Educationally Related Services

Presented by: WOCCSE

History

- In recent years, insurance companies are recognizing Autism and other diagnoses and are paying for therapies outside of school.
- School Based Services are looking different than they did 5-10 years ago
 - Related Services (OT/ PT) emphasizes a students' overall participation and functional performance in the educational setting.
 - Recommended service delivery focuses on supporting the student in the classroom or other educational settings (e.g. school playground, lunch room, hallways, job site, etc.).

Professional Associations

- Professional Organizations
 - ? AOTA has several resources that address educationally related services
 - Occupational Therapy In School Settings Fact Sheet
 - What is the Role of the School-Based Occupational Therapy Practitioner? Questions & answers for Parents
 - [?] AJOT Article: OT for Children and Youth Using Sensory Integration Theory and Methods in School-Based Practice (on AOTA website, 2015 publication)
 - APTA resources.....Anyone?

Similarities

- There are two primary models of OT and PT for children: educational and non-educational.
- The basic purpose behind each of these models is different, although they can overlap.
- The student must have a recognized disability or disorder which adversely affects performance or participation.
- Evidence-based intervention is used.
- Evaluation data is collected and interpreted to determine need for service and develop an intervention plan.

What about the medical model?

Pe careful about saying that school-based OT is not the medical model because many districts bill Medi-Cal

Non-Educational Model

	Non-Educational Model
Where does it start?	 Referral is initiated by Physician based on observed delay or diagnosis
Who decides the need for services?	 Frequently driven by doctor's order Testing/ assessment and clinical observation by a licensed OT/ PT Assessment takes all settings into consideration
What is the purpose of the evaluation?	To determine a need for servicesHelp identify areas of strength and needsHelp guide goals
Who decides scope of services?	 Therapist determines the: Focus Location Frequency duration

Non-Educational Model Cont.

	Clinical Model
How can services be changed?	Doctors can alter ordersTherapist can change therapy plan
What is the focus of therapy?	 Addresses medical conditions and impairments Works to get full potential Interventions are usually for acute problems and are more of rehabilitative in nature
Where does therapy occur?	In the clinic, hospital, or home
How is therapy delivered?	Direct 1 on 1 treatments
Who Pays?	 Fee-for-service payment by: Family Insurance Governmental agency
How are services documented?	 Dictated by insurance requirements and guidelines of the setting Emphasis on medical terminology and billing codes

Educational Model

	Educational Model
Where does it start?	 Teacher, parent or other involved person can ask the IFSP/IEP team to consider the need for evaluation
Who decides need for service?	 IFSP/IEP team consensus with recommendation from licensed OT/PT based on testing and classroom/campus observation Assessment takes into consideration only needs associated with special education program
What is the purpose of the evaluation?	 To contribute knowledge and data to the IFSP/ IEP team for discussion and decisions Determine eligibility Helps to identify areas of strengths and needs Helps to guide goals

Educational Model Cont.

	Educational Model
Who decides scope of service?	 IFSP/IEP team- including parents, student (if appropriate), educators, administrators and school-based therapists A doctor's order does not drive decisions about school therapy services
How can services be changed?	 Changes to related services require an IFSP/ IEP meeting with parents, educators, administrators and the school-based therapist
What is the focus of therapy?	 Therapy addresses access to education and school environment Works toward independence and participation Intervention for problems/barriers that interfere with educational process
Where does therapy occur?	 On school grounds, bus, halls, playground, classroom, lunchroom, job site, motor rooms (in some districts)

Educational Model Cont.

	Educational Model
How is therapy delivered?	 Staff training/workshops, consultation, program development, collaboration with staff, group intervention, individual treatments
Who pays?	No cost to student or familyFree and appropriate public education (FAPE)
How are services documented?	 Related to IFSP/IEP with accessible, readable language guided by state and local policy reflecting best practice

Guidelines for OT and PT in California Public Schools, California Dept. of Education, Sacramento, 2010

- [?] In school-based practice, OTs and PTs support a child's ability to gain access to and make progress in the school curriculum.
- OTs are health professionals whose purpose in a public school setting is to support a child's engagement and participation in daily occupations, which include activities of daily living, education, prevocational work, play, rest, leisure, and social participation (AOTA, 2008).
- PTs are health professionals whose purpose is to correct, facilitate, or adapt the child's functional performance in motor control and coordination, posture and balance, functional mobility, accessibility, and use of assistive devices (see http://ww.apta.org).
- OTs and PTs have unique roles in the educational setting in working both on remediation (e.g. improving sensory and motor foundations of learning and behavior) and compensation (e.g. modifying the environment, tools, or task) to help a child succeed at school.