

Special Interest Section Quarterly

# Early Intervention & School

Volume 19, Number 3 • September 2012

Published by The American Occupational Therapy Association, Inc.

## Exploring New Territories in the Schools

■ Susan M. Cahill, PhD, OTR/L

School-based practice is evolving as occupational therapy practitioners begin to realize the extent of their role in this setting (Rodger, 2010). New opportunities afforded by changes put forth in the Individuals with Disabilities Education Improvement Act of 2004 regulations means that school practitioners are providing services to entire schools and students without individualized education plans (IEPs). This is both an exciting and extremely challenging time as occupational therapy practitioners are forced to juggle their traditional workload with new responsibilities. Occupational therapy practitioners may feel overwhelmed as they attempt to pioneer new territory in the school setting, but we are obligated to address the unmet occupational performance needs of children and youth (Schultz-Krohn, 2012). The American Occupational Therapy Association's (AOTA's) Centennial Vision calls on occupational therapy practitioners to explore these bold new frontiers and provides a roadmap for us to realize the potential reach of our profession (Clark, n.d.).

When pioneers set off for a new territory, the first thing they do is try to get the "lay of the land." Occupational therapy practitioners understand the context in which they hope to introduce new services, as well as the key players who will be involved and the occupational performance needs that they will address. A needs assessment can guide your work in this new territory and can be completed in three phases (Finlayson, Baker, Rodman, & Herzberg, 2002). The first phase of the needs assessment involves reviewing the current literature, gaining an understanding of the needs of the group or a setting, and identifying services and interventions that were previously provided (Schultz-Krohn, 2012). Fortunately, AOTA has many resources that school practitioners can use to get an understanding of the lay of the land and begin to respond to or create new initiatives. Position papers, societal statements, evidence-based practice guidelines, consumer brochures, and live and prerecorded chats are just some of the tools that an occupational therapy practitioner can use in the first phase of the needs assessment to gain a deeper understanding of the context for their work. Based on the work of Finlayson et al. (2002), some questions you can ask yourself to guide your investigation into this new territory include:

### Meet the Incoming Chairperson

■ Dottie Handley-More, MS, OTR/L

The newly elected Early Intervention & School Special Interest Section (EISSIS) chairperson, Dottie Handley-More, MS, OTR/L, has more than 25 years of experience in school-based practice. She earned a bachelor of science degree in occupational therapy from the University of Washington (UW) in 1986, and in 1999, earned a master of science degree at UW in rehabilitation medicine. She is currently an occupational therapist and assistive technology consultant for Highline Public Schools in Burien, Washington. She is also a clinical assistant professor with the Occupational Therapy Department of UW and serves on the UW Master of Occupational Therapy Program Advisory Board. She provides guest lectures on school-based practice for both UW and the University of Puget Sound.

Dottie has written articles on school-based practice and has presented on a variety of topics, including pediatric assessment, assistive technology, and consultation and collaboration. She was an author for the American Occupational Therapy Association (AOTA) Online Course *Occupational Therapy in School-Based Practice: Contemporary Issues and Trends* (2004) and *Occupational Therapy Services for Children and Youth Under IDEA, 3rd Edition* (2007), from AOTA Press. She also serves on the editorial board of the *Journal of Occupational Therapy, Schools, & Early Intervention*.

Being a volunteer leader has been important to Dottie throughout her career as an occupational therapist. She advocated for adding a related services representative to the representative council of her local education association. She then served the association for several years, first as the related services representative and later on the executive board. At the state level, Dottie has represented occupational therapists on the Washington Education Association Educational Staff Associates

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Commission, an organization for related services staff. She also has served as co-chair of Occupational Therapists in Schools (a special interest section of the Washington Occupational Therapy Association [WOTA]) and has represented WOTA on several state-level committees. She was appointed to represent WOTA at the AOTA Promoting Partnerships Leadership Seminar and went on to become a member of the National IDEA Resource Cadre of the federally funded IDEA Partnerships Projects, U.S. Department of Education, Office of Special Education Programs. She is transitioning into the EISSIS Chairperson position after serving as the Professional Development Coordinator (Communications) on the EISSIS Standing Committee. ■

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Handley-More, D. (2012, September). Meet the incoming chairperson. *Early Intervention & School Special Interest Section Quarterly*, 19(3), 1–2.

- What is the back story on this population or concern? Are the needs related to this group or occupational performance problem reflected in the popular media or literature to provide a deeper understanding?
- What factors related to the social, physical, temporal, spiritual, and virtual contexts influence this population? Are there any social norms or performance patterns that I need to know about?
- What do the key stakeholders think about what is going on with this situation? Do the teachers, parents, or students identify a problem or a need for change?
- What barriers or challenges do I anticipate facing as I attempt to work in this new context? How will I make sure that I have enough resources to implement my plan? How will I get people on board with my initiative?

The second phase of the needs assessment involves setting priorities and establishing outcomes. During this phase, the occupational therapist works to analyze and interpret the information that was collected to better understand the needs of the group or setting (Finlayson et al., 2002) and come up with a plan. In the school setting this may be accomplished through collaborative consultation (Brentnall & Bundy, 2012). Collaborative consultation involves working with key stakeholders (i.e., teachers, parents, student) to define or develop an operational definition of the problem that will be addressed and a plan to address it. AOTA

has many resources that school practitioners can use to gain skills related to collaboration, including a Self-Paced Clinical Course called *Collaborating for Student Success: A Guide for School-Based Occupational Therapy* (Hanft, Shepherd, Frolek Clark, & Swinth, 2008) that can be taken anywhere.

The final phase of the needs assessment involves implementing and evaluating the plan. Once you decide how to conquer the new frontier, a systematic approach for reviewing the challenges and benefits of your service delivery should be established (Schultz-Krohn, 2012). The occupational therapist should have a clear understanding of the desired outcome of the program or service before beginning implementation. Then, as services are implemented, they are simultaneously evaluated and adjusted as needed. This iterative process will ensure that the necessary adjustments are identified and addressed early so that the group or setting receives the maximum benefit from occupational therapy services (Schultz-Krohn, 2012).

Occupational therapy practitioners at all levels of practice who are eager to explore new frontiers but do not know much about these emerging areas of practice or are having a difficult time conceptualizing their role can use resources provided by AOTA for guidance. Many of the resources are located on AOTA's Web site under Practitioners (Practice Areas, Children & Youth) or Continuing Education. Live virtual chats are announced regularly, and archived virtual chats are available ([www.aota.org/Practitioners/PracticeAreas/Pediatrics.aspx](http://www.aota.org/Practitioners/PracticeAreas/Pediatrics.aspx)).

Working in response to intervention initiatives and supporting children's mental health at school are two new frontiers that school practitioners may explore.

### Case Example

Julie is a Level II occupational therapy fieldwork student in the second week of her school system placement. She is eating lunch in the staff lounge when her clinical fieldwork supervisor and two teachers approach her to talk about an exciting new initiative. The principal has asked staff to volunteer to work together to develop an after-school program to target the needs of some students who

**Table 1. AOTA Response to Intervention (RtI) Resources**

Practitioner Question	Name of Resource	Type of Resource
How do I learn more about RtI?	RtI for At-Risk Learners: Advocating for Occupational Therapy's Role in General Education  FAQ: Response to Intervention for School-Based Occupational Therapists and Occupational Therapy Assistants	CEonCD™  Downloadable resource page
How do I explain my role to teachers, administrators, and other school personnel?	RtI Consumer brochure  FAQ for Educators: Help All Students Achieve Greater Success in Academic Performance and Social Participation	Downloadable brochure  Downloadable resource page
How do I find the time to start implementing RtI?	Transforming Caseload to Workload in School-based and Early Intervention OT Services	Downloadable resource page
How do I collaborate with educators and other personnel in this new role?	Collaborating for Student Success: A Guide for School-based Occupational Therapy	Self-Paced Clinical Course

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Special Interest Section Quarterly

(ISSN 1093-7242)

Chairperson: Dottie Handley-More  
Editor: Patricia Bowyer  
Production Editor: Cynthia Johansson

Published quarterly by The American Occupational Therapy Association, Inc., 4720 Montgomery Lane, Bethesda, MD 20814-3425; [ajotsis@aota.org](mailto:ajotsis@aota.org) (e-mail). Periodicals postage paid at Bethesda, MD. POSTMASTER: Send address changes to *Early Intervention & School Special Interest Section Quarterly*, AOTA, PO Box 31220, Bethesda, MD 20824-1220. Copyright © 2012 by The American Occupational Therapy Association, Inc. Annual membership dues are \$225 for OTs, \$131 for OTAs, and \$75 for Student members. All *SIS Quarterly*ies are available to members at [www.aota.org](http://www.aota.org). The opinions and positions stated by the contributors are those of the authors and not necessarily those of the editor or AOTA. Sponsorship is accepted on the basis of conformity with AOTA standards. Acceptance of sponsorship does not imply endorsement, official attitude, or position of the editor or AOTA.

**Table 2. AOTA School Mental Health Resources**

<i>Practitioner Question</i>	<i>Name of Resource</i>	<i>Type of Resource</i>
What are the guidelines for providing mental health services to children and youth?	OT Practice Guideline for Children with Behavioral and Psychosocial Needs	AOTA Practice Guidelines Series
	FAQ on School Mental Health	Downloadable resource page
What is my role in providing mental health services to children and youth?	Mental Health in Children and Youth: The Benefit and Role of Occupational Therapy	Downloadable fact sheet
	Occupational Therapy Services in the Promotion of Psychological and Social Aspects of Mental Health	Statement
How do I help educators and other school personnel understand my role in addressing the mental health needs of children and youth?	FAQ for Educators: Help All Students Achieve Greater Success in Academic Performance and Social Participation	Downloadable FAQ for educators
	Occupational Therapy and School Mental Health	Downloadable fact sheet
	Mental Health Promotion, Prevention, and Intervention with Children and Youth: A Guiding Framework for OT	Self-Paced Clinical Course
How do I help children with social emotional needs develop social interaction skills?	Building Play Skills for Healthy Children and Families	Downloadable Tip Sheet
	How to Pick a Toy: Checklist for Toy Shopping	Downloadable Tip Sheet and checklist

have been identified as being at-risk for learning or social difficulties through the school's Response to Intervention (RtI) initiative. The group wants to know if Julie is willing to help develop this program.

Julie is eager to join the group. She is familiar with the main concepts of RtI, but she wants to learn more (see Table 1) so she can make substantial contributions to the after-school program. Over the next 2 weeks, Julie completes two self-paced continuing education courses offered on CD through AOTA to learn more about her potential role in RtI. Once she is armed with more information, she sets out to gain a better understanding of the history of the RtI initiative at this school. Julie talks to the assistant principal, several teachers, a group of students, and a few parents. She gains a better understanding of the social norms at the school and the typical performance patterns of the majority of the students. Through her discussions, Julie learns that the time allotted for recess at this school has been shortened by the school district every year for the past 3 years to increase the amount of instructional time available to teachers in an effort to strengthen the student body's yearly achievement scores.

The assistant principal and the teachers feel that the reduced recess time has inadvertently led to more discipline referrals for

off-task and disruptive behaviors and decreased the students' participation during instruction. The parents are concerned that their children are not getting enough activity and worry about how this lack of activity affects their physical and mental health. The children tell Julie they wish they had more opportunity to interact with their peers. Julie identifies the district's policy of reduced recess as a barrier; however, she sees how the after-school program has the potential to create opportunities for students who have been identified as at risk to increase their physical activity levels and work on skills to support their learning and social participation.

Julie works with the staff who are heading up the after-school program initiative to set priorities and establish outcomes. She uses AOTA's resources on school-based mental health (See Table 2) to make a case for occupational therapy's continued role in this initiative and to get some ideas on the program components that could be offered by occupational therapists. Julie, her clinical fieldwork educator, and the two teachers collaborate with key stakeholders to develop an after-school program to meet the needs of the students at the school.

Finally, Julie works with the staff to pilot the after-school program with two grade levels and works with the team to collect evaluation data. Julie's time at her fieldwork placement quickly comes to an end and she realizes that besides providing traditional services in a school setting, she had the opportunity to be an integral part of a new initiative that expanded the scope of occupational therapy at the school.

## Conclusion

School-based occupational therapy is expanding from meeting the needs of children with Individualized Education Plans (IEPs) to meeting the needs of entire school communities. Resources from AOTA can be used by occupational therapists as they conduct needs assessments to determine the boundaries of their practice during this exciting time. ■

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Cahill, S. M. (2012, September). Exploring new territories in the schools. *Early Intervention & School Special Interest Section Quarterly*, 19(3), 1–3.

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