

## IMPORTANT OT/PT GUIDELINES

1. Make sure you are inviting OT/PT providers to the evaluation and IEP meetings.
2. Goals should include how OT/PT will be used. This may be indicated in: (see examples)
  - a. Purpose of goal
  - b. Characteristics of services
  - c. As objectives
3. Collaborate with the OT/PT to write the goals.
  - a. Ask for OT/PT input
  - b. Write the goal/objectives with the OT/PT present
4. Review list of deficits that OT/PT can address within academic and behavior goals
5. When adding OT/PT services to an IEP on a non-evaluation year, the following documents must be completed:
  - a. Consent for Evaluation
  - b. Prior Written Notice of Action
  - c. Diagnostic Report (from the OT/PT)
  - d. IEP Amendment (add new information to PLP and write goals)

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## Writing Collaborative Goals

The North Dakota Department of Public Instruction (NDDPI) Individualized Education Program Planning Guidelines states that there are four primary components of a goal:

- A. The behavior or skill being addressed,
- B. The desired ending level of achievement,
- C. The intent or purpose for accomplishment, and
- D. Characteristics of services

### Specifics for goals

**Intent /purpose:** (Component C of NDDPI's intent or purpose for accomplishment.)

What is the participation limitation that this goal is going to address?

*Some areas to consider would be playground/recess, transportation, bathroom/toileting, transitions, mealtime/snack time, and general education environment/setting. This is similar to a clinical, long term goal. Where is the participation restriction? When the team was discussing the student profile or the PLAAFP, what was a participation or functional limitation discussed that a skilled therapist could help address?*

*Example A:* In order for the classroom teacher to assess Jeremy's knowledge of content through written work

*Example B:* In order to improve Sally's participation in visual-motor skills such as writing, cutting, and drawing in the classroom setting,

*Example C:* In order for George to decrease his dependence on adults and make functionally based decisions with improved independence,

**Behavior:** (Component A of NDDPI's behavior or skill.)

The student will complete some type of educational function.

*Example A:* Jeremy will improve the legibility of his writing.

*Example B:* Sally will be able to complete the following tasks:

- a. trace the uppercase letters of her first name with correct letter formation
- b. draw a square with four distinct sides and corners
- c. write her first name in uppercase form, using adequate formation, so that the letters are legible to the reader
- d. cut on a 1/4" thick line to cut out a 3" square, for at least 3/4" length of the shape

*Example C:* George will decrease the amount of assistance required for multiple functionally based school tasks.

**Ending Level:** (Component B of NDDPI's measurable data and goal.)

Include current status. This should include something that can be measured or could be graphed.

*Example A:* Jeremy currently has proper spacing in 10% of his written work handed into the teacher in 1 week. Ending level goal of proper spacing in 90% of written work in 1 week.

*Example B:* Sally will complete this goal with 75% accuracy (3 of 4 tasks) over three charted opportunities. If this goal is met as written prior to her IEP, Student will work toward meeting this goal with 100% accuracy. She currently is unable to complete any of these tasks. (0%) 1

*Example C:*

1. George will load and carry his own lunch tray independently with 4-6 verbal cues. He currently requires 1 physical and 2 verbal cues.
2. George will deliver a small pencil box (5"x8") loaded with supplies up/down a flight of stairs with supervision from a distance only (no cuing) and a foot over foot pattern with use of the handrail. He currently requires 3 verbal and 1 physical cue.
3. George will put supplies into his locker with 2-3 verbal cues. He currently requires 3-4 physical cues and 1-2 verbal cues.
4. George will climb onto 20-30% of playground equipment with a peer with supervision only; no cuing required from an adult. He currently climbs on 75% of the equipment with 1-2 physical cues and 3-4 verbal cues from an adult.

**Characteristics of Services:** (Component D of NDDPI's goal.)

What and where will therapy be like?

*Each goal must also include a description of where, how, and by whom the services will be delivered, unless the goal includes short-term objectives that will include this information.*

*Example A:* Occupational therapist will address this goal through direct intervention in a resource room. (direct minutes) OT will also practice skills in the regular education classroom in order to generalize skills across all educational settings (direct minutes). Indirect occupational therapy minutes will be used to create sensory breaks/treatments, visual schedules, and/or prewriting tasks to be completed by support staff in class during writing times.

*Example B:* This skill will be addressed collaboratively by the special education teacher, general education teacher, and the occupational therapist across general and special education setting(s). Skills may be addressed in 1-on-1, small group, or classroom settings.

*Example C:* Direct physical therapy treatment will occur across all academic settings to instruct George on skills and gross motor components required for skills, model for and instruct staff, and make adaptations to the environment as necessary. Direct occupational therapy in a resource room/outside general education will support this goal by addressing foundational skills such as upper extremity coordination, fine motor coordination, strength and motor planning in a resource room in order to facilitate George's progress in the areas noted above.

#### **How and when periodic progress reports will be provided**

*Example A:* Progress will be monitored and reported on by the occupational therapist, with input and written work collected from the classroom teacher.

*Example B:* This goal will be implemented by the educational team and monitored and reported on by the classroom teacher and the occupational therapist. Progress will be reported 3 times a year through a written progress report and parent-teacher conferences.

*Example C:* Progress will be monitored and reported at the trimesters by the physical therapist.

The GOAL at the top of a progress report combines intent, behavior and ending level into one paragraph. All therapists are required to document the student's starting level and the anticipated ending level in the goal (their goal from component B), as well as report progress at the trimester or 19 quarter. At each progress reporting period, therapists will track the student's current level and report progress according to IEP documentation requirements.

**So, you have established that OT is an educational need for your student. How do you fit OT needs under a goal?**

Reading: visual tracking, visual perceptual skills (letter recognition/reversal, for example), stamina, focus/attention, posture (core strength),

Writing: handwriting, visual motor skills (copying), motor coordination, strength/endurance, posture (core strength)

Math: visual perceptual skills (number recognition/reversal), visual motor skills, focus/attention, posture (core strength), stamina

Self-regulation: using sensory components to work on self-regulation (such as calming strategies, fidgets, etc)

Here are just some of the areas that OT works on in school:

- **Handwriting**
- **Visual Motor skills**- the ability to copy from the board or from another sheet of paper; writing, spacing, alignment of writing; cutting/scissors skills; letter formation; aligning numbers
- **Visual Perceptual skills**- the ability to identify similarities and differences in visual information; reversals; organizing visual information, difficulty isolating visual information
- **Upper extremity and core strength/endurance**- stamina for writing, posture for writing, handwriting itself
- **Coordination/Bilateral coordination**- letter formation, number formation, alignment/spacing/size of writing; cutting; crossing midline (being able to complete activities across the body, rather than only using one side of the body exclusively)
- **Balance**
- **Sensory Processing**- regulating body during classroom activities, sensitivities to sounds/visual input/tactile input, running into people or things, getting too close to others, seeks out movement
- **Self-regulation**- difficulty calming down/alerting self, difficulty identifying strategies to help regulate, and using sensory activities to help self-regulate
- **Focus/attention** (through sensory input)
- **Fine Motor skills**
- **Executive Functioning skills**- organization, self-monitoring, time management, writing checklists, prioritizing, multitasking
- **Self-care skills**- carrying a lunch tray, zipping up coat/putting on winter gear, using fork/spoon to eat lunch with classmates, opening milk carton, working with combination locks
- **Visual Tracking/Visual Scanning**- smooth pursuit while reading, figure ground, visual sensory processing

Important things to remember:

- Please remember that if OT is on the service page of the IEP, it needs to be included in the goals or the Adaptations page of the IEP!
- If you are unsure how OT will fit into a goal, please just contact me, and we can figure it out together.
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