ADAPTIVE PHYSICAL EDUCATION AND OCCUPATIONAL & PHYSICAL THERAPY SERVICES HANDBOOK

2015-2016

*Work In Progress
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Adapted Physical Education and Occupational & Physical Therapy services are provided in the school setting to those children with disabling conditions who require services to benefit from their education.

Therapy services are intended to assist in the development, improvement or maintenance of the student’s functional level when additional intervention is essential for skill acquisition in the educational program.

The purpose of these services is to augment the child’s education program. The development and implementation of the educationally relevant goals should be the result of the team’s collaboration. The need for therapy must be relevant to the student’s performance in the educational environment and be reflected in the IEP. This service delivery is dependent upon group problem solving and implementation of agreed upon strategies in order to enhance the educational and functional abilities of the student. Comprehensive program planning by a multidisciplinary education team is essential.

The members of the collaborative team may include, but are not limited to, the following: teachers, parents, administrators/supervisors, occupational therapists (OT), physical therapists (PT), speech & language pathologists (SLP), educational & occupational/physical therapy assistants, etc., as indicated on the IEP.
Title: OCCUPATIONAL THERAPIST

Reports to: OT/PT Coordinator

Job Objective:
Provides assessments and therapeutic interventions that help identified students achieve maximum benefit from educational programs. Promotes a positive impression of the Madison-Champaign Educational Service Center. NOTE: ESC employees must follow member school district calendars/hours of operations when providing on-site contractual services.

FLSA Status: Exempt

Minimum Qualifications:
- Holds a valid state department of education license/certificate appropriate for the position and a state board license as an occupational therapist.
- Meets all mandated health screening requirements.
- Maintains a record free of criminal violations that would prohibit public school employment.
- Adheres to the Licensure Code of Professional Conduct for Ohio Educators.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Establishes professional relationships with co-workers and functions as part of a cohesive team.
- Takes the initiative to keep work skills updated.
- Ability to travel to multiple locations in the ESC service area.

Essential Functions:
The following are typical work responsibilities. A reasonable accommodation may be made to enable a qualified individual with a disability to perform essential functions.

- Plans, implements, and oversees the ongoing improvement of occupational therapy services.
- Advances the service center and member district’s professional image. Maintains open/effective communications. Uses problem-solving techniques to resolve questions/concerns tactfully.
- Refers program policy interpretation questions to administrators.
- Consults with staff to identify ongoing/emerging occupational therapy needs of students.
- Helps ensure that assessment policies/procedures support non-biased planning activities.
- Prepares the assessment/consultation/treatment area. Requisitions supplies.
- Follows due process procedures to qualify students to receive services. Administers diagnostic tests. Interprets results. Identifies an intervention strategy. Helps the family/student understand how therapy services relate to educational programs.
- Implements protocols to safeguard student information shared with staff and/or referral sources.
- Develops a service schedule. Provides consultation and therapeutic intervention services.
- Explains therapy roles/responsibilities to staff (e.g., evaluations, therapeutic interventions, etc.).
- Communicates therapy goals to students/parents. Shows an active interest in student progress.
- Guides students in therapy regimens and the use of equipment. Helps students increase strength, dexterity, coordination, and endurance skills. Positions students. Teaches daily living skills.
- Devises or adapts equipment and fabricates splints that facilitate therapy outcomes.
- Teaches skills that help students manage the learning environment (e.g., assistive technology, augmentative devices, use of instructional/media resources, access/proximity to activities, etc.).
- Provides information about techniques to help families assist student with activities at home.
- Complies with federal/state policies/procedures for the education of students identified as having a disability. Prepares and implements Individualized Education Plans (IEP). Works with staff to help ensure that services are provided in the least restrictive educational environment.
- Helps staff resolve problems that impede student participation in appropriate learning activities.
- Facilitates opportunities for students with disabilities to participate in an inclusive educational environment. Helps implement behavior management plans when required.
- Documents student progress. Prepares end-of-year recommendations for each student served.
- Consults with parents as needed (e.g., phone calls, E-mail, written notes, meetings, etc.).
- Responds to requests in a timely manner.
- Promotes diversity, cultural awareness, self-reliance, problem-solving, critical-thinking, and creativity skills.
- Maintains a positive learning environment. Facilitates student learning activities that encourage teamwork and positive peer relationships. Facilitates parental involvement.
- Collaborates with staff to share effective intervention strategies and resources.
- Consults with support personnel and families to address student concerns (e.g., academic difficulties, excessive absences, behavior, mental/physical health, family/peer relations, etc.).
- Promotes the proper use and care of program resources. Ensures that all materials are stored properly. Works with staff/students to address equipment safety/security.
- Inspects program equipment to ensure that it is ready when needed. Works with administrators to schedule repairs by outside vendors. Maintains repair records. Evaluates the relevance of new technology. Recommends program purchases. Prepares inventories as directed.
- Requests permission and follows board-approved procedures for the disposal of fixed assets.
- Prepares/maintains accurate records. Submits required paperwork on time.
- Maintains the confidentiality of privileged information.
- Upholds the student conduct code. Implements effective pupil management procedures. Provides appropriate student supervision.
- Takes precautions to ensure safety. Watches for conduct/situations that may indicate a problem. Works with supervisors to manage or eliminate risk factors.
- Reports suspected child abuse and/or neglect to civil authorities as required by law.
- Participates in staff meetings, conferences, and other required school activities.
- Pursues educational opportunities to enhance professional performance.
- Supports workplace initiatives that enhance productivity and advance service center goals.
- Strives to develop rapport and serve as a positive role model for others.
- Helps students understand and embrace ethical conduct and democratic values.
- Maintains a professional appearance. Wears work attire appropriate for the position.
- Provides prompt notification of delays or absences.
- Performs other specific job-related duties as directed.

**Abilities**

The following personal characteristics and skills are important for the successful performance of assigned duties.

- Anticipates time constraints. Manages tasks efficiently to meet deadlines.
- Averts problem situations and intervenes to resolve conflicts.
- Demonstrates professionalism and contributes to a positive work/learning environment.
- Uses active listening, observation, reading, verbal, nonverbal, and writing skills effectively.
- Exhibits consistency, resourcefulness, and resilience.
- Interprets information accurately and initiates effective responses.
- Maintains an acceptable attendance record and is punctual.
- Respects diversity. Manages individual and group interactions skillfully.
- Uses diplomacy and exercises self-control when dealing with other individuals.

**Working Conditions:**

Safety is essential to job performance. Employees must exercise caution and comply with safety regulations and service center procedures when involved in the following situations:

- Balancing, bending, climbing, crouching, kneeling, reaching, or standing.
- Exposure to adverse weather conditions and temperature extremes.
- Exposure to air-borne particulates, chemical irritants, combustible materials, electrical hazards, equipment vibrations, noises, and odors.
- Exposure to blood-borne pathogens and communicable diseases.
- Interacting with aggressive, disruptive, and/or unruly individuals.
- Lifting, carrying, and moving work-related supplies/equipment.
- Operating and/or riding in a vehicle.
- Traveling to meetings and work assignments.
- Working in proximity to moving mechanical parts.

**Performance Evaluation:**

Job performance is evaluated according to policy provisions and contractual agreements adopted by the Madison-Champaign Educational Service Center.

The Madison-Champaign Educational Service Center is an equal opportunity employer. This job description identifies general responsibilities and is not intended to be a complete list of all duties performed. This document may be modified in response to student demographics, staffing factors, funding variables, new operating procedures, program/curriculum changes, and unforeseen events.
This job description is subject to change and in no manner states or implies that these are the only duties and responsibilities to be performed by the incumbent. The incumbent will be required to follow the instructions and perform the duties required by the incumbent’s supervisor/appointing authority.

________________________________________        ___________________
Signature                                                                          Date

Rev. 9.2.10
Title: PHYSICAL THERAPIST  

Reports to: OT/PT Coordinator  

Job Objective: Provides assessments and therapeutic interventions that help identified students achieve maximum benefit from educational programs. Promotes a positive impression of the Madison-Champaign Educational Service Center. NOTE: ESC employees must follow member school district calendars/hours of operations when providing on-site contractual services.

FLSA Status: Exempt

Minimum Qualifications:
- Holds a valid state department of education license/certificate appropriate for the position and a state board license as an physical therapist.
- Meets all mandated health screening requirements.
- Maintains a record free of criminal violations that would prohibit public school employment.
- Adheres to the Licensure Code of Professional Conduct for Ohio Educators.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Establishes professional relationships with co-workers and functions as part of a cohesive team.
- Takes the initiative to keep work skills updated.
- Ability to travel to multiple locations in the ESC service area.

Essential Functions: The following are typical work responsibilities. A reasonable accommodation may be made to enable a qualified individual with a disability to perform essential functions.

- Plans, implements, and oversees the ongoing improvement of physical therapy services.
- Advances the service center and member district’s professional image. Maintains open/effective communications. Uses problem-solving techniques to resolve questions/concerns tactfully.
- Refers program policy interpretation questions to administrators.
- Consults with staff to identify ongoing/emerging physical therapy needs of students.
- Helps ensure that assessment policies/procedures support non-biased planning activities.
- Prepares the assessment/consultation/treatment area. Requisitions supplies.
- Follows due process procedures to qualify students to receive services. Administers diagnostic tests. Interprets results. Identifies an intervention strategy. Helps the family/student understand how therapy services relate to educational programs.
- Implements protocols to safeguard student information shared with staff and/or referral sources.
- Develops a service schedule. Provides consultation and therapeutic intervention services.
- Explains therapy roles/responsibilities to staff (e.g., evaluations, therapeutic interventions, etc.).
- Communicates therapy goals to students/parents. Shows an active interest in student progress.
- Guides students in therapy regimens and the use of equipment. Helps students increase strength, dexterity, coordination, and endurance skills. Works with students to improve mobility, restore function, diminish or relieve pain, and limit the advent permanent physical disabilities.
- Devises or adapts equipment and fabricates splints that facilitate therapy outcomes.
- Provides information about techniques to help families assist student with activities at home.
- Teaches skills that help students manage the learning environment (e.g., assistive technology, augmentative devices, use of instructional/media resources, access/proximity to activities, etc.).
- Complies with federal/state policies/procedures for the education of students identified as having a disability. Prepares and implements Individualized Education Plans (IEP). Works with staff to help ensure that services are provided in the least restrictive educational environment.
- Helps staff resolve problems that impede student participation in appropriate learning activities.
- Facilitates opportunities for students with disabilities to participate in an inclusive educational environment. Helps implement behavior management plans when required.
- Documents student progress. Prepares end-of-year recommendations for each student served.
- Consults with parents as needed (e.g., phone calls, E-mail, written notes, meetings, etc.).
- Responds to requests in a timely manner.
- Promotes diversity, cultural awareness, self-reliance, problem-solving, critical-thinking, and creativity skills.
- Maintains a positive learning environment. Facilitates student learning activities that encourage teamwork and positive peer relationships. Facilitates parental involvement.
- Collaborates with staff to share effective intervention strategies and resources.
Consults with support personnel and families to address student concerns (e.g., academic difficulties, excessive absences, behavior, mental/physical health, family/peer relations, etc.).

Promotes the proper use and care of program resources. Ensures that all materials are stored properly. Works with staff/students to address equipment safety/security.

Inspects program equipment to ensure that it is ready when needed. Works with administrators to schedule repairs by outside vendors. Maintains repair records. Evaluates the relevance of new technology. Recommends program purchases. Prepares inventories as directed.

Requests permission and follows board-approved procedures for the disposal of fixed assets.

Prepares/maintains accurate records. Submits required paperwork on time.

Maintains the confidentiality of privileged information.

Upholds the student conduct code. Implements effective pupil management procedures. Provides appropriate student supervision.

Takes precautions to ensure safety. Watches for conduct/situations that may indicate a problem. Works with supervisors to manage or eliminate risk factors.

Reports suspected child abuse and/or neglect to civil authorities as required by law.

Participates in staff meetings, conferences, and other required school activities.

Pursues educational opportunities to enhance professional performance.

Supports workplace initiatives that enhance productivity and advance service center goals.

Strives to develop rapport and serve as a positive role model for others.

Helps students understand and embrace ethical conduct and democratic values.

Maintains a professional appearance. Wears work attire appropriate for the position.

Provides prompt notification of delays or absences.

Performs other specific job-related duties as directed.

**Abilities Required:**

The following personal characteristics and skills are important for the successful performance of assigned duties.

- Anticipates time constraints. Manages tasks efficiently to meet deadlines.
- Averts problem situations and intervenes to resolve conflicts.
- Demonstrates professionalism and contributes to a positive work/learning environment.
- Uses active listening, observation, reading, verbal, nonverbal, and writing skills effectively.
- Exhibits consistency, resourcefulness, and resilience.
- Interprets information accurately and initiates effective responses.
- Maintains an acceptable attendance record and is punctual.
- Respects diversity. Manages individual and group interactions skillfully.
- Uses diplomacy and exercises self-control when dealing with other individuals.

**Working Conditions:**

Safety is essential to job performance. Employees must exercise caution and comply with safety regulations and service center procedures when involved in the following situations:

- Balancing, bending, climbing, crouching, kneeling, reaching, or standing.
- Exposure to adverse weather conditions and temperature extremes.
- Exposure to air-borne particulates, chemical irritants, combustible materials, electrical hazards, equipment vibrations, noises, and odors.
- Exposure to blood-borne pathogens and communicable diseases.
- Interacting with aggressive, disruptive, and/or unruly individuals.
- Lifting, carrying, and moving work-related supplies/equipment.
- Operating and/or riding in a vehicle.
- Traveling to meetings and work assignments.
- Working in proximity to moving mechanical parts.

**Performance Evaluation:**

Job performance is evaluated according to policy provisions and contractual agreements adopted by the Madison-Champaign Educational Service Center.

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**MADISON-CHAMPAIGN EDUCATIONAL SERVICE CENTER**

**JOB DESCRIPTION**

**Title:** ADAPTED PHYSICAL EDUCATION TEACHER  
**File 315**

**Reports to:** Assigned Supervisor

**Job Objective:** Plans, implements, and oversees the ongoing improvement of student learning experiences. Helps students make appropriate choices and grow academically. Promotes a positive impression of the Madison-Champaign Educational Service Center. NOTE: ESC employees must follow member school district calendars/hours of operations when providing on-site contractual services.

**FLSA Status:** Exempt

**Minimum Qualifications:**
- Holds a valid state department of education license/certificate appropriate for the position.
- Meets all mandated health screening requirements.
- Maintains a record free of criminal violations that would prohibit public school employment.
- Adheres to the *Licensure Code of Professional Conduct for Ohio Educators*.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Establishes professional relationships with co-workers and functions as part of a cohesive team.
- Takes the initiative to keep work skills updated.
- Ability to travel to multiple locations in the ESC service area.

**Essential Functions:** The following are typical work responsibilities. A reasonable accommodation may be made to enable a qualified individual with a disability to perform essential functions.

- Prepares the classroom or designated area for instruction. Teaches assigned classes.
- Advances the service center and member district's professional image. Maintains open/effective communications. Uses problem-solving techniques to resolve questions/concerns tactfully.
- Refers program policy interpretation questions to administrators.
- Maintains a thorough understanding of subject matter and pedagogy. Organizes subject content and learning goals. Aligns lesson plans with state standards and Individualized Education Plan (IEP) objectives.
- Draws on knowledge of human development, personal experience/expertise, and student responses, to develop insights about intellectual, emotional, and functional abilities.
- Evaluates academic needs of students. Develops effective educational experiences that engage and stimulate student learning. Varies instructional techniques to address student learning styles.
- Teaches individual/group games and sports. Implements learning activities that enhance student motor skills and physical fitness.
- Communicates program objectives and performance expectations to students/parents. Provides guidance and shows an active interest in student progress.
- Uses formal and informal assessment strategies to manage student learning and monitor progress.
- Helps students identify and use supplemental instructional/media resources.
- Promotes diversity, cultural awareness, self-reliance, problem-solving, critical-thinking, and creativity skills.
- Maintains a positive learning environment. Facilitates student learning activities that encourage teamwork and positive peer relationships. Facilitates parental involvement.
- Collaborates with staff to share effective intervention strategies and resources.
- Evaluates student achievement/performance. Prepares progress reports.
- Consults with parents as needed (e.g., phone calls, E-mail, written notes, meetings, etc.).
- Responds to requests in a timely manner.
- Consults with support personnel and families to address student concerns (e.g., academic difficulties, excessive absences, behavior, mental/physical health, family/peer relations, etc.).
- Complies with federal/state policies/procedures for the education of students identified as having a disability. Prepares and implements Individualized Education Plans (IEP). Works with staff to help ensure that services are provided in the least restrictive educational environment.
- Facilitates opportunities for students with disabilities to participate in an inclusive educational environment. Helps implement behavior management plans when required.
- Provides accommodations/modifications as needed (e.g., differentiated curriculum, equipment adaptations, extended time, study guides, reading/transcribing assistance, etc.).
- Helps staff resolve problems that impede student participation in appropriate learning activities.
· Promotes the proper use and care of program resources. Ensures that all materials are stored properly. Works with staff/students to address equipment safety/security.

· Inspects program equipment to ensure that it is ready when needed. Works with administrators to schedule repairs by outside vendors. Maintains repair records. Evaluates the relevance of new technology. Recommends program purchases. Prepares inventories as directed.

· Requests permission and follows board-approved procedures for the disposal of fixed assets.

· Prepares/maintains accurate records. Submits required paperwork on time.

· Maintains the confidentiality of privileged information.

· Upholds the student conduct code. Implements effective pupil management procedures. Provides appropriate student supervision.

· Takes precautions to ensure safety. Watches for conduct/situations that may indicate a problem. Works with supervisors to manage or eliminate risk factors.

· Reports suspected child abuse and/or neglect to civil authorities as required by law.

· Participates in staff meetings, conferences, and other required school activities.

· Pursues educational opportunities to enhance professional performance.

· Supports workplace initiatives that enhance productivity and advance service center goals.

· Strives to develop rapport and serve as a positive role model for others.

· Helps students understand and embrace ethical conduct and democratic values.

· Maintains a professional appearance. Wears work attire appropriate for the position.

· Provides prompt notification of delays or absences. Ensures that student lists and teaching materials are readily available for substitutes.

· Performs other specific job-related duties as directed.

Abilities

Required: The following personal characteristics and skills are important for the successful performance of assigned duties.

· Anticipates time constraints. Manages tasks efficiently to meet deadlines.

· Averts problem situations and intervenes to resolve conflicts.

· Demonstrates professionalism and contributes to a positive work/learning environment.

· Differentiates subtle variances in intonation, pitch, rhythm, and sound.

· Exhibits consistency, resourcefulness, and resilience.

· Interprets information accurately and initiates effective responses.

· Maintains an acceptable attendance record and is punctual.

· Respects diversity. Manages individual and group interactions skillfully.

· Uses diplomacy and exercises self-control when dealing with other individuals.

Working Conditions: Safety is essential to job performance. Employees must exercise caution and comply with safety regulations and service center procedures when involved in the following situations:

· Balancing, bending, climbing, crouching, kneeling, reaching, or standing.

· Exposure to adverse weather conditions and temperature extremes.

· Exposure to blood-borne pathogens and communicable diseases.

· Interacting with aggressive, disruptive, and/or unruly individuals.

· Lifting, carrying, and moving work-related supplies/equipment.

· Operating and/or riding in a vehicle.

· Traveling to meetings and work assignments.

Performance Evaluation: Job performance is evaluated according to policy provisions and contractual agreements adopted by the Madison-Champaign Educational Service Center.

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Rev. 9.2.10
Title: OCCUPATIONAL THERAPY ASSISTANT

Reports to: OT/PT Coordinator

Job Objective: Under the direction of an occupational therapist, assists with therapeutic interventions and related program activities. Promotes a positive impression of the Madison-Champaign Educational Service Center. NOTE: ESC employees must follow member school district calendars/hours of operations when providing on-site contractual services.

FLSA Status: Non-Exempt

Minimum Qualifications:
- Holds a valid state board occupational therapy assistant license and appropriate state department of education license.
- Meets all mandated health screening requirements.
- Maintains a record free of criminal violations that would prohibit public school employment.
- Embodies high ethical standards and integrity. Accepts responsibility for decisions and conduct.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Establishes professional relationships with co-workers and functions as part of a cohesive team.
- Takes the initiative to keep work skills updated.
- Demonstrates dependability, flexibility and willingness to take on new responsibilities.
- Positive behavioral support, communicable disease, child abuse/neglect, CPR, first aid, and/or physical restraint training may be required as a condition of employment.
- Ability to travel to multiple locations in the ESC service area.

Essential Functions: The following are typical work responsibilities. A reasonable accommodation may be made to enable a qualified individual with a disability to perform essential functions.
- Checks assignments. Carefully follows directions. Seeks clarification when expectations are unclear. Performs routine responsibilities independently.
- Prepares the therapy area as directed. Sets up equipment. Stocks supplies. Promotes the proper use and care of program resources. Keeps storage areas orderly.
- Works with small groups and/or individual students under the direct supervision of the occupational therapist.
- Advances the service center and member district’s professional image. Maintains open/effective communications. Uses problem-solving techniques to resolve questions/concerns tactfully.
- Refers program policy interpretation questions to administrators.
- Prepares/maintains accurate records. Uses a computer to prepare and process information (e.g., input, compile, tabulate, post, store, retrieve, scan, modify, print, etc.). Verifies the accuracy of data as directed. Submits required paperwork on time.
- Assists with complex evaluation and treatment procedures.
- Follows safety precautions when using heat, cold, light, water, sound, and massage treatments.
- Devises or adapts equipment and fabricates splints to facilitate therapy outcomes.
- Provides instructions in the use and care of assistive and/or augmentative devices.
- Exercises students to increase strength, dexterity, coordination, and endurance skills. Positions students. Teaches students daily living skills and methods to manage their environment. Instructs students in exercise regimens.
- Upholds the student conduct code. Maintains high expectations for behavior and performance. Provides appropriate student supervision as directed.
- Works with the occupational therapist to address persistent behavior problems.
- Maintains a positive therapy environment. Helps parents and students understand therapy goals and how they relate to the educational program.
- Communicates expectations, provides guidance, and shows an active interest in student progress.
- Helps teachers implement classroom modifications, behavioral intervention strategies, and other activities identified in Individualized Education Plans (IEP).
- Helps students take full advantage of the learning environment (e.g., access and proximity to activities, use of adaptive equipment, etc.).
- Documents therapy progress as directed. Submits all therapy reports for review and counter-signature.
- Maintains the confidentiality of privileged information.
· Consults with parents as needed (e.g., phone calls, E-mail, written notes, meetings, etc.).
· Reports suspected child abuse and/or neglect to civil authorities as required by law.
· Participates in intervention assistance team (IAT) meetings when requested.
· Assists the occupational therapist with in-service programs as directed.
· Supports an inclusive educational environment. Helps students with disabilities participate in appropriate learning activities as directed.
· Closely monitors student use of therapy equipment. Follows standard sanitation procedures to maintain a clean program environment.
· Takes precautions to ensure safety. Watches for conduct/situations that may indicate a problem. Works with supervisors to manage or eliminate risk factors.
· Participates in staff meetings and in-service training as directed.
· Supports workplace initiatives that enhance productivity and advance service center goals.
· Strives to develop rapport and serve as a positive role model for others.
· Helps students understand and embrace ethical conduct and democratic values.
· Maintains a professional appearance. Wears work attire appropriate for the position.
· Performs other specific job-related duties as directed.

Abilities
Required:
The following personal characteristics and skills are important for the successful performance of assigned duties.

· Demonstrates professionalism and contributes to a positive work/learning environment.
· Uses active listening, observation, reading, verbal, nonverbal, and writing skills effectively.
· Exhibits consistency, resourcefulness, and resilience.
· Maintains an acceptable attendance record and is punctual.
· Reacts productively to interruptions and changing conditions.
· Uses diplomacy and exercises self-control when dealing with other individuals.
· Works efficiently with limited supervision. Prioritizes tasks to meet deadlines.

Working Conditions:
Safety is essential to job performance. Employees must exercise caution and comply with safety regulations and service center procedures when involved in the following situations:

· Balancing, bending, climbing, crouching, kneeling, reaching, or standing.
· Exposure to adverse weather conditions and temperature extremes.
· Exposure to air-borne particulates, chemical irritants, combustible materials, electrical hazards, equipment vibrations, noises, and odors.
· Exposure to blood-borne pathogens and communicable diseases.
· Interacting with aggressive, disruptive, and/or unruly individuals.
· Lifting, carrying, and moving work-related supplies/equipment.
· Operating and/or riding in a vehicle.
· Traveling to meetings and work assignments.
· Working in proximity to moving mechanical parts.

Performance Evaluation:
Job performance is evaluated according to policy provisions and contractual agreements adopted by the Madison-Champaign Educational Service Center.

The Madison-Champaign Educational Service Center is an equal opportunity employer. This job description identifies general responsibilities and is not intended to be a complete list of all duties performed. This document may be modified in response to student demographics, staffing factors, funding variables, new operating procedures, program/curriculum changes, and unforeseen events.

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Rev. 9.2.10
Title: PHYSICAL THERAPY ASSISTANT

Reports to: OT/PT Coordinator

Job Objective: Under the direction of an physical therapist, assists with therapeutic interventions and related program activities. Promotes a positive impression of the Madison-Champaign Educational Service Center. NOTE: ESC employees must follow member school district calendars/hours of operations when providing on-site contractual services.

FLSA Status: Non-Exempt

Minimum Qualifications:
- Holds a valid state board physical therapy assistant license and appropriate state department of education license.
- Meets all mandated health screening requirements.
- Maintains a record free of criminal violations that would prohibit public school employment.
- Embody high ethical standards and integrity. Accepts responsibility for decisions and conduct.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Establishes professional relationships with co-workers and functions as part of a cohesive team.
- Takes the initiative to keep work skills updated.
- Demonstrates dependability, flexibility and willingness to take on new responsibilities.
- Positive behavioral support, communicable disease, child abuse/neglect, CPR, first aid, and/or physical restraint training may be required as a condition of employment.
- Ability to travel to multiple locations in the ESC service area.

Essential Functions: The following are typical work responsibilities. A reasonable accommodation may be made to enable a qualified individual with a disability to perform essential functions.

- Checks assignments. Carefully follows directions. Seeks clarification when expectations are unclear. Performs routine responsibilities independently.
- Prepares the therapy area as directed. Sets up equipment. Stocks supplies. Promotes the proper use and care of program resources. Keeps storage areas orderly.
- Works with small groups and/or individual students under the direct supervision of the physical therapist.
- Advances the service center and member district’s professional image. Maintains open/effective communications. Uses problem-solving techniques to resolve questions/concerns tactfully.
- Refers program policy interpretation questions to administrators.
- Prepares/maintains accurate records. Uses a computer to prepare and process information (e.g., input, compile, tabulate, post, store, retrieve, scan, modify, print, etc.). Verifies the accuracy of data as directed. Submits required paperwork on time.
- Assists with complex evaluation and treatment procedures.
- Follows safety precautions when using heat, cold, light, water, sound, and massage treatments.
- Devises or adapts equipment and fabricates splints to facilitate therapy outcomes.
- Provides instructions in the use and care of assistive and/or augmentative devices.
- Helps students exercise to increase strength, dexterity, coordination, and endurance skills. Positions students. Helps students improve mobility, restore function, diminish or relieve pain, and limit permanent physical disabilities.
- Upholds the student conduct code. Maintains high expectations for behavior and performance. Provides appropriate student supervision as directed.
- Works with the physical therapist to address persistent behavior problems.
- Maintains a positive therapy environment. Helps parents and students understand therapy goals and how they relate to the educational program.
- Communicates expectations, provides guidance, and shows an active interest in student progress.
- Helps teachers implement classroom modifications, behavioral intervention strategies, and other activities identified in Individualized Education Plans (IEP).
- Helps students take full advantage of the learning environment (e.g., access and proximity to activities, use of adaptive equipment, etc.).
- Documents therapy progress as directed. Submits all therapy reports for review and counter-signature.
- Maintains the confidentiality of privileged information.
- Consults with parents as needed (e.g., phone calls, E-mail, written notes, meetings, etc.).
- Reports suspected child abuse and/or neglect to civil authorities as required by law.
- Participates in intervention assistance team (IAT) meetings when requested.
- Assists the physical therapist with in-service programs as directed.
- Supports an inclusive educational environment. Helps students with disabilities participate in appropriate learning activities as directed.
- Closely monitors student use of therapy equipment. Follows standard sanitation procedures to maintain a clean program environment.
- Takes precautions to ensure safety. Watches for conduct/situations that may indicate a problem.
- Works with supervisors to manage or eliminate risk factors.
- Participates in staff meetings and in-service training as directed.
- Supports workplace initiatives that enhance productivity and advance service center goals.
- Strives to develop rapport and serve as a positive role model for others.
- Helps students understand and embrace ethical conduct and democratic values.
- Maintains a professional appearance. Wears work attire appropriate for the position.
- Performs other specific job-related duties as directed.

**Abilities Required:**

The following personal characteristics and skills are important for the successful performance of assigned duties.

- Demonstrates professionalism and contributes to a positive work/learning environment.
- Uses active listening, observation, reading, verbal, nonverbal, and writing skills effectively.
- Exhibits consistency, resourcefulness, and resilience.
- Maintains an acceptable attendance record and is punctual.
- Reacts productively to interruptions and changing conditions.
- Uses diplomacy and exercises self-control when dealing with other individuals.
- Works efficiently with limited supervision. Prioritizes tasks to meet deadlines.

**Working Conditions:**

Safety is essential to job performance. Employees must exercise caution and comply with safety regulations and service center procedures when involved in the following situations:

- Balancing, bending, climbing, crouching, kneeling, reaching, or standing.
- Exposure to adverse weather conditions and temperature extremes.
- Exposure to air-borne particulates, chemical irritants, combustible materials, electrical hazards, equipment vibrations, noises, and odors.
- Exposure to blood-borne pathogens and communicable diseases.
- Interacting with aggressive, disruptive, and/or unruly individuals.
- Lifting, carrying, and moving work-related supplies/equipment.
- Operating and/or riding in a vehicle.
- Traveling to meetings and work assignments.
- Working in proximity to moving mechanical parts.

**Performance Evaluation:**

Job performance is evaluated according to policy provisions and contractual agreements adopted by the Madison-Champaign Educational Service Center.

The Madison-Champaign Educational Service Center is an equal opportunity employer. This job description identifies general responsibilities and is not intended to be a complete list of all duties performed. This document may be modified in response to student demographics, staffing factors, funding variables, new operating procedures, program/curriculum changes, and unforeseen events.

This job description is subject to change and in no manner states or implies that these are the only duties and responsibilities to be performed by the incumbent. The incumbent will be required to follow the instructions and perform the duties required by the incumbent’s supervisor/appointing authority.

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Rev. 9.2.10

________________________________________        _ ___________________
Signature                                                                          Date
THERAPISTS ROLES IN THE SCHOOL SETTING

Adapted Physical Education, occupational and physical therapy services are provided to students whose handicapping conditions interfere with their ability to benefit from exceptional education programming. The purpose of both occupational and physical therapy includes restoring or maintaining of function; fostering normal development; and, where feasible, preventing disabilities. In order to meet these objectives, therapists are required to assume a variety of responsibilities and roles.

Conceptual Roles

Adapted Physical Education, occupational and physical therapists assume a variety of responsibilities and roles in the school setting. These conceptual roles include but are not limited to the following:

I. **Decision Making**
   A. Assessing the student to determine present level of functioning
   B. Participating in multidisciplinary team decision making
   C. Participating in long-and short–term goal planning for student’s Individual Education Program (IEP)
   D. Designing therapeutic programs to assist the student in achieving educational objectives.

II. **Program Management**
   A. Obtaining an adequate area for therapy in an assigned building
   B. Scheduling students according to levels of service
   C. Recommending therapy procedures designed to achieve educational goals established for the individual student
   D. Recommending equipment and assisting in procurement of the same
   E. Documenting student progress
   F. Evaluating the program

III. **Liaison**
    All therapists act as liaisons between medical and educational systems regarding the student’s *physical condition* and its effect on learning and level of functioning.

IV. **Support/Resource/Consultation**
    A. Providing consultative services to classroom teachers and other educational staff relative to the individual student’s functional level in the classroom.
    B. Providing consultative services to parents regarding the student’s handicap and its effect on the level of functioning at home, school, and in the community, assisting
in locating community resources when the therapy needed is not required to assist the student to benefit from special education.

V. Education
   A. Providing in-service training for teachers, teacher aides, administrators, and other educational staff as necessary.
   
   B. Supervising university students in clinical rotations in occupational and physical therapy programs (optional)
   
   C. Providing staff development
**Similar Roles of Occupational and Physical Therapists and APE Teachers**

The general goal for Adapted Physical Education teachers, physical and occupational therapists is the same: to allow the student to succeed within the special educational setting by minimizing the effect of the physical disability or handicapping condition. The therapists’ basic role is to organize, develop, and implement a therapy program involving the use of selected, constructive activities. Both work to:

- develop physical prerequisites for functional skill development and coordination;
- improve impaired muscle strength and limit the impact of muscle deteriorating disease;
- improve or maintain physical endurance impaired through physical injury or disease;
- improve functional independence by recommending and teaching use of adaptive equipment and/or teaching other methods of compensation;
- educate staff, students, and families regarding each student’s disability, motor potential, use of equipment, and so forth.

Adapted Physical Education teachers, physical and occupational therapists use tests, measurements, and other evaluation procedures to ascertain the student’s functional level, gross and fine motor abilities, and sensory/motor abilities in order to establish performance baselines. All interpret their findings and make educational recommendations. Each profession uses its own expertise in the structuring, conducting, and interpretation of these evaluations.

Adapted Physical Education teachers, physical and occupational therapists participate in developing and writing Individualized Educational Programs, relating goals in the above areas to the exceptional educational setting. Therapy in the educational setting is intended to develop and maintain a student’s physical potential for independence in all educational activities.

Adapted Physical Education teachers, physical and occupational therapists provide related services in the educational setting. They are available to work with, not replace, the educational staff. They are able to provide staff with recommendations and guidance about how best to work with and handle students with handicapping conditions in their classroom, thus providing a “therapeutic day” for their students. Full cooperation among therapists and the educational staff is essential to a student’s successful development and positive school experience.
Rules and responsibilities specific to occupational therapists include but are not limited to the following:

I. Developing prerequisites for fine motor coordination
   A. Developing adequate trunk/head control to sit up, attend to teacher, write, etc. (classroom positioning, or how child sits at a desk/chair, table, carpet square, etc.)
   B. Developing more normal movement patterns in hands/arms
   C. Developing appropriate grasp patterns (dressing, skills, feeding skills, paper, pencil, scissors/hand skills)
   D. Developing full range of motion in trunk/arms (posture, endurance, quality of movements from one position to another)
   E. Developing visual-perceptual skills (copying from blackboard, following written directions, organizing work space)

II. Recommending and training of staff in using equipment/classroom adaptations to develop self-help, daily living skills
   A. Developing adaptations for dressing and feeding
   B. Developing adaptations for writing/reading
   C. Developing adaptations for special chairs
   D. Assisting staff in the use of prosthetic arms
   E. Assisting staff in the use of splints

III. Developing sensory motor skills and sensory integration as necessary for classroom performance (moving about school, writing, reading, playing, dressing)
   A. Developing motor planning (ability to perform an unfamiliar movement)
   B. Promoting bilateral integration (coordinated use of both sides of body)
   C. Reducing tactile defensiveness (abnormal response to touch)

IV. Teaching/helping to develop work simplification and motion economy techniques within the school setting for students with debilitating physical conditions
SPECIFIC ROLES OF PHYSICAL THERAPISTS

Rules and responsibilities specific to physical therapists include but are not limited to the following:

I. Developing prerequisites for gross motor skill development
   A. Developing balance responses (environmental movement skills, i.e. walking, running, balancing, and coordinating on level or uneven surfaces, stair, ramps, and curbs)
   B. Developing truck control for upright postures (endurance levels for independent mobility in school environment)
   C. Developing “normal” movement patterns in legs and feet (motor planning/body awareness for transfers and mobility)
   D. Developing full range of motion in truck, legs, and feet (rise to stand, lower to sit, gait, approach to, leaving stairs, curbs, turns, weight shifts)

II. Developing mobility, including:
   A. Developing independent walking, crawling, and creeping
   B. Developing competence in use of wheelchairs
   C. Developing use of assistive devices such as crutches, canes, walkers, adapted tricycles
   D. Developing use of prosthetic legs

III. Recommending and training of staff in using adaptive equipment/classroom adaptations to enhance gross motor movements
   A. Assisting staff in the use of prone standers/standing frames
   B. Assisting staff in use of special chairs
   C. Assisting staff in use of leg braces, splints
   D. Assisting staff with other positioning equipment

IV. Consulting with and training of staff in the following areas:
   A. Handling
   B. Positioning
   C. Safety/transfers

V. Developing and monitoring programs of postural drainage
THERAPY AS AN EDUCATIONAL NEED

In making recommendations regarding therapy services, the following questions may be helpful.

Educational Need for Service

*Expected Response to Therapy Service*

- Would therapy be expected to contribute to achievement of the student’s overall educational goals or maintenance in the least restrictive environment?

- Has the student received previous therapy? Has the student plateaued? Has the student maintained maximum level of expected functioning without frequent intervention?

- Does the student have perceptual, physical or sensory integrative deficits, which interfere in varying degrees to the achievement of academic, motor, or self-help/mobility skills?

- Does the student have a degenerating condition, which currently requires some degree to intervention to maintain maximum functioning?

- Does the student need some degree of indirect services such as consulting with teachers, parents, and others; setting up school/home programs; and evaluating for adaptive equipment?

- Would therapy be anticipated to contribute to the achievement of overall educational goals (trial therapy)?

*Possibility of Needs Being Met by Other People*

- Can the student’s needs be met by others such as parents, teachers, another school related service (occupational therapy, physical therapy, adapted physical education, or speech pathology), another therapist in the community, or without additional help?

- Does the student’s educational instruction already provide for the necessary remediation of the identified area of disability? Examples include:
  - Speech program includes feeding and oral-motor remediation.
  - Classroom instruction covers the needed perceptual, gross motor, and fine motor needs.
  - Student’s physical education programming covers the needed gross motor, motor planning and perceptual needs.
**Behavior/Cooperation/Motivation**

Behavior may be the primary interference of a student’s performance while the physical disability if only secondary at this particular time.

- Does the student’s behavior/cooperation/motivation consistently prevent therapy from being beneficial? Should therapy be discontinued until the behavior problem is alleviated?

- Is there another staff member or parent who has better rapport with the student whom the therapist could consult in order to provide some appropriate therapeutic intervention?

**Motor Skills Compared to Cognitive Functioning**

- Are the student’s gross and fine motor levels commensurate with his cognitive level, maturational age, and other skill levels? If motor level is commensurate of above, then therapy is probably not warranted. If motor level is below other areas, then therapy may be warranted
GUIDELINES TO INDICATE NEED FOR OCCUPATIONAL THERAPY & PHYSICAL THERAPY

Occupational and physical therapy related services are provided to students with disabilities to help them benefit from the educational process. It is important to identify a student’s need for therapy services in the school setting as opposed to the need for therapy in other settings. Therapy services contribute to the development, improvement, or maintenance of the disabled student’s functional level when educational instruction does not in itself provide for necessary remediation.

Related Services

The following guidelines are provided in an effort to clarify for educators and therapists the indication for occupational, adapted physical education and physical therapy services in the school setting.

I. Student lacks normal basis for sensory-motor development:
   Occupational, and physical therapy services may be necessary when a student demonstrates problems with the prerequisites of motor skill development and coordination. These prerequisites include, but are not limited to, the following:

A. Muscle tone provides the ability to assume and maintain positions against gravity, to voluntarily change positions, and to move freely. Muscle tone is necessary for control and coordination of trunk, legs and arms.
   Rational: Trunk control is necessary for balancing, sitting at a desk, holding up one’s head. Head control is necessary to allow a student to attend to the teacher or to read. Arm control is necessary for writing, breaking a fall, dressing, and eating. Leg control is necessary for walking, moving about the school, running, and independent sitting.

B. Strength and endurance provide the ability to perform expected physical activities without tiring.
   Rational: Students whose strength or endurance has been limited by disease or chronic conditions may not be able to keep up with peers and may be unable to complete classroom assignments.

C. Range of motion is the amount of joint movement.
   Rational: A limited range of joint movement can lead to deformities which interfere with functional use of arms or legs as may be required in the school setting.
D. **Reflexes** are predetermined, obligatory movements to an outside stimulus. One example would be a startled reaction to an unexpected noise. **Rationale:** Abnormal reflex activity may interfere with a student’s attention to classroom work, ability to sit safely, ability to look at an object he or she is holding (eye-hand coordination), ability to maintain pencil grasp, and therefore, general development of motor skills.

E. **Automatic balance responses** provide the ability to maintain and/or regain body position during any movement. **Rational:** Developing balance is necessary for safe sitting, safe walking, and freely changing positions.

F. **Sensory integration** is the organization of sensory input for use. The “use” may be a perception of the body or the world, an adaptive response, a learning response, or movement. Through sensory integration, the many parts of the nervous system work together so that a student can interact with the environment effectively, learn, move, and experience appropriate satisfaction. **Rationale:** A student must understand/organize information from the environment to use it. For example, a student unable to filter out unnecessary tough information may be highly distracted and unable to attend to the teacher. A student unable to learn from past movement motor task (such as holding a pencil) and, therefore, may be unable to have time to do seat work or to learn to dress.

II. **Student lacks functional independence:**

Adapted Physical Education, Occupational, and physical therapy services may be indicated when a student demonstrates problems in performing functional daily living skills owing to a physical/sensory motor deficit.

A. **Mobility** includes any method of purposeful movement used to get from one location to another. It may include rolling; crawling; and using a wheelchair, tricycle, crutches, or other aids. **Rational:** Mobility is important for active participation and for the ability to act on one’s environment. It is important for a student to move within the classroom or school building, to allow incidental learning, to help develop perception, to develop self-worth, and to allow a student to assume appropriate age-level responsibilities.

B. **Fine motor movements** include the prerequisites and combinations of movement necessary to be successful and independent in fine motor skills. **Rationale:** In order to participate effectively in academic tasks, the student must be able to manipulate classroom equipment such as pencils,
scissors, or books. This would include effective reaching, hand grasping, and using both hands.

C. **Gross motor movements** include the prerequisites and combinations of movements necessary to be successful and independent in gross motor skills.

*Rationale:* Balance, muscle tone, strength, and endurance are important prerequisites for gross motor skill development in order for a student to walk, run, climb stairs, use playground equipment, and participate in games and physical education.

D. **Self-help functioning** includes the student’s using prerequisites and combinations of movements to effectively manage daily living needs such as dressing, eating, and toileting.

*Rationale:* Students who are able to independently and effectively manage their own needs have a greater opportunity to benefit from educational programming. Effective independence in feeding, dressing, and toileting can allow a student to spend more class time focusing on the development of academic skills. Such independence is also important in the development of self-worth and independent living.
results in the child’s need for special education and related services.

(vii) “Occupational therapy”:

(a) Means services provided by a qualified occupational therapist licensed under Chapter 4755. of the Revised Code; and

(b) Includes:

(i) Improving, developing, or restoring functions impaired or lost through illness, injury, or deprivation;

(ii) Improving ability to perform tasks for independent functioning if functions are impaired or lost; and

(iii) Preventing, through early intervention, initial or further impairment or loss of function.

(viii) “Occupational therapy assistant services” means services provided by an occupational therapy assistant licensed under Chapter 4755. of the Revised Code and includes assisting in the practice of occupational therapy under the direction and supervision of an occupational therapist.

(ix) “Orientation and mobility services”:

(a) Means services provided to blind or visually impaired children by qualified personnel to enable those students to attain systematic orientation to and safe movement within their environments in school, home, and community; and

(b) Includes teaching children the following, as appropriate:

(i) Spatial and environmental concepts and use of information received by the senses (such as sound, temperature and vibrations) to establish, maintain, or regain orientation and line of travel (e.g., using sound at a traffic light to cross the street);

(ii) To use the long cane or a service animal to supplement visual travel skills or as a tool for safely negotiating the environment for children with no available travel vision;

(iii) To understand and use remaining vision and distance low vision aids; and

(iv) Other concepts, techniques, and tools.

(x) “Parent counseling and training” means:

(a) Assisting parents in understanding the special needs of their child;

(b) Providing parents with information about child development; and
(c) Helping parents to acquire the necessary skills that will allow them to support the implementation of their child’s IEP.

(xi) “Physical therapy” means services provided by a qualified physical therapist licensed under Chapter 4755 of the Revised Code.

(xii) “Physical therapist assistant services” means services provided by a physical therapist assistant licensed under Chapter 4755 of the Revised Code who performs such services under the direction and supervision of a physical therapist.

(xiii) “Psychological services”:

(a) Include but are not limited to:

   (i) Administering psychological and educational tests, and other assessment procedures;

   (ii) Interpreting assessment results;

   (iii) Obtaining, integrating, and interpreting information about child behavior and conditions relating to learning;

   (iv) Consulting with other staff members to plan and develop school programs and interventions to meet the educational needs or special education needs of children or groups of children as indicated by psychological tests, interviews, direct observation, and behavioral evaluations;

   (v) Conducting and monitoring interventions;

   (vi) Diagnosing psychological disorders that effect learning and/or behavior;

   (vii) Planning and managing a program of psychological services, including psychological counseling for children and parents;

   (viii) Participating in the provision of a program of mental health services; and

   (ix) Assisting in developing positive behavioral intervention strategies.

(b) The services of a school psychology aide shall be under the direct supervision of a school psychologist.

(c) The school psychologist intern program shall be organized under guidelines approved by the Ohio department of education, office for exceptional children.

(xiv) “Reader services” means assisting learners with visual impairments by orally reading written materials.

(xv) “Recreation” includes:
services, including the location of the services and any transportation necessary, consistent with rule 3301-51-08 of the Administrative Code, and is developed and implemented in accordance with rule 3301-51-08 of the Administrative Code.

(60) Special education:

(a) General.

(i) “Special education” means specially designed instruction, at no cost to the parents, to meet the unique needs of a child with a disability, including:

(a) Instruction conducted in the classroom, in the home, in hospitals and institutions, and in other settings; and

(b) Instruction in physical education.

(ii) Special education includes each of the following, if the services otherwise meet the requirements of paragraph (B)(60)(a)(i) of this rule:

(a) Speech-language pathology services, or any other related service, if the IEP team considers the service special education rather than a related service under state standards;

(b) Travel training; and

(c) Vocational education.

(b) Individual special education terms defined. The terms in this rule are defined as follows:

(i) “At no cost” means that all specially-designed instruction is provided without charge, but does not preclude incidental fees that are normally charged to nondisabled students or their parents as a part of the regular education program.

(ii) “Physical education” means:

(a) The development of:

(i) Physical and motor fitness;

(ii) Fundamental motor skills and patterns; and

(iii) Skills in aquatics, dance, and individual and group games and sports (including intramural and lifetime sports); and

(b) Includes special physical education, adapted physical education, movement education, and motor development.

(iii) “Specially designed instruction” means adapting, as appropriate to the needs of an eligible child under this rule, the content, methodology, or delivery of instruction:

(a) To address the unique needs of the child that result from the child’s disability; and
(c) Require that personnel serving as physical therapists are licensed pursuant to Chapter 4755. of the Revised Code to practice physical therapy; physical therapist assistants are licensed pursuant to Chapter 4755. of the Revised Code to assist in the provision of physical therapy services under the supervision of a licensed physical therapist; and physical therapists and physical therapist assistants practice in accordance with sections 4755.40 to 4755.56 of the Revised Code and Chapters 4755-21 to 4755-29 of the Administrative Code.

(d) Require that personnel serving as occupational therapists are licensed pursuant to Chapter 4755. of the Revised Code to practice occupational therapy; occupational therapy assistants are licensed pursuant to Chapter 4755. of the Revised Code to assist in the provision of occupational therapy services under the supervision of a licensed occupational therapist; and occupational therapists and occupational therapy assistants practice in accordance with sections 4755.04 to 4755.13 of the Revised Code and Chapters 4755-1 to 4755-9 of the Administrative code.

(3) Qualifications for special education teachers

The qualifications described in paragraph (H)(1) of this rule must ensure that each person employed as a public school special education teacher in the state who teaches in an elementary school, middle school, or secondary school is highly qualified as a special education teacher by the deadline established in Section 1119(a)(2) of the Elementary and Secondary Education Act of 1965, as amended by the No Child Left Behind Act of 2001, January 2002, 20 U.S.C. 6301 (ESEA).

(4) Qualifications for supervisory personnel

Personnel with supervisory responsibilities for the delivery of special education services shall be appropriately licensed.

(5) Policy

(a) School districts in the state shall take measurable steps to recruit, hire, train, and retain highly qualified personnel to provide special education and related services under this rule to children with disabilities.

(b) Personnel shall be provided professional development that aligns with school district goals and objectives and meets the changing needs of children as required by paragraph (A)(8) of rule 3301-35-05 of the Administrative Code.

(6) Rule of construction

Notwithstanding any other individual right of action that a parent or child may maintain under this rule, nothing in this rule shall be construed to create a right of action on behalf of an individual child or a class of children for the failure of a particular Ohio department of education or school district employee to be highly qualified, or to prevent a parent from filing a complaint about staff qualifications with the Ohio department of education as provided for under this rule.

(I) Service provider workload determination for delivery of services
School districts, county boards of developmental disabilities and other educational agencies shall determine workload for an individual service provider based upon all of the factors set forth in subsections 1, 2, and 3 below.

(1) Workload for an individual service provider shall be determined by following process, which incorporates the following components:

(a) All areas of service provided to children with and without disabilities, including, but not limited to: school duties, staff meetings, professional development, supervisions, travel/transition, screening, assessment, evaluation, progress documentation and reporting, secondary transition service planning, conference/consultation pertaining to individual students, documentation for individual students, and third party billing requirements.

(b) The severity of each eligible child’s need, and the level and frequency of services necessary to provide a free and appropriate public education (FAPE).

(c) Time needed for planning in accordance with paragraph (A)(9) of rule 3301-35-05 of the Administrative Code, including statutory and/or contractual agreements applicable to the educational agency.

(2) School-age service providers will provide specially designed instruction in accordance with the following requirements limiting the number of students per licensed professional, as set forth below.

(a) An intervention specialist shall serve no more than sixteen children at the elementary, middle, or junior high school levels, or no more than twenty-four children at the high school level with intellectual disabilities.

(i) No more than twelve children at the elementary, middle, or junior high school levels, or no more than sixteen children at the senior high school level shall be served during any one instruction period.

(ii) The age range shall not exceed sixty months within any one instructional period.

(b) An intervention specialist shall serve no more than sixteen children at the elementary, middle, or junior high school levels, or no more than twenty-four children at the high school level with specific learning disabilities.

(i) No more than twelve children shall be served during any one instructional period.

(ii) The age range shall not exceed sixty months within any one instructional period.

(c) An intervention specialist shall serve no more than ten children with hearing impairments, visual impairments, orthopedic impairments, and/or other health impairments.

(i) No more than eight children shall be served during any one instructional period.
(3) Related service providers for preschool and school-age children with disabilities shall provide specially designed instruction in accordance with the following requirements limiting the number of students per licensed professional:

(a) An adapted physical education specialist shall provide services to no more than one hundred children with disabilities.

(b) An audiologist shall provide services to no more than one hundred school-age children with disabilities or no more than seventy-five preschool children with disabilities.

(c) An occupational therapist shall provide services to no more than fifty school-age children with disabilities or no more than forty preschool children with disabilities. An occupational therapy assistant who provides occupational therapy techniques must do so under the general supervision of an occupational therapist as required by rules 4755-7-01 and 4755-7-03 of the Administrative Code.

(d) An orientation and mobility instructor shall provide services to no more than fifty school-age children with disabilities or no more than forty preschool children with disabilities.

(e) A physical therapist shall provide services to no more than fifty school-age children with disabilities or no more than forty preschool children with disabilities. A physical therapist assistant who assists in the provision of physical therapy services must do so under the supervision of a physical therapist as required by Chapter 4755-27 of the Administrative Code.

(f) A speech and language pathologist shall provide services to no more than:

(i) Eighty school-age children with disabilities, or

(ii) No more than fifty school-age children with multiple disabilities, hearing impairments, autism, or orthopedic/other health impairments, or

(iii) No more than fifty preschool children with disabilities, or

(iv) A combination of preschool and school-age children with disabilities or children with multiple disabilities, hearing impairment, autism, or orthopedic/other health impairments proportionate to the ratios set forth in (I)(3)(f)(i), (ii), and (iii).

Each school district shall provide speech and language pathology services as required by division (F) of section 3317.15 of the Revised Code.

(g) A school psychologist shall provide services to no more than:

(i) One hundred twenty-five school-age children with disabilities, or

(ii) Seventy-five preschool children with disabilities, or
(iii) A combination of preschool and school-age children with disabilities proportionate with the ratios set forth in (I)(3)(g)(i) and (ii).

Psychological services are defined in paragraph (B)(54)(b)(xiii) of rule 3301-51-01 of the Administrative Code. Each school district shall provide school psychological services as required by division (F) of section 3317.15 of the Revised Code.

(4) Transition services
   (a) A work-study coordinator shall provide services to seventy-five children with disabilities.
   (b) A vocational special education coordinator shall provide services to fifty children with disabilities.

(5) Supervisory services
   (a) A supervisor shall provide services to twenty intervention specialists who are providing services to children with disabilities; or
   (b) A supervisor shall provide services to twenty speech and language pathologists; or
   (c) A supervisor shall provide services to twenty school psychologists.
   (d) An occupational therapy assistant must be supervised as required by rule 4755-7-01 of the Administrative Code.
   (e) A physical therapist assistant must be supervised as required by Chapter 4755-27 of the Administrative Code.

(J) Housing, facilities, materials, and equipment and supplies for preschool and school-age programs
   (1) Children and service providers must have a service area that will accommodate the special needs of the children in attendance and shall be large enough to accommodate the use and storage of special equipment and teaching materials. Service areas used for special education classrooms must be equivalent to those used for general education classrooms.
   (2) Each service provider must have access to an office or room space suitable for private consultation or intervention; access to a telephone in an area where scheduling, parent contacts, and confidential conversations regarding children can be completed; and adequate office equipment including a locking file cabinet with a key and supplies.
   (3) Service areas must be equipped with the appropriate materials, equipment, and facilities necessary to identify children with disabilities and to implement the child’s IEP and meet the educational, physical, developmental, and learning needs of children within the area.
   (4) The service areas for intervention specialists shall be located in the section of the building that houses regular education children of comparable age.
(5) The service areas must provide a work environment that supports service providers and is conducive to children’s learning consistent with rule 3301-35-05 of the Administrative Code. Instructional materials, equipment, and technology shall be provided to support each child’s progress toward meeting educational objectives as required in paragraph (I)(1) of rule 3301-35-06 of the Administrative Code.

(6) Evaluation and instructional materials and equipment shall be provided to enable the child with a disability to progress in the general curriculum or in the case of preschool, developmentally appropriate activities, and meet both IEP and performance objectives.

(7) Children with disabilities shall have the same access to textbooks, educational materials, and computer technology that is provided to regular education children.

(8) Additional materials and/or technology must be provided to allow children with disabilities access to the materials used in the general curriculum.

(9) Equipment that is utilized for children with disabilities shall be adequately maintained and promptly repaired.

(K) Waiver

(1) If a school district, county board of developmental disabilities or other educational agency exceeds the workload requirements in paragraph (I) of this rule a waiver request must be filed with the Ohio department of education, office for exceptional children. A school district, county board of developmental disabilities or other educational agency may be granted a waiver for individual service provider limits or for age-range per instructional period as required by this rule.

(2) Requests must be submitted in writing to the Ohio department of education, office for exceptional children or office of early learning and school readiness. The written request shall include, but not be limited to, the following:

(a) Identification of the specific rule for which a waiver is being requested;

(b) Specific period of time for which the waiver is requested; and

(c) Rationale for the request.

(3) Each school district, county board of developmental disabilities or other educational agency shall annually review the reason for its request as it plans for the delivery of services through the strategic planning process as required by paragraph (A) of rule 3301-35-03 of the Administrative Code.

(L) Prohibition on mandatory medication

(1) General

School district personnel are prohibited from requiring parents to obtain a prescription for substances identified under schedules I, II, III, IV, or V in Section 202(c) of the Controlled Substances Act as amended and specified in the Anabolic Steroids Control Act of 1990, November 1990, 21 U.S.C. 812(c) for a child as a
(3) If there is a suspected disability and the child is eligible for special education and related services as a preschool child, the school district shall work with the family to ensure an IEP is in place and implemented by the child’s third birthday. The dates for the initiation and duration of services shall be determined by the evaluation team or the IEP team and other qualified professionals.

(4) A school district must consider extended school year services as part of the IEP process for children transitioning from Part C services. There is no requirement that a child must have previous school experience to receive extended school year services. Based upon data available from the Part C system, the evaluation team or the IEP team and other qualified professionals shall determine if extended school year services are required as outlined in paragraph (G) of rule 3301-51-02 of the Administrative Code.

(5) A school district determined by the Ohio department of education to be noncompliant with the transition timeline to have an IEP in place by an eligible child’s third birthday:

(a) Shall develop a corrective action plan in addition to the interagency agreement. The corrective action plan must include the signature of a representative of the agency responsible for "Help Me Grow" Part C services; and

(b) May have funds reduced or terminated by the Ohio department of education.

(E) Measuring child progress

A school district shall measure a child's progress using multiple sources of information. Information must be obtained across multiple settings, representing a variety of interactions and input from parents and staff involved with the child.

(1) Information shall be analyzed to evaluate the conditions under which desired behaviors occur and if the desired behavior is not demonstrated, an analysis of contributing factors shall be conducted, and changes in the environment, curriculum, and instruction shall be considered.

(2) Information on a child's progress shall be reported in the manner prescribed by the Ohio department of education.

(F) Center-based and itinerant teacher services

A continuum of service delivery options that includes the options of center-based or itinerant teacher services shall be considered when determining the least restrictive environment.

(1) Adapted physical education (APE) or related services, as appropriate, shall be considered in conjunction with center-based or itinerant teacher services. When determining services, the school district shall consider the following factors:

(a) The child’s ability to participate and progress in the general early childhood curriculum; and

(b) The child’s socialization needs; and
Ohio Administrative Code Rules 3301-51-01 to 09, 11 and 21

(c) The child’s educational and developmental progress.

(2) Itinerant services may be delivered in the home, in a preschool program administered by a public school, or in a community-based preschool or child care program that meets the requirements of Chapter 5104. of the Revised Code.

(3) Center-based classroom services may be delivered in an integrated facility, such as team teaching within a community-based program, or a separate facility.

(4) Center-based options must include opportunities for services in settings that are considered to be early childhood settings as the term is used by the United States department of education.

(5) A “change of placement” is defined as a change in the service delivery option (center-based or itinerant teacher).

(6) Center-based environments meeting the federal definition of an early childhood setting shall be considered during the IEP meeting.

(7) Up to eight age-eligible, nondisabled peers may be enrolled in a preschool special education classroom. In such cases, no more than sixteen children shall be present at any one time. The maximum number of children enrolled in any class shall be appropriate for the severity of disabilities and needs of the children enrolled.

(G) Preschool services

Special education and related services shall be provided in accordance with the following:

(1) Unless otherwise specified in the IEP, preschool children eligible for special education are considered to be receiving full-day center-based services if twenty or more hours of center-based services are provided per week;

(2) Unless otherwise specified in the IEP, a minimum of four hours of services per month shall be provided for each child by an itinerant teacher and a minimum of ten hours of services per week shall be provided for each child served by a center-based teacher:

(a) Preschool children eligible for special education are considered to be .50 full-time equivalency (FTE) if ten hours of center-based preschool special education services are provided per week.

(b) Preschool children eligible for special education receiving itinerant teacher services are considered to be .50 FTE.

(3) Services may be provided directly to the child or provided to the child using a consultative model. Consultative services may include all staff involved with the preschool child who is eligible for special education;

(4) All staff involved in service delivery shall contribute to planning instruction and monitoring progress;

(5) Service delivery may be done through a team teaching or transdisciplinary model in conjunction with “Head Start”, public preschools, community preschools, or child care; and
Ohio Administrative Code Rules 3301-51-01 to 09, 11 and 21

(6) A school year consistent with section 3313.48 of the Revised Code shall be provided to preschool children who are eligible for special education.

(H) Preschool service provider ratios

Preschool service providers will provide direct or consultative services, including sufficient supervision, during all activities in accordance with the following ratios:

(1) Center-based preschool special education classrooms shall serve no more than eight preschool children with disabilities in any one class session. If a teacher is responsible for two half-day class sessions, no more than sixteen children shall be served per teacher;

(2) A full-time staff member shall be provided when there are six full-day or twelve half-day preschool children eligible for special education enrolled in a center-based program;

(3) A teacher providing both center-based and itinerant services shall serve no more than twenty children, and each child will be considered .50 FTE;

(4) An itinerant teacher shall serve no more than twenty children, and each child will be considered .50 FTE;

(5) Staff ratios of one teacher for six children shall be maintained at all times for a center-based teacher, and a second adult shall be present when there are seven or more children, including nondisabled peers, enrolled in a class session; and

(6) Sufficient staff shall be available at all times when preschool children eligible for special education are enrolled so that in emergency situations when help must be summoned, ratios shall be maintained, and children shall be sufficiently supervised during all activities;

(7) APE and related services shall be counted as one FTE based upon the following number of eligible preschool children served:

(a) An APE staff member at one FTE shall have a caseload of no more than one hundred eligible preschool children;

(b) A preschool attendant at one FTE shall have a caseload of no more than three eligible preschool children;

(c) An audiologist at one FTE shall have a caseload of no more than seventy-five eligible preschool children with hearing impairments;

(d) An occupational therapist at one FTE shall have a caseload of no more than forty eligible preschool children;

(e) An orientation and mobility specialist at one FTE shall have a caseload of no more than forty eligible preschool children with visual impairments;

(f) A physical therapist at one FTE shall have a caseload of no more than forty eligible preschool children;

(g) A school psychologist at one FTE shall have a caseload of no more than seventy-five eligible preschool children or on the basis of one thousand
This three-ring model represents the three disciplines of physical therapy, occupational therapy and adapted physical education. Each segment of the circles denotes areas examined by each individual discipline as well as areas of overlap between disciplines. This model is dynamic in nature and, therefore, ever changing depending upon the expertise and experience of the team. For example, oral motor may be in the OT only segment if the PT has no experience or expertise in oral motor. Each motor team should adapt the model to reflect their student population and the expertise of individual team members. The model is designed to reflect the “what” the disciplines address, not the “how” the disciplines address each area. This implies that disciplines are Interactive and that one discipline may not necessarily be substituted for another.
SERVICE DELIVERY PROCESS

A. DETERMINATION OF SERVICES DELIVERY AND FREQUENCY

Once the student is eligible for related services, the IEP team meets to determine the educational goals and objectives and the appropriate service delivery for meeting them. These goals and objectives will be reviewed annually. If at any time a change in delivery is suggested, the IEP team will reconvene to determine the most appropriate service delivery. An IEP amendment will be done.

The amount of service that is most appropriate to meet the needs of the student is determined by IEP team after careful consideration of the following factors:

1) the extent to which the areas of concern relate to needs that therapy can address.

2) the degree that the areas of concern are interfering with educational progress of functioning.

3) the possibility of regression in relationship to peers or potential in these areas if therapy is not continued or provided at a certain level.

4) the extent to which opportunities for meeting the student’s needs exist in the educational environment.

5) the level of progress that the student has achieved in the classroom relative to the areas of concern being addressed.

6) the student’s potential (based on age, handicapping condition and assessed response) to benefit from therapy intervention.

B. CHANGE OF SERVICE

1) Changes in service may be recommended by their therapist to the IEP team, based upon changes in the student’s physical/functional status.

2) These changes will involve an IEP revision.

C. DISMISSAL

If a student is being considered for dismissal from OT, APE or PT related services, an IEP Team meeting must be held.
METHODS OF SERVICE DELIVERY

I. Contact Time: Time spent providing the following services to enhance a student’s exceptional educational program. The student must be present.

A. Evaluation - the individualized, detailed, and documented assessment of a student known to have or suspected of having an educationally handicapping condition.
   1. New referrals
   2. Re-evaluations of students presently on caseload

B. Therapeutic intervention - implementation of OT/APE/PT programs
   1. Student therapy session
   2. Classroom observation of student
   3. Teacher, staff, parent consultation, with student present
   4. Positioning, fitting, or adjusting adaptive equipment
   5. Home visit
   6. Hospital or clinic visit with student

II. “On Behalf of” Time: time spent on the following student-related activities. The student is not necessarily present.

A. Program planning and preparation
   1. IEP conference and revisions, as necessary
   2. Therapy planning based on IEP
   3. Preparing materials
   4. Ordering or making of adaptive equipment

B. Report writing
   1. Initial evaluation, annual report; or re-evaluation
   2. Progress notes
   3. Home programs
   4. Letters to physicians or to other agencies

C. Communication
   1. Phone calls related to student services, i.e., parent, physician wheelchair service
   2. M-Team meetings
   3. Informal staffing conferences
III. **Preparation Time:** Time spent on job-related activities other than contact or “on behalf of” time.

A. General classroom observation and teacher consultation regarding possible student referrals
B. Recordkeeping, i.e., attendance, monthly data sheets
C. Scheduling
D. General equipment and supply upkeep (not student specific)
E. General staff in-service and department meetings
F. Phone calls and written documents concerning the above
Resource Alternatives

Resource alternatives are possible adjuncts to the therapy service or, if no therapy service is indicated, as part of the student’s educational program.

I. Within the School Setting
   A. Teacher
   B. Paraprofessional
   C. Other students in class (i.e. peer model or peer mentor, etc.)
   D. Regular education students (i.e. peer model or peer mentor, etc.)
   E. Adult volunteer, room parent
   F. Physical education program (regular, adapted, specially-designed physical education)
   G. Parent-teacher organization

II. Within the Community
   A. Parents, family members
   B. Therapy services through local hospital, rehabilitation centers, private therapy, etc.
   C. Physicians (to monitor progress or changes)
   D. Volunteers (foster grandparent, big brother/big sister program, PTO, etc.)
   E. Community recreation programs (summer camp, YMCA, swimming program, etc.)
   F. Local or state associations (United Cerebral Palsy, Association for Retarded Citizens, Muscular Dystrophy Association, Visiting Nurse, etc.)
Service Delivery Models

There are three basic service delivery models:

1. **Direct Treatment** which uses specific therapeutic techniques to remediate or prevent student problems. These students are going through rapid and/or crucial changes in physical/functional status.

2. **Monitoring** which is the training and supervision of their professionals and paraprofessionals to implement intervention procedures. For those students who the therapist has evaluated and whose condition is relatively stable.

3. **Consultation** which uses the expertise of the OT/APE/PT to help educational staff meet programmatic and student needs. These students’ needs are less severe and whose physical/functional status is stable.

In every instance, the OT/APE/PT is responsible for evaluating the student and for developing the intervention program. Also, the OT/APE/PT is responsible for monitoring the provision of services except for the consultation model, in which case the educational staff is responsible for monitoring progress and consulting with the OT/APE/PT as questions arise and/or conditions change. The major distinctions among the models are illustrated by the following diagram.

<table>
<thead>
<tr>
<th>OT/APE/PT Service Delivery Model</th>
<th>Responsible For</th>
<th>Responsible For Program</th>
<th>Responsible For Follow Up</th>
<th>Minimum Frequency</th>
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</thead>
<tbody>
<tr>
<td>Direct Treatment</td>
<td>OT/APE/PT</td>
<td>OT/APE/PT, *COTA/PTA</td>
<td>OT/APE/PT</td>
<td>1/week</td>
</tr>
<tr>
<td>Monitoring</td>
<td>OT/APE/PT</td>
<td>OT/APE/PT *COTA/PTA or Educational Staff</td>
<td>OT/APE/PT</td>
<td>2/month</td>
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<tr>
<td>Consultation</td>
<td>OT/APE/PT</td>
<td>Educational Staff</td>
<td>None</td>
<td>N/A</td>
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</table>

*Certified occupational or physical therapy assistants may provide occupational or physical therapy under the supervision of a licensed occupational or physical therapist
Accurate assessment and careful monitoring to assure appropriate service are crucial when their therapist is not providing the direct service. In those instances where it is not necessary for the OT/APE/PT to provide direct service, their therapist must be involved with the other persons who will (regular or adaptive), paraprofessionals, parents, and volunteers are all potential providers of appropriate activities to meet the student’s needs.

Decisions regarding (1) whether the therapy is educationally or medically necessary, (2) which therapy model is most appropriate for the student, (3) who will provide those necessary services that are not provided by their therapist, and (4) how student progress will be evaluated and monitored raise complex legal, medical, educational, and financial questions. Those questions must be addressed.
1. All new referrals must be coordinated with the Director of Special Education for your school district. They will distribute all referral packets to the appropriate therapist. (See chart below)

2. Checklists are included in the referral packet to facilitate decision making for when to refer to OT/PT. Typically the Gross Motor Checklist has been filed out by the PE teacher and the Fine Motor Checklist has been filled out by the classroom teacher. These checklists are very helpful to our therapists, but they are considered optional.

3. OT/PT are designated related special education services. Referrals need to reflect input from either the MFE team or from the IAT. If a student with a disability on an IEP is not currently in an MFE process, the OT/PT evaluation should initiate an MFE review.

4. Therapists will schedule evaluations based on the order in which the completed referral forms are received. If it appears that the evaluation cannot be completed before the end of the 60 day period, the therapist will contact the Special Education Administrator for direction.

5. **Transfer Students**
   - Names of transfer students with OT/PT on their current IEP will be forwarded to ESC, attention OT/PT Department.
   - OT / PT should ask for a copy of Enrollment Form so they have current address & contact information.
   - Student names will be forwarded to therapist. Therapist will communicate with district contact person.
   - The referral packet, complete with written request for service, current IEP, and copies of any available OT/PT reports (medical reports) should be provided to the therapists.
<table>
<thead>
<tr>
<th>District</th>
<th>Spec. Ed Administrator</th>
<th>OT</th>
<th>PT</th>
<th>APE</th>
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<tr>
<td><strong>Champaign County</strong></td>
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<tr>
<td>Mechanicsburg</td>
<td>Ce Greene</td>
<td>Terri Schmitt</td>
<td>Tricia Honeycutt</td>
<td>Chasity Gregorek</td>
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<tr>
<td>West Liberty-Salem including ESC</td>
<td>Julie Hartsel</td>
<td>Mindy France –HS MD</td>
<td>Lori Perkins</td>
<td>Chasity Gregorek</td>
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<tr>
<td>Preschool class</td>
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<tr>
<td>Triad including ESC</td>
<td>Michele Peters</td>
<td>Patricia Kauffman-</td>
<td>Tricia Honeycutt</td>
<td>Chasity Gregorek</td>
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<td>Urbana School Age</td>
<td>Lucas Pozenel [or</td>
<td>Kristi Borger</td>
<td>Heather Embry</td>
<td>Chasity Gregorek</td>
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<td>Graham</td>
<td>Emily Smith</td>
<td>Catie Ungs</td>
<td>Lori Perkins</td>
<td>Chasity Gregorek</td>
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<td>Cathy Pappas</td>
<td>Karen Kleis, Mindy</td>
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<td>France, and Kristi</td>
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<td>Borger</td>
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<td>Refer to class’s site</td>
<td>Chasity Gregorek</td>
</tr>
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<td>location</td>
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<td>Mary Mitchell</td>
<td>Mindy France</td>
<td>Lori Perkins</td>
<td>Chasity Gregorek</td>
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<td>Jonathan Alder</td>
<td>Shawn Heimlich</td>
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<td>Leigh Counts</td>
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<td>Jennifer Merb</td>
<td>Leigh Counts</td>
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</tbody>
</table>

2
FORMS CHECKLIST

The following information **MUST** be complete prior to being added to the list of completed referral packets for evaluation scheduling.

New Referral:

- [ ] Request form for OT/PT/APE Services or information on it in an email message
- [ ] COPY of Parent Consent for Evaluation (PR-05)
- [ ] Parent Survey (optional)
- [ ] Gross and Fine Motor Checklists (optional)

Transfer Student:

- [ ] Request form for OT/PT/APE Services or information on it in an email message
- [ ] COPY of Current IEP
- [ ] COPY of current ETR (optional)
- [ ] Parent Survey (optional)

Screening Referral:

- [ ] Request form for OT/PT/APE Services or information on it in an email message
- [ ] COPY of Permission to Review (CI-213)
- [ ] Gross and Fine Motor Checklists (optional)
REQUEST FORM FOR OT/PT/APE SERVICE

Service Requested: □ OT □ PT □ APE

□ New Referral  □ Transfer Student with □ OT □ PT □ APE currently on the IEP (please attach)

□ Screening Only

Student Name ____________________________________________ Date of Birth ____________________________

District of Attendance ____________________________ School Building and Phone Number ____________________________

District of Residence ____________________________ Teacher and Room # ____________________________

End of 60 day Evaluation ____________________________ Date of Anticipated ETR ____________________________

Signature of Director/Supervisor of Special Ed. or the district fiscal rep. ____________________________ Date ____________________________ Phone # ____________________________

Please Note: OT/PT Evaluations must be requested through your Director/Supervisor of Special Education or another district fiscal representative. They must sign this form to authorize funding for the evaluation.

Please give a brief description of the main reason for the referral and/or primary concerns:

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Please list strategies that have been attempted to address this concern:

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________
Madison-Champaign Educational Service Center

Parent Survey

To: Parents and Guardians
From: Occupational / Physical Therapists

Please complete this form with the most recent and accurate information so that we may better understand your child prior to his/her evaluation. We use this information to complete our records and to plan for the type of evaluation activities that will be most appropriate for us to use with your child. You know your child best and we value any information you can give us. Thank you very much for your time.

Student Name: _______________________________________ Birthdate: _____________________

Parent/Guardian Name: _____________________________________________________________

Phone #: ________________________________ Daytime #: _______________________________

1. Please identify areas the concern you regarding your child's small motor skills or large motor skills and your child's ability to use these skills at school.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

2. Please identify skills/characteristics that you feel are strengths for your child.

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

3. Does your child have Diabetes? □ Yes □ No

4. Is your child sensitive to latex products? □ Yes □ No

5. Does your child have a history of seizures? □ Yes □ No

6. Does your child use any adaptive equipment at home or at school? Please circle

Car Seat                     brace/splint  glasses  ramp  hearing aide
Crutches                   wheelchair     adapted toilet seat      walker
Adapted eating utensils      adapted drinking cup

7. Please list the names of Physicians/Specialists seen by your child:

Pediatrician/Family _________________________________ Orthopedist ____________________
Neurologist _______________________________________ Vision Specialist ________________
ENT ____________________________ (outside school) Speech/OT/PT ______________________
Internal Med _________________________________ Mental Health Professional __________
Other ________________________________________________________________________________

Thank you for taking time to complete this form. This information will help us maintain a safe and appropriate environment for your child's learning.

Informant ____________________________________ Date __________________
Student Name: ______________________ Age: __________ Grade: ______

(Circle one please)
Student uses mostly RIGHT/LEFT /BOTH hands for writing and fine motor tasks.
Student DOES/ DOES NOT wear glasses, if so: ALL THE TIME/JUST FOR READING/ JUST FOR DISTANCE

Instructions: Please place a check by any of the following statements that are NOT true for this student.
- Physical maturity/size is average for his/her age
- Demonstrates adequate hearing, vision, and language skills to listen and follow directions
- Demonstrates age appropriate social skills
- Has no medical or medication issues that affect adequate motor skill performance
- Cooperates with teacher and follows rules in class
- Shifts body positions appropriately when writing
- Can efficiently use classroom tools (scissors, ruler, pencil sharpener, eraser)
- Holds pencil correctly
- Consistently uses the same hand for written work, cutting etc. (past 6 yrs old)
- Controls pencil pressure when writing
- Written work is neat and legible in relation to peers
- Can use both hands together in a coordinated manner (cutting, zipping, tying)
- Demonstrates no frustration with fine motor tasks regularly
- Can complete fine motor tasks within usual time limits
- Uses just fingers to pick up items
- Can make smooth lines for shapes or letters
- Able to copy/draw basic geometric shapes (square, circle, triangle, cross)
- Able to stay on the line or within the boundary lines when coloring or tracing
- Spaces appropriately between words when printing
- Handles manipulatives without difficulty (bears, blocks, puzzles)
- Does not lose place on page of work
- Copies from book or board without difficulty
- No reversals in letters or numbers (after 1st grade/age 8)
- Can manage all clothing and toileting needs
- Can manage all needs in the lunchroom
- Does not overreacts to sudden touch or sound
- Is not fearful of movement
- No excessive craving for bouncing, swinging, spinning
- Doesn’t avoid crowded areas
- Refrains from touching everything he/she sees
- Explores unfamiliar textures
- No difficulty learning new motor skills
- Able to cope with routine or schedule changes
- Is not distractible/Impulsive/hyperactive
- Does not tends to repeat directions to self repeatedly
- No marked mood variations, outbursts, tantrums, silliness, excuses
- Is able to visually attend to work, to hands, or to people
- Manipulation of scissors is appropriate
- Can do 2 motor tasks at the same time
- Orients written work to the page correctly
- Demonstrates good writing posture
- No complaint of fatigue or pain with seatwork/writing
- Can follow 1,2, or 3 step directions
- Is not fidgety
- Can organize belongings
- Can retrieve dropped items effectively
- No difficulty moving eyes without moving head
- Good 1:1 correspondence
Madison-Champaign Educational Service Center
GROSS MOTOR CHECKLIST

Student Name: __________________________ Age: ___ Grade: ___ Informant: __________ Date: ______

(Circle one please)
Student uses mostly RIGHT/LEFT/BOTH hands for writing and fine motor tasks.

Student DOES/DOES NOT wear glasses, if “does” answer: ALL THE TIME/JUST FOR READING/JUST FOR DISTANCE

Does the child participate in any organized/recreational sports? YES/NO If so, What? ________________

Please place a check on any of the following statements that are NOT true.

○ Physical maturity/size is average for their age
○ Appears to have adequate hearing, vision, and language skills to listen and follow directions
○ Appears to have age appropriate social skills
○ Has no medical or medication issues that affect adequate motor skill performance
○ Cooperates with teacher and follows rules in class
○ Transitions smoothly between motor activities
○ Shifts body position appropriately when writing
○ Reacts appropriately to unexpected touch, sounds or movement
○ Is able to manage all needs in the lunchroom
○ Balances without difficulty when walking
○ Balances without difficulty when standing on one foot
○ Balances without difficulty when jumping rope.
○ Maneuvers around obstacles in his/her path with ease
○ Moves without fear
○ Walks efficiently within the environment
○ Runs efficiently
○ Hops on 1 foot efficiently
○ Skips efficiently
○ Jumps on 2 feet efficiently
○ Successfully maneuvers on playground equipment independently
○ Learns new motor skills easily
○ Demonstrates no frustration with motor tasks
○ Completes at least 2 motor tasks at the same time without difficulty
○ Can adequately kick
○ Can adequately jump rope
○ Can adequately broad jump
○ Can adequately throw a ball in relation to peers
○ Can adequately catch a ball in relation to peers
○ Can adequately dribble a ball in relation to peers
○ Can adequately bounce a ball in relation to peers
○ Demonstrates good writing posture
○ Expresses no complaints of fatigue or pain with seatwork/writing
○ Follows 1,2, and 3 step directions
○ Can retrieve dropped items effectively
○ Is generally physically fit
○ Good body awareness (left/right, special awareness, directionality, sequencing movement)
○ Able to keep up in gym and on playground
○ Can properly adjust activity level to various demands; especially in gym class
○ Able to negotiate stairs, ramps and curbs
○ Able to remain seated without falling
○ Free from frequent falls

Revised 1/2007
Once you meet with the district contact person, the following documentation should be in order:

- Consent for Evaluation (Form PR-05)
- Parent survey (optional)

Once these are obtained, the OT/PT can begin assessment.
Parent Consent for Evaluation (Form PR-05)

Districts are required to obtain consent from the parent, legal guardian, or custodian prior to conducting an initial evaluation or re-evaluation, which may require additional assessment of a child. Districts should instruct the parent or other responsible party to either complete Part I, which grants the consent, or Part II, which refuses consent, and return the form to the district.

Should the parent or other responsible party either provide or deny consent, the district needs to provide a copy of the Procedural Safeguards Notice and ensure that the recipient understands the information.

In Part III, the district needs to document that it provided information about the evaluation and the Procedural Safeguards Notice.

Reference: Rule 3301-51-05(E), Operating Standards for Ohio’s Schools Serving Children with Disabilities.
PR-05 PARENT CONSENT FOR EVALUATION

TYPE OF EVALUATION

☐ Initial Evaluation    ☐ Reevaluation (if additional assessment is to be conducted)

PART 1: TO GRANT CONSENT

I HEREBY GIVE MY PERMISSION FOR ________________________________ to receive an evaluation(s) by designated personnel. I understand the evaluation information will be shared by teachers, principals, and other appropriate school personnel, and that the school district will forward educational records upon request to another school district or educational agency in which my child seeks or intends to enroll. I further understand that my granting of consent is voluntary on my part and I may revoke my consent at any time.

I have received a copy of my procedural safeguards and I understand the information provided.

Signature of parent/legal guardian/custodian, or student (if age 18 or older)      Relationship to Child      Date

PART 2: TO REFUSE CONSENT

(Do Not complete Part II if you completed Part I)

I have received a copy of my procedural safeguards and I understand the information provided.

I DO NOT GIVE MY PERMISSION for an evaluation for: ________________________________

Reasons: (It would be helpful to school personnel who are designing an educational program to meet your child's unique needs if you would share with us your reasons for not giving your permission for an evaluation.)

Signature of parent, legal guardian, custodian, or student (if 18 or older)      Relationship to Child      Date

PART 3 (To be completed by the school)

Information about the evaluation and a copy of the procedural safeguards notice were presented/sent by:

Signature of school district representative      Date(s)

The parents’ native language is ________________________________

If not English, was the information provided in the native language or other mode of communication of the parents? ☐ YES ☐ NO

If no, explain:

If the native language or other mode of communication is not a written language, attach documentation of the steps taken to ensure that the notice was explained and that the parent understands the content of the notice.
PARENT/GUARDIAN/STUDENT CONSENT FOR MEDICAL RECORDS AND/OR INFORMATION RELEASE

I authorize the reciprocal sharing of information between the following parties regarding:

STUDENT: ___________________________ AGE: _____ BIRTHDATE: ________________

TO: _________________________________ FROM: _________________________________
   (Name)                              (Name)
   (Agency)                            (Agency/School)
   (Student Address)                   (Student Address)
   (City, State, Zip Code)             (City, State, Zip Code)

Permission is granted to communicate with and disclose to one another the following information:
   ____ The following records only: (please specify)
   ___________________________________________________________________________________
   ___________________________________________________________________________________

Reason for request: (please check one)
   ____ To aid in making present and future educational decisions
   ____ Other: (please specify)
   ___________________________________________________________________________________

I understand that I have the right to revoke this authorization at any time by sending or delivering such written notification to the administration office of the student’s school district. I understand that a revocation is not effective to the extent that the school has already acted on the authorization.

I further understand that once the information is disclosed under this authorization, the receiving school district could disclose it to another school district and federal privacy law in the receiving party’s hands may no longer protect it.

The authorization shall expire on ____________________________.

Educational services shall not be denied or withheld if permission is not granted.

Date_____________________________ (Signature of parent/guardian)
   (Address)
   (City, State, Zip Code)

FOR AGENCY/OFFICE USE ONLY
Date Data Released __________________ by ________________________________
Date Copies Mailed __________________ by ________________________________
Physicians Orders: Physical Therapy

The passage of P.L. 47533.481, allows a physical therapist to evaluate and treat a patient without a prescription. If the evaluation is completed, within 5 days and with parental consent, the physical therapist (PT) will inform the child’s physician about the evaluation. If the child does not have a physician, the physical therapist is not responsible to notify anyone. If the child does not make the substantial progress within 30 days, the PT shall consult with or refer the child to a licensed physician unless either of the following applies:

- The evaluation, treatment, or services are provided for fitness, wellness, or prevention purposes OR
- The patient previously was diagnosed with chronic, neuromuscular, or developmental conditions and evaluation, treatment, or services are being provided for problems or symptoms associated with one or more of those previously diagnosed conditions.
CONSENT TO INFORM PHYSICIAN OF PHYSICAL THERAPY EVALUATION

The Laws and Rules Regulating the Practice of Physical Therapy in the State of Ohio require that if a physical therapist evaluates and treats a patient without the prescription of, or the referral of the patient by a physician or other qualified practitioner, then the physical therapist shall, upon consent of the patient (or guardian in the case of a minor), inform the physician of the evaluation not later than five business days after the evaluation is made.

_____ I DO NOT want the physician informed of ___________________ ‘s physical therapy evaluation.

_____ I DO want the physician informed of ___________________ ‘s physical therapy evaluation.

Physician’s Name:____________________________________________

Physician’s Address:____________________________________________

Physician’s Phone Number:_______________________________________

Physician’s Fax Number:________________________________________

_________________________                        ____________
Guardian’s signature                                           Date
SCHEDULING CONSIDERATIONS

THERAPY LICENSES IN SCHOOL SITES: Even though license verification is available to be viewed by anyone at www.otptat.ohio.gov licensees shall display the original license at their principal place of business and shall have available at all locations of service delivery a copy of their current license information from the Ohio e-license center verification page: http://license.ohio.gov/lookup/.

SCHOOL SCHEDULES: (general considerations)
Obtain a copy of the CURRENT school year calendar, available from the school secretary or district contact person. Note that school calendars may vary by district, and you will need to be aware of:

- year round (12 month) vs. traditional (9 month) sessions
- holidays and seasonal (Winter, Spring) recess dates
- parent/teacher conference days
- teacher/staff in-service day(s)
- school emergency closing

SCHOOL SCHEDULES: (specific considerations)
Consult with building staff (teachers, principal) to determine:

* Student schedule: Attempt to schedule therapy sessions around priority academics (consult with teacher), noting that students may not be pulled from “specials”, or classes mandated on the IEP, unless signed parent consent is obtained.

  Kindergarten: These classes are usually scheduled for ½ day a.m. or p.m. sessions, or may follow either a 4-day or an alternating (M/W/F) schedule. Therapy should be scheduled during school hours.

  Therapy space availability: Consult with building staff when scheduling therapy day and time, as a “desired” space may be available to you if you can schedule around staff use. Provision of an “adequate” space is assured by the district requesting service.
**DOCUMENTATION**

**FILES:**
All files which contain personally identifiable material are to be treated as confidential. Therapy providers accessing these files must be authorized to do so and are required to sign and date an Access Record found in the front of the file.

Complete student files are maintained by each school district. There may be several files within a school building, including a cumulative file and a confidential file. A confidential file may be kept at the Board Office. To access these files speak with the school principal or your district contact person.

Each therapy provider maintains a “working” file on students currently being served. This file may contain copies of evaluations, the IEP, progress notes, work samples, anecdotal notes, attendance records, etc. It is to be treated with confidentiality and is intended for the therapy provider’s reference. When a student is discharged from therapy the working file is placed in an inactive file drawer in the office for a period of two years. After two years that working file should be returned to the district.
Assessment

Assessment entails occupational/physical therapy evaluation of students to determine fine and gross motor abilities and functional ability within the school setting. Assessment may include observation, testing, and a review of records.

Each individual therapist will schedule evaluations with students and their teachers as appropriate. The assessment process shall not begin until the OT/PT Referral packet parental permission for evaluation are on file in the district office. Previous OT/PT and medical records should also be requested by review before the assessment is begun.

The evaluation process should, when appropriate, involve observation of the student in the classroom as well as during motor activities. Therapists use a variety of motor skill, developmental, and standardized performance tests. A brief description of most frequently used assessment tools follows in this section.

Following completion of the evaluation, the therapist is responsible for providing a written summary of the evaluation and making recommendations to the multidisciplinary team. Guidelines for recommendations have been developed to assist the therapist with this process. Re-evaluation is required every three years for IDEA and annually for MSP. However, the MSP annual reevaluation can simply be statements of progress noted in MSP notes but must be called annual evaluation.

Evaluation Methods

The choice of evaluation method is determined by the therapist based upon the reason for the therapy referral and an assessment of the student’s presenting problems. Information can include the findings gathered from a review of past information (medical records, school file); interviews with the student, family, teacher, and other persons involved with the student; and observations of the student within the school environment. The therapy evaluation describes how the student is performing, why he or she performs in such a manner, and how that interferes with his or her educational programming.

The therapy evaluation may involve the use of:

- Inventories or checklists
- Non-standardized measurement assessments
- Standardized tests
- Review of records

In most instances a student with motor development problems cannot be put into specific test categories because of many variables. Most standardized tests do not allow for deviation in test administration or scoring as may be needed for a student with multiple disabilities. Often inventories, checklists, and non-standardized tests are used for a more accurate picture of the student’s performance level or physical/functional status.
ENTRANCE CONSIDERATIONS:

1. The student’s level of education functioning in the area(s) being addressed by therapy is significantly below age level, grade level, and/or level of intellectual functioning.

2. The areas of concern being addressed through therapy interfere with the student’s ability to function or make progress in the educational environment.

3. The student’s need for improvement of educationally relevant skills cannot be met in the school setting without a therapist’s involvement. The student’s difficulty in school performance is due to an underlying problem (i.e. reflex integration, sensory-motor processing, tone normalization, perceptual skill development) which requires the specialized skills of a therapist for remediation and/or compensation.

4. Consideration of the following factors may influence the provision of therapy services.
   a. Chronicity versus acuteness of condition or current need
   b. Age of student
   c. Ability of the student to be engaged in or benefit from therapy
   d. Potential for progress toward IEP goals and objectives
   e. Priorities of academic versus therapeutic goals as they relate to educational objectives
   f. Therapy history
   g. Student’s level of motivation and cooperation

EXIT CONSIDERATIONS:

1. The student’s level of educational functioning in the area(s) being addressed by therapy has reached age level, grade level, and/or level of intellectual functioning.

2. The student’s rate of progress in the educational environment in the area(s) being addressed by therapy continues to be steady and commensurate with the student’s overall level of progress in other areas, despite a decrease in therapy services.

3. The area(s) of concern being addressed through therapy does not interfere with the student’s ability to function or make progress in the educational environment.

4. The student’s needs for remediation and/or compensation in the area(s) being addressed are being fully met by the student’s primary education providers without need for continued therapist involvement.

5. The student’s functioning in the educational environment in the area(s) being addressed remains unchanged despite multiple efforts by the therapist to remediate the concerns or assist the student in compensating.

6. The lack of student motivation and cooperation seriously limits the provision and/or follow through of therapy.
7. The goals to be addressed by therapy are not viewed as priorities by the family and/or school personnel.

**INDIVIDUAL TRANSITION PLANNING:**

Individual transition planning (ITP) is a coordinated set of activities to assist students in their move from school to adult life. The ITP is part of the IEP at age 14. Through the IEP process the school and community meet and create interagency agreements based upon the needs of the student. Therapists may be asked to become active members of the ITP/IEP team as different options are explored with the student and his or her family.
APPENDIX A

FORMS & INFORMATION RELATED TO FORMS
NOTICE TO TEACHERS AND PARENTS

OT/PT SCHEDULE

THERAPY SCHEDULE

BILLING INFORMATION/FORMS

*PT

*OT

*APE

RELATED SERVICES – HOURLY REPORT OF SERVICE TO CLIENT DISTRICT

MSP – OT PROFESSIONAL SERVICES

DOCUMENTATION
Please note that _______________________________ is receiving OT/PT services on Monday, Tuesday, Wednesday, Thursday, or Friday at _______________________________.

The therapist can be contacted at the following phone number __________________________.

You can also email the therapist at _____________________________________________.

_________________________________________

Signature

1512 S. US Hwy. 68, Suite J100, Urbana, Ohio 43078  Phone: (937) 484-1557  Fax: (937) 484-1571

www.mccesc.k12.oh.us
Please note that _______________________________ is receiving APE services on Monday, Tuesday, Wednesday, Thursday, or Friday at _____________________________.

The teacher can be contacted at the following phone number _______________________.

You can also email the teacher at _____________________________________________.

_________________________________________
Signature
OT/PT Schedule

Please list district/building and phone number where you can be reached daily on the schedule below:

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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Please provide Madison-Champaign Educational Service Center with a copy of revised schedule as changes occur

Date____________________ Name_______________________________________________________________
# THERAPY SCHEDULE

<table>
<thead>
<tr>
<th>Day Of The Week</th>
<th>Time Of Day Start/End</th>
<th>Student's Name</th>
<th>Building Location</th>
<th>Teacher Name</th>
<th>Building/Room Phone Number</th>
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This list was developed to increase consistency among therapists for billing purposes, and improve tracking of time spent with individual students.

**Time related directly to individual students:**

1. **Evaluation/assessment**  
   Research diagnosis, review files  
   Short observations/screening  
   Administration of evaluation instruments/activities  
   Scoring and interpretation of evaluation information  
   Reports (evaluation, 3 year MFE, and discharge)  
   Assist with alternate assessments/report cards  
   504 development/IEP development

2. **Treatment**  
   1:1 treatment  
   Small group treatment  
   Co-treatment with speech, PT, teacher etc.  
   Develop individual home program  
   Staff training for specific student needs

3. **Equipment**  
   Locate equipment through catalog, shopping or vendor  
   Fabricate adaptive equipment for unique needs  
   Equipment repair, fitting or individualizing equipment  
   Educating staff/student for use of equipment

4. **Meetings and communication**  
   Talk with teacher or school staff  
   Talk with parent  
   Meetings: IAT, IEP, MFE, alternate assessment  
   Team meeting for results completed by other agency (i.e. COSERRC)  
   Parent teacher conferences

5. **Time scheduled for students**  
   Student unavailable due to assemblies, field trips  
   Absent student  
   Parents not attending scheduled meeting  
   Meeting cancelled or rescheduled without notice

**District specific time not related to individual child**  
   Activity development, lesson planning and preparation time  
   Consultation with district representative (special ed. and/or principal)  
   Scheduling, rescheduling for assemblies etc.  
   Maintaining records for students in district  
   Set up and clean up time (each time location is changed) schedule evals  
   Travel time  
   Unscheduled meetings  
   Activity occurring in area normally scheduled for OT treatment, or supplies moved  
   Unexpected relocation during treatments
Inability to schedule 1 area for treatment leading to regular search for available and/or appropriate area
Scheduling around student and teacher needs leading to extended time gaps between student treatments
Attempting to reschedule student times during a day to compensate for treatments missed due to field trips, assemblies or conflicting meetings, and teachers or circumstances preventing success. This applies more to some locations than others.

**Administrative time: Time utilized for more than 1 district**
Supervision of student/new employee/COTA, cosign their materials
Meetings for issues involving multiple districts
Continuing education
Tracking district and administrative time, paperwork affecting more than 1 district
Copying and supply preparation
Obtaining and maintaining equipment, supplies and files
Consult with ESC staff
Learn/teach new testing material
Consultation with other therapists
Develop budget
Develop new forms as needed
The Madison-Champaign ESC charges programs and bills school districts for APE, OT, PT, and Speech Services based on amount of time charged either to:

[In order of priority] -

1. An ESC Cooperative classroom program, (ex. MD; PS), or
2. The District where the child is served, if the child is NOT enrolled in an ESC cooperative classroom program.

At the end of each month, staff members are to complete a Time Allocation form (available online @ www.mccesc.k12.oh.us) which is intended to capture the amount of time spent the previous month serving students in either ESC Cooperative Classroom programs, or students seen in local districts that are not enrolled in an ESC Cooperative Classroom Program.

**Electronic reports are due to the ESC office following completion of the previous month’s work; generally the Friday of first full week with exceptions:**

<table>
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<tr>
<th>Report for:</th>
<th>Due:</th>
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<tbody>
<tr>
<td>August &amp; September(combined)</td>
<td>October 2</td>
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<tr>
<td>October</td>
<td>November 6</td>
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<td>November</td>
<td>Tuesday, December 1</td>
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<td>December</td>
<td>January 8</td>
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<td>January</td>
<td>February 5</td>
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<td>February</td>
<td>Tuesday, March 1</td>
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<td>March</td>
<td>April 8</td>
</tr>
<tr>
<td>April</td>
<td>May 6</td>
</tr>
<tr>
<td>May &amp; June (combined)</td>
<td>Wednesday, June 1</td>
</tr>
</tbody>
</table>

- If a student is enrolled in any ESC Cooperative Classroom (PS, MD, etc.), then that time is allocated to that Program. The cost of this time is then in turn billed to districts based on student enrollments attributable to each district.

- If a student is **not** enrolled in an ESC Cooperative Classroom program, but seen in a particular district, then that time is allocated on the form to the specific district where the child is being seen. This would also include non-direct student contact time spent within or on-behalf of a specific district.

- **“Supervision”** for purposes of the Time Allocation Form is intended to capture **all time spent NOT connected with that individual’s own caseload.** However, **time spent in Evaluations is always to be charged the student’s District or Program.** The equivalent cost for “Supervision” is separated out from direct student/district contact time and spread across the entire program to all districts participating in that service.

- Time spent by OTRs or PTs in conducting Evaluations/ETRs is **NOT** to be charged **AS PART OF SUPERVISION** but to an ESC program or local district.
- **Do not include sick days, calamity days, personal days, professional days or ESC meetings.** The time allocation is not intended to capture these. Time for these is allowed for within internal calculations and the cost of those days is distributed across the entire program.

- The time reported on the form should reflect the individual staff member’s calculation of which costing area (ESC program or specific district) their time was spent in during any given month. The method by which an individual may calculate is left to the staff member. It may be based on actual logs and be as detailed as desired to enable accurate reporting of where a staff member’s time was spent each month.

- There is a box at the top of the form to input the staff member’s number of days worked. The amount of time listed in this box **MUST** equal the amount of time listed on the staff member’s contractual calendar. If the number of hours at the top of the time allocation sheet does not equal the number of hours at the bottom of the sheet, the cells will highlight in red.

- **“Substituting”** – If you are temporarily covering another staff member’s assignment **whether within your own regularly contracted days, or being paid additional**, then you **would** include that time in your time allocation.

- **Division of time: K-6 and 7-12** – For APE, OT and PT, time charged to a District must be separated by the Grade Level of the student(s). This is necessary since starting this year local district Treasurers must show those costs separately for students by those grade levels divisions.

- **Services at Fairhaven for Madison County schools – Pre-school & School-age** time for APE, OT, PT and Speech is to be entered under Fairhaven indicating the specific school District who is sending the child to Fairhaven. All time for E.I. is to be entered under EI (not by District).

**CHANGES/NEW THIS YEAR:**

- The box at the top of the top now includes lines for delays and any time submitted with a time sheet.
  - Any time worked for which a time sheet will be submitted will be added to your total number of hours worked for the month so that the numbers at the top and at the bottom can reconcile.
  - The amount of time for which your district is on a delay, will be subtracted from the total number of hours worked for the month for reconciliation purposes. DO NOT include those hours in the allocation section of the form.

- There is a separate tab for each month. Please be VERY careful that you are entering you time allocation information on the correct month. If everything is entered correctly, you should be able to track your time (year-to-date) on the Summary tab.
Accessing and Submitting the Related Service Electronic Monthly Time Allocation forms online:

1. Go to the ESC webpage www.mccesc.k12.oh.us

2. Scroll down the left side to Staff Forms under Staff Information and click on Student Reporting Forms

3. Locate the appropriate form for your position and click on download.
   - APE Time Allocation (Excel)
   - OT Time Allocation (Excel)
   - COTA Time Allocation (Excel)
   - PT Time Allocation (Excel)
   - PTA Time Allocation (Excel)
   - Speech Time Allocation (Excel)

4. Click in the shaded area for Name and fill in your name. Your name must be put completed on the Aug-Sept tab no matter what month you begin working.

5. Click in the shaded area for Month of: and fill in which month’s information you are submitting.

6. Click in the shaded area for Total “On Duty” from Calendar (O) and fill in the appropriate information from you Monthly Contractual Calendar.

7. Choose one of the 3 Columns (Days, Hours, Minutes), and fill in the Time dedicated that month to the appropriate ESC program or local district.

   Remember to follow guidelines for determining where & how to log your time.
   - Include only days actually worked. Do not include calamity days, sick days, etc.

   As you enter your time, the spreadsheet will automatically calculate the equivalent number of hours. If your time entered does not match the time indicated from your contractual calendar, the cell will highlight in red.

8. There is an area at the bottom to include any notes you may wish me to be aware of related to the information you are submitting. Please include in the notes section if you are subbing and the name of person you are subbing for.

9. When finished entering your time, you will need to do a File – Save As and save it under a new name to your computer (e.g. TimeAllocation 15-16).

10. You may then close the web page spreadsheet and Email the saved file as an attachment to weinert@mccesc.k12.oh.us

Reports are due on the dates indicated on the Time Allocation Instructions

Combine August & September and May & June each into one report.
THERAPIST: \\

MONTH: AUGUST / SEPTEMBER \\

<table>
<thead>
<tr>
<th>PROGRAM</th>
<th>Number of DAYS</th>
<th>Number of HOURS</th>
<th>Number of MINUTES</th>
<th>Calculated Hours</th>
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</thead>
<tbody>
<tr>
<td>AUTISM</td>
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Fill in only the Green shaded areas as applicable

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Time Entered on Time Sheet:

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TOTAL HOURS WORKED: 0.00

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<td>W. Lib. - Salem (K-6)</td>
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<td>Madison-Plains (7-12)</td>
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<td>Emmanuel Christian</td>
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TOTAL: - - - -

NOTES:

[Note: Fill in only the Green shaded areas as applicable]
### ADAPTED PHYSICAL EDUCATION SERVICES Monthly Time Allocation

Fill in ONLY the Green shaded areas as applicable

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<th>TEACHER:</th>
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<table>
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<th>MONTH:</th>
<th>AUGUST / SEPTEMBER</th>
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<table>
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<th>Total &quot;On Duty&quot; from Calendar (O):</th>
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<tr>
<th>PD Required by Assigned District:</th>
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<table>
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<th>Delays:</th>
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<table>
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<th>Time Entered on Time Sheet:</th>
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<table>
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<tr>
<th>TOTAL HOURS WORKED:</th>
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**Charge to:**

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<th>Number of HOURS</th>
<th>Number of MINUTES</th>
<th>Calculated Hours</th>
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<tr>
<td>PS-Jefferson</td>
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**DISTRICT (Non-ESC Program)**

| GRAHAM (K-6) | | | | |
| GRAHAM (7-12) | | | | |
| JEFFERSON (K-6) | | | | |
| JEFFERSON (7-12) | | | | |
| JONATHAN ALDER (K-6) | | | | |
| JONATHAN ALDER (7-12) | | | | |
| LONDON (K-6) | | | | |
| LONDON (7-12) | | | | |
| MADISON-PLAINS (K-6) | | | | |
| MADISON-PLAINS (7-12) | | | | |
| MECHANICSBURG (K-6) | | | | |
| MECHANICSBURG (7-12) | | | | |
| TRIAD (K-6) | | | | |
| TRIAD (7-12) | | | | |
| URBANA (K-6) | | | | |
| URBANA (7-12) | | | | |
| W. LIB. - SALEM (K-6) | | | | |
| W. LIB. - SALEM (7-12) | | | | |

**OTHER**

| TOLLES CAREER CTR. | | | | |

| TOTAL: | | | | |
|---|---|---|---|

**NOTES:**
The Ohio Medicaid School Program (MSP)
Occupational Therapy Services

**Medicaid Reimbursable Activities:**

*Initial ETR Assessment* - Only the assessments for students going through the ETR process are reimbursable. Any assessments done solely for academic purposes would not be reimbursable by Medicaid. Reimbursable activities include Administering Tests, Scoring Tests, and Report Writing.

*Annual Re-assessment (IEP Records Review)* - Must be done within one year of the prior year assessment. This would be the time spent reviewing data or re-assessing the student to determine if service will be modified, continued, or discontinued.

*Treatment and Therapy* - These direct services must be listed in the student's IEP, or there must be a separate Care Plan that is referenced in the IEP. The student must be on an IEP in order for services to be reimbursed under MSP.

(The above 3 service areas are all that need to be documented for MSP purposes. However, you can document any additional services that you wish to track. See optional Procedure Codes for non-reimbursable activities)

**Qualified Practitioners:**

Licensed Occupational Therapist or a Licensed Occupational Therapist Assistant

**Occupational Therapy Procedure Codes:**

*Common Treatment and Therapy Codes:*

97110 - Therapeutic exercises; strength, endurance, range of motion, flexibility
97530 - Therapeutic activities (dynamic activities, improve functional performance)
97150 - Therapeutic procedures; group of 2 or more

*Assessment/Re-assessment Codes:*

97003 - Initial or 3-year occupational therapy evaluation
97004 - Annual occupational therapy review/re-evaluation
92610 - Initial or 3-year occupational therapy evaluation of oral and pharyngeal swallowing function
92610 - Annual occupational therapy review/re-evaluation of oral and pharyngeal swallowing function
Other Treatment and Therapy Codes:

97112 - Neuromuscular re-education; movement, kinesthetic sense, sitting, standing
97532 - Cognitive skills development to improve attention, memory, problem solving
97533 - Sensory integrative techniques; enhance processing, promote adaptive responses
97116 - Gait training; includes stair climbing
97535 - Self-care/home management training
97760 - Orthotic management and training; upper and/or lower extremity(ies), and/or trunk
97761 - Prosthetic training; upper and/or lower extremity(ies)
92526 - Treatment of swallowing dysfunction and/or oral function for feeding
97012 - Traction, mechanical
97016 - Vasopneumatic devices
97032 - Electrical stimulation (manual) application of modality to one or more areas
97113 - Aquatic therapy with therapeutic exercises
97124 - Massage therapy
97140 - Manual therapy techniques, one or more regions
97537 - Community/work reintegration training

Non-Reimbursable Codes: (optional documentation)

99994 - IEP Consultation
99995 - Non-billable academic instruction/activity
99996 - ETR/IEP Team Meetings
99997 - Student Absent
99998 - Calamity Day/Holiday
99999 - Other Non-Reimbursable Activity
The Ohio Medicaid School Program (MSP)
Physical Therapy Services

Medicaid Reimbursable Activities:

Initial ETR Assessment - Only the assessments for students going through the ETR process are reimbursable. Any assessments done solely for academic purposes would not be reimbursable by Medicaid. Reimbursable activities include Administering Tests, Scoring Tests, and Report Writing.

Annual Re-assessment (IEP Records Review) - Must be done within one year of the prior year assessment. This would be the time spent reviewing data or re-assessing the student to determine if service will be modified, continued, or discontinued.

Treatment and Therapy - These direct services must be listed in the student's IEP, or there must be a separate Care Plan that is referenced in the IEP. The student must be on an IEP in order for services to be reimbursed under MSP.

(The above 3 service areas are all that need to be documented for MSP purposes. However, you can document any additional services that you wish to track. See optional Procedure Codes for non-reimbursable activities)

Qualified Practitioners:

Licensed Physical Therapist or a Licensed Physical Therapist Assistant

Physical Therapy Procedure Codes:

Common Treatment and Therapy Codes:

97110 - Therapeutic exercises; strength, endurance, range of motion, flexibility
97530 - Therapeutic activities (dynamic activities, improve functional performance)
97150 - Therapeutic procedures; group of 2 or more

Assessment/Re-assessment Codes:

97001 - Initial or 3-year physical therapy evaluation
97002 - Annual physical therapy review/re-evaluation
92610 - Initial or 3-year physical therapy evaluation of oral and pharyngeal swallowing function
92610 - Annual physical therapy review/re-evaluation of oral and pharyngeal swallowing function
**Other Treatment and Therapy Codes:**

97112 - Neuromuscular re-education; movement, kinesthetic sense, sitting, standing  
97532 - Cognitive skills development to improve attention, memory, problem solving  
97533 - Sensory integrative techniques; enhance processing, promote adaptive responses  
97116 - Gait training; includes stair climbing  
97535 - Self-care/home management training  
97760 - Orthotic management and training; upper and/or lower extremity(ies), and/or trunk  
97761 - Prosthetic training; upper and/or lower extremity(ies)  
92526 - Treatment of swallowing dysfunction and/or oral function for feeding  
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97016 - Vasopneumatic devices  
97032 - Electrical stimulation (manual) application of modality to one or more areas  
97113 - Aquatic therapy with therapeutic exercises  
97124 - Massage therapy  
97140 - Manual therapy techniques, one or more regions  
97537 - Community/work reintegration training

**Non-Reimbursable Codes:** (optional documentation)

99994 - IEP Consultation  
99995 - Non-billable academic instruction/activity  
99996 - ETR/IEP Team Meetings  
99997 - Student Absent  
99998 - Calamity Day/Holiday  
99999 - Other Non-Reimbursable Activity
### COMMON ICD-9 CODES

#### Nursing
- Diabestes Mellitus Uncomp 250.00
- Diabetes W Ketoacidosis 250.10
- Cerebral Palsy NOS 343.9
- Epilepsy NOS 345.90
- Cong. hered Muscular Dystrophies 359.0
- Osteogenesis imperfecta (brittle bone disease) 756.51

#### Speech
- Speech Therapy V57.3
- Prob with learning V40.0
- Prob with Communication V40.1
- Stuttering 307.0
- Expressive Language Dis 315.31
- Oth Learning Difficulty 315.2
- Recp-Expres Language Dis 315.32
- Speech Del DIT Hear Loss 315.34
- Development Delays NEC 315.8
- Cleft palate 749.00
- Aphasias 784.3
- Dysphagia 787.20

#### OT/PT
- Physical Therapy NEC V57.1
- Encntr Occupational Therapy V57.21
- Encntr Vocational Therapy V57.22
- Devel Coordination Dis 315.4
- Cerebral Palsy NOS 343.9
- Difficulty in walking 719.7
- Scoliosis NEC 737.39
- Abnormality of gait 781.2
- Lack of coordination 781.3

#### Psychology
- Prob with learning V40.0
- Bipolar 1 Current NOS 296.7
- Atypical Manic Disorder 296.81
- Delusional disorder 297.1
- Generalized Anxiety Dis 300.02
- Social phobia 300.23
- Obsessive-Compulsive Dis 300.3
- Personality Disorder NOS 301.9
- Posttraumatic Stress Dis 309.81
- Depressive Disorder NEC 311

#### Mental Retardation, Developmental Delays, Misc
- Autistic disorder 299.00
- Academic Underachievement 313.83
- Attention Deficit Dis 314.00
- Mild mental retardation 317
- Down's syndrome 758.0

To access and search all 17,000+ valid ICD-9 codes, go to www.TeamHBS.com and click on "Log onto the HBS web-based documentation system". Log in and select "ICD-9 Code Look-Up" from the menu on the left. Search either by ICD-9 number or enter first few letters of description.

9/3/2013
### IDEA & MSP Example Timelines for a Student

#### Initial Year (2008-09)
- **SLP Evaluation**: 9/15
- **PT Evaluation**: 9/30
- **Initial ETR**: 10/31
- **Initial IEP**: 11/30
- **IEP Progress**: 1/16, 3/20, 6/4
- **SLP MSP Progress**: 12/15, 3/15, 6/15
- **PT MSP Progress**: 12/30, 3/30, 6/30

#### Year 1 (2009-10)
- **SLP Reevaluation**: 9/15
- **PT Reevaluation**: 9/30
- **IEP Review**: 11/29
- **IEP Progress**: 10/30, 1/15, 3/19, 6/3
- **SLP MSP Progress**: 9/15, 12/15, 3/15, 6/15
- **PT MSP Progress**: 9/30, 12/30, 3/30, 6/30

#### Year 2 (2010-11)
- **SLP Reevaluation**: 9/15
- **PT Reevaluation**: 9/30
- **Reevaluation ETR**: 10/30
- **IEP Review**: 11/28
- **IEP Progress**: 10/29, 1/14, 3/18, 6/3
- **SLP MSP Progress**: 9/15, 12/15, 3/15, 6/15
- **PT MSP Progress**: 9/30, 12/30, 3/30, 6/30

#### Year 3 (2011-12)
- **SLP Reevaluation**: 9/15
- **PT Reevaluation**: 9/30
- **Reevaluation ETR**: 10/30
- **IEP Review**: 11/27
- **IEP Progress**: 10/28, 1/13, 3/16, 6/4
- **SLP MSP Progress**: 9/15, 12/15, 3/15, 6/15
- **PT MSP Progress**: 9/30, 12/30, 3/30, 6/30

---

* IEP progress is reported (by method defined in IEP) to the parent at least as frequently as interim or report cards are sent to all students. In this example the district only sends quarterly report cards.

** Progress on goals for MSP services must be documented in service notes no later than quarterly (every 3 months) from MSP evaluation date. Written IEP progress reports may be used as the documentation when timing is approximately the same date. For quarters overlapping school breaks, progress should be documented on the last day of service prior to due date.
APPENDIX B

Peer Evaluation
PEER EVALUATION

Please complete and return to supervisor __________________________ by _____________________ .
Data will be compiled and shared.

N = I honestly cannot rate this
0 = unsatisfactory
1 = needs improvement
2 = improving
3 = satisfactory
4 = often above average
5 = exceptional

Name of Employees to be Evaluated ______________________

Peer Evaluation Requested by: __________   __________

Self   Supervisor

Communication/Interpersonal Skills:

<table>
<thead>
<tr>
<th>Approaches people in a positive manner</th>
<th>Good customer service skills</th>
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<tbody>
<tr>
<td>Good conflict identification and resolution skills</td>
<td>Actively listens and communicates with others</td>
</tr>
<tr>
<td>Responsive to the needs and requests of others</td>
<td>Follows through on agreements with others</td>
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<tr>
<td>Demonstrates respectful attitude towards co-workers</td>
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</table>

Comments:

Professionalism:

<table>
<thead>
<tr>
<th>Dresses appropriately for work roles</th>
<th>Is a team player</th>
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<tbody>
<tr>
<td>Learns new tasks and accepts responsibilities/change willingly</td>
<td>Open and available to new staff</td>
</tr>
<tr>
<td>Arrives on time</td>
<td>Makes good use of time</td>
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<tr>
<td>Effectively uses and shares resources</td>
<td>Demonstrates knowledge of required behaviors (Safety, Confidentiality etc)</td>
</tr>
</tbody>
</table>

Comments:

Work Skills:

<table>
<thead>
<tr>
<th>Discerns when to ask for help or clarification</th>
<th>Documentation and billing are accurate, complete and timely</th>
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</thead>
<tbody>
<tr>
<td>Reasonable evaluation turnaround time</td>
<td>Develops appropriate goals</td>
</tr>
<tr>
<td>Demonstrates ability to provide appropriate treatment considering age, growth and development of population served</td>
<td>Utilizes appropriate techniques with various patients</td>
</tr>
</tbody>
</table>

Comments:

Signature of Peer Completing this form _______________________________________________ _____
Date _______________________
APPENDIX C

Motor Resources
1. www.pecentral.org - PE Central is an excellent site that provides physical education teachers with ideas for games and lessons. It has a book store where various literature items can be purchased. There is a specific "page" within the website devoted to adapted physical education which is packed with helpful information on all aspects of the field including a "frequently asked questions" section and an opportunity for the site visitor to ask questions to an assigned adapted physical education expert (a different expert each month).

2. education.ohio.gov/Topics/Ohios-Learning-Standards/Physical-Education – one can also refer to Ohio's State Standards for Physical Education which can be found on ODE's website.

3. physedgames.com - The PE games you will find on this site are used by professional physical education teachers as part of successful programs in elementary gyms. This games library resource contains some of the best ideas for P.E. games and activities. Simply enjoy the quick and easy video descriptions to learn a new game for your phsysed class!

4. www.bridges4kids.org/IEP/iep.goal.bank.pdf - This is a good goal bank to help with wording or coming up with unique goal ideas.

5. www.breezyspecialed.com/ - Here is a blog where you can get ideas about pre-vocational tasks that involve fine motor skills

6. www.otexchange.com/index.php - This site is good to access forms and excel sheets for scoring tests that are helpful. You have to become a member, but it is free!

7. www.toolstogrowot.com/ - This site offers general OT/PT activities. Some are free but then you would need a membership to access the full site.

8. www.3dinosaurs.com - online website/blog with tons of free printables (many with themes) for approx. 2-8 yr. olds. Examples are: pencil paths, pattern cards, lacing cards, dot marker pictures and cutting.

9. www.otplan.com – at this website you can click on skills you want to address and/or materials you want to use and it gives you activity ideas based on this information.

10. www.ot-mom-learning-activities.com - A pediatric OT's website filled with OT and PT activities.

11. www.sugaraunts.com - Another website by an OT containing many ideas for activities.

12. www.yourtherapysource.com – online resource for pediatric occupational therapy, pediatric physical therapy and special needs publications. There is “free stuff” and also items that can be purchased.

13. www.redtreehouse.org – Ohio’s online resource promoting and supporting the physical, emotional, intellectual and social development of children and young adults, prenatal – 25 years.

14. www.pediastaff.com/resources – lists of resources for all fields and a free weekly newsletter you can sign up for.

15. www.eduplace.com/graphicorganizer - for graphic organizers

16. www.activityvillage.co.uk – for printable themed activities and worksheets

17. www.dltk-kids.com – for printable themed crafts, coloring pages, activities and worksheets
18. www.skillbuildersonline.com – preschool fine motor skills and therapeutic activities, pencil grasp, online handwriting worksheets and free resource downloads

19. www.therapystreetforkids.com – free resource printables

20. www.donnayoung.org/penmanship/handwriting-paper-grayline.htm - downloadable handwriting papers as well as other printables and resources for home and classroom

21. www.allkidsnetwork.com/mazes/ - printable mazes with various themes (try copying them and pasting them in to Word instead of clicking "print this printable version"

22. www.scholastic.com/teachers/story-starters/ - story starter that a student can type or write

23. www.tlsbooks.com/preschoolworksheets.htm - PS through 6th grade printables

24. www.writingwizard.longcountdown.com/handwriting_practice_worksheet_maker.html - make handwriting worksheets including name practice

25. www.etsy.com – good resource for fine motor activities such as marble mazes

26. www.todayinpt.com – the leading source of physical therapy continuing education courses (with free CE), PT and PTA jobs, and the latest Physical Therapy news

27. www.pecentral.org/adapted/adapteddisabilities1.html