricular activities such as gym and chorus)
- Collaborating with school personnel including families for school initiatives such as recess promotion and response to intervention

- Offering instructional strategies to support all student learning such as Universal Design for Learning (UDL)
- Increasing independence in daily living skills (for example, addressing self care such as toileting and organizational skills needed for homework completion)
- Supporting transition toward employment, community integration, and further education (for example, increasing student ability to perform the activities associated with an afterschool job or internship)
- Recommending assistive technology to increase learning access and participation (i.e. recommending computer software, pencil grips, modified seating)
- **Promoting positive behavior** and interaction that impacts learning (i.e. sharing, turn-taking, social skills training)
- Supporting school mental health (offering anti-bullying initiatives and promoting coping and calming skills for social participation)
- Increasing attention by recommending motor breaks and alerting activities
- Addressing sensory, cognitive, motor needs that impact access or participation in the curriculum (for example, increasing coordination so the student can manipulate his backpack or assessing tolerance for fire drill noise for those with sound sensitivity)

4 Who pays for occupational therapy services?

When educationally necessary as determined by the individualized education program (IEP) team or 504 committee, occupational therapy services are provided at no cost to the family. Federal, state, and local funds are all sources for funding occupational therapy in public schools.

5 What is the difference between an occupational therapist and an occupational therapy assistant?

Occupational therapy practitioners complete accredited programs and pass a national board exam before entering

the profession. Occupational therapists are responsible for all aspects of occupational therapy service delivery including the safety and effectiveness of the service. Occupational therapy assistants provide occupational therapy services under the supervision of the occupational therapist.

6 How do occupational therapy services look different in a school than in a hospital or clinic?

Regardless of setting, occupational therapy services help individuals participate in daily life skills and routines. School-based and hospital/clinic-based occupational therapy services differ in focus:

School-based occupational therapists observe, assess, and address the child's strengths and needs within the natural school settings (e.g., classroom, lunchroom, playground) in order to support the student's educational program. Services may be directed to the child and on behalf of the child in the school environment (e.g., training educational staff).

Hospital and clinic-based occupational therapists typically assess and address the child's strengths and needs in a clinic setting in order to support participation in life activities. The focus in non-school settings may be more varied and may or may not address specific educational needs.

Who determines if my child receives school-based occupational therapy services and at what frequency and duration? Is parental consent needed?

Service determinations are made by the 504 committee or IEP team in collaboration with the occupational therapist. Parents are a part of the IEP team or 504 team who make all service decisions. Parental consent is required for evaluations and service under special education. Services provided within general education such as screening and consultation to teachers under Tier One early intervening services or Response to Intervention do not require parental consent.

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