Weaving OT Into the Fabric of Your School

Kristen Bach MA, OTR/L
Christi Edmonds MA, OTR/L
July 23, 2018
Learning Objectives

1. Understand how to implement a collaborative, inclusive model for service delivery
2. Differentiate between service delivery models and the benefits of each
3. Understand the basics of RTI and the OT role in the process
4. Discussion/Questions/Comments
Benefits of an Inclusive Service Model

- Teacher and OT collaborate in real time within student’s natural learning environment, fostering generalization of skills.
- Better classroom carryover of strategies implemented (e.g. mechanics of handwriting, adapted materials, self-regulation strategies, etc)
- OT has a better understanding of the educational curriculum and more clarity on how to best plan interventions that are inclusive of academic targets
- Promotes a school environment of collaboration, enhanced skills, and higher expectations of students
- Builds relationships, which in turn foster buy-in to benefits of OT
Barriers to Implementing an Inclusive Service Model

- Logistics (e.g. students in multiple homerooms, therapist in multiple buildings, time, etc)
- Teacher perceptions (e.g. taking time away from core academics, has only experienced OT as a pull out service)
- Philosophies/Compatibility (instructional styles, personality, behavior management style, communication, etc)
- Lack of administrative support
- Lack of experience with inclusion/How do I start?/ Feeling overwhelmed
Factors for Successful Collaboration/Inclusion

Arguelles, Hughes, and Schumm (2000) report 7 factors that should be in place for a successful co-teaching model:

1. Common Planning
2. Flexibility
3. Risk-Taking
4. Defined Roles and Responsibilities
5. Compatibility
6. Administrative Support
7. Communication Skills
Factors for Success

Common Planning Time:
- **Plan** several groups at the beginning of the year, quarterly, weekly, etc
- **Use technology** to assist (google docs, texts/email, etc)

Flexibility:
- Open to **new ways** of doing things
- **Adapt!** - to instructional styles, behavior/classroom management styles, personality and communication styles
Factors for Success

Risk-Taking
● Must be willing to take a chance and try something different
● Collaboration leads to new ideas and practices
● May try new activities because there is “extra help” in the room

Defined Roles/Responsibilities:
● Initially establish roles and responsibilities of each staff member involved
● This ensures that everyone is clear on academic, classroom, and behavioral expectations
● Understand/respect self regulation needs of staff as well as students
Factors for Success

Compatibility
● Good rapport between teacher and therapist
● Similar can be helpful, but differences allow for unique contributions and new learning
● Belief that inclusive model is preferred for quality, not just quantity of therapy

Administrative Support
● Team effort to make inclusion possible
● Help overcome obstacles by taking an active role—such as class placement of students, scheduling, etc
Factors for Success

Communication Skills

Build Relationships!

- Active listening
- Compromise
- Be assertive
- Communicate clearly and often with each other. Technology can be very helpful with this (text, email..)
- Be helpful
  - people don’t care how much you know, until they know how much you care
How Can I Get Started?

- Consider needs (e.g. fine/visual motor development, handwriting, self-regulation, social skills, etc)
- Start small
  - Be ready to be helpful/provide acts of kindness
  - Consider staff with existing rapport - suggest “trial” inclusion group
  - Consider monthly or bi-weekly group, blending inclusion and pull-out services to gain comfort and experience
- Be creative: consider all opportunities in the school day- bus, lunch, recess, beginning/end of day, specials, centers
- Promote attractive skill (self reg/ behavior mgmt) with administration
How Can I Get Started?

- Build relationships (teachers, teaching assistants, SLP, school psychologists, administrators, custodian, secretaries, parents)
- Communicate simply- don’t use therapy jargon
- Educate staff and parents about the role and benefits of OT
- Model and demonstrate interventions and modifications whenever possible. This will foster buy in to the skills/perspective you offer and facilitate carry-over in the daily classroom routine
- Get involved (RTI, staff meetings, parent meetings, volunteer for special events/activities/district initiatives, etc)
Response to Intervention (RTI)
What is RTI?

- Structures the instructional day in a way that students are systematically provided additional time and support.
- A process for ALL students, not just those identified with special needs.
- 3 Tiers of Instructional Processes:
  - Use varies depending on the nature or severity of a student’s difficulties.
What is RTI?

- Assessment
  - Universal Screening (district/building common assessments, state assessments, behavior/attendance, course grades, etc) and Progress Monitoring
- The instruction/intervention that occurs as a result of the assessment outcome drives the identified changes that we then hope to see in our students
Tiers

Tier 1

- High quality core instruction
  - evidenced-based
- Provided to all students
- Synonymous with the core reading and math curriculum
- 75-85% of the students will show growth
Tiers

Tier 2

- Research-based interventions of moderate intensity targeting the deficient skill
- Consists of small group interventions (5-8 students), 2-3 x per week for roughly 20 min each time
- Required by 10-15% of students in a classroom
Tiers

Tier 3

(Typically, step at which Building RTI team becomes involved)

- Individualized interventions of increased intensity for students who show minimal response to Tier 2 interventions, or those who are at a high risk for failure
- Consists of daily intervention in a very small group (3 or less students) or individually for roughly 30 min
- Required by 3-5% of students in a classroom
Tier 1: What teachers are already doing
- High Quality Instruction
- PBIS Initiatives
- TBT

Tier 2: An Additional Level of Support
- Small group to review concepts
- Check In/Check Out
- LLI

Tier 3: Intensive Intervention
How is RTI Different from IAT?

- RTI is a classroom-based structure where data is monitored by the classroom teacher, TBTs, literacy/math coaches, and/or RTI liaison/coordinaotr. Interventions are monitored and changed based on student response.
- In situations where students show continued lack of progress in the RTI structure, the team can use the data obtained from RTI to document intervention attempts before special education is considered.
When Should Students be Referred to RTI?

- Typically once Tier 1 and 2 interventions have been implemented and the teacher has consulted with the TBT team, coaches, and the RTI liaison
- Progress/data has been monitored with Tier 1 and 2 interventions
- Student continues to perform in the lowest 3-5% of the classroom in core academics or behavior
OT’s Role in RTI

- Integral team member
- Consult with teachers/support staff, providing recommendations for strategies and interventions such as fine motor, visual motor, visual perceptual, sensory/self-regulation, mental health, social skills, etc
- When appropriate, provide direct interventions to student on a short-term basis
BB is a 3rd grade student. His recent reading diagnostic score was a 3 (target = 15). He has difficulty solving words and has poor reading comprehension. BB flips some letters and numbers and transposes them in his writing. He has difficulty retaining information from day to day. BB has been diagnosed with ADHD but is not on medication as he has had severe side effects with medications tried (racing HR, weight loss). His teacher reports that he responds well to teacher cues to get back on task but requires constant monitoring. BB’s mom is very involved and works with him at home on reading.

As an OT, what do you think could be causing BB’s difficulties with reading and writing?
Questions?

