

Occupational Therapy in the School System



Definition: Purpose for Students

1. Maximize occupational performance of students with special needs
2. Improve school performance skills — ability to learn
3. Meet goals (Individualized Education Program/Individualized Family Service Plan)
4. Diminish deficit(s)
5. Enhance strengths
6. Gain progress toward Independence
7. Remain anonymous — positive social acceptance
9. Allow for inclusive setting: Challenging
10. Eliminate interference of ability to gain instruction
11. Boost self-esteem, self-worth, confidence
12. Acquire skills for transition to future



Definition: Goals & Characteristics of Therapist

1. Make tx fun — tailor to students perception (games, devices, activities)
2. Teach manipulation (puzzles, books, scissors, pencils) for function
3. Allow for freedom by altering environment (write, organize, eat, mobility)
4. Show patience, maturity, creativity and tactfulness, while being fully present
5. Work well with others team members — generalize tx to other settings
6. Maintain record system to show progress
7. Benefit the student — productive life

OT



8. Increase in number

- 19% of OT's work in schools
- Opportunities for work in schools grow rapidly in 21st C.

Practice Sites

- Any place routine to child
- Any place causing difficulty
- Variety — Generalization — Independence

Examples

- Special needs classroom
- Integrated classroom
- Lunchroom
- Bathroom
- Playgrounds
- After school programs
- Daycare center
- Home



Treatment Team

Student Study Team — those who contribute to the school setting

Occupation Therapist

Physical Therapist

Speech Therapist

School Social Worker

Educator

Principal/Administrator

School Nurse

Student Counselor

Parents

Siblings

Physician

Daycare Provider

Delineate concerns * Make recommendations * Create work plan * Assess child's progress * Alter plan as needed * Achieve goals * Give support * Achieve the Best



Effective Treatment Team

Lilyan's preschool classroom

Individual therapy

- Practice buttoning sweater
- Draw broad chalk lines, imitating her vertical/horizontal strokes

Entire class — motor group activities

- Jointly planned by OT, PT, ST
- Farm animal unit
- ST: sing “Old MacDonald”
- PT: Obstacle course (gallop, push bail of hay, crawl, roll)
- OT: Milk the cardboard cow with rubber glove utters filled with milk

End of Day — meet with teachers and therapists to discuss progress, make recommendations, complete documentation



Diagnoses: What to Treat

Skill issues that interfere with a child's educational performance

Generally

Gross/Fine Motor Deficits

Physically Disabled

Developmental Delays

Visual-motor Integration

Visual-perceptual Skills

Emotionally Disabled

Mentally Disabled

Learning Disabled

Attention Deficits

Sensory Awareness Processing

At Risk to develop problems

Specifically

Feeding self

Holding crayon

Completing a written assignment

Managing wheelchair/assistive device

Walking independent

Completing a one piece puzzle

Watching educational video segment

Completing learning assessment

Ability to touch certain items such as glue



“Early intervention is important to minimize the secondary behavioral, emotional, physical and psychiatric problems that can result from students experiencing challenges with their daily occupations.”



Diagnoses: Areas of Treatment

Academic

Math

Reading

Writing

Manipulation of tools

Physical Education

Prevocational/vocational participation

Non-Academic

Behavior Management

Recess

Sports

Self-Help/Care

Social Skills/Integration



Federal law requires OT be available to students up to age 21, but the majority of occupational therapists employed in schools work with elementary age children.

More intensive occupational therapy services are necessary during times in which child is acquiring new skills; this is a time in which critical learning and generalization skills are present. (i.e. first few years of life; transition to new program, new school or community job site.

Diagnoses: Specific Condition

- Developmental Coordination Disorder (DCD)
- Affects 6% of population
- Lack motor coordination to perform daily self-care and productive and/or leisure tasks
- Experience frequent failure and low self-confidence
- Hinders social, academic, and physical performance
- Coexists with learning disabilities and/or attention deficit disorder

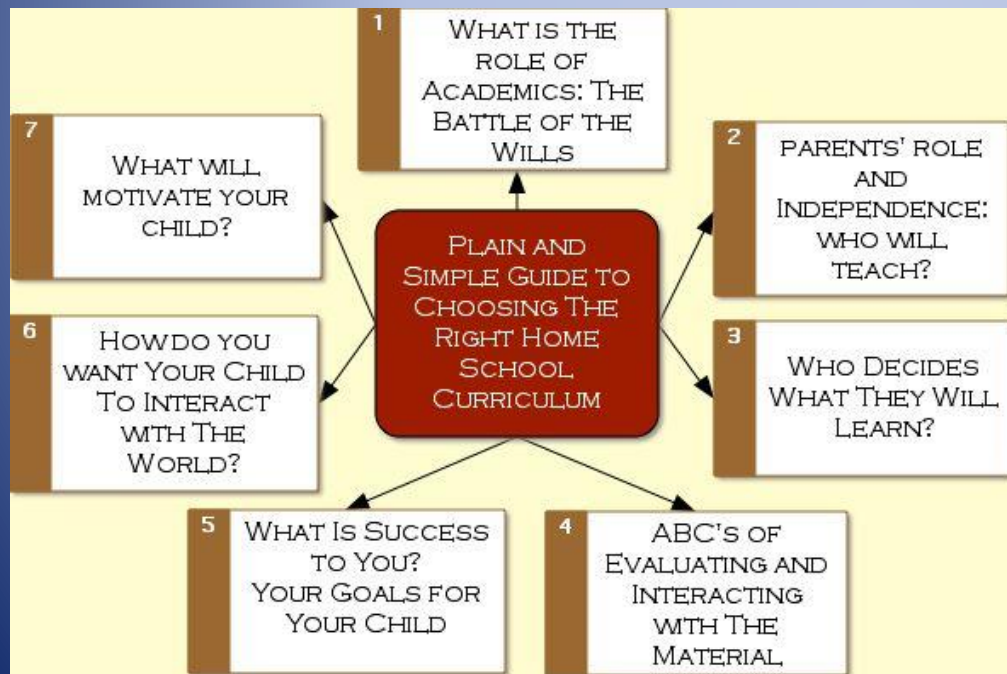


- “Top-down” approach effective in improving functional performance of children with DCD

- Cognitive Orientation to Daily Occupational Performance (CO-OP) assists with skill acquisition and generalization/transfer of skills

Diagnoses: Additional Roles of OT

- Develop curriculums and programs
- Address school health and safety
- Identify assessment accommodations and modifications
- Develop violence prevention programs
- Various others; well-roundedness



Current Practice Issues and Trends

Expressing Knowledge

Verbal and Non-verbal Communication

- Personal space
- Questions expresses, and directions
- Social skills
- Gestures and expressions
- Communication

Graphic Communications

- Tools
- Writes
- Computer
- Tests

Self-Care and Functional Mobility

Self Care Activities

- Personal hygiene
- Toilet
- Feeds self
- Personal devices
- Independence
- Cooks & Cleans
- Budgets
- Community and personal needs

Functional Mobility

- Moves and transfers
- Walks
- Stairs
- Playground and equipment
- Transportation

Current Practice Issues and Trends

Learning Academics

- Development
- Adaptation
- Modalities
- Environment

Community Integration and Work

- Information
- Participation
- Job requirements
- Manage time and work
- Equipment

Student Role

- Completes, manages, organizes
- Adheres and attends
- Participates in groups
- Develops and organizes
- Classroom and school
- Transitions
- Respect
- Socialization
- Participates in school
- Manages and uses

Treatment Goals

Using goal directed activities in school to improve the students learning and developmental abilities. These include individual functions, performance skills, patterns and contextual/activity demands.

Goal directed activities vary between each individual student

- Physical
- Sensory
- Neurological
- Emotional
- Mental function and challenges



Models of Service Delivery

Direct

- On or off site
- Individually selected → therapist
- “Hands-on”

Integrated or Supervised

- Intervention → therapist
- On site

Consultation

- Recommendation → therapist
- Provided to teachers, aids, or service providers



Models of Service Delivery



Practice Models

- Developmental
 - Sensory integration
 - Neurodevelopment
 - Biomechanical
 - Motor control
 - Coping
 - Occupational adaptation
 - Behavioral
 - Cognition

Approaches

- Establish/restore
 - guide movement and postural adjustments
- Alter/modify
 - analyze environment
- Adapt
 - special equipment
- Prevent
 - teach and wait
- Create
 - Design

Changing Patterns of Care

Evolution of Occupational therapy



1970's: Start of movement



1975: Education of the Handicapped Act



1980-90's: Focus on quality of life



Today: Focus on occupation and performance skills

Ethical Issues

Occupational Therapy Code of Ethics



Principle 1

Principle 2

Principle 3



HIPAA: The Health Insurance Portability and Accountability Act of 1996

FERPA: Family Educational Rights and Privacy Act



➤ AOTA Handout

➤ Dino-therapy

➤ Questions

➤ References

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