Occupational Therapy Guidelines

Kent Intermediate School District



Table of Contents

Local District Signatures	2
OT Committee Contributing Members	3
Preface	4
Introduction	5
School-Based Occupational Therapy	<i>€</i>
General	<i>€</i>
Collaboration	7
Service Delivery	
Workload and Caseload	
Response to Intervention (RtI)	12
Evaluation	17
General	17
Assessments	17
O.T. Educational Performance Questionnaire	18
School-Age	19
Preschool	21
Guidelines for Determination of OT Service	22
O.T Service Rubric	23
Assistive Technology/Universal Design for Learning	24
Evidence-Based Practice	26
Grade Level Content Expectations	30
Use of School Materials	36
Written Work	44
Behavior/Self-Regulation	52
Personal Management/Self-Care	58
Present Level Academic Achievement Functional Performance	63
References/Resources	64

Local District Signatures

Kevin S. Toronka	DAJA WAR
Kevin A. Konarska	Greg Warsen
Kent Intermediate School District	Kelloggsville Public Schools
Donal 2	Levald Hyping
Daniel Takens	Gerald Hopkins /
Byron Center Public Schools	Kenowa Hills Public Schools
Clery Thelin	NSW1)2
Jerry Phillips	Mike Weiler
Caledonia Community Schools	Kent City Community Schools
(M)	6.11.00
Ram	Ocott Palcifuste
Ronald McDermed	Scott Palczewski, #d. D.
Cedar Springs Public Schools	Kentwood Public Schools
Sthe Shart	
Ethan Ebenstein	Gregory H. Pratt
Comstock Park Public Schools	Lowell Area Schools
STOME STOP	
fatal aounas miles	Miller France
Sara M. Shubel, Ph. D.	Michael Paskewicz, Ed.D.
East Grand Rapids Public Schools	Northview Public Schools
The Ode	Arhf Alberta
'6 '	
Daniel Behm	Michael S. Shibler, Ph.D.
Forest Hills Public Schools	Michael S. Shibler, Ph.D. Rockford Public Schools
Forest Hills Public Schools	Rockford Public Schools
	Rockford Public Schools Kent Swinson
Forest Hills Public Schools David Britten	Rockford Public Schools
David Britten Godfrey Lee Public Schools	Rockford Public Schools Kent Swinson Sparta Area Schooks
David Britten Godfrey Lee Public Schools Bill Fetterhoff	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider
David Britten Godfrey Lee Public Schools	Rockford Public Schools Kent Swinson Sparta Area Schooks
David Britten Godfrey Lee Public Schools Bill Fetterhoff Godwin Heights Public Schools Demand Taylor Jr.	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider
David Britten Godfrey Lee Public Schools Bill Fetterhoff Godwin Heights Public Schools Demand Taylor, Jr., Ed. D.	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider Thornapple Kellogg Schools Thomas Reeder
David Britten Godfrey Lee Public Schools Bill Fetterhoff Godwin Heights Public Schools Demand Taylor Jr.	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider Thornapple Kellogg Schools Lewis Acute
David Britten Godfrey Lee Public Schools Bill Fetterhoff Godwin Heights Public Schools Demand Taylor, Jr., Ed. D.	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider Thornapple Kellogg Schools Thomas Reeder
David Britten Godfrey Lee Public Schools Bill Fetterhoff Godwin Heights Public Schools Demand Taylor, Jr., Ed. D.	Rockford Public Schools Kent Swinson Sparta Area Schools Gary Rider Thornapple Kellogg Schools Thomas Reeder

Therapists Contributing to the Kent ISD OT Guidelines

Core Group

Janet Brown
Kathy Burmania
Barb Fink
Marcia Kantorowski
Liddy Olszewski
Nancy Markosky
Laura Ragotzy
Anne Schefke
Deb Schuitema

Facilitator

Laurie VanderPloeg

Other Contributors

Laura Carmoney Jamie Sue Foster Shannon Foster Carol Harrington Kindy Segovia Pat Sinen

This document can be accessed on-line at the Kent ISD website http://kentisd.org/Special_Education/manuals

Preface

A team of professionals developed these revised *Guidelines for Determining the Need for and Services Regarding Occupational Therapy in Kent County*. Devoted members of the team and subcommittees represented a collective voice from throughout Kent County.

This document will not only aide local districts in determining the need for services, but will also assist in identifying appropriate assistance for those students who will benefit from Occupational Therapy. The task of identifying, evaluating, and determining aids is difficult and challenging for professionals in this area. Hopefully, the concentrated efforts of the professionals who developed and revised this document will make the task manageable and beneficial to the students we serve.

It is critical for evaluation teams within Kent County to work collaboratively in order to make decisions in planning, conducting evaluations, and providing service. It is imperative that Occupational Therapists follow these guidelines carefully to reduce the risk of misidentifying or programming inappropriately for students.

In conclusion, I would like to thank all members of the Kent ISD Occupational Therapy Guidelines Committee for their dedication and commitment, which was extremely evident during this undertaking. The performance of the committee will increase the level of support and improve services for students throughout Kent County.

Kevin Konarska, Superintendent

Kerin A Towards

Kent Intermediate School District

Introduction

This School Occupational Therapy Guidelines document is the work of a Kent County-wide committee of school occupational therapists. It is a joint effort of therapists working in various school districts and school settings throughout Kent County.

This document is a revision of Kent ISD Guidelines for Itinerant Occupational Therapy Services (School Aged) written in March, 2001. This revision has increased the scope to include pre-school services. The delivery of therapy services as well as the roles and responsibilities of the school occupational therapist have shifted over the years. The reauthorization of Individuals with Disabilities Education Act (IDEA) along with passage of Elementary and Secondary Education Act (ESEA) have emphasized that specially designed instruction should assist the student within the general education environments. Early intervention and prevention has increased in importance. The roles of the school occupational therapists have become more appropriately considered as that of caseload responsibilities and workload responsibilities.

The purpose of this present document is to assist with local procedures and provide consistent policies to guide educational teams in meeting individual needs of students within Kent ISD in the area of school occupational therapy. There are research-based and legal parameters to which we must all adhere.

This manual now aligns occupational therapy service to the general education curricula. This is a shift in thinking for many therapists. The linkage from curricula to goals and objectives via scaffolding and alignment will be supported by the Grade Level Content Expectations section of this manual. The intent of this document is to provide consistency across Kent ISD in early intervention, evaluation, service qualification, service, and dismissal.

School-Based Occupational Therapy



General Information

Educational environments, theories and thoughts have changed dramatically over the last 25 years. More often, students with learning challenges are educated in local schools, in general education classrooms, with typically developing peers. Students' needs demand a continuum of programming options, including local schools, regional programs or center based programs. Occupational Therapy (OT) within the context of educational settings can be provided within a variety of service models. When determining school placement and related services, consideration of "free appropriate public education" in the least restrictive environment is mandated.

Occupational therapy is a related service that supports students' academic achievement and functional performance. The profession of occupational therapy is concerned with a person's ability to participate in daily life activities or "occupations". The occupation of a student in school includes everyday skills like use of school materials, written work, behavior/self-regulation and self-care. In the schools, occupational therapists use their unique expertise to help students prepare for and perform important learning and school related activities and to fulfill their role as students. OTs support academic and non–academic outcomes including social skills, math, literacy, writing, recess participation, self-help skills, vocational participation and more. Best practice indicates that interventions are most effective when provided where performance naturally occurs. The academic focus of Elementary and Secondary Education Act (ESEA) and Individuals with Disabilities Education Act (IDEA) requires that supports be provided in the child's natural environment. OTs, as part of an education team, provide the most effective therapy intervention services when delivered according to a collaborative model, using a team approach in the design and implementation of the student's Individualized Educational Program (IEP) or Individual Family Service Plan (IFSP) goals.

OTs can function as part of a multidisciplinary evaluation team for students suspected of being in need of special education. Evaluative input by the occupational therapist can include clarifying the reason for referral, observations in various school environments, interviews, testing, progress monitoring, and record review. Determination of therapy services is the decision of the Individualized Educational Planning Team (IEPT). Consideration of the following questions may assist the IEPT in determination of therapy provisions:

- 1. What are the student's educational needs for which the occupational therapist can provide unique skills and perspective?
- 2. How do the needs of the student impact educational performance?
- 3. How will OT services improve performance that will contribute to the achievement of the student's educational goals aligned with curricula?
- 4. What can the OT provide that is different from other team members?

OT services in the educational setting differ from those in rehabilitation and other medical settings both in scope and intent. In the school setting, OT is part of a broad program based on students' achievement and functional performance congruent with the educational curricula. The provision of therapy and

outcome is based on the impact the disability has on educational performance rather than on the disability itself. OT services in the schools are solely to support the educational process. A student may manifest a disability that does not significantly interfere with educational performance and then school-based OT would not be warranted. Occasionally, a student may require medically based therapy services outside the scope of the IEP goals, and the family can pursue community resources to meet medical-rehabilitation needs.

Collaboration



Therapy services in an educational setting are most effective when delivered according to a collaborative model, using a collaborative team approach in the design and implementation of student goals and objectives. School-based collaboration is an interactive team process that focuses student, family, education and related services partners on enhancing the academic achievement and functional performance of all students in school. A collaborative model implies that OT programming is an integral part of the student's daily life, and therefore is carried out not only by the therapists, but also by various members of the educational team, in naturally occurring settings. Therapists have responsibilities not only for design and implementation of programming, but also for teaching, monitoring and updating other staff and parents in specific programming for individual students. While other team members complete, prompt, and reinforce activities under the development and support of the OT, these team members are not considered therapists or as doing "therapy".

The collaborative approach is defined as the transference of knowledge across discipline boundaries in order to facilitate the provision of consistent programming for individual students.

Components of the collaborative approach include:

- 1. Discipline specific evaluation related to the student's functional abilities in educational environments.
- 2. Student IEP goals and objectives developed collaboratively by the team, with shared responsibilities for implementation.
- 3. OT goals and services integrated rather than isolated from a student's total educational program.
- 4. Therapeutic intervention provided in a variety of sites for a given student, such as a classroom, gym, cafeteria or job site.
- 5. Use of naturally–occurring situations to maximize a student's opportunity for learning and/or improving their skills.
- 6. OT involvement in both the design and implementation components of the student's educational program.

The use of a collaborative model does not imply a reduction in staff or decreased time involved with service, nor does it imply that services are interchangeable. Indirect therapy necessitates direct interaction. The OT needs to commit to involvement that is flexible in nature, and includes sharing expertise with others in order for the student to make progress.

The OT, as a member of the student's educational team, can provide input to support others in facilitating the student's progress toward educational goals. Legislation and mandates such as

Elementary and Secondary Education Act and Individuals with Disabilities Education Act (IDEA) encourage collaborative teamwork.

A collaborative approach to service delivery is the most effective. The collaborative approach encompasses both direct and consultative services. This takes advantage of naturally occurring situations and provides consistent on-going support. However, there are circumstances when other models are needed for other students.

Service Delivery

Given the complexities of service delivery, administrators need to work together with therapists to insure the delivery of appropriate services. Transforming caseload into workload requires thinking not only about caseload "numbers" but also about what is the most effective "work" that occupational therapy professionals can perform. The question for therapists and administrators is not "Are you doing things right?" but rather "Are you doing the right things?" Recognizing and defining what appropriate work is in school-based practice are important tasks for occupational therapy practitioners and their supervisors.

The following are components for successful implementation of the collaborative service delivery model:

- 1. Jointly consider integrated IEP goals that are flexible, collaborative and not discipline-specific.
- 2. A "combination" of direct and consultative services can be identified on the IEP.
- 3. Staff who are accessible to other team members for ongoing and crisis intervention as well as formal and informal team meetings.
- 4. Provide flexibility in scheduling to permit the therapist to work with students in naturally occurring situations as well as with non-routine events. Time is also needed to allow for collaborative planning.
- 5. Both <u>caseload</u> (number of students seen by OT as part of the IEP) and <u>workload</u> (all work activities OT performs to benefit students directly and indirectly) must be considered in determining reasonable student number and responsibilities of the OT
- 6. Sufficient space to carry out activities. While most activities should be carried out within the context of the daily classroom routine and in appropriate environments, a few others have space requirements outside of the classroom.
- 7. Knowledgeable team members who are willing to share skills and work together with trust, honesty and flexibility.
- 8. Support of administration, therapists and teaching staff to build team relationships and support the successful implementation of the service delivery model.

Absence of components listed above can compromise the effectiveness of this approach and may require alternative approaches. The collaborative service delivery model is complex and requires a commitment of all involved. Extensive and ongoing training is a necessary process in which administrative support is essential.

School-based practice requires collaboration to develop goals, supports, services and accommodations with shared responsibilities for implementation. It is rarely appropriate for a therapist to develop separate goals and objectives. OT goals and services should be integrated into rather than isolated from a student's total educational program. Each team member needs to apply his or her specific disciplinary

skill to the shared goals. For some families, the collaborative therapy service model does not match their concept of what "therapy" should look like for their child. When explaining service delivery, support from professional organizations, such as the American Occupational Therapy Association (AOTA) and recent best practice literature may be helpful. Resources are listed elsewhere in this document.

Direct Service

The OT works directly with the student on goals and objectives individually, in small groups, or in classroom groups. The OT is primarily responsible for documentation (reporting out) of progress on the goal. This implies increased responsibility for follow through related to the goals and objectives. The student is seen directly by the OT in a frequency and location determined by the IEP team. OT service includes ongoing discussion with the teacher regarding student progress.

Consultation

The OT supports the teacher/staff in addressing the student's goals and objectives. For example, the OT meets with the staff member and may observe or work with the student. The OT documents consultation topics and dates. In a consultative model, the OT helps to create solutions and seeks to educate staff so that in the future they can generalize to other students or situations.

Monitoring

The OT works with the teacher and/or student on accommodations versus goals and objectives. Examples may include developing sensory strategies or determining assistive technology needs. OT monitor can also be included for a limited time on an IEP after a goal has been achieved.

What Is the Difference Between Workload and Caseload?

"The concept of *workload* encompasses all of the work activities you perform that benefit students directly and indirectly. *Caseload* refers only to the number of children seen by occupational therapy as part of the Individual Education Program (IEP) or Individualized Family Service Plan (IFSP). A traditional caseload "counting" approach does not fully appreciate the complexity of the occupational therapy role in current best-practice scenarios. Pull-out services built around a clinical model of predictable, routine "appointments" have limited support in the educational literature and do not necessarily promote the generalization of skills to the classroom or other appropriate settings. A simple caseload also does not recognize the potential occupational therapy contribution to the Individuals with Disabilities Education Act of 2004's (IDEA's) participation focus or its mandate that services support access to and progress in the general education curriculum or natural environment" (American Occupational Therapy Association, 2006).

TOP 10 WORKLOAD RESPONSIBILITIES

- 1. Screen students to determine appropriate instructional strategies, provide follow-up consultation and documentation.
- 2. Monitor students for maintenance of skills in the areas of sensory processing / use of sensory strategies, visual-motor skills, use of assistive technology, functional skills, etc. Maintain ongoing documentation.
- 3. Provide Response to Intervention (RtI) at all 3 tiers and maintain ongoing documentation.
- 4. Provide support to special education classrooms as needed.
- 5. Participation and collaboration in teams at the building level (RtI, Positive Behavior Support, Child Study, grade level, curriculum, Child Find, etc.), district level (Special Education, Technology, Fetal Alcohol Spectrum Disorder) and county level (Kent County Collaborative Autism Network, Traumatic Brain Injury Transition Team) and act as liaisons and advocates with community agencies.
- 6. Provide training to students, staff, and families; trainings may include assistive technology, sensory theory and intervention, Universal Design for Learning, developmental stages, handwriting, pre-voc and vocational, etc.
- 7. Evaluate and provide supports to maximize success and access in the school environment (e.g., seating/positioning, lighting, low tech solutions, etc.).
- 8. Identify sensory needs in students; develop, train and monitor sensory programming (e.g., Alert Program, sensory diets, movement programs).
- 9. Assist with the identification, recommendation and purchase of materials, technology and equipment for school or district-wide use.
- 10. Participate in professional development, professional association activities and maintain professional certification/licensure.

TOP 10 CASELOAD RESPONSIBILITIES

- 1. Provide direct and indirect therapy/service to students with IEP's/IFSP's using a continuum of service delivery options.
- 2. Evaluate students for initial and ongoing special education eligibility, functional performance in the school environment, specific disabilities and ongoing assessment / data collection to determine effectiveness of interventions.
- 3. Complete mandated paperwork such as report writing based on evaluation results, collect and record student progress data, complete report cards, complete daily service logs, maintain parent contact logs, collect and report information to a 3rd party billing agency (Medicaid service logs and Random Moments).
- 4. Attend and participate in or coordinate Multidisciplinary Team conferences, Individualized Educational Program /Individualized Family Service Plan/Evaluation Review Plan meetings, Parent-Teacher meetings.
- 5. Train/Coach/Monitor other adults working with students (paraprofessionals, aides, teachers, etc.) on specific procedures such as sensory diets, assistive technology or fine-motor activities to integrate therapy into the whole school environment of the student.
- 6. Observe classrooms and design/recommend adaptations to the environment, curriculum, and delivery of instruction to assure progress in least restrictive environment.
- 7. Research/order/prepare/adapt/provide assistive technology and equipment or materials to meet the needs of the student in all school settings (classroom, lunchroom, hallway, bathroom, playground, bus, gym, etc).
- 8. Communicate and collaborate with other agencies, therapists and physicians regarding student.
- 9. Plan for student transitions to different buildings, programs, work or college.
- 10. Collaborate with parents to access resources or provide home activities to support the student progress.

Response to Intervention



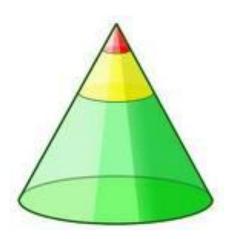
Response to Intervention (RtI) uses a multi-tier model of early intervening and service delivery to support student success. "RtI and early intervening services (EIS) have been used as frameworks for high quality instruction and data-based decision making in both general and special education, thus integrating services across educational levels" (Clark & Polichino, 2010). Through participation in RtI, occupational therapists participate in team-based problem solving for students in occupational performance activities related to participation in their educational program.

The RtI model includes Tier 1, Universal Prevention; Tier 2, Targeted Intervention, and Tier 3, Intensive intervention.

Tier 1 (Universal Prevention)— OT may provide classroom consultation regarding environmental accommodations, such as seating and positioning adjustments, adjusting sensory input, movement programs, co-teaching to demonstrate motor/sensory strategies, suggesting a variety of paper/writing utensils; etc.

Tier 2 (Targeted Intervention) - OT may work closely with teacher/staff to develop classroom interventions for a particular student to be successful in their educational program. Examples may include a pencil grip, slant board, ball chair, adapted scissors, digital recorder, electronic speller, etc.

Tier 3 (Intensive Intervention) - OT may work with staff and student on intensive and individualized interventions, such as use of high tech solutions including adapted software, computer access options, word-processor, individualized handwriting training, developing/monitoring an individualized sensory diet, use of visual supports, etc.



OCCUPATIONAL THERAPY RESPONSE TO INTERVENTION

USE OF SCHOOL MATERIALS

CONTINUUM OF SUPPORTS

Tier 3:

Intensive Intervention: Use of School Materials *examples***:**

- Provide direct intervention to student(s) in the classroom during typical classroom tasks (during cutting, computer use, manipulation of small items during math or art)
- Provide individual or small group instruction (in or out of the classroom) regarding fine motor skills or use of school materials
- Provide individual intervention programs and materials for teacher/paraprofessional, provide ongoing monitoring and support
- Provide and instruct regarding the use of assistive technology (word processor, netbook, portable organizer, tablet, individualized speech to text or other specialized software)

Tier 2:

Targeted Intervention: Use of School Materials examples:

- Provide information/materials regarding the use of fine motor "bins" for daily use
- Provide information/materials regarding proper use of pencil grip (provide visuals at desk as cues)
- Provide information/materials regarding "Mid-tech" accommodation (slant board, electronic dictionary, computer text reader, adapted scissors)
- Provide information/materials/instruction on proper scissor use
- Provide small group intervention for fine motor skills

Tier 1:

Universal Prevention: Use of School Materials *examples:*

- Provide information/materials regarding proper seating (hips, knees and feet at 90 degrees, desk height just above elbow)
- Provide information/materials regarding proper keyboarding skills
- Provide information/materials regarding proper pencil grasp
- Provide information/materials regarding proper letter/number formation for teaching handwriting
- Provide mini lessons to classrooms (grasp activities, sensory breaks/Brain Gym, scissor skills, fine motor bins)
- Provide information/materials regarding the incorporation of visual skill building activities (using balls, playground equipment, balloons/bean bags, blocks, Legos, playdough, crayons)
- Provide information/materials regarding fine motor activities, such as manipulating small items to develop finger prehension
- Provide information regarding the benefits of upper extremity weight bearing activities (animal walks, push-ups, wheelbarrow walking)
- Assist teachers with planning center time activities to incorporate developmental motor activities
- Participate in Co-teaching and consult with teachers as needed
- Provide information regarding frequent cuing to facilitate proper grasp of pencil, crayon, scissors, computer mouse
- Provide training regarding facilitation of developmental motor levels (presentations, consultations, emails, handouts, follow-ups)
- Provide suggestions for low-tech devices or adaptations (pencil grips, weighted items, adapted scissors, line/paragraph strips, alternative paper)

WRITTEN WORK

Tier 3:

Intensive Intervention: Written Work *examples***:**

- Provide direct intervention to student in the classroom during handwriting or writing assignment
- Provide individual or small group instruction (in or out of the classroom) for fine and visual motor skills, letter and number formation, line use, and visual spatial organization
- Provide instruction for use of Assistive Technology required by specific student

Tier 2:

Targeted Intervention: Written Work examples:

- Provide small group or individual instruction for fine motor, visual motor, letter and number formation, line use, visual spatial organization
- Provide instruction to classroom staff on specific intervention for fine motor, visual motor, letter and number formation, line use, visual spatial organization
- Provide instruction for use of Mid-tech accommodations (graphic organizers, specific writing tools or paper, colored overlays or reader strip, Franklin spell checker/thesaurus)

Tier 1:

Universal Prevention: Written Work examples:

- Provide information/materials for development of finger coordination for handwriting: small beads, Legos pegs, coins, push pins, tearing activities, unifix cubes, small blocks, etc.
- Provide information/materials for pre-writing visual motor activities which encourage pencil/crayon/marker control, like tracing, mazes, dot-to-dot, coloring
- Provide information/materials for hand and finger strengthening using resistive materials: playdough, squeeze balls, clothespins, paper punch, tearing paper, tweezers, rolling paper into tiny balls, and squeezing sponges
- Provide information/activities to help develop isolated movement of individual fingers, such as finger plays, musical keyboards, computer keyboards, "finger exercise"
- Provide information/instruction for warm-up prior to handwriting, do 1-2 minutes of large muscle warm-ups, and 1-2 minutes of hand and finger exercises
- Provide information and instruction pertaining to proper pencil grasp, develop cues to remind students how to correctly hold their pencil
- Provide information and instruction regarding pencil grips
- Provide information and instruction regarding proper paper positions (right corner higher for right handed, left corner higher for lefties)
- Provide information/instruction/activities pertaining to use of non-dominant helping hand to stabilize the paper
- Provide information/instruction regarding proper seating (feet flat on floor, hips/knees/ankles at 90 degree angles, desk height 1-2 inches higher than elbow)
- Provide information regarding the use of multi-sensory strategies to teach proper letter formation (sand trays, raised letters to trace, verbal cues, gel bags, shaving cream, sky writing, "writing" on carpet, building letters out of wood pieces)
- Provide information/instruction regarding proper letter formation (top to bottom and left to right)
- Encourage quality in writing, not quantity, 5-10 minutes (the last letters written are the ones that may be stored in the motor memory)
- Provide information/instruction regarding opportunities for working on vertical surfaces: chalk or white board, paper taped to wall, easels (this encourages mature grasp, assists with directional difficulties, and provides extra sensory input)
- Provide information regarding the variety of paper that is available (line width options, graph, colored, or unlined)

BEHAVIOR / SELF-REGULATION

Tier 3:

Intensive Intervention: Behavior / Self-Regulation *examples*:

- Provide sensory program to be completed 1-3 times daily, which includes individually developed deep pressure (proprioceptive) and movement(vestibular) activities for neural regulation; provide a quiet space for frequent breaks
- Provide the necessary sensory equipment for high intensity movement and deep pressure input (e.g. trampoline, crash mat, steam roller, exercise bike, rower, inversion table, suspended equipment, barrel, therapy balls, spinning board, rocker board, etc.)
- Recognize early signs of sensory overload, and intervene proactively by providing calming sensory accommodations
- Closely monitor and adjust the sensory program; consult as needed with occupational therapist

Tier 2:

Targeted Intervention: Behavior / Self-Regulation examples:

- Provide information/materials regarding alternative seating options (sit cushion, standing table, ball chair, rocking chair, T-stool, prone on floor, bean bag)
- Provide information/materials regarding weighted and pressure tools (lap weight, weighted vest, neoprene waist wrap, back packs or heavy coats deep pressure input to shoulders)
- Provide information regarding preferential seating (front of room to minimize distractions, back of room to allow for extra movement, low stimulation "view")
- Provide information/materials regarding noise reduction "tools" (ear plugs, headphones, hat)
- Provide information/materials regarding specific movement program to be completed regularly
- Provide information/materials regarding frequent and scheduled quiet breaks, (such as running errands out of the classroom)
- Provide information/materials regarding individualized sensory activities to help keep the student calm and organized; observe and intervene throughout the day as necessary
- Provide information regarding accommodations for potentially overstimulating situations (transitions, lunch room, cafeteria, specials, assemblies, recess)

Tier 1:

Universal Prevention: Behavior / Self-Regulation *examples***:**

- Provide information/materials regarding organized physical environment (minimize "clutter")
- Provide information/materials regarding quiet spaces for individual work centers
- Provide information/materials regarding frequent movement opportunities within the classroom
- Provide information/materials regarding limiting visual stimulation (keep white boards clean, do not hang things from ceiling, cover shelves with fabric, use calm colors like blue and green)
- Provide information regarding use of natural lighting, limit fluorescent lighting
- Provide information/materials regarding frequent structured movement breaks which incorporate head movement and muscle resistance (group movement breaks should include deep breathing, stretching and slow rhythmical movement patterns for maximal calming effect)
- Provide information/materials regarding use of a visual schedule, give advanced notice of changes/transitions
- Provide information/materials regarding use of water bottles/straws, gum in the classroom
- Provide information/materials regarding use of hand tools or fidgets
- Provide information/materials regarding the creation of a designated "personal space" area
- Provide information regarding the adverse affects of removal of recess as a punishment; provide plenty of playground / recess opportunities
- Provide information regarding the positive effects of classical music or white noise

PERSONAL MANAGEMENT/SELF-CARE

CONTINUUM OF SUPPORTS

Tier 3:

Intensive Intervention: Personal Management/Self-Care examples:

- Provide direct intervention to student during the classroom routine for managing clothing, toileting, personal hygiene, or eating/management of food, organizational skills, or managing environment.
- Provide individual or small group instruction (in or outside of the classroom) for specific skill training for managing clothing, toileting, personal hygiene, or eating/management of food, organizational skills, or managing environment.
- Provide specific adaptations for managing clothing/shoes, toileting, personal hygiene, or eating/management of food, organizational skills, or managing environment.
- Provide and instruct in the use of assistive technology (adaptations for clothing, toileting, hygiene, eating, organization, and management of the physical environment.)

Tier 2:

Targeted Intervention: Personal Management/Self-Care examples:

- Provide small group or individual instruction pertaining to clothing management (fastening, donning/doffing winter clothing, or shoes/boots)
- Provide materials and small group or individual instruction pertaining to feeding or adapted equipment (weighted utensils, scoop dishes, terry cloth wrist bands, managing containers, oral motor skills)
- Provide materials and small group or individual instruction pertaining to accessible bathrooms and appropriate hygiene supplies, (post visual guides/pictures for appropriate routines for personal hygiene such as hand washing or toileting)
- Provide materials and small group or individual instruction pertaining to environmental accommodations (leave class a few minutes early to avoid crowded hallways, use elevator instead of stairs, use peer buddy for assistance with doors or books, tape off personal space)
- Provide materials and small group or individual instruction pertaining to organizational strategies (colored coded folders for notebook, planners, use of note taking outline or notes from teacher or student buddy, homework checklists or timelines, highlighter)

Tier 1:

Universal Prevention: Personal Management/Self-Care *examples*:

- Provide information/materials pertaining to oral motor exercises and foods to help develop oral sensory motor skills (crunchy, chewy, salty, sour, sweet)
- Provide information/materials pertaining to eating/feeding (opening containers, managing lunchroom, using utensils)
- Provide information/materials pertaining to clothing management (dressing/undressing techniques, open/closes fasteners, manages outerwear, ties shoes)
- Provide information/materials pertaining to toileting (accessibility, physical environment, manages clothing, manages toilet paper)
- Provide information/materials pertaining to visual guides/pictures for sequencing (hand washing, toileting, dressing, eating)
- Provide information/materials pertaining to hygiene (one-handed hand washing or wiping technique)
- Provide information/materials for organizing materials (desk, locker, backpack)
- Provide information regarding management of school physical environments (playground equipment and outdoor environment, doors, stairs, hallways)

Evaluation



Occupational therapy addresses the occupational roles of the student in the educational setting. These roles may fall under any of the following four areas which are addressed in the Occupational Therapy Educational Performance Questionnaire: Use of School Materials, Written Work, Behavior/Self-Regulation, and Personal-Management/Self-Care.

The following tests and tools are some of those frequently used by occupational therapists working within the Kent Intermediate School District. Occupational therapists should consider available information on the date of the latest edition or revision, reliability and validity, included ages, areas addressed and standardizations.



Use of School Materials

Kent ISD Perceptual/Fine Motor Profile Benbow Observations of Hand Skills of the K-1 Child Bruininks Oseretsky Test of Motor Proficiency, 2nd Edition (BOT2) SETT Framework



Written Work

Beery Visual Motor Integration (VMI)
The Print Tool
Gardner Test of Visual Perceptual Skills non-motor (TVPS)
Developmental Test of Visual Perceptual (DTVP-3)
Motor Free Visual Perceptual Test (MFVPT)
Children's Handwriting Evaluation Scale (CHES)
Kent ISD Perceptual/Fine Motor Profile



Behavior/Self Regulation

(Sensory Processing/Sensory Integration)
Sensory Profile (Winnie Dunn PhD, OTR)
Sensory Processing Measure (SPM)



Personal Management/Self-Care

Early Intervention Developmental Profile (EIDP) Battelle Developmental Inventory



Preschool/Early Childhood

Mullen Scales of Early Learning
Infant Toddler Developmental Assessment(IDA)
Bayley Scales of Infant Development
Early Intervention Developmental Profile (EIDP)
Preschool Developmental Profile (PDP)
Brigance Comprehensive Inventory of Basic Skills-Revised

Occupational Therapy Educational Performance Questionnaire

The OT Educational Performance Questionnaire forms were designed to be used formally or informally in multiple circumstances as a tool to gain information from the teacher, or others familiar with the student. Some of the ways for use of this form include:

- Obtain information following concerns reported to the OT
- To assist in developing appropriate classroom interventions/strategies/accommodations
- Following concerns noted by the RtI team as part of the screening process
- As part of the special education referral or Evaluation Review Plan
- Obtain information regarding present level prior to the annual IEP or redetermination meeting

This form is available at: http://kentisd.org/Special_Education/

OCCUPATIONAL THERAPY EDUCATIONAL

PERFORMANCE

SCHOOL AGE TEACHER QUESTIONNAIRE

	Student:	Birth date:		Date:
	School:	Teacher / Grade:		
	Completed by:			
1.	USE OF SCHOOL MATERIALS:			
	Compared with classroom peers, does the stream participation?noyes. If yes, check			_
	Turns pages in book Reads without losing place Uses a functional grasp of writing tools Erases without tearing paper Folds paper Manipulates small items (game pieces, coins, manipulatives) Please explain how "use of school materials" interventions.	Uses scissors Spreads glue on Uses calculator/ru Inserts paper into (folder, desk, cub	uler/template, etc. appropriate places by)	Removes/replaces objects into storage bin/desk/locker Uses computer mouse Uses two-handed keyboarding Produces computer work with reasonable speed , and comment on successful/unsuccessful
2.	WRITTEN WORK: Compared with classroom peers, does the study of the st	•	•	earning/participation?noyes.
	Has established hand dominance Uses functional grasp of pencil Uses appropriate pressure on writing tool Maintains adequate posture during handwriting Prints numbers/letters of acceptable size and formation	Writes on lines or in des spaces Organizes written items from top to bottom & left Leaves appropriate space between words in a sent Aligns numbers/words	word on a page Copy to right boar proces Procence Specific Write Word Write Word Process Write Word Process Pr	bies from a nearby source (book, ksheet) bies from a distant source (white rd, screen) duces written work with reasonable ed without fatigue tes letters of acceptable size and nation (cursive)
	Please explain how "written work" significantly interventions.	y interferes with the stud	lent's learning, and comr	nent on successful/unsuccessful

Compared with classroom peers, does this student's behavior/self-regulation significantly interfere with learning or participation? no____yes. If yes, check items in section 3 that are difficult for the student; if no, go to section 4. Tolerates stimuli (visual, sound, touch) Demonstrates appropriate work habits Handles frustration when experiencing Demonstrates appropriate attention difficulties without overreacting Maintains control in large groups Transitions between activities Awareness of personal space Manages unstructured time (bus, recess, Accepts change in routine boundaries Complies with adult direction lines, lunch) Please explain how "behavior / self-regulation" significantly interferes with the student's learning, and comment on successful/unsuccessful interventions. PERSONAL MANAGEMENT/SELF CARE: Compared with classroom peers, does this student's personal management/self-care significantly interfere with learning/participation? ____no___yes. If yes, check items in section 4 that are difficult for the student. Uses utensils (fork, spoon) Ties/unties shoes Manages backpack, books, supplies Sits in chair with adequate posture Eats meals without assistance Manages hallway /keeps pace with Opens food/drink containers Organizes materials in workspace peers Moves in classroom without tripping Manages lunch in lunchroom Manages doors Uses playground equipment Removes/puts on clothing Manages bathroom Opens/closes fastenings (buttons, Manages locker (books, bag, lock, etc.) Uses supplemental aids (explain below): zippers) Please explain how "personal management/self-care" significantly interferes with the student's learning, and comment on successful/unsuccessful interventions. Additional comments: (IEP Teacher input) Date_ Teacher Signature _ Please return form to:

3.

BEHAVIOR/SELF REGULATION:

OCCUPATIONAL THERAPY EDUCATIONAL PERFORMANCE PRESCHOOL TEACHER QUESTIONNAIRE

Student:	Birthdate:	Date:
School:	Teacher/Grade:	Completed by
As compared to classroom peers, check the section.	activities of significant studen	t difficulty. If none, proceed to the next
USE OF SCHOOL MATERIALS: Orients book correctly Turns pages in book Grasps writing tool (pencil, crayon, mark Manipulates small items (game/puzzle p marker tops, glue sticks, manipulatives) Grasps scissors/cutting tool Snips with scissors Cuts on a line	Demonstrate Demonstrate Demonstrate ver) writing/color leces, Uses appropr Stabilizes pa Colors within Imitates a lii Draws a pers	es hand preference es functional grasp of writing tools es fluid movements when ring/painting riate pressure on writing utensils eper during coloring/drawing endefined area enderorated (OI — \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \
BEHAVIOR/SELF REGULATION: Participates in classroom activities appr (stays with group, doesn't blurt or wand Able to attend to a story	opriately Eats/drinks si ler) Uses simple u Manages meal	ANAGEMENT/SELF CARE: nacks/meals without assistance tensils in lunchroom
Complies with adult direction Transitions easily to next activity Tolerates stimuli (visual, sound, touch) w overreacting Aware of personal space Handles frustrations appropriately	Manages simp without Manages bath Manages hand Identifies own Manages back Moves in scho Manages hallw	washing n belongings pack ol environments without tripping vay and keeps pace with peers
Explain how the activities you identified sig successful/unsuccessful interventions (con	mificantly interfere with partici	vith good posture
Teacher Signature	(MET pai	rticipation-teacher input)

Please return form to:___

Guidelines for Determination of Occupational Therapy Service

Instructions for determining occupational therapy service based on an initial special education referral, annual review or 3-year redetermination or other OT referral:

- 1. Acquire data through review of the completed Occupational Therapy Educational Performance Teacher Questionnaire, parent input, (developmental history, interview, forms) and the occupational therapy evaluation, including observation in school environments
- 2. Review the results of Occupational Therapy Educational Performance Teacher Questionnaire, parent input and OT evaluation; determine if problems in each area are "significantly interfering" with the student's ability to participate in his/her educational program
- 3. Proceed to the OT Service Rubric
 - a) If there are no areas of significant difficulty in any **Educational Performance Area**, then STOP, OT service is not required. Proceed with RtI Continuum of Supports.
 - b) Circle the appropriate educational performance score(s), and enter score in column.
 - c) If there is at least one area of significant interference then complete the **Contributing Factor** portion. Circle the score in each row, then add all column score (total).
 - d) Based on this total score, use the **OT Frequency Guidelines** for service recommendations.
- 4. Determine the significance of possible deficit(s) and the impact on each of the educational performance areas in the Occupational Therapy Service Rubric.



Guidelines for Occupational Therapy Service Rubric

Complete the rubric below based on the completed OT Educational Performance Questionnaire, Staff/Parent Input, your evaluation, as well as your interpretation of data. Using your professional judgment, consider the following: potential for change in the student's occupational performance, previous interventions, underlying limitations in occupational performance components (e.g., postural, perception, coordination, processing), factors such, environmental, emotional, lack of experience, additional paraprofessional or adult support, reduced school day, home-bound or medical factors, etc.

Educational Performance Areas	Use of School Materials	Written Work	Behavior / Self- Regulation	Personal Management	
Does the problem significantly interfere with student's ability to participate in educational program and require the expertise of an occupational therapist? (Circle all that apply)	(1)	(1)	(1)	(1)	= (score 1-4)

Contributing Factors					
Age (Circle one)	18+	12-17	7-11	6 or below (3)	_
	(0)	(1)	(2)		
Placement (Circle one)		Self-contained	Resource	General	score 0-3
		(1)	support	education	
			(2)	(3)	= score 0-3
Previous School	5+ years	4-5 years	2-3 years	0-1 years	Score 0-5
Occupational Therapy	(0)	(1)	(2)	(3)	=
(Circle one)					score 0-3

TOTAL Score = ____ (total of 4 areas above)

OT Frequency Guidelines:

Total Score	Frequency Recommendations
10-13	3-4x/ month
8-10	2-3 x/ month
6-8	1-2 x/ month
1-6	no service / monitor

Assistive Technology within Kent ISD

Use of School Materials, Written Work, Behavior/Self Regulation, Personal Management/Self Care

WHAT IS ASSISTIVE TECHNOLOGY?

Assistive Technology is defined in the federal law for students with disabilities called the Individuals with Disabilities Education Act (IDEA).

"Assistive Technology device" means any item, piece of equipment, or product system, whether acquired commercially off the shelf, modified, or customized that is used to increase, maintain, or improve the functional capabilities of a child with a disability.

"Assistive Technology service" means any service that directly assists a child with a disability in the selection, acquisition, or use of an assistive technology device.

Assistive Technology is provided to support the student's ability to have access to the general education curriculum in the least restrictive environment possible.

WHO PROVIDES ASSISTIVE TECHNOLOGY?

- Assistive Technology is provided through the student's school, as determined:
 - by school-site personnel knowledgeable about motor, vision, hearing, processing and communication (OT, SLP, PT, teacher, etc.)
 - o in consultation with the Assistive Technology Coordinator at Kent ISD as needed
- Assistive Technology is incorporated into a student's IEP as a tool to reach curriculum goals, typically documented under 'Accommodations'
- Assistive Technology equipment is drawn from district, ISD or MITS (Michigan Integrated Technology Supports) resources. Resources may include no-low tech items as well as devices with electronic and digital components.

WHAT IS THE ASSISTIVE TECHNOLOGY DECISION-MAKING PROCESS?

- 1. Identification of the student's team that will be involved with the AT process.
- 2. Use of the SETT form and process to determine tools.
- 3. Implement trial of tools, with action plan and process for documentation.
- 4. Review level of success in improving student access to and progress in the curriculum, including goals and objectives.

THE OT ROLE IN ASSISTIVE TECHNOLOGY DECISION-MAKING:

Occupational Therapists have the background to support students in school performance through recommendation or provision of adaptive devices and environmental accommodations. Supporting the IEP team and the student in considering assistive technology and then implementing its use in the school setting is a natural expansion of the OT's role.

Assistive technology interventions generally involve consideration within the following performance areas:

Use of school materials:

- Mechanics of writing (paper, pencil/pen, grip, keyboard, slantboard, etc.)
- Computer access (positioning supports, keyboard, mouse, trackball, software, etc.)
- Reading (adapted books, book supports, ebooks, visual supports, etc.)
- Math (adapted calculators, adapted paper, etc.)
- Recreation/leisure (adapted art, music or PE materials, etc.)
- Positioning/seating in the school environment (adapted chair, arm supports, etc.)

Written Work:

- Writing supports (software, digital writing tools, adapted note takers, etc.)
- Math (software, tactile/manipulative tools, etc.)

Behavior/Self-Regulation:

- Positioning (seating options, listening devices, adapted timers, etc.)
- Schedules (visual supports, digital supports/reminders, etc.)

Personal Management/Self Care:

- Schedules (print, picture or digital adaptations, software, timers, etc.)
- Daily living (adapted social stories, digital supports, adapted seating, etc.)
- Communication (adapted AAC, switches, software, etc.)

•

For more information visit:

www.kentisd.org > Assistive Technology page

Evidence-Based Practice



Evidence—based practice (EBP) refers to the integration of clinical expertise with the best available external evidence from systematic research. It also takes into consideration the students' preferences and goals. EBP is mandated by IDEA and Elementary and Secondary Education Act, and must be a critical component in determining delivery of school-based OT services.

EBP refers to the use of research and scientific studies as a base for determining the best practices in the field of occupational therapy. EBP uses various methods (e.g. carefully summarizing research, putting out accessible research summaries, educating professionals in how to understand and apply research findings) to encourage professionals and other decision-makers to pay more attention to evidence that can inform their decision making. Where EBT is applied, it encourages professionals to use the best evidence possible, i.e., the most appropriate information available.

Evidence-based practice is a philosophical approach that is in opposition to <u>rules of thumb</u>, folklore, and <u>tradition</u>, or "the way it's always been done".

EBP is a process for making informed clinical decisions.

EBP is about USING research - not doing it. Examples include Critically Appraised Topic (CAT).

EBP involves clinical reasoning to integrate:

clinical experience students/families' preferences highest quality evidence available (both quantitative and qualitative)

Evidenced Based Practice for School-Based Occupational Therapy

Use of School Materials:

Bazyk, S., Michaud, P., Goodman, G., Papp, P., Hawkins, E., & Welch, M. A. (2009). Integrating occupational therapy services in a kindergarten curriculum: A look at the outcomes. *American Journal of Occupational Therapy*, *63*, 160–171.

Case-Smith, J. (2000). Effects of occupational therapy services on fine motor and functional performance in preschool children. *American Journal of Occupational Therapy*, *54*, 372–380.

Hemmingsson, H., Lidström, H., & Nygård, L. (2009). Use of assistive technology devices in mainstream schools: Students' perspective. *American Journal of Occupational Therapy*, 63, 463–472.

Preminger, F., Weiss, P. L., & Weintraub, N. (2004). Predicting occupational performance: Handwriting versus keyboarding. *American Journal of Occupational Therapy*, *58*, 193–201.

Smith-Zuzovsky, N., & Exner, C. E. (2004). The effect of seated positioning quality on typical 6-and 7-year-old children's object manipulation skills. *American Journal of Occupational Therapy*, 58, 380–388.

Watson, A. H., Ito, M., Smith, R. O., & Andersen, L. T. (2010). Effect of assistive technology in a public school setting. *American Journal of Occupational Therapy*, 64, 18–29.

Written Work:

Asher, A. V. (2006). Handwriting instruction in elementary schools. *American Journal of Occupational Therapy*, 60, 461–471.

Case-Smith, J. (2002). Effectiveness of school-based occupational therapy intervention on handwriting. *American Journal of Occupational Therapy*, *56*, 17–25.

Dankert, H. L., Davies, P. L., & Gavin, W. J. (2003). Occupational therapy effects on visual-motor skills in preschool children. *American Journal of Occupational Therapy*, *57*, 542–549.

Denton, P. L., Cope, S., & Moser, C. (2006). The effects of sensorimotor-based intervention versus therapeutic practice on improving handwriting performance in 6- to 11-year-old children. *American Journal of Occupational Therapy*, 60, 16–27.

Engel-Yeger, B., Nagauker-Yanuv, L., & Rosenblum, S. (2009). Handwriting performance, self-reports, and perceived self-efficacy among children with dysgraphia. *American Journal of Occupational Therapy*, 63, 182–192.

Hammerschmidt, S. L., & Sudsawad, P. (2004). Teachers' survey on problems with handwriting: Referral, evaluation, and outcomes. *American Journal of Occupational Therapy*, *58*, 185–192.

Marr, D., & Dimeo, S. B. (2006). Outcomes associated with a summer handwriting course for elementary students. *American Journal of Occupational Therapy*, 60, 10–15.

Naider-Steinhart, S., & Katz-Leurer, M. (2007). Analysis of proximal and distal muscle activity during handwriting tasks. *American Journal of Occupational Therapy*, *61*, 392–398.

Ratzon, N. Z., Efraim, D., & Bart, O. (2007). A short-term graphomotor program for improving writing readiness skills of first grade students. *American Journal of Occupational Therapy*, 61, 399–405.

Roberts, G. I., Siever, J. E., & Mair, J. A. (2010). Effects of a kinesthetic cursive handwriting intervention for grade 4–6 students. American Journal of Occupational Therapy, 64, 745–755. doi: 10.5014/ajot.2010.08128

Rosenblum, S., Goldstand, S., & Parush, S. (2006). Relationships among biomechanical ergonomic factors, handwriting product quality, handwriting efficiency, and computerized handwriting process measures in children with and without handwriting difficulties. *American Journal of Occupational Therapy*, 60, 28–39.

Volman, M., van Schendel, B. & Jongmans, M. (2006). Handwriting difficulties in primary school children: A search for underlying mechanisms. *American Journal of Occupational Therapy*, 60, 451–460.

Woodward, S., & Swinth, Y. (2002). Multisensory approach to handwriting remediation: Perceptions of school-based occupational therapists. *American Journal of Occupational Therapy*, 56, 305–312.

Behavior/Self-Regulation:

Arbesman, M., & Lieberman, D. (2010). Methodology for the systematic reviews of occupational therapy for children and adolescents with difficulty processing and sensory information. American Journal of Occupational Therapy, 64, 368–374. doi: 10.5014/ajot.2010.09068

Bazyk, S., & Bazyk, J. (2009). The meaning of occupation-based groups for low-income urban youths attending after-school care. *American Journal of Occupational Therapy*, 63, 69–80.

- Cosbey, J., Johnston, S. S., & Dunn, M. L. (2010). Sensory processing disorders and social participation. American Journal of Occupational Therapy, 64, 462–473. doi: 10.5014/ajot.2010.09076
- Davies, P. L., & Tucker, R. (2010). Evidence review to investigate the support for subtypes of children with difficulty processing and integrating sensory information. American Journal of Occupational Therapy, 64, 391–402. doi: 10.5014/ajot.2010.09070
- Gere, D. R., Capps, S. C., Mitchell, D. W., & Grubbs, E. (2009). Sensory sensitivities of gifted children. *American Journal of Occupational Therapy*, 64, 288–295.
- Koenig, K. P., & Rudney, S. G. (2010). Performance challenges for children and adolescents with difficulty processing and integrating sensory information: A systematic review. American Journal of Occupational Therapy, 64, 430–442. doi: 10.5014/ajot.2010.09073
- Lane, S. J., & Schaaf, R. C. (2010). Examining the neuroscience evidence for sensory-driven neuroplasticity: Implications for sensory-based occupational therapy for children and adolescents. American Journal of Occupational Therapy, 64, 375–390. doi: 10.5014/ajot.2010.09069
- May-Benson, T. A., & Koomar, J. A. (2010). Systematic review of the research evidence examining the effectiveness of interventions using a sensory integrative approach for children. American Journal of Occupational Therapy, 64, 403–414. doi: 10.5014/ajot.2010.09071
- Miller, L. J., Coll, J. R., & Schoen, S. A. (2007). A randomized controlled pilot study of the effectiveness of occupational therapy for children with sensory modulation disorder. *American Journal of Occupational Therapy*, 61, 228–238.
- Miller, L. J., Schoen, S. A., James, K., & Schaaf, R. C. (2007). Lessons learned: A pilot study on occupational therapy effectiveness for children with sensory modulation disorder. *American Journal of Occupational Therapy*, *61*, 161–169.
- Pfeiffer, B., Henry, A., Miller, S., & Witherell, S. (2008). The effectiveness of Disc 'O' Sit cushions on attention to task in second-grade students with attention difficulties. *American Journal of Occupational Therapy*, 62, 274–281.
- Polatajko, H. J., & Cantin, N. (2010). Exploring the effectiveness of occupational therapy interventions, other than the sensory integration approach, with children and adolescents experiencing difficulty processing and integrating sensory information. American Journal of Occupational Therapy, 64, 415–429. doi: 10.5014/ajot.2010.09072
- Schaaf, R. C., & Nightlinger, K. M. (2007). Occupational therapy using a sensory integrative approach: A case study of effectiveness. *American Journal of Occupational Therapy*, *61*, 239–246.
- VandenBerg, N. L. (2001). The use of a weighted vest to increase on-task behavior in children with attention difficulties. American Journal of Occupational Therapy, 55, 621–628.
- Smith Roley, S., Bissell, J., Frolek, G. (2009). Providing occupational therapy using sensory integration theory and methods in school-based practice. American Journal of Occupational Therapy, 63, 823–842.

Personal Management/Self-Care:

Bundy, A. C., Luckett, T., Naughton, G. A., Tranter, P. J., Wyver, S. R., Ragen, J., Singleton, E., & Spies, G. (2008). Playful interaction: Occupational therapy for all children on the school playground. *American Journal of Occupational Therapy*, 62, 522–527.

Cahill, S. M., & Suarez-Balcazar, Y. (2009). The Issue Is—Promoting children's nutrition and fitness in the urban context. *American Journal of Occupational Therapy*, 63, 113–116.

Chapparo, C. J., & Hooper, E. (2005). Self-care at school: Perceptions of 6-year-old children. *American Journal of Occupational Therapy*, *59*, 67–77.

Dolva, A.-S., Coster, W., & Lilja, M. (2004). Functional performance in children with down syndrome. *American Journal of Occupational Therapy*, *58*, 621–629.

Egilson, S. T., & Traustadottir, R. (2009). Participation of students with physical disabilities in the school environment. *American Journal of Occupational Therapy*, *63*, 264–272.

Other:

Bose, P., & Hinojosa, J. (2008). Reported experiences from occupational therapists interacting with teachers in inclusive early childhood classrooms. *American Journal of Occupational Therapy*, 62, 289–297.

Dirette, D., Rozich, A., & Viau, S. (2009). The Issue Is—Is there enough evidence for evidence-based practice in occupational therapy? *American Journal of Occupational Therapy*, 63, 782–786.

Lin, S. H., Murphy, S. L., & Robinson, J. C. (2010). The Issue Is—Facilitating evidence-based practice: Process, strategies, and resources. *American Journal of Occupational Therapy*, *64*, 164–171.

Grade Level Content Expectations (GLCE)

Grade Level Content Expectations (GLCE) were developed by the Michigan Department of Education with the intention of increasing consistency of curriculums throughout the state. These GLCE standards and more detailed learning objectives, called benchmarks, are contained within the Michigan Curriculum Framework. The initial purpose of this Kent ISD OT committee was to develop school-based occupational therapy goals and objectives that would align with the GLCEs, which is now a requirement of the Individual Educational Program. A careful examination was made of Early Learning Expectations and GLCEs to determine which would be appropriate for the scope of occupational therapy. The GLCEs that were identified were categorized into the four areas of educational performance: use of school tools, written work, behavior/self-regulation, and personal management/self-care. The GLCEs include samples of annual goals, short-term objectives and criterion that require individualization for each student. These are presented in both a chart and list format, to accommodate individual learning styles. These GLCEs may not encompass all areas that are addressed by the occupational therapist in the student's IEP.

GLCE Code Descriptions

K-8 ELA Content Expectations

First part of the code represents:				
R	· · · · · · · · · · · · · · · · · · ·			
	Writing Strand			
	Listening Strand			
S	Speaking Strand			
Second part o	of the code represents the Domain:			
WS	Word Recognition and Word Study			
FL	Fluency			
NT	Narrative Text			
IT	Informational Text			
CM	Comprehension			
MT	Meta-cognition			
CS	Critical Standards			
AT	Attitude about reading or writing			
GN	Genres			
PR	Process			
PS	Personal Style			
GR	Grammar and Usage			
SP	Spelling			
HW	Handwriting			
CN	Conventions (some speaking S.CN or some are listening L.CN)			
DS	Discourse			
RP	Response			
	•			
Breakdown of the Content Expectation Code Description: R.CM.03.01				
R.	= Reading Strand			
R.CM.	= CM represents the Comprehension Domain			
R.CM.03	= 03 represents 3 rd Grade			
R.CM.03.01	= 01 represents the first content expectation in the comprehension domain			
K.C.VI.03.01	- Of represents the first content expectation in the comprehension domain			
K-8 Math Content Expectations				
First part of the code represents:				
N				
A	•			
	M Measurement			
GGeom				
	D Data and Probability			

D.____ Data and Probability

Second part of the code represents:

ME Meaning, notation, place value, and comparisons

MR Number relationships and meaning of operations

FL Fluency with operations and estimations PA Patterns, relations, functions and change

RP Representations

RP Formulas, expressions, equations, and inequities

UN Units and systems of measurement

TE Techniques and formulas for measurement PS Problem solving involving measurement

GS Geometric shape and properties, and mathematical arguments

LO Location and spatial relationships

SR Spatial reasoning and geometric modeling

TR Transformation and symmetry

RE Data representation

AN Data interpretation and analysis

PR Probability

Breakdown of the Content Expectation Code Description:

N.FL.07.01

N = Number and Operations

N.FL = <u>Fluency</u> with operations and estimations

 $N.FL.07 = \frac{0.000}{0.0000}$ N.FL.07 = 0.7 represents 7th Grade

N.FL.07.01 = 01 represents the 1st content expectation in that strand and standard

K-8 Physical Education Content Expectations

First part of the code represents the Strand:

M.____ Motor Skills and Movement Patterns

K.____Content Knowledge

A.____ Fitness and Physical <u>A</u>ctivity

B.____ Personal/Social <u>Behaviors</u> and Values

Second part of the code represents the Domain:

MC Movement Concepts

MS Motor Skills AQ Aquatics

OP Outdoor Pursuits

TG Target Games
IG Invasion Games
NG Net/Wall Games

SG Striking/Fielding Games RA Rhythmic Activities

FB Feedback

PA Participation Inside/Outside of Physical Education

PE Participation During Physical Education

HR Health Related Fitness

AN Physical Activity and Nutrition PS Personal/Social Behaviors RP Regular Participation

SB Social Benefits

ID Individual Differences

FE Feelings

Breakdown Description of the Content Expectation Code:

Example: M.MC.01.01

M = Motor Skills and Movement Patterns Strand

MC = Movement Concepts Domain

01= First Grade Expectations

01= First Expectations in the Grade-Level Motor Skills Domain

K-3 Health Education Grade Level Content Expectations

First part of the code represents the Grade Level: Kindergarten K.____ 1.____ 1st Grade 2nd Grade 2.____ 3rd Grade 3.____ *Second part of the code represents the Strand:* Nutrition and Physical Activity Strand 1: Alcohol, Tobacco, and Other Drugs Strand 2: Strand 3: Safety Social and Emotional Health Strand 4: Strand 5: Personal Health and Wellness *Third part of the code represents the Standard:* Core Concepts Standard 1: Standard 2: **Access Information** Standard 3: **Health Behaviors** Standard 4: Influences Standard 5: **Goal Setting** Standard 6: **Decision Making** Standard 7: Social Skills Standard 8: Advocacy Breakdown Description of the Content Expectation Code: Sample: Health K.3.1 Health Health Education Content Expectations Health K.3.1 K = Kindergarten (Grade Level) Health K.3.1 $3 = 3^{rd}$ Strand (Safety) Health K.3.1 1 =first Content Expectation in the Strand/Standard 4th – 5th Grade Health Education Level Content Expectations First part of the code represents the Grade Level: 4th Grade 4.____ 5th Grade 5.

Second part of the code represents the Strand:

Nutrition and Physical Activity Strand 1: Alcohol, Tobacco, and Other Drugs Strand 2:

Strand 3: Safety

Strand 4: Social and Emotional Health Strand 5: Personal Health and Wellness

Strand 6: **HIV Prevention**

Strand 7: Growth and Development

Third part of the code represents the Standard:

Standard 1: Core Concepts

Access Information Standard 2:

Standard 3: **Health Behaviors**

Standard 4: Influences

Standard 5: Goal Setting

Standard 6: **Decision Making**

Standard 7: Social Skills

Standard 8: Advocacy

Breakdown Description of the Content Expectation Code:

Health 4.1.3 Sample:

Health Health Education Content Expectations

Health 4.1.3 $4 = 4^{th}$ Grade

Health 4.1.3 $1 = 1^{st}$ Strand (Nutrition and Physical Activity)

Health 4.1.3 3 = Third Content Expectation in the Strand/Standard

PK-12 Technology Content Expectations

First part of the code represents the Grade Level:

PK-2	Pre-Kindergarten through 2 nd Grade
3-5	3 rd through 5 th Grade
6-8	6 th through 8 th Grade
9-12.	9 th through 12 th Grade

Second part of the code represents the Strand:

Creativity and Innovation CI

Communication and Collaboration CC

Research and Information Literacy RI

 \mathbf{CT} Critical Thinking, Problem Solving, and Decision Making

DC Digital Citizenship

TC **Technology Operations and Concepts**

Third part of the code represents the Standard Number:

- 1 First Standard of the Strand
- 2 Second Standard of the Strand

Breakdown Description of the Content Expectation Code:

Sample: PK-2.CC.1.

PK-2 = Pre-Kindergarten through 2nd Grade PK-2.**CC** = Creativity and Innovation strand

PK-2.CC.1. = 1 represents the 1^{st} standard in the strand

Early Learning Expectations

ESUT Early Skills in Using Technology

LELD Language and Early Learning Literacy Development

ELM Early Learning Math
CD Creative Development

ELS Early Learning in Science and Social Studies

ID Intellectual DevelopmentAL Approaches to LearningPDH Physical Development

SED Social and Emotional Development

Michigan GLCEs	Annual Goals	Short-term Objectives	Criterion
•		*Needs to be measurable, achievable and specific to student	
Pre-K/Early Learning Expectations ESUT.1.1 Children typically can describe and creatively use a variety of technological tools independently or with peer or adult help. ESUT.2.2 Children typically use adaptive devices to operate a software program as necessary. ESUT.4.2 Children typically can learn to handle equipment gently and avoid dropping items. Grade Level Content Expectations T.K2.1TPT (kindergarten,1st, 2nd grade) Know how to use a variety of software (e.g. word processors, drawing tools, presentation software) to convey ideas and illustrate concepts	1. Will increase ability to operate/use technology or school tools to complete functional tasks. 2. Improve ability to manipulate classroom objects/materials. 3. Improve use of writing implements or keyboard for written communication.	1.Know how to operate technology equipment (on/off, mouse, print) 2.Use keyboard "hunt and peck" style 3.Use correct placement of fingers on home row keys 4. Use correct fingers on keyboard 5.Use modified keyboard style 6.Use word processing to create a draft, revise and edit 7.Use technology to create a published written task 8.Produce a written finished product using appropriate support tools (spell checker, work processor, peer editor) 9.Use paper pencil and/or assistive technology to independently develop a completed writing assignment	Criterion out of times -% of time -% of accuracy -WPM -% of accuracy over activities/ assignments Conditions regarding the skill/objective -With no assistance; independently -With adult assistance: demonstration, (min, mod, max) assist, verbal cues, #
T.K-2.7BOC Use a variety of age appropriate technologies for sharing information (drawing a picture, writing a story)		10.Activate and de-activate a (name type of switch, computer, toy) switch	-With materials: adaptive devices, adaptive techniques, visual supports

T.K. K-2.9BOC Proofread and edit their writing using appropriate resources including dictionaries and a class developed checklist both individually and as a group. T.K.3.5.11BOC Proofread and edit writing using appropriate resources (e.g. dictionary spell checker, grammar check, grammar references) and grade level appropriate checklists both individually and in groups School Classroom Materials Pre-K/Early Learning		1.Use dominant hand	Measurement of objectives -Documented by: teacher, therapist, paraprofessional, other -As reported in: progress notes/logs, checklist, observation notes -With testing results from: -By randomly observing student samples, class papers, tests, journal writing, spelling tests.
Expectations			
_	1. Will increase ability to	2.Use non dominant hand	
Children typically use a variety of forms of early writing (e.g., scribbling, drawing use of letter strings, copies environmental print) and move toward the beginning of phonetic and/or conventional spelling. LELD.2.5 Children typically begin to write familiar words such as their names. ELM.6.7 Children typically begin to record their work with numbers in a variety of simple concrete and pictorial formats, moving toward some use of number symbols.	operate/use technology or school tools to complete functional tasks. 2. Improve ability to manipulate classroom objects/materials. 3. Improve use of writing implements or keyboard for written communication.	 3.Use both hands together 4.Grasp, hold and release larger classroom objects (such as books) 5.Grasp, hold, and release smaller classroom objects such as pencils or crayons, or math manipulatives 6.Grasp object using finger and thumb in opposition 7.Pick up, position, and use writing tools 8.Hold pencil in a mature tripod grasp (index finger opposes to thumb) 9.Use writing/scribbling representation with a variety of classroom tools (e.g. markers, computer, pencils, crayons, chalk) 	

PDH.3.1

Children typically develop and refine motor control and coordination, eye-hand coordination, finger/thumb and whole-hand strength, coordination and endurance using a variety of ageappropriate tools (e.g., scissors, pencils, markers, crayons, blocks, putting together puzzles, using a variety of technology.

ELM.3.1

Children typically recognize, describe, copy, extend, and create simple patterns with real objects and through pictures.

ELM.5.7

Children typically begin to use non-standard (e.g., length of hand) measures for length and area objects.

Grade Level Content Expectations

Kindergarten W.HW.00.01

Form upper and lower case manuscript letters.

G.GS.OO.03

Create, describe and extend simple geometric patterns.

First Grade

W.HW.01.01

Write upper and lower case manuscript letters legibly.

M.UN.01.01

Measure the lengths of objects in non-standard

- 10.Trace/copy/draw shapes (circle, cross, square,)
- 11. Manipulate containers to access materials (open and close a jar, open glue bottle, open crayon box, use pencil sharpener)
- 12. Turn pages independently
- 13.Use an assistive device to turn pages
- 14.Pick up, position, and use writing and art tools
- 15.Pick up, position, and use cutting materials
- 16.Show beginning cutting skills by snipping
- 17.Hold scissors in dominant hand with wrist extended and with hand in "thumbs up" position
- 18.Cut basic shapes (name the shape)
- 19.Cut any (e.g basic or complex) shape
- 20.Copy/create a block pattern using ____ blocks
- 21.Fit manipulatives together and take them apart (e.g. Legos, puzzles, shape boxes)
- 22.Manipulate measurement tools (e.g rulers, compass, measuring cups)
- 23.Apply glue or paste to materials
- 24.Pick up, position, and carry educational materials from one site to another

units, (e.g. pencil length,		
shoe length).		
Second Grade		
W.HW.02.01		
VV.11 VV.02.01		
Fluently and legible write		
upper and lower case		
manuscript letters and begin		
to write the cursive		
alphabet.		
aipinaset.		
M.UN.02.01		
Measure lengths of meters,		
centimeters, inches, feet,		
and yards.		
Third Grade		
W.HW.03.01		
Fluently and legibly write		
the cursive alphabet.		
the cursive aiphabet.		
Fourth Grade		
W.HW.04.01		
White week and lookly		
Write neat and legible		
compositions.		
Fifth grade		
I min grade		
W.HW.05.01		
White neet and 1!-1-		
Write neat and legible		
compositions.		
	<u> </u>	<u>I</u>

Use of School Materials

Technology

Early Learning Expectations

ESUT.1.1

Children typically can describe and creatively use a variety of technological tools independently or with peer or adult help.

ESUT.2.2

Children typically use adaptive devices to operate a software program as necessary.

ESUT.4.2

Children typically can learn to handle equipment gently and avoid dropping items.

Grade Level Content Expectations

T.K.-2.1TPT (kindergarten/first/second grade)

Know how to use a variety of software (e.g. word processors, drawing tools, presentation software) to convey ideas and illustrate concepts.

T.K. K-2.9BOC

Proofread and edit their writing using appropriate resources including dictionaries and a class developed checklist both individually and as a group.

T.K-2.7BOC

Use a variety of age appropriate technologies for sharing information (drawing a picture, writing a story).

T.K. K-2.9BOC

Proofread and edit their writing using appropriate resources including dictionaries and a class developed checklist both individually and as a group.

T.K.3.5.11BOC

Proofread and edit writing using appropriate resources (e.g. dictionary spell checker, grammar check, grammar references) and grade level appropriate checklists both individually and in groups.

Annual Goals:

Will increase ability to operate/use technology or school tools to complete functional tasks.

Improve ability to manipulate classroom objects/materials.

Improve use of writing implements or keyboard for written communication.

Short Term Objectives:

- -Knows how to operate technology equipment (on/off, mouse, print)
- -Use keyboard "hunt and peck" style
- -Use correct placement of fingers on home row keys
- -Use correct placement of fingers on keyboard
- -Use Modified keyboard style
- -Use word processing to create a draft, revise and edit
- -Use technology to create a published written task
- -Produce a written finished product using appropriate support tools (spell checker, work processor, peer editor)

-Use paper pencil and/or assistive technology to independently develop a completed writing assignment -Activate and de-activate a (name type of switch, computer, toy) switch

School Classroom Materials

Early Learning Expectations

LELD.2.2

Children typically use a variety of forms of early writing (e.g., scribbling, drawing use of letter strings, copies environmental print) and move toward the beginning of phonetic and/or conventional spelling.

LELD.2.5

Children typically begin to write familiar words such as their names.

ELM.6.7

Children typically begin to record their work with numbers in a variety of simple concrete and pictorial formats, moving toward some use of number symbols.

PDH.3.1

Children typically develop and refine motor control and coordination, eye-hand coordination, finger/thumb and whole-hand strength, coordination and endurance using a variety of age-appropriate tools (e.g., scissors, pencils, markers, crayons, blocks, putting together puzzles, using a variety of technology.

ELM.3.1

Children typically recognize, describe copy, extend, and create simple patterns with real objects and through pictures.

ELM.5.7

Children typically begin to use non-standard (e.g., length of hand) measures for length and area objects.

Grade Level Content Expectations

W.HW.00.01

Form upper and lower case manuscript letters.

G.GS.OO.03

Create, describe and extend simple geometric patterns.

W.HW.01.01

Write upper and lower case manuscript letters legibly.

M.UN.01.01

Measure the lengths of objects in non-standard units, (e.g. pencil length, shoe length).

W.HW.02.01

Fluently and legibly write upper and lower case manuscript letters and begin to write the cursive alphabet.

M.UN.02.01

Measure lengths of meters, centimeters, inches, feet, and yards.

W.HW.03.01

Fluently and legibly write the cursive alphabet.

W.HW.04.01

Write neat and legible compositions.

W.HW.05.01

Write neat and legible compositions.

Annual Goals:

Will increase ability to operate/use technology or school tools to complete functional tasks. Improve ability to manipulate classroom objects/materials

Improve use of writing implements or keyboard for written communication

Short term Objectives:

- -Use dominant hand
- -Use non-dominant hand
- -Use both hands together
- -Grasp, hold, and release larger classroom objects (such as books)
- -Grasp, hold, and release smaller classroom objects such as pencils or crayons, or math manipulative
- -Grasp object using fingers and thumb in opposition
- -Pick up, position, and use writing tools
- -Hold pencil in a mature tripod grasp (index finger opposes to thumb)
- -Use writing/scribbling representation with a variety of classroom tools (e.g., markers, computer, pencils, crayons, chalk)
- -Trace/copy/draw shapes (circle, cross, square,)
- -Manipulate containers to access materials (open and close a jar, open glue bottle, open crayon box, use pencil sharpener)
- -Turn pages independently
- -Use an assistive device to turn pages
- -Pick up, position, and use writing and art tools
- -Pick up, position, and use cutting materials
- -Show beginning cutting skills by snipping
- -Hold scissors in dominant hand with wrist extended and with hand in "thumbs up" position
- -Cut basic shapes (name the shape)
- -Cut any (e.g., basic, complex) shape
- -Copy/create a block pattern using ____ blocks
- -Fit manipulatives together and take them apart (e.g. Legos, puzzles, shape boxes)
- -Manipulate measurement tools (e.g. rulers, compass, measuring cups)
- -Apply glue or paste to materials
- -Pick up, position, and carry educational materials from one site to another

Criteria

out of	times

% of time

% of accuracy

WPM

% accuracy over_____ activities/ assignments

Conditions regarding the skill/objectives:

With no assistance: independently

With adult assistance: demonstrated, (min, mod, max) assist, verbal cues, # cues, visual cues, hand over

hand

With materials: adaptive devices, adaptive techniques, visual supports

Measurement

Documented by teacher, therapist, paraprofessional, other

As reported in: progress notes/logs, checklist, observation notes

Reporting testing results from: (give name of assessment used)

By randomly observing student samples: class paper, tests, journal writing, spelling tests

Sample Objectives

Following instruction in one handed keyboarding, the student will demonstrate proper home row finger placement 2/3 times.

The student will independently place the scissors in her hand in the correct position 2/3 times.

The student will cut on a 6-inch straight line within ½-inch deviations 80% of the time.

The student will stabilize a ruler with his non-preferred hand to draw a straight line 3/4 times.

Michigan GLCEs Handwriting	Annual Goals	Short-Term Objectives	Criterion
Handwriting			Criterion
Pre-K Level-Early		*Needs to be measurable, achievable and specific to student	
Learning Expectations		Student	Criterion
LELD.2.2			
Children typically use a variety of forms of early writing (e.g., scribbling, drawing use of letter strings, copies environmental print) and move toward the beginning of phonetic and/or conventional spelling. LELD.2.4 Children typically represent their own or imaginary experiences through writing (with/without illustrations). LELD.2.5 Children typically begin to write familiar words such as their names. LELD.2.8 Children typically develop greater control over the physical skills needed to write letters and numbers. ELM.6.5 Children typically make progress from matching and recognizing number symbols to reading and writing numerals. ELM.6.7 Children typically begin to record their work with numbers in a variety of simple concrete and pictorial formats, moving toward	2will produce functional grade level written work. 2will improve fine motor skills to produce functional grade level written work. 3 will improve visual motor skills to produce functional grade level written work.	Pre-K Level 1. Pick up and position fingers correctly or use appropriate alternate grasp. 2. Demonstrate handedness. 3. Aim and scribe to stay on paper. 4. Trace a line. 5. Use appropriate pencil pressure 6. Aim and color within a defined area. 7. Trace, imitate, copy geometric shapes. 8. Uses non-dominant hand to stabilize paper. 9. Draws a recognizable person. 10. Draws a recognizable picture other than a person. 11. Trace name.	

ELM.8.1 Children typically can make models, draw, name and/or classify common shapes and verbally describe them in simple terms. PDH.3.1 Children typically develop and refine motor control and coordination, eye-hand coordination, finger/thumb and whole-hand strength, coordination and endurance using a variety of age-

Grade Level Content Expectations

appropriate tools (e.g.,

scissors, pencils, markers,

crayons, blocks, putting

together puzzles, using a variety of technology).

Kindergarten

W.HW.00.01

Form upper and lower case manuscript letters

W.HW.00.03

Write from left to right and top to bottom

W.GN.00.01

Write a brief personal narrative using pictures, words, word-like clusters, and/or sentences as supports.

N.ME.00.04

Read and write numbers to 30 and connect them to the quantities they represent.

First Grade

W.HW.01.01

Write upper and lower case manuscript letters legibly.

W.GN.01.01

Write a personal narrative

Measurement of objectives

- -Documented by: teacher, therapist, paraprofessional, other
- -As reported in: progress notes or logs, checklist, observation notes
- -With testing results from:
- -By randomly observing student samples: class paper, tests, journal writing, spelling tests, math papers

K-1 Level

- 1. Trace, imitate, copy, produce independently first and last name.
- 2. Trace, imitate, copy, produce independently upper case letters.
- 3. Trace, imitate, copy, produce independently lower case letters.
- 4. Trace, imitate, copy, produce independently numerals 0-9.
- 5. Write upper case letters, lower case letters and numerals in correct orientation.
- 6. Place upper case letters on a line or within _____ of a line.
- 7. Place lower case letters appropriately on a baseline

using illustrations and transitional words such as before, after, now or finally to indicate a sequence of events, sense of story (beginning, middle, end) and physical descriptions.

N.ME.01.02

Read and write numbers to 110 and relate them to the quantities they represent.

Second Grade

W.HW.02.01

Fluently and legibly write upper and lower case manuscript letters and begin to write the cursive alphabet.

W.GN.02.01

Write a narrative piece such as realistic fiction, fantasy, or personal narrative depicting major story events, using illustrations to match mood, containing setting, problem/solution and sequenced events.

N.ME.02.02

Read and write numbers to 1,000 in both numerals and words and relate them to the quantities they represent.

Third Grade

W.HW.03.01

Fluently and legibly write the cursive alphabet.

W.GN.03.01

Write a cohesive narrative piece such as a fable, folktale, or realistic fiction using personification, setting, actions, and thoughts that reveal important character traits.

N.ME.03.01

or within of baseline.

- 8. Write upper and lower case letters and numerals using grade appropriate size.
- 9. Correct formation of letters and numerals (start and sequence).
- 10. Write letters and numerals with grade appropriate control and pressure.
- 11. Write words/sentences with left to right and top to bottom flow.
- 12. Leave appropriate grade level space between letters within and between words.
- 13. Produce written work in appropriate space for paper requirements.
- 14. Produces written work with acceptable speed for grade level requirements.
- 15. Produces acceptable amount of written work for grade level requirements.

Second grade

1. Write some of the cursive lower case alphabet following a model.

Third grade

- 1. Write lower case cursive letters with model, cues, from memory.
- 2. Write upper case cursive letters with model, cues, from memory.
- 3. Write upper/lower case cursive letters with correct formations.

Read and write numbers to 10,000 in both numerals and words, and relate them to the quantities they represent (e.g., relate numerals or written word to a display of dots or objects).

Fourth Grade

W.HW.04.01

Write neat and legible.

W.GN.04.01

Write a cohesive narrative piece such as a myth, legend, fantasy or adventure creating relationships among setting, characters, theme and plot.

N.ME.04.01

Read and write numbers to 1,000,000; relate them to the quantities they represent; compare and order.

Fifth Grade

W.HW.05.01

Write neat and legible compositions.

W.GN.05.01

Write a cohesive narrative piece such as a mystery, tall tale or historic fictions using time period and setting to enhance the plot; demonstrating roles and functions or heroes, antiheroes, and narrator; and depicting conflicts and resolutions.

- 4. Write upper/lower case cursive letters with correct placement on the line.
- 5. Write upper/lower case cursive letters in appropriate grade level size.
- 6. Copy materials accurately from a nearby source (book, worksheet).
- 7. Copy materials accurately from a distant source (chalkboard, overhead).

Written Work

Pre-K Level/Early Learning Expectations:

LELD.2.2

Children typically use a variety of forms of early writing (e.g., scribbling, drawing use of letter strings, copies environmental print) and move toward the beginning of phonetic and/or conventional spelling.

LELD.2.4

Children typically represent their own or imaginary experiences through writing (with/without illustrations).

LELD.2.5

Children typically begin to write familiar words such as their names.

LELD.2.8

Children typically develop greater control over the physical skills needed to write letters and numbers.

ELM.6.5

Children typically make progress from matching and recognizing number symbols to reading and writing numerals.

ELM.6.7

Children typically begin to record their work with numbers in a variety of simple concrete and pictorial formats, moving toward some use of number symbols.

ELM.8.1

Children typically can make models, draw, name and/or classify common shapes and verbally describe them in simple terms.

PDH.3.1

Children typically develop and refine motor control and coordination, eye-hand coordination, finger/thumb and whole-hand strength, coordination and endurance using a variety of age-appropriate tools (e.g., scissors, pencils, markers, crayons, blocks, putting together puzzles, using a variety of technology.

Grade Level Content Expectations

W.HW.00.01

Form upper and lower case manuscript letters.

W.HW.00.03

Write from left to right and top to bottom.

W.GN.00.01

Write a brief personal narrative using pictures, words, word-like clusters, and/or sentences as supports.

N.ME.00.04

Read and write numbers to 30 and connect them to the quantities they represent.

W.HW.01.01

Write upper and lower case manuscript letters legibly.

W.GN.01.01

Write a personal narrative using illustrations and transitional words such as before, after, now or finally to indicate a sequence of events, sense of story (beginning, middle, end) and physical descriptions.

N.ME.01.02

Read and write numbers to 110 and relate them to the quantities they represent.

W.HW.02.01

Fluently and legibly write upper and lower case manuscript letters and begin to write the cursive alphabet.

W.GN.02.01

Write a narrative piece such as realistic fiction, fantasy, or personal narrative depicting major story event, using illustrations to match mood, containing setting, problem/solution and sequenced events.

N.ME.02.02

Read and write numbers to 1,000 in both numerals and words and relate them to the quantities they represent.

W.HW.03.01

Fluently and legibly write the cursive alphabet.

W.GN.03.01

Write a cohesive narrative piece such as a fable, folktale, or realistic fiction using personification, setting, actions, and thoughts that reveal important character traits.

N.ME.03.01

Read and write numbers to 10,000 in both numerals and words, and relate them to the quantities they represent (e.g. relate numerals or written word to a display of dots or objects).

W.HW.04.01

Write neat and legible compositions

W.GN.04.01

Write a cohesive narrative piece such as a myth, legend, fantasy or adventure creating relationships among setting, characters, theme and plot.

N.ME.04.01

Read and write numbers to 1,000,000; relate them to the quantities they represent; compare and order.

W.HW.05.01

Write neat and legible compositions.

W.GN.05.01

Write a cohesive narrative piece such as a mystery, tall tale or historic fiction using time period and setting to enhance the plot, demonstrating roles and functions of heroes, antiheroes, and narrator; and depicting conflicts and resolutions.

Δ	nn	าาจไ	l Goa	le•
$\overline{}$		1	LYTUA	13.

 will produce functional grade level written work.
 will improve fine motor skills to produce functional grade level written work.
 will improve visual motor skills to produce functional grade level written work.

Pre-K Level Short Term Objectives:

- -Pick up and position fingers correctly or use appropriate alternate grasp.
- -Demonstrate handedness.
- -Aim and scribble to stay on paper.
- -Trace a line.
- -Use appropriate pencil pressure.
- -Aim and color within a defined area.
- -Trace, imitate, copy geometric shapes.
- -Uses non-dominant hand to stabilize paper.
- -Draws a recognizable person.
- -Draws a recognizable picture other than a person.
- -Trace name.

Early Elementary Short Term Objectives:

- -Trace, imitate, copy, produce independently first and last name.
- -Trace, imitate, copy, produce independently upper case letters.
- -Trace, imitate, copy, produce independently lower case letters.
- -Trace, imitate, copy, produce independently numerals 0-9.
- -Write upper case letters, lower case letters and numerals in correct orientation.
- -Place upper case letters on a line or within _____ of a line.
- -Place lower case letters appropriately on the baseline or within _____ of baseline.
- -Write upper and lower case letters and numerals using grade appropriate size.
- -Correct formation of letters and numerals (start and sequence).
- -Write letters and numerals with grade appropriate control and pressure.
- -Write words and sentences with left to right and top to bottom flow.
- -Leave appropriate grade level space between letters within and between words.
- -Produce written work in appropriate space for paper requirements.
- -Produce written work with acceptable speed for grade level requirements.
- -Produce acceptable amount of written work for grade level requirements.

Upper Elementary Short Term Objectives:

- -Write some of the cursive lower case alphabet following a model.
- -Write lower case cursive letters with model, cues, from memory.
- -Write upper case cursive letters with model, cues, from memory.
- -Write upper/lower case cursive letters with correct formations.
- -Write upper/lower case cursive letters with correct placement on the line.
- -Write upper/lower case cursive letters in appropriate grade level size.
- -Copy materials accurately from a nearby source (book, worksheet).
- -Copy materials accurately from a distant source (chalkboard, overhead).

Criteria	
out of times	
% of the time	
% accuracy	
% accuracy over activities/assignments	
/	
Conditions regarding the skill/objective	
-With no assistance; independently	
-With adult assistance: demonstration, (min, mod, max) assist, verbal cues, # verbal cues, hand over har	nd
-With materials: adaptive devices, adaptive technique, lined paper, workbook pages, letter/number mod	els.
Measurement of objectives	
-Documented by: teacher, therapist, paraprofessional, other	
-As reported in: progress notes/logs, checklist, observation notes	
-With testing results from:	
-By randomly observing student samples: class paper, tests, journal writing, spelling tests, math papers	
Sample objectives	
1. John will copy his first and last name from a model, 2/3 attempts.	
2. John will print his first and last name from memory, in correct sequence, 2/3 attempts.	
3. John will print his first and last name within a 1" x 8" box, 2/3 attempts.	
4. John will print all upper case manuscript letters from memory, placing letters within 1/8" of the baseli letters.	ine, 20/26

5. John will print a sentence of at least 10 words, using consistent spacing of letters within words and identifiable

spaces between words with 80% accuracy.

Michigan GLCEs	Regulation (sensor Annual Goals	Short-term Objectives	Criterion
Health	Amiuai Guais	*Needs to be measurable, achievable	CHUCHOH
		and specific to student	
Pre-K/Early Learning		and specific to student	
0			
Expectations			
AL.1.1			
Children typically			
choose to participate in			C
an increasing variety of		1. Use a sensory strategy	Criteria
tasks and activities	1. Ability to transition	(visual/concrete object/sensory motor	out oftimes
using all five senses.	from one activity to	activity) to transition	% of time as
doing an investment.	another	3,	measured by
AL.2.3			incusared by
Children typically show			
growing capacity to		2. Use a sensory strategy to follow a	-choose of
maintain concentration		classroom routine	activities
in spite of distractions			
and interruptions.			-indicate choice with
•			gesture/word/picture
AL.3.2			-within time
Children typically try			within time
new things and take	2. Ability to tolerate		
risks	sensory stimuli (tactile,		
	auditory, vestibular, etc)	1. Handle materials of various	
AL.3.3	, ,	textures	
Children typically			
problem solve using a			
variety of strategies.			
		2. Tolerate predictable/unpredictable	Conditions regarding
CD.3.3		noises in school environment	the skill/objective
Children typically			-With no assistance;
begin to identify and			independently
create movement in		3. Participate/use sensory strategy/	
place and through		equipment/tool	-With adult assistance:
space.			demonstration, (min, mod,
ELGA.			max) assist, verbal cues, # verbal cues, hand over
ELS.2.6		4. Seek appropriate means of	hand
Children typically		meeting sensory needs	nanu
demonstrate greater		mooning someony needs	-With materials: picture,
knowledge and respect			object, checklist
for their bodies (e.g., describe visible parts of			
the human body and			-In a timely manner
their functions.			
men functions.			

ID.4.2 Children increase their Measurement of 3. Awareness of body 1. Recognize and maintain personal ability to observe **Objectives** within the school space within the school environment attentively. -Documented by: teacher, environment therapist, paraprofessional, **ID.4.5** other Children typically try a 2. Navigate and transition within the -As reported in: progress variety of ways of school environment. notes/logs, checklist, solving problems. observation notes, data form **SED.2.5** Children typically manage transitions and follow routines most of the time. **Grade Level Content Expectations** Kindergarten 1. Identify/choose/participate in self-4. Ability to self-regulate H.NPA.K.1.4 regulation activities (i.e. take a break, Generate examples of sensory motor activities) to physical activities that calm/alert are personally enjoyable. 2. Participate in classroom activities H.S.K.3.3 appropriately (i.e. not Describe characteristics blurting/wandering) of appropriate touch and inappropriate touch. H.S.K.3.6 Demonstrate how to ask trusted adults for help. H.S.K.3.11 Apply strategies to avoid personally unsafe situations. L.CN.00.01 Understand and follow one-step directions and two-step directions.

First Grade		
H.NPA.1.1.5		
Describe how physical		
activity, rest, and sleep		
help a person stay		
healthy.		
,		
Second Grade		
H.S.2.3.4		
Demonstrate how to		
ask trusted adult for		
help.		
r·		
H.S.2.3.7		
Apply strategies to		
avoid personally unsafe		
situations.		
H.S.2.3.2		
Identify appropriate		
and inappropriate		
touch.		
toucii.		
Third Grade		
H.NPA.3.1.5		
Describe the elements		
of a physical activity		
plan.		
Fourth Grade H.NPA.4.1.6		
Assess one's ability to		
include physical		
activity, rest, and sleep		
in one's daily routine.		
in one s daily foutilite.		
H.S.4.3.2		
Explain the importance		
of respecting personal		
space and boundaries.		
Fifth Grade		
H.S.5.3.1		
Explain importance of		
respecting personal		
space and boundaries		
1	 	

Behavior/Self-Regulation (sensory)

Pre-K Level/Early Learning Expectations:

AL.1.1

Children typically choose to participate in an increasing variety of tasks and activities using all five senses.

AL.2.3

Children typically show growing capacity to maintain concentration in spite of distractions and interruptions.

AL.3.2

Children typically try new things and take risks.

AL.3.3

Children typically problem solve using a variety of strategies.

CD.3.3

Children typically begin to identify and create movement in place and through space.

ELS.2.6

Children typically demonstrate greater knowledge and respect for their bodies (e.g., describe visible parts of the human body and their functions.

ID.4.2

Children typically increase their ability to observe attentively.

ID.4.5

Children typically try a variety of ways of solving problems.

SED.2.5

Children typically manage transitions and follow routines most of the time.

Grade Level Content Expectations

Kindergarten

H.NPA.K.1.4

Generate examples of physical activities that are personally enjoyable.

H.S.K.3.3

Describe the characteristics of appropriate touch and inappropriate touch.

H.S.K.3.6

Demonstrate how to ask trusted adults for help.

H.S.K.3.11

Apply strategies to avoid personally unsafe situations.

L.CN.00.01

Understand and follow one-step directions and two-step directions.

First Grade

H.NPA.1.1.5

Describe how physical activity, rest, and sleep help a person stay healthy.

Second Grade

H.S.2.3.4

Demonstrate how to ask trusted adult for help.

H.S.2.3.7

Apply strategies to avoid personally unsafe situations.

H.S.2.3.2

Identify appropriate and inappropriate touch.

Third Grade

H.NPA.3.1.5

Describe the elements of a physical activity plan.

Fourth Grade

H.NPA.4.1.6

Assess one's ability to include physical activity, rest, and sleep in one's daily routine.

H.S.4.3.2

Explain the importance of respecting personal space and boundaries.

Fifth Grade

H.S.5.3.1

Explain importance of respecting personal space and boundaries.

Annual Goal:

Ability to transition from one activity to another

Short Term Objectives:

- -Use a sensory strategy (visual/concrete object/sensory motor activity) to transition
- -Use a sensory strategy to follow a classroom routine

Annual Goal:

Ability to tolerate sensory stimuli (tactile, auditory, vestibular, etc)

Short Term Objectives:

- -Handle materials of various textures
- -Tolerate predictable/unpredictable noises in school environment
- -Participate/use sensory strategy/equipment/tool
- -Seek appropriate means of meeting sensory needs

Annual Goal:

Awareness of body within the school environment

Short Term Objectives:

- -Recognize and maintain personal space within the school environment
- -Navigate and transition within the school environment

Annual Goal:

Ability to self-regulate

Short Term Objectives:

- -Identify/choose/participate in self-regulation activities (i.e. take a break, sensory motor activities) to calm/alert
- -Participate in classroom activities appropriately (i.e. not blurting/wandering)

Criteria

out of	f tir	mes	
% c	of time a	as measured by	
-choose	_ of	_ activities	
indicate c	hoice w	ith gesture/word/	picture
-within	time	-	-

Conditions regarding the skill/objective

- -With no assistance; independently
- -With adult assistance: demonstration, (min, mod, max) assist, verbal cues, # verbal cues, hand over hand
- -With materials: picture, object, or checklist
- -In a timely manner

Measurement of Objectives

Documented by: teacher, therapist, paraprofessional, other As reported in: progress notes/logs, checklist, observation notes, data form

Sample Objectives

The student will use a sensory strategy when given one adult cue 3 out of 4 times.

The student will transition in line from classroom to special with appropriate behavior (not pushing) 3 out of 4 times.

The student will utilize previously taught strategies (i.e. sound blocking head phones) when experiencing auditory overstimulation with one adult cue 75% of the time.

When presented with sensory tools, the student will choose one tool or strategy and complete the activity independently 4 out of 5 times.

Personal Management/Self Care **Short-term Objective Annual Goals** Criterion **Michigan GLCEs General Categories** *Needs to be measurable, **Pre-K/Early Learning** Criterion achievable and specific to **Expectations** -___ out of ___ times student **PDH.3.2** -Within ____ amount of Children typically use fine 1.Manages clothing Manages outdoor motor skills they are learning -% of time clothing. in daily activities (e.g., (coat, boots, hat, etc.). dressing themselves). -% accuracy over _ 2. Manages indoor clothing. activities or assignments. **PDH.5.1** (pants, shirt, socks, shoes, etc). Children typically show growing independence in Conditions regarding the 8. Manages clothing keeping themselves clean, fasteners (buttoning, shoe skill/objective personal care when eating, tying, zipping, snapping, dressing, washing hands, Velcro). -With no assistance; brushing teeth, use of tissues independently for nose blowing, and toileting. -With adult assistance: demonstration, (min, mod, 2. Increases ability to manage Manages toileting **PDH.7.3** max) assist, verbal cues, # toileting (facilities or hygiene facilities. verbal cues, hand over (access, transfers, Children typically use hand, visual cue clothing management). age/developmentally appropriate eating utensils -With materials: adaptive 4. Manages toileting safely and correctly. devices, adaptive hygiene. (wipe, wash, technique. flush, etc.). **Grade Level Content Expectations** Measurement of objectives 1. Manages tooth brushing 3. Improve personal hygiene Kindergarten routine. -Documented by: teacher, 2. Manages hand washing K.5.4 Demonstrate proper therapist, paraprofessional, routine. tooth brushing techniques. 3. Manages hair. other 4. Manages washing face. **K.5.5** Demonstrate proper 5.Manages blowing nose. -As reported in: progress hand washing to prevent the 6. Manages cleaning glasses. notes/logs, checklist, spread of disease. 7. Manages deodorant. observation notes 8. Manages hearing aids or other self care devices. -By randomly observing student performance

First Grade 1.5.2 Demonstrate proper tooth brushing techniques. 1.5.3. Demonstrate skills to reduce the spread of germs. Second Grade 2.5.1. Demonstrate skills throughout the day to reduce the spread of germs.	4. Manages meals and snacks at school	 Manages feeding utensils (scoop, jab, cut, spread). Manages drink (straw, pour, cup, drinking fountain). Follows cafeteria routine (obtain and carry tray and utensils, locate and sit in designated eating areas, dispose of tray in designated receptacle, select variety of food, make appropriate food choices). Manages containers (milk, juice, condiments, food packages, zip locks, lids). 	
---	---------------------------------------	---	--

Personal Management/Self Care

Pre-K/Early Learning Expectations

PDH.3.2

Children typically use fine motor skills they are learning in daily activities (e.g., dressing themselves).

PDH.5.1

Children typically show growing independence in keeping themselves clean, personal care when eating, dressing, washing hands, brushing teeth, use of tissues for nose blowing, and toileting.

PDH.7.3

Children typically use age/developmentally appropriate eating utensils safely and correctly.

Grade Level Content Expectations

K.5.4

Demonstrate proper tooth brushing techniques.

K.5.5

Demonstrate proper hand washing to prevent the spread of disease.

1.5.2

Demonstrate proper tooth brushing techniques.

1.5.3.

Demonstrate skills to reduce the spread of germs.

2.5.1.

Demonstrate skills throughout the day to reduce the spread of germs.

Dressing

Annual Goal:

Manages clothing

Short Term Objectives:

- -Manages outdoor clothing with assistance, independently, or with cues.
- -Manages indoor clothing with assistance, independently, or with cues.
- -Manipulates clothing fasteners (buttoning, shoe tying, zipping, snapping, Velcro) with assistance, independently, or with cues.

Toileting

Annual Goal:

Increases ability to manage toileting (facilities or hygiene)

Short Term Objectives:

- -Manages toileting facilities with assistance, independently, or with cues.
- -Manages toileting hygiene with assistance, independently, or with cues.

Personal Hygiene

Annual Goal:

Improve personal hygiene

Short Term Objectives:

- -Manages tooth brushing with assistance, independently, or with cues.
- -Manages handwashing with assistance, independently, or with cues.
- -Manages hair with assistance, independently, or with cues.
- -Manages washing face with assistance, independently, or with cues.
- -Manages blowing nose with assistance, independently, or with cues.
- -Manages cleaning glasses with assistance, independently, or with cues.
- -Manages deodorant with assistance, independently, or with cues.
- -Manages hearing aids with assistance, independently, or with cues.

Eating

Annual Goal:

Manages meals and snacks at school

Short Term Objectives:

- -Manages feeding utensils (scoop, jab, cut, spread) with assistance, independently, or with cues.
- -Manages drink (straw, pour, cup, drinking fountain) with assistance, independently, or with cues.
- -Follows cafeteria routine (obtain and carry tray and utensils, locate and sit in a seat within designated eating areas, dispose of tray in designated receptacle, select variety of food, make appropriate food choices for time of day) with assistance, independently, or with cues.
- -Manages containers (milk, juice, condiments, food packages, zip locks, lids) with assistance, independently, or with cues.

Criteria

9	6 of the tim	e	
Within	amo	unt of tin	ne
9	6 accuracy	over	_activities/assignments
	out of	times	

Conditions regarding the skill/objective

- -With no assistance; independently
- -With adult assistance: demonstration, (min, mod, max) assist, verbal cues, # verbal cues, visual cues, hand over hand
- -With materials: adaptive devices, adaptive technique.

Measurement of objectives

- -Documented by: teacher, therapist, paraprofessional, other
- -As reported in: progress notes/logs, checklist, observation notes
- -By randomly observing student performance

Sample Objectives:

The student will put on & remove coat with assistance for set-up 2/3 times.

The student will engage zipper and zip coat with verbal cues 2/3 times.

The student will use two hands to stabilize and zip coat with assistance 2/3 times.

The student will transfer from the wheelchair to the toilet with 1-2 verbal cues 4/5 times.

The student will manage toilet paper and wiping process to effectively clean self 3/4 times.

The student will independently follow the hand washing routine using a visual picture chart/schedule 4/5 times.

The student will open a milk container with adult physical assistance for stabilization 4/5 times.

The student will use a straw to drink all of his juice 3 out of 5 days during snack time with no more than one reminder.

Present Level of Academic Achievement and Functional Performance

A grade student in th	ne area of needs to
know and be able to do (GL	CE # concept and skills)
	·
Based on	(data source),
	(student name)
(performance level)	
(struggles with)	
	·
This impacts the student by	
	_(impact on educational performance).
The student needs to learn	
	(specific skill).

References

American Occupational Therapy Association. (2006). *Transforming caseload to workload in school-based and early intervention occupational therapy services*. Bethesda, MD: http://www.aota.org/Practitioners/Resources/Docs/FactSheets/School/38519.aspx

Clark, & Polichino. (2010). Response to intervention & early intervention services: Occupational therapy roles in general education. *OT Practice*, 15(1), CE1 – CE8.

WDPI. (2010). Applying the Special Education Process to OT and PT. In *Wisconsin Department of Public Instruction*. Retrieved November 8, 2010, from http://dpi.wi.gov/sped/pdf/otpt- faqoverview.pdf

Resources

Casillas, D. (2010). Teachers' perceptions of school-based occupational therapy consultation: Part I. *American Occupational Therapy Association Early Intervention & School Special Interest Section*, 17 (20) 1-4.

Cook, L., & Friend, M. (2010). The state of the art of collaboration in special education. *Journal of Educational and Psychological Consultation*, 20, 1-12.

Friend & Cook (2009). *Interactions: Collaboration skills for school professionals* (6th Ed.) Boston: Allyn & Bacon.

Hanft, B. & Shepherd, J. (Eds.). (2008). *Collaborating for student success: A guide for school-based occupational therapy*. Bethesda: AOTA.

Jackson, L. (2010). From the chairperson. *American Occupational Therapy Association Early Intervention & School Special Interest Section Quarterly*, 17(1), 3–4.

Knippenberg, C., Hanft, B. (2004). The key to educational relevance: Occupation throughout the school day. *American Occupational Therapy Association School System Special Interest Quarterly*, 11(4), 1-3.

Nochajski SM. (2001). Collaboration between team members in inclusive educational settings. *Occupational Therapy in Health Care*, *15* (3/4), 101-112, 2001.

Swinth, Y., Spencer, K & Jackson, L. (2007). OT: A report on effective school-based practices within a policy context. COPSSE. Retrieved November 8, 2010, from http://www.coe.ufl.edu/copsse/research-focus-areas/related-services.php