

# Occupational Therapy is a Related Service

**As a related service, OT serves a supportive role in helping the student to participate in and benefit from special education.** Educationally related OT services are provided within the context of the student's educational program, with service delivery occurring in the school environment, where the need occurs. The goal of intervention is to assist the student to function in the school setting by adapting the environment, revising the functional tasks and embedding elements of sensory strategies into the school routine.



*One of the most important clarifications that a student's IEP (Individualized Education Program) team should understand is that students with disabilities do not attend school to receive related services (therapies); they receive services so they can attend and participate in school" (Giangreco, 2002)*

Occupational therapy practitioners help to promote healthy school climates that are conducive to learning.



In addition to being an IEP team member, OT's offer other valuable services to meet the broader student and systemic needs of a school district. OT's can support students' mental health needs and participate in other school-wide initiatives such as positive behavior supports and early intervening activities to address students' behavior and learning needs.

Furthermore, occupational therapy practitioners may be active participants in developing curriculums and programs, addressing school health and safety concerns, identifying assessments, accommodations and modifications.

In this capacity, occupational therapy practitioners also focus on supporting the needs of all students, including those without disabilities.

*Information adapted from AOTA website and Upper Arlington Occupational Therapy Intervention Services Guidelines*

## Upper Arlington Schools Occupational Therapy Intervention Services

The practice of occupational therapy means the therapeutic use of occupations, including everyday life activities to support participation, performance, and function in roles and situations in the home, school, workplace, community, and other settings. Occupational therapy addresses the physical, cognitive, psychosocial, sensory-perceptual, and other aspects of performance in a variety of contexts and environments across the life span.



**In the public school setting, OT's are health professionals who use their unique expertise to help children perform important learning and school related activities.**

Occupational therapy services for students with special needs are determined through the IEP (Individualized Education Program) process. School-based occupational therapy is available, as a related service, for students who are eligible for special education. Occupational therapists complete assessments and work with other members of the school-based team to help determine what is needed for a student to receive a free, appropriate public education in the least restrictive environment (LRE).

# Medical versus Educational Models of OT Practice

## In the Medical Model

- Referral is initiated by a physician based on a particular diagnosis or observed delay in one or more areas of development.
- The parent or guardian is then referred to a hospital or clinic for an evaluation and or treatment by the appropriate professional.
- Need for service is primarily based on testing and clinical observations.
- Children with mild, moderate and severe deficits may qualify for services.
- The parent is responsible for obtaining the services as well as payment for those services.
- Health insurance may assist with payment but not necessarily.

## In the Educational Model

- Schools provide OT, as a service, only when there is documented adverse impact on academic performance.
- Related services are provided only when they are required to assist a student with a disability to benefit from special education.
- The student is assessed for needs associated with his or her educational program. Need for service is primarily based on testing, classroom observations and input from the student's IEP team.
- A doctor or psychologist can not prescribe OT treatment in the school setting.
- The IEP team must establish whether OT service is needed for the child to benefit from his or her education and other special education supports, related services or other school staff (i.e. teacher, paraprofessional) are unable to adequately address the area of concern.



# Educationally Necessary Occupational Therapy Services

Special Education teachers can assess and assist children who have special needs in fine and gross motor skills and embed sensory strategies in the classroom curriculum. Most children with special education needs, in these areas, can and should be served by their teachers. There are few children whose needs are so significant and unique that the child's special education teacher cannot serve them.

Educationally Necessary Therapy	Medically Necessary Therapy
Educational goals are primary	Therapy goals are primary
Intervention services are directed toward facilitating educational progress	Treatment is directed toward alleviation of a specific medical problem.
Goals are written and services are delivered collaboratively with other IEP team members. Much time is given to communicating with other service providers.	Services tend to be delivered individually in a clinic or hospital setting.
Focus is on functional skills and adaptations that promote the attainment of educational objectives.	Focus is based on developmental milestones and components of skill, movement and or rehabilitation after injury or medical diagnosis. The focus on outcome is functional skills.
More responsibilities are delegated to other educational professionals and the parents.	Few responsibilities are delegated except to parents.
Therapists work in the school setting. Services should be provided in the natural context whenever possible (least restrictive environment: LRE)	Therapists see clients in a clinical setting.