Guidance for Performance Evaluation of School Occupational Therapists

Preface

Guidance for Performance Evaluation of School Occupational Therapists was developed by
the American Occupational Therapy Association (AOTA) in response to requests from states,
local school systems, and occupational therapy practitioners for assistance in light of new
educational accountability standards. The objectives are threefold: (1) to identify the unique and
essential contributions of occupational therapists (OTs)within their multiple school-based roles;
(2) to offer guidance for measuring performance in those roles; and (3) to offer an additional
sample process and rubric for evaluating school OTs. This guidance is not designed to address
performance evaluation of occupational therapy assistants working in public schools.

A combination of literature review, inquiry and feedback from school occupational therapists
and educator evaluation experts, and iterative team-based authoring were used to develop this
resource. It is intended solely as expert guidance; it is not an effort to prescribe, regulate, or
mandate the performance evaluation of occupational therapists working in public schools. The
information and samples are offered to support states and local school systems as they design
evidence-based occupational therapist performance evaluation processes and instruments specific
to their context and needs.

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Introduction

With the appropriation and allocation of the U.S. Department of Education (ED) *Race to the Top* (RttT) competitive grant program (2009b), state and local education agencies have entered a new era of educational reform. This has taken place regardless of RttT awards. The message from Washington is clear: student achievement, high school graduation, and preparation for success in college and careers shape the mission of American public education. One of the central components of this effort is teacher and principal effectiveness demonstrated through student growth data. This process affects occupational therapists working in public schools.

Many states have recognized that student growth in learning, especially for students with disabilities, depends on factors and influences other than teachers and principals. The contribution to student growth by curriculum and pupil support personnel, including related services providers or specialized instructional support personnel such as occupational therapists, is often under identified and undocumented (ED, 2009b).In an effort to articulate the educational impact of pupil support staff, states and local school systems are exploring ways to include related services providers in newly designed staff evaluation systems.

RttT assessment systems require approaches that:

- demonstrate students' growth between two or more points in time,
- are comparable across classrooms (or, for occupational therapists, across workloads),
- are rigorous,

- derive from appropriate grade-level standards, and

demonstrate high expectations for student learning (Goe&Holdheide, 2010). In addition to the RttT influences, since 2004 state and local education agencies are required to demonstrate compliance and growth in the 20 indicators of the Individuals with Disabilities Education Act (IDEA) Part B State Performance Plan (SPP) (ED, 2009a). These indicators guide states as they implement IDEA and measure their performance when educating students with disabilities. SPP indicators underscore data about graduation rates, dropout rates, and whether services prepare students for further education, employment, and independent living (Goe&Holdheide, 2010). Although it is generally accepted that related services providers, including occupational therapists, supply valuable expertise in meeting the SPP growth goals for students, the mechanisms of their contributions have not been well articulated.

Accountability is only one area emphasized in the new educational improvement models. Reform is another central component. Professional development plans must be informed by performance appraisal data, which may include supervisor ratings, self-assessment, peer and team member review, as well as artifacts and evidence from practice that contribute to staff evaluations. This type of systematic, data-based, multi-source feedback approach to identify professional development needs is essential to meet reform mandates and build school personnel capacity.

AOTA offers many resources that can assist in evaluating practitioner performance, including official documents such as:

Occupational Therapy Code of Ethics and Ethics Standards (2010)(AOTA, 2010c)

Occupational Therapy Practice Framework: Domain and Process, 2ndedition (AOTA, 2008c)

Guidelines for Documentation of Occupational Therapy(AOTA, 2013)

Guidelines for Supervision, Roles, and Responsibilities During the Delivery of Occupational Therapy Services (AOTA, 2009a)

Occupational Therapy Services in Early Childhood and School-Based Settings (AOTA, 2011a)

Standards of Practice for Occupational Therapy (2010e)

Providing Occupational Therapy Using Sensory Integration Theory and Methods in School-Based Practice (AOTA, 2009d)

Other AOTA resources include Fact Sheets on *Occupational Therapy in School Settings* (AOTA, 2010d), *Occupational Therapy and School Mental Health* (AOTA, 2009c), *Occupational Therapy's Role With Autism*(AOTA, 2011b), and *Occupational Therapy and Universal Design for Learning*(AOTA, 2010b); *Frequently Asked Questions (FAQs) on School Mental Health* (AOTA, 2008b), Autism Spectrum Disorders (AOTA, 2010f), and Response to Intervention (RtI) (AOTA,2008a); Tip Sheets for teachers and consumers (AOTA, 2009b), and a downloadable PowerPoint for in-services on school service (AOTA, n.d.b). The AOTA Commission on Continuing Competence and Professional Development developed a Professional Development Tool (PDT) (AOTA, 2003) for evaluating professional development needs and interests and for developing a plan of action. AOTA has also developed voluntary specialty certification in School Systems and Pediatric board certification (AOTA, n.d.a,c) that is available to its members.

Several competencies and appraisal instruments are available at the state and local levels. Many of these have been developed without occupational therapist involvement or reference to the IDEA SPP indicators, and most were completed prior to the RttT requirements for assessment systems (Goe&Holdheide, 2010).

- While existing performance systems may satisfy immediate local needs, debate continues as to what data best determine occupational therapist effectiveness,

- who is best suited to conduct the performance appraisal, and

- how the results should shape future professional development.

Evaluation of occupational therapists working in public schools can benefit from a more reliable, broadly accepted, policy-conscious, and educationally relevant approach. With 21.6% of occupational therapists working in schools, AOTA (2010a) recognizes the need to provide informed support to both school-based occupational therapists and their employers during this pivotal time. This document offers guidance for states and local education agencies as they seek to evaluate the effectiveness of occupational therapists working in public schools. Content is based on professional practice standards, current research, federal mandates, and expert knowledge in school-based service.

Education Personnel Effectiveness and Student Achievement

Value-Added Models

Measures of teacher performance and student learning outcomes based on a value-added model (VAM) of student achievement have become popular in research and are gaining

increasing acceptance among policymakers in the development of pay-for-performance processes (Braun, 2005). Many states and local educational agencies are considering research indicating that pay-for-performance incentives may contribute to improvement in teaching practices and student/program outcomes (Coggshall, Ott,Behrstock, & Lasagna, 2009; Firestone 1991; Springer et al., 2010).The use of VAMs is supported in the RttT program as a means to objectify teacher effects on student learning and achievement (ED, 2009b). VAMs employ statistical methodology to estimate the effects of individual schools and/or teachers through longitudinal test score data. VAMs that include hierarchical linear modeling, percentile growth scores, and other statistical procedures have been developed to evaluate teacher effectiveness while attempting to eliminate the influence of factors such as prior student achievement and socioeconomic status (Goldhaber& Brewer, 1997; Palardy&Rumberger, 2008; Rowan, Chiang, & Miller, 1997).

The Concept of Value-added

Teacher quality → Student learning → Student performance → Measure teacher effectiveness
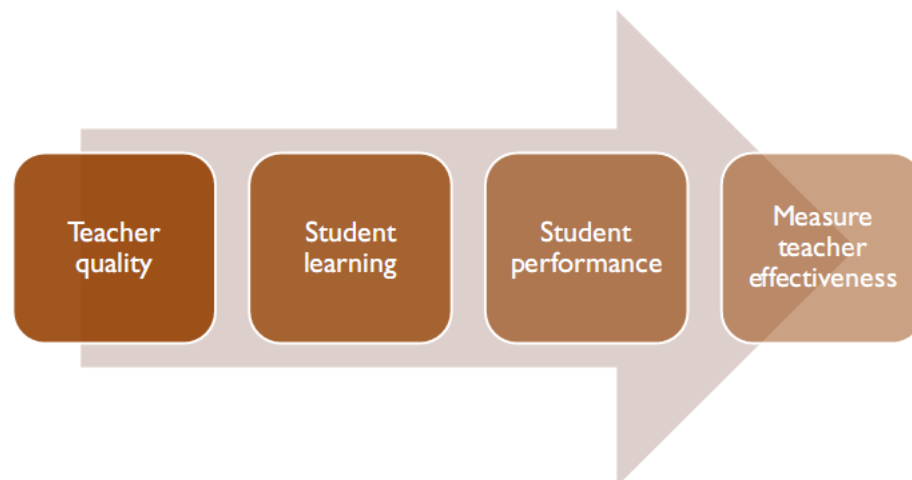
Researchers, educators, and policy makers identify a number of challenges in using student performance data to analyze teacher effectiveness (Harris, 2010; Holdheide, Goe, Croft,&Reschly, 2010; Koedel& Betts, 2009; Kupermintz, 2003; McCaffrey, Lockwood, Koretz, & Hamilton, 2004; Olson, 2004; Pearson Education, 2004; Popham, 2010; Rothstein, 2009, 2010; Toch& Rothman, 2008; Tucker & Stronge, 2005).These factors are even more salient for itinerant instructional support staff like occupational therapists:

1. Existing measures of student performance tend to focus on high-stakes domains (English, language arts, and math), and may not reflect the full range of growth and learning (e.g., social-emotional learning, higher order thinking skills, etc.).

2. Statistical methodologies, missing data, population size, testing accommodations, and alternate test forms may inaccurately identify teacher effects on achievement.

3. It is difficult to correlate achievement to an individual teacher because of the influence of multiple factors on student achievement. These factors include student maturation, health status, motivation, interest, mobility and attendance; family and peer influence; non-random classroom assignment, instruction provided by other teachers or service providers, and individualized instruction provided by alternate teachers and alternate or remedial programs.

4. Achievement trajectories may vary considerably in children with disabilities, and annualized progress may be inconsistent.

5. Research is lacking on the use of VAMs with special educators and related services providers.

Occupational Therapy Models

Occupational therapy in schools encompasses a unique body of knowledge that changes rapidly with local, state, and federal regulatory updates; the dissemination of scientific evidence; and the development of best practices. Occupational therapists build on their initial preparation and take ongoing steps to ensure performance effectiveness in the school setting (Brandenburger-Shasby, 2005; Case-Smith & Cable, 1996; Hollenbeck, 2010; Royeen&Furbush, 1996; Swinth, Chandler, Hanft, Jackson, & Shepherd, 2003).The literature suggests, however, that many occupational therapists enter school practice without a uniform method of preparation and competency maintenance (Brandenburger-Shasby, 2005; Case-Smith & Cable, 1996; Hollenbeck, 2010; Royeen&Furbush, 1996; Swinth et al., 2003).

Best practice is supported by a culture that values continuing competency, performance assessment, and outcome measurement, coupled with explicit, systematic, and intentional professional development opportunities (Banfield&Lackie, 2009; Gleeson, 2010; Hollenbeck, 2010; Lysaght, Altschuld, Grant, & Henderson, 2001; Peterson, McMahon, Farkas, & Howland, 2005; Royeen&Furbush, 1996). An explicit competency-based model for appraisal clearly documents:

1. continuing competence and change in performance,

2. maintenance of licensure and school division requirements,

3. contribution to student achievement outcomes through analysis of the outcome artifacts collected, and

4. self-assessment of knowledge, clinical and ethical reasoning, communication skills and performance.

Environments that promote a culture of continuing competency through professional competency-based performance assessment, workplace monitoring, and expectation for quality practice are associated with positive outcomes for clients served (Jensen, Gwyer, Shepard &Hack, 2000).

There is scant literature addressing the development of competency assessment and maintenance in school occupational therapists. Competency-based performance evaluation may inform professional development models and actions for therapists as they progress from novice to expert competency. In addition, explicit performance assessment may support local, regional, or statewide efforts to develop the capacity, capability, and sustainability of their occupational therapy workforce in school settings. A four-pronged approach to competency development is recommended:

1. Federal and state agencies support accessible state and regional level trainings that promote evidence-based practice and outcomes (Andersen, 2001; Craik&Rappolt, 2006; Lowe, Rappolt, Jaglal, & Macdonald, 2007; O'Brien, 2001; Suarez-Balcazar, Hammel, Helfrich, Wilson, & Head-Ball, 2005).

2. The state occupational therapy association collaborates with state education departments and disability/advocacy organizations to support supervision and peer mentorship for school-based occupational therapists (Swinth, et al., 2003).

3. Local school system occupational therapy services reflect policy, practice supports, and guidelines developed by AOTA to promote highly qualified occupational therapists and implementation of evidence-based practices in school settings (Clark, Jackson, &Polichino, 2011).

4. Local school system supports quality professional development activities that promote reflection, lifelong learning, and application of best practices in the schools (Andersen, 2001; Craik&Rappolt, 2006; Lowe et al., 2007; O'Brien, 2001; Suarez-Balcazar et al., 2005).

To date, there is no literature that addresses the validity of using VAMs to evaluate the effectiveness of school-based occupational therapists. Effectiveness is paramount, however, and evaluation processes are necessary to determine an occupational therapist's contribution to student learning and school improvement. It is essential that the evaluation:

- considers occupational therapy's unique contribution to the educational process,

- incorporates the roles and functions of an occupational therapist in meeting the diverse needs of students, and

- measures occupational therapist effectiveness in contributing to student success.

A performance assessment system grounded in the context of student outcomes and continuing professional development provides the strongest picture of an occupational therapist's effectiveness and value-added contribution to the school division he or she supports. The competency based performance assessment process described above can serve as a cornerstone for the development of a continuum of professional development opportunities for continuous improvement of knowledge of, trends in, and changes in school system practice.

Unique Contribution of Occupational Therapy in Public Education

Occupational therapy engages clients in meaningful routines, roles, and occupations in a manner that supports their health and participation (AOTA, 2008a). In school practice, clients include students, teachers, families, classes, schools, and school districts. Occupational therapists are experts at identifying ways to engage students in educational activities and supporting them to develop competence in their roles as students. Occupational therapists' expertise supports system-wide initiatives by addressing ways to promote safe and accessible environments for student participation. They work with other education personnel to develop curriculums and design curricular accommodations. They help build capacity through instruction and support provided to families and individual members of the school team through professional development trainings.

Unique Contribution of School-based OT

Education
academics, non-academic, extracurricular, sports, band, clubs, pre-vocational and vocational participation

Personal Care
mealtime, toileting, dressing, hygiene, managing personal belongings, personal organization

Play
turn-taking, imaginative play, sharing materials, exploring new play ideas/ opportunities

Community Integration & Work
fieldtrips, school-related vocational interests and training, community mobility

Social Participation
school community, peer and family engagement

Contribution to Student Learning

Students attend U.S. public schools to acquire content knowledge, life skills, and social capital in preparation for life roles such as college student, community member, and career builder. To that end, occupational therapists contribute to students' mastery of curricular standards by identifying their learning styles, strengths, and needs; facilitating development of learning, as well as study and test-taking habits and skills; and maximizing their ability to show what they know. Occupational therapists have expertise in activity and environmental analysis and modification. This expertise means that they are able to:

- Offer curricular modifications for Universal Design for Learning (UDL) to help make learning accessible for all students

- Offer recommendations for differentiated instruction to accommodate a variety of learning preferences

- Offer strategies to promote literacy in reading and writing

- Help students meet State Common Core Standards or other measures of achievement

- Support physical and mental health of all students, with or without disabilities, which is necessary for successful learning to occur

Many students with needs in the areas of personal care, materials and time management, understanding disability, self-advocacy, or coping require an occupational therapist's skills and knowledge in prevention, promotion, and intervention strategies to successfully participate in their school day and benefit from educational opportunities. Occupational therapists also help students interpret and engage the social milieu of the educational environment in order to access instruction, enjoy friendships, and serve the school community, and they support students' transitions into and out of their school careers.

Contribution to School Improvement

The occupational therapy lens is valuable to help identify and improve the quality of both regular and special education. Occupational therapists observe in the classroom, co-teach, coach instructional personnel, and implement environmental modification to facilitate learner-instruction fit and learner-environment fit. Occupational therapists build teacher capacity through in-service presentations at grade-level and faculty meetings. They provide direct training and technical assistance, and they serve on problem-solving teams. In tiered and problem-solving systems of support, they design strategies and interventions to foster student performance in the classroom and train instructors in their use (see Domain section below for performance areas).

Occupational therapists are particularly skilled in applying principles of UDL(CAST, 2011), sensory processing, and biomechanics to maximize students' participation and learning during instructional activities. They are highly skilled in addressing cognitive and executive functioning that impacts learning and academic achievement.

Occupational Therapy in Schools

The *Occupational Therapy Practice Framework* (AOTA, 2008c) outlines the domain and process of occupational therapy. Federal and state education law and regulations, local education agency goals and priorities, and requirements of the school's curriculum frame the specific focus of occupational therapy in each school setting.

Domain

Occupational therapists in school systems support children and youth to develop competence in student roles and participate in school occupations (see Table 1).They are knowledgeable about the skills and habits needed for success in expected student roles and occupations. They understand human development, social-emotional functioning, sensory processing, and the development of functional life skills. Occupational therapists are skilled in task analysis, the use of technology and specialized equipment, as well as environmental modification to promote function. They bring knowledge of how a range of health-related issues may impact student performance in the classroom and in other naturally occurring activities within the school setting.

Table 1. Student Roles and Occupations

Roles (Chapparo& Lowe, 2012)	Occupations (AOTA, 2008c)
- Learner (following demonstrations, carrying out verbal and written directions, demonstrating knowledge, attending to instruction, completing assignments) - Worker (using classroom tools, producing written work, producing artwork, using technology) - Community member (following protocols and routines in the classroom, non-academic classes like music, PE, and art ,on campus, on the bus, and in the cafeteria; exercising safety awareness; contributing to group projects; respecting the space/time/materials of others) - Friend (negotiating relationships with peers and staff) - Player (participating in recess, physical education, team activities, extracurricular activities including sports and leisure) - Self-carer(managing personal care needs, items and materials)	- Education (academics; non-academic contexts such as recess, the cafeteria; extracurricular activities, such as sports, band, clubs; pre-vocational and vocational participation, such as volunteering, and after school employment - Personal care (feeding/eating, toileting, dressing, hygiene, managing personal belongings, personal organization) - Play(turn-taking, imaginative play, sharing materials, exploring new play ideas/opportunities, extracurricular activities) - Community integration/Work (fieldtrips, school-related vocational interests and training, community mobility) - Social participation and interactions (community and school, peer and family engagement)

These roles and occupations provide units for analysis. Occupational therapists understand that multiple other variables, including student attributes, the teaching-learning process, staff attributes, family and peer attributes, the school context (temporal, physical, sensory, cultural, virtual) and environment (physical and social), and activities and materials, also influence a student's school performance. It is often this comprehensive and holistic perspective of dynamic relationships among the student, other persons, environment, and educational activities that instructional teams find so valuable in the occupational therapist's contribution.

Process

The *Occupational Therapy Practice Framework* description of *process* guides the occupational therapist's decision-making and actions (AOTA, 2008c). This process is occupation-centered and identifies strengths and needs affecting student performance and participation. Occupational therapists address specific student issues, along with system elements that support or limit the student's ability to function and/or participate fully in school activities. The process provides guidance for school occupational therapists to:

- Gather the occupation profile by identifying the client (student, teacher, team, family); their occupational history and their priorities; why they are seeking occupational therapy services; and what has been successful or problematic in various contexts and/or environments

- Address referral concerns through a top-down evaluation approach (Coster, 1998)

- Collaborate with team members to make data-driven decisions regarding
    - eligibility for special education
    - individualized student goals

- o the need for specialized services

- o the need for supports in the general education context

- Establish intervention plans based on individualized education program (IEP) goals to promote students increased function and participation, or to prevent decline in function and participation

- Provide intervention with students and consult with team members

- Use data to monitor student progress and outcomes

- Collaborate with school personnel to support training, environmental modifications and curriculum implementation that enables participation and performance of all students

Occupational Therapist Roles

Occupational therapists' roles in evaluation, planning, and service delivery in school settings are discussed in this section. While these roles are common for most school occupational therapists, the number and proportion of the roles exhibited will vary based on the occupational therapist's assignments, workload, experience level, skills, and preferences. Outcomes anticipated from occupational therapy contributions are categorized according to their benefit to students, school staff members, the school community, and families. Strategies and methods to assess the occupational therapist's performance are outlined, along with examples of relevant artifacts and resulting work products that provide evidence for the appraisal, in Tables 3, 6, 7, and 8.

Evaluator

Occupational therapists participate in individual student evaluation in regular and special education. Informed consent requirements may vary per state. Informed consent is needed for evaluations and screenings if the purpose is to make a decision about the need for special education or if the child is going to participate in testing that is not offered to the general population. In some states, classroom observation of a specific student for the purposes of differentiating instruction or tiered interventions requires parental consent. If state occupational therapy regulations allow, activities prior to a referral for special education evaluation, such as screening students or providing teachers with strategies, may be conducted by an occupational therapist to facilitate student participation. Information gathered by an occupational therapist prior to formal evaluation may help student support teams determine the need for more intense or specialized interventions, or additional student performance data. The occupational therapist may conduct observations, review work samples, and interview team members, including teachers, parents, and the student, to gather information.

Occupational therapists may participate in the comprehensive evaluation of a student as part of the initial referral for a special education evaluation, or complete an evaluation for a student already identified with a disability that adversely impacts educational performance. The occupational therapist collaborates with educational team members to determine which school-related activities challenge the student's participation in the educational setting. The evaluation process is based on an enablement model of practice, focusing on capability rather than disability. Table 2 outlines common sources for occupational therapy evaluation data.

Table 2. Common Occupational Therapy Evaluation Data Sources

- Educational file review, including classroom intervention data
- Interview with the student, teacher(s), parent(s), community providers
- Skilled observation of the student's engagement in typical school environments, routines, and activities
- Administration and interpretation of standardized and non-standardized assessments of relevant skills or functional performance
- Review of student work samples

The evaluation data gathered and interpreted by an occupational therapist is not primarily intended to answer the question, "Does the student need occupational therapy at school?" Instead, along with the information gathered by other IEP team members, occupational therapy evaluation data contributes to identify the student's educational strengths, needs, and factors that support or limit performance. For students initially referred to special education, the evaluation data helps the team determine whether the student has a disability that adversely impacts educational performance and requires special education. Occupational therapy evaluation data is useful as the team establishes priorities and determines ways the student can access activities in the classroom and across the school environment, participate in instruction, and make progress in the curriculum. Once the team develops IEP goals based on evaluation data, a determination is made regarding whether the student requires occupational therapy services to benefit from the special education program.

See Table 3 for guidance to assess the occupational therapist in the evaluator role.

Table 3. Evaluating Occupational Therapist Role as Evaluator

Occupational Therapist (OT) Role	Anticipated outcomes on behalf of the…	Strategies to evaluate OT performance may include…	Artifacts/Work Products for performance evaluation may include…

Evaluator	Student:
	• identify capabilities, strengths, and needs, patterns of performance and habits for academics, and participation in school occupations
	• identify any individualized learning goals, with recommended strategies to promote student access and participation in academics and school occupations
	
	Staff:
	• improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning
	• improved knowledge of the student as a learner
	• IEP team decisions are based on data about the student's ability to access and participate in the school community
	• improved ability to differentiate instruction
	• identified professional development needs
		• observe occupational therapist
		  - conducting an evaluation
		  - interviewing staff or family member
		  - participating in an IEP meeting
		
		• review assessment reports and IEP documentation
		
		• solicit feedback from IEP team members
		
		• review OT's self-assessment
		
		• review peer evaluation summary
			• Occupational Therapy Evaluation Report
			
			• team meeting minutes
			
			• IEP documents
			
			• peer review documentation
			
			• observation reports
			
			• staff and family surveys/feedback

	School Community:		
	• identified assets of and barriers to school environment		
	Families:		
	• increased knowledge of their child as a student and learner		
	• increased ability to support their child's performance in student learning activities		
	• improved collaborative partnerships with school teams		
	• increased capacity for parenting		
	• improved access to information to assist them in planning family and community activities		

Service Provider

Occupational therapists provide services at a variety of levels throughout the educational process (Table 4). They offer instruction, training, and support for school staff and parents and assist in district planning. Occupational therapists serve students in the least restrictive environment (LRE), which typically means they embed strategies within the student's classroom schedule or daily routine. Strategies to increase student participation in the LRE should be implemented before isolated interventions are attempted and may include collaboration and provision of team supports, and modifications to the environment, schedule, activities, materials, or assignments. The occupational therapist develops an intervention plan (AOTA, 2008a) that guides services according to the student's strengths, needs, interests, goals, and the provisions available in the situation (see Table 5).

Table 4. Occupational Therapy Services in the School System

Focus	Examples
System Level or Local Education Agency	• Consult with Central Office teams in planning activities (e.g., equipment acquisition for elementary school playgrounds or all self-contained classrooms for children with autism) • Develop protocols (e.g., management of students with sensory differences or mobility needs during fire drills) • Design and select curriculum (e.g., analyze appropriateness of handwriting or driver education curricula, prepare for transition from middle school to high school) • Address parenting issues (e.g., strategies for homework completion and self-management) • Enhance instructional methods (e.g., provide training on how to engage students in the work of the classroom)
School Level	• Provide student and staff training (e.g., organize an assembly on disability awareness or offer school-wide ergonomics checks) • Contribute to school-wide tiered processes (RtI or Positive Behavioral Support • Consult during building construction and renovation • Participate in school health and safety committees
Grade Level	• Provide in-services at grade-level meetings (e.g., on how to use physical activity to teach and reinforce grade-level math concepts)
Classroom Level	• Co-teach or collaborate with teacher to design classroom environments, schedules, and routines
Group of Students	• Lead or co-teach during center-based or station-based learning in a classroom • Organize before or after school groups to address social skills, study skills, or fitness and personal care habits
Individual Student	• Develop, implement, and evaluate intervention services outlined in the IEP or the Section 504 plan, as appropriate

Table 5. School-Based Occupational Therapy Intervention Plan(AOTA, 2008c)

- Student goals for engagement in activities within the educational setting

- Frequency, duration, and location of service(s)

- Intervention approaches

  - Create/promote (e.g., skill/performance enhancement/health promotion)

  - Establish/restore (e.g., skill/performance acquisition or remediation)

  - Maintain (e.g., sustain skill/performance that is likely to decrease)

  - Modify/adapt (e.g., environment/activity/program adjustments such as changing schedules, protocols, or rubrics to support student engagement, organization, and performance in school tasks/activities, or enhancements to promote student access and participation, including assistive technology)

  - Prevent (e.g., for those at risk, such as providing early intervening support and avoiding secondary complications)

- Intervention Types

  - Therapeutic Use of Occupations and Activities (e.g., whole class, group, one-on-one with student)

  - Advocacy (e.g., class training of disability, playground equipment, funding for equipment)

  - Education of team members (e.g., training)

  - Consultation with team members (e.g., problem solving)

    - Whole class

    - Group

    - One-on-One Interaction

- Outcome Measures

  - Increased participation in school routines and learning activities

  - Student achieves IEP goals

  - Increased team satisfaction with student performance

  - Increased competence or autonomy in student role

  - Increased health and wellness as seen by active and positive choices for physical, mental, and social participation

  - Prevention of further difficulties

  - Improved quality of life at school

  - Increased team/team member competence

- Recommendations for parents and teachers
- Team discussion about when the student may no longer require occupational therapy to support participation in the curriculum
- Referral (e.g., community programs/resources, other disciplines)

Throughout service implementation, the occupational therapist considers the evidence in selecting interventions and then collects and uses data to evaluate the effect of intervention and determine factors that influence change. When tracking data on a specific intervention or program, the occupational therapist:

- selects outcomes to document student progress toward goals,

- identifies meaningful and feasible data collection methods,

- determines frequency and duration of data collection, and

- collaborates with other team members to identify personnel required for data collection.

According to Swinth, Spencer, and Jackson (2007), when evaluating the efficacy of service, occupational therapists aim for direct impact on the student's *performance* of educational activities and the student's *participation* within the education context, with an end view of students becoming career and college ready. Service recommendations and plans are modified, as needed, according to data collected.

See Table 6 for guidance on how to assess the occupational therapist in the service provider role.

Table 6. Evaluating Occupational Therapist Role as Service Provider

Occupational Therapist (OT) Role	Anticipated outcomes on behalf of the…	Strategies to assess OT may include…	Artifacts/Work Products may include…

Service Provider	Student:
	• improved performance patterns, skills, and habits for academics
	
	• increased competence in student roles and functional life skills
	
	• increased participation in school occupations, curriculum, and learning activities in the classroom and across the campus
	
	• access to instruction/learning activities through assistive technology or environmental modification
	
	• increased self-advocacy
	
	Staff:
	• increased capacity for instruction of all students
	
	• improved ability to differentiate instruction
	
	• improved understanding of how the student's medical, developmental,
		• observe occupational therapist:
		  - providing interventions in a variety of contexts with student and/or staff members
		  - collaborating with staff or family member
		  - participating in an IEP meeting
		
		• review progress monitoring data and documentation
		
		• solicit feedback from students, teachers, parents and colleagues
		
		• review OT's self-assessment
			• documentation of collaborative planning
			• OT intervention plan
			
			• IEP documents, intervention plans, student work samples, service log data, progress notes
			
			• videotapes/ photographs
			
			• feedback from students, teachers, parents, and colleagues
			
			• records of team communication
			
			• mentorship documentation

	behavioral, and/or psychosocial status impacts school participation and learning School Community: • increased use of environmental modification and/or adaptations, including assistive technology, leads to participation by all students in school occupations as well as academic performance and participation in extra-curricular activities Families: • increased strategies to engage their child in family and community life activities • increased ability to support student learning • enhanced collaborative partnerships with school teams	• review peer evaluation summary	• peer review documentation • student assessments and outcome measures

Collaborative Consultant

Occupational therapists often consult with educators and other school staff members to facilitate student performance. Through communication and cooperation, timely sharing of perspectives and expertise, identification of mutual interests, service coordination, and interagency coordination (Swinth et al., 2007), occupational therapists contribute to student academic and functional outcomes. Consultation may focus on a specific student's need to achieve identified goals. Consultation may focus more broadly, helping teachers incorporate pre-

referral classroom interventions in their classrooms. Building teachers' capacity to integrate functional skills—students' use of tools in the classroom, time management, or personal care independence—into their daily routines and instructional approach may decrease students' need for direct services from specialists, such as occupational therapists.

Occupational therapists rely on skill in collaboration and the interactive team process to address key issues within children's education (Hanft& Shepherd, 2008).Occupational therapy consultation has application in a number of areas, including:

- professional development activities and materials (in-services, workshops, one-on-one mentoring, coaching, brochures, Websites, career fairs),

- evidence-based practices including data collection, research-driven projects, and development (time studies, grants, audit reviews, surveys),

- administrative procedures (school/district/state process guides, Medicaid billing, ethical issues, scheduling),

- curriculum development (writing, adaptive skills, transitions, social skills),

- budgeting (specialized equipment, materials, professional development, hiring),

- outreach and partnership with community/public agencies, and

- recruitment and personnel management (job fairs, job postings, interviews, personnel evaluations/observations, contractual agencies)

See Table 7 for guidance to assess the occupational therapist in the collaborative consultant role.

Table 7. Evaluating Occupational Therapist Role as Collaborative Consultant

Occupational Therapist (OT) Role	Anticipated outcomes on behalf of the…	Strategies to evaluate OT may include…	Artifacts/Work Products may include…

Collaborative Consultant	Student:
	• increased participation in school occupations and activities
	
	• inclusion in positive and consistent learning environments
	
	• participation in the least restrictive environment throughout the school career
	
	• improved access to services
	
	Staff:
	• consistent and appropriate use of adaptive equipment and assistive technology
	• improved ability to differentiate instruction
	• increased capacity to instruct students in the least restrictive environment
	• improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning
		• observe occupational therapist:
		   - collaborating, coaching, and problem-solving with team members
		   - participating in an IEP meeting
		   - providing staff training or in-services
		
		• review OT service documentation
		
		• solicit feedback from students, teachers, parents and colleagues
		
		• review evaluations of in-services and/ or trainings provided by OT
			• classroom intervention protocols (positioning schedules, activity modifications, mealtime plans, etc.)
			
			• progress notes
			
			• data collection
			
			• student work samples
			
			• videotapes/photographs
			
			• feedback from students, teachers, parents, and colleagues

	• enhanced knowledge and strategies for transition planning and implementation School Community: • allows for robust pre-referral process and subsequent creative strategies • increased school safety (e.g., ergonomics, bus safety, evacuation plans, and emergency response plans) • utilization of strategies to improve and promote the health and well-being of children and families by addressing issues such as obesity, ergonomics, backpack awareness, bullying prevention, and playground safety • utilization of environmental modifications, adaptations, and assistive technology to create accessible classrooms and playgrounds, leads to participation by all students in academics, school occupations and extracurricular activities	• review OT's self-assessment • review peer evaluation summary	• documentation of staff and/or family trainings • peer review documentation • examples of emergency response and safety plans

	Families:		
	• increased use of strategies to engage their child in family and community life activities		
	• increased knowledge of school and community resources		
	• enhanced knowledge and strategies for transition planning and implementation		
	• increased capacity for obtaining, maintaining, repairing, and financing adaptive equipment, assistive technology, and environmental adaptations		
	• increased ability to support their child's performance in student learning activities		
	• enhanced collaborative partnerships with school teams		

Administrator/Manager

School occupational therapists manage their practice through scheduling and prioritizing work, ensuring program integrity, procuring and maintaining therapy equipment and materials, submitting administrative reports, developing effective procedures, making data-based decisions, and communicating proactively. Occupational therapists are responsible for their competencies

and sustained knowledge concerning state and federal legislation, professional standards, best practice guidelines, and local policy.

Occupational therapists may supervise occupational therapy assistants, pre-service occupational therapy interns, and volunteers. As supervisors, occupational therapists provide education/training and share best practice strategies to positively impact the work of others. They may develop and implement fieldwork or mentoring programs, oversee relevant classroom programming, and assist other staff to identify and pursue professional goals.

See Table 8 for guidance to assess the occupational therapist in the administrator and manager role.

Leader and Scholar

Role Model

Schools are environments in which student character develops and commitment to student outcomes is the highest priority. Part of character education is encouraging the acquisition of positive habits by offering students effective role models. Occupational therapists are role models and, in this capacity, are responsible for demonstrating positive conduct and attitude. Further, occupational therapists are expert in the assessment and development of productive habits and routines for daily life and activity. The habits students acquire in school contribute to their character development and trajectory.

Advocate

Given their expertise in facilitating student participation in contexts that support optimal performance, occupational therapists often serve as advocates to promote students' participation

in the least restrictive environment. Further, teachers and families may need support in identifying issues, implementing interventions, determining methods for monitoring progress, and analyzing student performance data. Being well versed in the therapeutic model, which at its core is a problem-solving and strengths-based model, occupational therapists help staff and families obtain the resources, training, equipment, and support needed to ensure student growth.

Students benefit from opportunities to develop activity interests, build relationships with peers, and establish a sense of belonging in the school community (Knesting, Hokanson, & Waldron, 2008). Active engagement and belonging enable them to experience positive feelings about their capacities and contributions, understand and feel confident about the differences that exist between themselves and other children, and develop productive roles (Nutbrown& Clough, 2009). A community that values contributions by all, expects participation by individuals with and without disabilities, and encourages engagement in mutual and reciprocal relationships and self-chosen activities, facilitates membership and participation (Milner & Kelly, 2009). An inclusive community emphasizes these characteristics and provides students with opportunities to build self-advocacy skills that generalize to other situations and last throughout their lives. School-based occupational therapists support inclusion and facilitate opportunities for student and family participation in school and neighborhood communities. They work to eliminate structural barriers to student participation in the community and support community integration.

Caring and empowering school professionals who connect families to the school community and to other families enable parents to achieve the supports they need to successfully negotiate the challenging transitions of childhood and parenting (Giovacco-Johnson, 2009). Occupational therapists are often instrumental in facilitating intentional school–family connections that enable all children to identify their personal interests, recognize and exercise

their rights to make choices and decisions, engage actively in meaningful occupations, and construct meaning in home and school contexts.

Researcher and Evidence Translator

The No Child Left Behind Act (NCLB) of 2001 and IDEA 2004 emphasize evidence-based practice to ensure high-quality practice in the school setting. Best practice in evidence-based decision making involves integrating relevant research and other data, clinical expertise, the contextual task demands and expectations, and the client's values and preferences (Haynes, Devereaux, &Guyatt, 2002). As health care professionals in educational settings, occupational therapists often investigate student health conditions, consult with community providers, and survey relevant literature to inform team planning, instruction, and intervention.

To stay abreast of current methods, occupational therapists must actively seek out and review current research in their area of practice. This research evidence is used to inform clinical reasoning and decision making in the school setting. Occupational therapists have a professional responsibility to read scholarly journals, pursue continuing education courses, and stay current with the resources offered by national and state professional associations. Whenever possible, occupational therapists must implement practices and interventions that draw on a strong research base. By providing evidence-based services in schools, occupational therapists "…integrate professional wisdom with the best available empirical evidence in making decisions about how to deliver instruction" (Whitehurst, n.d., p.3) to improve academic and functional outcomes for all students.

Data collection as part of service delivery demonstrates the effectiveness of intervention for the individual student or a group of students, and provides evidence that guides the

occupational therapist's clinical reasoning. This practice-based evidence may also be applied

when designing interventions for other students working toward similar goals.

Table 8. Evaluating Occupational Therapist Role as Administrator/Manager, Leader, and Scholar

Occupational Therapist (OT) Role	Anticipated outcomes on behalf of the…	Strategies to evaluate OT may include…	Artifacts/Work Products may include…
Administrator/ Manager **Leader and Scholar** *Role Model Advocate* *Researcher and Evidence Translator*	Student: • access to evidence-based services • participation in positive and consistent learning environments • participation in the least restrictive environment throughout their school career Staff: • increased access and capacity for evidence-based intervention and instruction • improved ability to differentiate instruction • improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning	• observe occupational therapist: - collaborating and consulting with school, district, and/or state personnel -problem-solving with team members - presenting and/or supporting district and/or state level professional development • review OT service documentation for compliance, reference to	agendas, outcomes, and notes from committee meetings feedback from students, parents, and/or colleagues in the form of e-mails, letters, and/or in-person communications documentation of self-assessment and professional development plan with updates continuing competence activity

	School Community: • utilization of strategies to improve and promote the health and well-being of children and families by addressing issues such as obesity, ergonomics, backpack awareness, bullying prevention, and playground safety • school climate embraces diversity and participation by all students • utilization of environmental modifications, adaptations, and assistive technology to create accessible classrooms and playgrounds leads to participation by all students in academics, school occupations, and extracurricular activities Families: • increased capacity to advocate for their child's needs • increased strategies to engage their child in family and community life activities • increased ability to support their child's performance in student learning-activities	published literature • solicit feedback from students, teachers, parents, and colleagues • review OT's self-assessment • review peer evaluation summary • review evaluations of in-services and/or conference programs provided by OT • review OT's professional development plan and accomplishments	documentation (e.g., journal club records, mentorship logs, annotated bibliography of professional reading) post-professional education (e.g., coursework transcripts or degree completion) record of specialty certifications evaluations of presentations and/or trainings membership in professional organizations program proposals, descriptions, and evaluation plans funded program

			grants
	• enhanced collaborative partnerships with school teams		publications such as articles in journals, newsletters, newspapers, and/or resources materials
			roster of students with disabilities who participate in extra-curricular activities

Implementing Performance Evaluation of School Occupational Therapists

Evaluation instruments and accompanying processes and materials should encourage professional growth, be flexible and fair to the persons being evaluated, and serve as the foundation to establish professional goals and identify professional development needs. The evaluation should serve as an annual measurement of performance in comparison to accepted standards. District superintendents, exceptional children directors, principals, and therapy team leaders are the most common evaluators of school-based occupational therapists. It is strongly recommended that, if the evaluator is not an occupational therapist, the evaluation process be conducted in collaboration with qualified, licensed occupational therapists serving as observers**.**

Suggested Evaluator Responsibilities**:**

- Have adequate knowledge of the profession and professional practice to effectively guide the evaluation process

- Know and understand the standards for school-based occupational therapists

- Supervise the evaluation process and ensure that all steps are conducted according to the approved process

- Identify the school-based occupational therapist's strengths and areas for improvement, and make recommendations for improving performance

- Ensure that the school-based occupational therapist evaluation contains accurate information and accurately reflects the school-based occupational therapist's performance

School occupational therapists should actively participate in the evaluation through self-assessment, reflection, and presentation of artifacts. A sample rubric suitable for self-assessment and the evaluator's summative evaluation of the occupational therapist is provided in Appendix B.

Figure 1 illustrates the components of the evaluation process.

Orientation

Early in school year

Professional Growth Plan

Self-Assessment

End of school year

Summary Evaluation Conference

Pre-Observation Discussion and Review of Annual Goals

Post-Observation Discussion

Observation (recommend this be conducted by a qualified OT)

Middle of school year
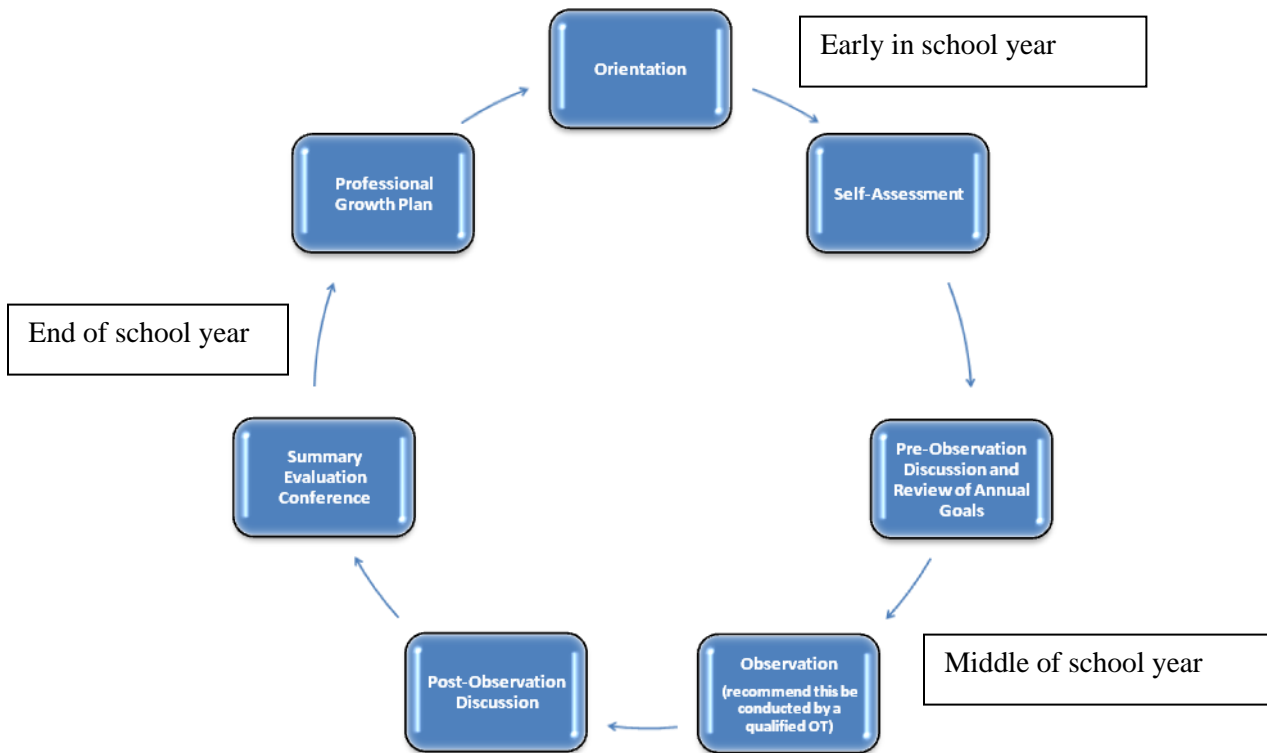
Figure 1. School Occupational Therapist Annual Evaluation Process

Summary

The U.S. Department of Education RttT grant program (ED, 2009b) and the IDEA Part B State Performance Plan (SPP) (ED, 2009a)have brought new focus on teaching effectiveness. Schools across the country are planning and implementing educational reform to support student achievement, high school graduation, and readiness for higher education or a career. Research correlates student achievement with high quality teaching(Aaronson, Barrow, & Sander, 2007; Allington& Johnston, 2000; Nye, Konstantopoulos, & Hedges, 2004; Rivkin, Hanushek, &Kain, 2005; Sanders & Horn, 1998; Sanders & Rivers, 1996; Stronge, Ward, Tucker, &Hindman, 2008; Wright, Horn, & Sanders, 1997). Using VAMs (Braun, 2005), school systems have begun

to develop performance appraisal tools that fairly and accurately evaluate an education professional's impact on student performance and learning.

Occupational therapists contribute to schools' efforts to educate diverse learners, and they support student participation and success in the least restrictive learning environment. They promote outcomes for students, staff members, school communities, and families through their potential roles as evaluator, service provider, collaborative consultant, manager, and leader/scholar.

This report offers guidance for a performance assessment that addresses the unique roles and responsibilities occupational therapists assume to support students and school systems (Refer to Appendix A). This assessment measures student, staff, school community, and family outcomes across occupational therapist roles and is linked to professional development plans for continued competency. This approach assists school district personnel who evaluate occupational therapists' contributions to students' education. Additionally, this document provides school-based occupational therapists with a framework to assess, maintain, and expand their skills and knowledge for effective practice, as well as advocate for their unique contribution to schools and student outcomes.

Appendix A

Assessing Occupational Therapist Performance in School-Based Roles

Occupational Therapist (OT) Role	Anticipated outcomes on behalf of the…	Strategies to evaluate OT may include…	Artifacts/Work Products may include…

Evaluator	Student:
	 • identify capabilities, strengths, and needs, patterns of performance and habits for academics, and participation in school occupations are identified
	 • identify any individualized learning goals, with recommended strategies to promote student access and participation in academics and school occupations
	
	 Staff:
	 • improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning
	 • improved knowledge of the student as a learner
	 • IEP team decisions are based on data about the student's ability to access and participate in the school community
	 • improved ability to differentiate instruction
	 • identified professional development needs
		• observe occupational therapist:
		   - conducting an evaluation
		   - interviewing staff or family member
		   - participating in an IEP meeting
		
		 • review assessment reports and IEP documentation
		
		 • solicit feedback from IEP team members
		
		 • review OT's self-assessment
		
		 • review peer evaluation summary
			• Occupational Therapy Evaluation Report
			
			 • team meeting minutes
			
			 • IEP documents
			
			 • peer review documentation
			
			 • observation reports
			
			 • staff and family surveys/feedback

	School Community: • identified assets of and barriers to school environment Families: • increased knowledge of their child as a student and learner • increased ability to support their child's performance in student learning activities • improved collaborative partnerships with school teams • increased capacity for parenting • improved access to information to assist them in planning family and community activities		
Service Provider	Student: • improved performance patterns, skills, and habits for academics • increased competence in student roles and functional life skills • increased participation in school occupations, curriculum, and learning activities in the classroom and across the campus • access to instruction/learning activities through assistive technology or environmental modification • increased self-advocacy Staff: • increased capacity for instruction of all students	• observe occupational therapist: - providing interventions in a variety of contexts with student and/or staff members - collaborating with staff or family member - participating in an IEP meeting • review progress monitoring data and documentation	• documentation of collaborative planning • IEP documents, plans of care, student work samples, service log data, progress notes • videotapes/photographs • feedback from students, teachers, parents, and

	• improved ability to differentiate instruction • improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning School Community: • increased use of environmental modification and/or adaptations, including assistive technology, leads to participation by all students in school occupations and academics and extra-curricular activities Families: • increased strategies to engage their child in family and community life activities • increased ability to support student learning • enhanced collaborative partnerships with school teams	• solicit feedback from students, teachers, parents, and colleagues • review OT's self-assessment • review peer evaluation summary	colleagues • records of team communication • mentorship documentation • peer review documentation • student assessments and outcome measures
Collaborative Consultant	Student: • increased participation in school occupations and activities • inclusion in positive and consistent learning environments • participation in the least restrictive environment throughout the school career	• observe occupational therapist: - collaborating, coaching, and problem-solving with team members	• classroom intervention protocols (positioning schedules, activity modifications, mealtime plans, etc.)

- improved access to services Staff: - consistent and appropriate use of adaptive equipment and assistive technology - improved ability to differentiate instruction - increased capacity to instruct students in the least restrictive environment - improved ability to differentiate instruction - improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning - enhanced knowledge and strategies for transition planning and implementation School Community: - allows for robust pre-referral process and subsequent creative strategies - increased school safety (e.g., ergonomics, bus safety, evacuation plans, and emergency response plans) - utilization of strategies to improve and promote the health and well-being of children and families by addressing issues such as obesity,	- participating in an IEP meeting - providing staff training or in-services - review OT service documentation - solicit feedback from students, teachers, parents, and colleagues - review evaluations of in-services and/ or trainings provided by OT - review OT's self-assessment - review peer evaluation summary	- progress notes - data collection - student work samples - videotapes/photogr aphs - feedback from students, teachers, parents, and colleagues - documentation of staff and/or family trainings - peer review documentation - examples of emergency response and safety plans

	• ergonomics, backpack awareness, bullying prevention and playground safety • utilization of environmental modifications, adaptations, and assistive technology to create accessible classrooms and playgrounds, leads to participation by all students in academics, school occupations, and extracurricular activities Families: • increased use of strategies to engage their child in family and community life activities • increased knowledge of school and community resources • enhanced knowledge and strategies for transition planning and implementation • increased capacity for obtaining, maintaining, repairing, and financing adaptive equipment, assistive technology, and environmental adaptations • increased ability to support their child's performance in student learning activities • enhanced collaborative partnerships with school teams		
Administrator/ Manager	Student: • access to evidence-based services	• observe occupational therapist:	agendas, outcomes and notes from committee meetings

Leader and Scholar Role Model Advocate Researcher and Evidence Translator	• participation in positive and consistent learning environments • participation in the least restrictive environment throughout the school career Staff: • increased access and capacity for evidence-based intervention and instruction • improved ability to differentiate instruction • improved understanding of how the student's medical, developmental, behavioral, and/or psychosocial status impacts school participation and learning School Community: • utilization of strategies to improve and promote the health and well-being of children and families by addressing issues such as obesity, ergonomics, backpack awareness, bullying prevention, and playground safety • school climate embraces diversity and participation by all students • utilization of environmental modifications, adaptations, and assistive technology to create accessible classrooms and playgrounds, leads to	- collaborating and consulting with school, district, and/or state personnel -problem-solving with team members - presenting and/or supporting district and/or state level professional development • review OT service documentation for compliance, reference to published literature • solicit feedback from students, teachers, parents, and colleagues • review OT's self-assessment • review peer evaluation summary • review evaluations of in-services and/or conference	feedback from students, parents, and/or colleagues in the form of e-mails, letters, and/or in-person communications documentation of self-assessment and professional development plan with updates continuing competence activity documentation (e.g., journal club minutes, mentorship logs, annotated bibliography of professional reading) post-professional education (e.g., coursework transcripts or degree completion) record of specialty certifications

	participation by all students in academics, school occupations, and extracurricular activities Families: • increased capacity to advocate for their child's needs • increased strategies to engage their child in family and community life activities • increased ability to support their child's performance in student learning-activities • enhanced collaborative partnerships with school teams	programs provided by OT • review OT's professional development plan and accomplishments	evaluations of presentations and/or trainings membership in professional organizations program proposals, descriptions, and evaluation plans funded program grants publications such as articles in journals, newsletters, newspapers, and/or resources materials roster of students with disabilities who participate in extra-curricular activities

Appendix B

Sample Rubric for Evaluating School-based Occupational Therapists

Standard 1: School-basedOccupational Therapists demonstrate leadership, advocacy, and collaborative and ethical practice.				
Developing	**Proficient**	**Accomplished**	**Distinguished**	**Not Demonstrated (Comment Required)**
Element a. Leadership. School-based Occupational Therapists support and promote high professional standards for themselves and for their colleagues. They are knowledgeable of and actively implement school, department, LEA, State, and professional goals and provide guidance to others in doing likewise.				
The Occupational Therapist: ❑ Ensures the safety of the occupational therapy service delivery process. ❑ Abides by LEA standards, *State OT Licensure Occupational Therapy Practice Act and Rules*, *Standards of Practice* (AOTA 2010), State Policies for Students with Disabilities, and *Guidelines for Providing Occupational Therapy Services in Public Schools* (2011). Demonstrates knowledge of: ❑ The scope of school-based Occupational Therapy practice, including philosophy, principles, theories, and practice concepts.	**. . . and** **The Occupational Therapist:** ❑ Articulates information about school-based Occupational Therapy practice and philosophy. ❑ Participates in developing and/or implementing the goals and priorities outlined in the district and department improvement plan.	**and…** **The Occupational Therapist:** ❑ Assumes leadership roles in the department. ❑ Plans and implements educational programs for department and school staff. ❑ Ensures the effectiveness of the occupational therapy service delivery process. ❑ Participates in hiring, mentoring, and/or supporting other Occupational Therapists, interns, or school-based Occupational Therapy students.	**and…** **The Occupational Therapist:** ❑ Assists other staff with understanding and applying regulations and policies that impact school-based Occupational Therapy. ❑ Provides input into the update of state and district policies and procedures designed to help Occupational Therapists operationalize district, State, and federal laws and regulations. ❑ Guides others to develop professional goals and skills.	

❑ Standards, regulations, and laws that impact school-based practice. ❑ Goals of the district, department, and school.				

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element b. Teamwork. School-based Occupational Therapists work collaboratively with school and LEA personnel to create professional learning communities that enhance student learning and create positive working environments. School-based occupational therapists provide input into the selection of professional development to build staff capacity and address the needs of students. They anticipate, problem-solve, and share the workload of the department.				
The Occupational Therapist: ❑ Establishes professional relationships with colleagues. ❑ Responds to school staff and parents' requests in a timely manner. ❑ Adheres to approved procedures for communicating with school staff, parents and students. ❑ Contributes to IEP meetings and processes, ❑ departmental and professional meetings.	**and…** **The Occupational Therapist:** Contributes to: ❑ Positive, productive, cooperative, and supportive work environment. ❑ Collaborates with educational personnel as essential partners in implementing student plans. ❑ Uses an occupation-based approach to collaborate with the team to achieve student outcomes. ❑ Educates school personnel, parents, and students about occupational therapy services. ❑ Maintains contact with community agencies and professionals.	**and…** **The Occupational Therapist:** Models positive interactions with: ❑ Students. ❑ Parents. ❑ Other occupational therapists. ❑ Educators. ❑ Members of the school community. ❑ Initiates new partnerships with community agencies and professionals. ❑ Shares ideas to help colleagues in times of need ❑ Participates in departmental committees or work groups.	**and…** **The Occupational Therapist:** ❑ Participates in school, community, state, and/or national committees or task forces. ❑ Leads IEP meetings to resolve complex situations to meet student needs. ❑ Provides a range of resources and services that address student, family, and community needs..	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element c. Vision. School-based Occupational Therapists embrace, communicate, and contribute to the strategic vision of the local district, department and assigned schools to help ensure that all students are equipped and prepared with life skills for the 21st century. School-based occupational therapists articulate core beliefs and values of the profession, department and local district. They establish standards of excellence to create a professional learning community.				
The Occupational Therapist: ❑ Is aware of the department/school/ LEA vision that all students are prepared for the 21st century ❑ Is aware of national professional vision, core values, and beliefs.	**and…** **The Occupational Therapist:** ❑ Participates in implementing the department/school/ LEA vision. Articulates a vision for: ❑ Students ❑ Occupational therapy department/program ❑ EC department ❑ School/District.	**and…** **The Occupational Therapist:** ❑ Monitors progress toward achieving the department/school/ LEA vision. Assists others in: ❑ Adhering to professional standards and values. ❑ Achieving professional goals. ❑ Adjusts programs in order to address local trends and issues.	**and…** **The Occupational Therapist:** ❑ Participates in developing the department/school/ LEA vision. ❑ Instills in others a desire to improve student outcomes. ❑ Articulates and develops goals for the department and LEA. ❑ Anticipates and prepares for current and future professional trends on state or national level.	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element d. Ethics. School-based Occupational Therapists exhibit high ethical standards. School-based Occupational Therapists demonstrate honesty, integrity, fair treatment, and respect for others. They uphold relevant codes of ethics and standards of professional practice.				
The Occupational Therapist: Abides by: ❑ AOTA Code of Ethics ❑ AOTA Standards of Practice ❑ The Code of Ethics for State Educators ❑ The Code of Professional Practice and	**. . . and** **The Occupational Therapist:** ❑ References applicable local, state, and professional standards to guide ethical decision making in school-based practice.	**. . . and** **The Occupational Therapist:** ❑ Encourages colleagues to uphold high ethical standards. ❑ Models respect for the dignity, privacy, and confidentiality of others within the work environment.	**. . . and** **The Occupational Therapist:** ❑ Models the profession's ethical principles and core values when assessing, clarifying, and resolving potential ethical and/or regulatory conflicts.	

Conduct for State Educators (See Appendix A). ❑ Accepts responsibility for actions and decisions that affect student outcomes. ❑ Respects the dignity, privacy, and confidentiality of students, families, and other professionals. ❑ Participates in ethics training and/or education.	❑ Reports unsafe or unethical situations to appropriate entity. ☐ Consults with supervisor or ethics committee to resolve ethical issues.		❑ Contributes to the development of departmental policies and protocols related to ethics. ❑ Provides professional development on ethics.	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element e. Advocacy. School-based Occupational Therapists advocate for positive changes in policies and practices affecting student learning and occupational therapy service delivery. They participate in the implementation of initiatives designed to improve educational and support services to promote positive student outcomes. They advocate for occupational therapy services to address student needs and support learning.				
The Occupational Therapist: ❑ Understands the policies and practices that impact student learning and occupational therapy service delivery. ❑ Understands how to implement initiatives to enhance student educational and support services.	**. . . and** **The Occupational Therapist:** ❑ Advocates for appropriate referrals on behalf of students and families. ❑ Advocates for adherence to policies and procedures for the benefit of students and families. ❑ Actively participates in the implementation of initiatives to enhance student educational and support services.	**. . . and** **The Occupational Therapist:** ❑ Customizes environment, resources, and supports for the department/school and/or LEA. ❑ Promotes an awareness of the roles and purpose of occupational services in schools. ❑ Advocates for positive changes in LEA policies and/or practices that support student learning. ❑ Works with others	**. . . and** **The Occupational Therapist:** ❑ Customizes environment, resources, and supports within the community and occupational therapy profession. ❑ Serves as occupational therapy representative on multi-disciplinary LEA task forces, committees, and work groups.	

		to improve safety and accessibility to facilities. ❑ Actively works with community and other agencies to secure the support needed to provide least restrictive environments for students.		

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element f. Supervision and Oversight. School-based Occupational Therapists value supervision that provides support, education, monitoring of service delivery, and creates a safe forum to reflect on professional practice to positively impact student learning outcomes.				
The Occupational Therapist: ❑ Understands the importance of the supervision process. ❑ Seeks feedback from supervisors and colleagues. ❑ Modifies behavior based on supervisory feedback.	**. . . and** **The Occupational Therapist:** ❑ Participates in the supervisory process to increase professional knowledge and skills. ❑ Supervises and provides feedback to assigned staff, fieldwork students, and volunteers.	**. . . and** **The Occupational Therapist:** ❑ Provides education and training of staff, fieldwork students, and volunteers. ❑ Positively impacts the work of colleagues by sharing best practice strategies.	**. . . and** **The Occupational Therapist:** ❑ Develops and oversees fieldwork student and/or mentoring program. ❑ Supervises/oversees occupational therapy-generated programs. ❑ Assists other staff in identifying professional goals.	

Examples of artifacts that may be used to demonstrate performance:
❑ Log of supervisory meetings and meetings
❑ Documentation of supervisory observations
❑ Intervention notes
❑ Intervention plans
❑ Classroom programming data sheets and monitoring logs
❑ Peer review documentation
❑ Mentorship documentation
❑ Mentoring fieldwork student documentation
❑ Mentoring agreement documentation
❑ Formal and informal mentoring
❑ Documentation of inservice provision
❑ Continuing competence log
❑ Documentation of referrals/consultations made

- ❑ Documentation of communications with parents/teachers/colleagues/community
- ❑ Media samples, newspaper articles, school newsletters
- ❑ Grant applications
- ❑ Documentation of AOTA, state OT association, or other national or state committee work
- ❑ Photos
- ❑ Membership in professional organizations
- ❑ Documentation of feedback from colleagues; peer evaluations
- ❑ Documentation of inservice provision
- ❑ Continuing competence record
- ❑ Department/school/LEA improvement planning documentation
- ❑ Documentation of service on department committees
- ❑ IEPs/IEP meeting minutes
- ❑ Log of attendance for IEP meetings
- ❑ Documentation of feedback from colleagues, students or parents
- ❑ Log of committee work, volunteer tasks outside of normal job duties
- ❑ Teacher and parent feedback
- ❑ Training and support resources created by the person being evaluated
- ❑ Documentation of in-service presentations
- ❑ Documents supporting completion of professional goals
- ❑ Documentation of service on committees
- ❑ File reviews
- ❑ Staff meeting minutes
- ❑ NBCOT certification
- ❑ AOTA specialty certification

Evaluator Comments: (Required for all "Not Demonstrated" ratings, recommended for all ratings.)

Comments of Person Being Evaluated: (Optional)

Standard 2: School-based Occupational Therapists promote a respectful environment for diverse populations.				
Developing	**Proficient**	**Accomplished**	**Distinguished**	**Not Demonstrated (Comment Required)**
Element a. Communication. School-based Occupational Therapists use language that is appropriate and easily understood by the listener, and they adapt their communication for their audiences. They are active listeners, respect cultural differences, and assist others in communicating effectively.				
The Occupational Therapist: ❑ Uses active ❑ listening strategies. Expresses self clearly and accurately: ❑ Orally	**. . . and** **The Occupational Therapist:** ❑ Adapts communication to the unique characteristics and backgrounds of the audience.	**. . . and** **The Occupational Therapist:** ❑ Actively engages others in work that supports students' unique learning and developmental needs.	**. . . and** **The Occupational Therapist:** ❑ Works at the state and national level to promote engagement of individuals from diverse backgrounds in the	

❑ In writing. ❑ Utilizes electronic communication appropriately and with regard to security.		❑ Facilitates effective communication between and among students, families, educators, and other professionals	profession. ❑ Communicates persuasively to a variety of audiences. ❑ Assists in development of policies and practices that improve effective communication regarding occupational services.	

Element b. Least Restrictive Environment. School-based Occupational Therapists help to ensure that every student receives services in the least restrictive environment. They continually monitor service delivery to reflect the least restrictive environment for the students they serve. They actively assist other school personnel to develop and implement appropriate contexts and strategies for students with differing needs.

	. . . and	. . . and	. . . and	
The Occupational Therapist: Articulates the: ❑ Range of environments in which students may be served ❑ Dynamic nature of occupation in the least restrictive environment.	**The Occupational Therapist:** ❑ Provides services in the least restrictive environments.	**The Occupational Therapist:** ❑ Encourages and supports team members to serve every student in the least restrictive environment.	**The Occupational Therapist:** ❑ Trains families and other professionals to understand the range of learning environments available for students. ❑ Expands and enhances knowledge /awareness of the full range of support least restrictive environments at the department, school, and district levels.	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element c. Embraces diversity. School-based Occupational Therapists recognize the influence of race, ethnicity, gender, religion, health, culture, ability, and other factors on development and personality. They adapt professional activities to reflect these differences among the students, families, and staff they serve. School-based Occupational Therapists create and encourage an environment that is inviting, respectful, supportive, inclusive, and flexible for every student.				
The Occupational Therapist: ❑ Acknowledges the influence of race, ethnicity, gender, religion, socio-economics, and culture on students' development and attitudes.	**. . . and** **The Occupational Therapist:** ❑ Respects and embraces diversity/perspectives of others. ❑ Understands own position on matters of diversity and reflects on and changes position as appropriate.	**. . . and** **The Occupational Therapist:** ❑ Models understanding and respect for cultural differences. ❑ Creates situations in which students may demonstrate understanding of and respect for diversity. ❑ Encourages others to understand and respect students' diversity.	**. . . and** **The Occupational Therapist:** ❑ Promotes a deep understanding of diversity through the integration of culturally sensitive materials. ❑ Participates in the development of department, school, and/or district policies to promote respect and understanding of diversity.	

Examples of artifacts that may be used to demonstrate performance:
- ❑ Documentation of file review
- ❑ Documentation of contact with community agencies
- ❑ Documentation of in-service presentations
- ❑ Documents supporting completion of professional goals
- ❑ Documentation of service on committees
- ❑ Professional development on cultural attitudes and awareness
- ❑ IEPs
- ❑ IEP service delivery documentation
- ❑ Staff and parent feedback
- ❑ Intervention plans
- ❑ Membership in professional organizations
- ❑ Formal and informal mentoring
- ❑ File reviews
- ❑ Staff meeting minutes
- ❑ NBCOT certification
- ❑ AOTA specialty certification
- ❑ Professional development record
- ❑ Documentation of student services
- ❑ Staff observations documentation
- ❑ Documentation of peer review

Evaluator Comments: (Required for all "Not Demonstrated" ratings, recommended for all ratings.)

Comments of Person Being Evaluated: (Optional)

Standard 3: School-based Occupational Therapists apply the skills and knowledge of their profession within educational settings.

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element a. Program Administration and Management. School-based Occupational Therapists effectively structure work tasks in accordance with local, state, and federal requirements and best practice guidelines. School-based occupational therapists assume professional responsibility for safe, effective, and timely delivery of occupational therapy (OT) services; and the oversight and/or improvement of occupational therapy systems and services.				
The Occupational Therapist: ❑ Prioritizes and schedules work tasks. ❑ Maintains current student files for use by authorized school personnel. ❑ Seeks information about best practice guidelines which impact program administration.	**. . . and** **The Occupational Therapist:** ❑ Manages inventory of therapeutic equipment and assessments. ❑ Contributes data for budget planning. ❑ Submits administrative reports as required.	**. . . and** **The Occupational Therapist:** Ensures that workloads are: ❑ Reasonable. ❑ Evenly distributed. ❑ Makes appropriate materials and assessments available for use. ❑ Collects and analyzes data to improve the occupational therapy program.	**. . . and** **The Occupational Therapist:** ❑ Shares effective work place processes and materials with other districts or states. ❑ Consistently collects and uses data to make decisions regarding administration and management of the occupational therapy program.	
Element b. Policies and Laws. School-based Occupational Therapists are knowledgeable and skillful regarding state and federal legislation, professional standards, best practice guidelines, and local policy.				
The Occupational Therapist: ❑ Abides by all state licensure board, AOTA, IDEA, DPI, and local policies, standards, and best practice guidelines (See Appendix A).	**. . . and** **The Occupational Therapist:** ❑ Ensures program compliance with state licensure board, AOTA, IDEA, SEA, and local policies, standards, and best practice guidelines.	**. . . and** **The Occupational Therapist:** ❑ Shares knowledge of current legislative and procedural issues that affect students and school-based practice. ❑	**. . . and** **The Occupational Therapist:** ❑ Participates on state or national task forces to develop best practice guidelines for school-based occupational therapy.	

				Participates in policy revision and/or development at local, state, or federal level.
			❑	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element c. Work behaviors. School-based Occupational Therapists are flexible, efficient, timely, reliable, and competent. They are engaged and responsive team members, as evidenced by adhering to deadlines, setting priorities, and setting appropriate limits. They are productive and complete assigned work with a positive attitude. They demonstrate safe, healthy, and ergonomically correct work practices.				
The Occupational Therapist: Demonstrates: ❑ Safe work practices. ❑ A positive professional approach to the work; ❑ Healthy and ergonomically correct work practices. ❑ Eagerness to learn.	**. . . and** **The Occupational Therapist:** ❑ Completes assigned work with a positive attitude. ❑ Is self-directed. ❑ Uses time and resources efficiently.	**. . . and** **The Occupational Therapist:** ❑ Demonstrates flexibility, adaptability and agility in approach. ❑ Promotes a positive attitude in colleagues	**. . . and** **The Occupational Therapist:** ❑ Is viewed by peers, colleagues, and leadership as being an example of excellence with respect to attitude, skills, and professionalism.	
Examples of artifacts that may be used to demonstrate performance:				
❑ Teacher of Excellence Award, Local awards or "Spotlights", emails/letters ❑ Documentation of peer, parent, and student feedback ❑ Caseload rosters ❑ Weekly schedules ❑ OCR and other required workplace training documentation ❑ Documentation of in-service provision ❑ Examples of forms/work processes created by Occupational Therapist ❑ Peer interview/input/emails reflecting the effectiveness of shared forms/processes. ❑ Professional development record ❑ Referral logs ❑ Work schedules ❑ Caseload rosters ❑ IEP documentation ❑ Intervention plans and notes ❑ Equipment inventory documentation ❑ Year-end reports ❑ Documentation of mentoring ❑ Emails, agendas of meetings/workshops, handouts ❑ Professional development documentation.				

Evaluator Comments: (Required for all "Not Demonstrated" ratings, recommended for all ratings
Comments of Person Being Evaluated: (Optional)

Standard 4: School-based Occupational Therapists facilitate student learning for optimal student performance and functional independence.				
Developing	**Proficient**	**Accomplished**	**Distinguished**	**Not Demonstrated (Comment Required)**
Element a. State Standard Course of Study. School-based Occupational Therapists ground their practice in school-related occupations and support student progress in the State Standard Course of Study (Common Core and Essential Standards).				
The Occupational Therapist: ❑ Articulates school-related occupations across grade levels. ❑ References the *curriculum* in occupational therapy practices and processes.	. . . and The Occupational Therapist: ❑ Uses the State Standard Course of Study to facilitate student progress in school-related occupations.	. . . and The Occupational Therapist: ❑ Guides others in using the *State Standard Course of Study* to facilitate student progress in school-related occupations.	. . . and The Occupational Therapist: ❑ Develops and presents workshops, in-services, or presentations on using the *State Standard Course of Study* to facilitate student progress in school-related occupations.	
Element b. Evidence-based Practice. School-based Occupational Therapists plan, deliver, and revise appropriate interventions based on evaluation data. They review current occupational therapy and other pertinent professional literature; use reliable, valid assessments; plan interventions based on research; build and work from their own clinical knowledge and expertise; and evaluate the effectiveness of their work based on analysis of evidence.				
The Occupational Therapist: ❑ Defines evidence-based practice. ❑ Locates evidence resources.	. . . and The Occupational Therapist: ❑ Provides evidence-based occupational therapy services. ❑ Uses professional literature, continuing education content, client evidence, and clinical experience to make decisions. ❑ Modifies interventions based on evidence.	. . . and The Occupational Therapist: ❑ Investigates and selects alternative research-based approaches to develop and revise plans of care. ❑ Participates in research activities.	. . . and The Occupational Therapist: ❑ Provides training regarding evidence-based practice. ❑ Contributes to the professional evidence base by presenting/publishing findings.	

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Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element c. Evaluation and Identification. School-based Occupational Therapists gather student performance data using contextual observation, standardized assessments, interviews, file reviews, student work samples, and other inquiry methods as deemed appropriate. They interpret evaluation data for the student's team to assist with decisions regarding special education eligibility, goals, placement, accommodations, supports, and services. School-based Occupational Therapists serve on student intervention teams as appropriate, consult on classroom interventions, and provide strategies to build teacher capacity for instructing a variety of learners.				
The Occupational Therapist: ❑ Completes and documents occupational therapy evaluation results. ❑ Adheres to data collection time lines, formats, and standards, required by local, state, and federal policies. ❑ Gathers data from teachers and parents. ❑ Actively pursues competence in administration of standardized assessments.	**. . . and** **The Occupational Therapist:** ❑ Evaluates student's ability to participate in life at school. ❑ Identifies and analyzes school-based occupations the student wants and needs to perform. ❑ Assesses environments in which student occupations occur. ❑ Shares and interprets relevant evaluation data with team members. ❑ Demonstrates competence in selection and use of standardized assessments.	**. . . and** **The Occupational Therapist:** ❑ Demonstrates keen, insightful evaluation and reporting skills. ❑ Mentors and educates team members on applicability of technical evaluation data to school context. ❑ Educates current and potential referral sources about the scope of occupational therapy services and the process of initiating occupational therapy evaluation. ❑ Promotes the acquisition and use of current assessment tools and processes.	**. . . and** **The Occupational Therapist:** ❑ Holds specialty certification in particular assessment types. ❑ Develops data collection tools and trains others in their use.	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element d. Planning and Intervention. School-based Occupational Therapists carefully consider evaluation data, IEP goals, ongoing progress monitoring data, and the least restrictive environment in planning services that meet the needs of students. They intervene in the context in which the student routinely performs the targeted skill or ability, in collaboration with instructional staff. Interventions are connected to student participation in learning the curriculum, demonstration of knowledge, life a career skills, socialization, and transition.				
The Occupational Therapist: ❑ Uses interventions that are appropriate for student's age, grade, cognitive level, interests, and aptitudes. ❑ Expands repertoire of intervention ideas/options. ❑ Delivers occupation-based, educationally relevant occupational therapy services. ❑ Adheres to IEP in planning and providing interventions.	**. . . and** **The Occupational Therapist:** ❑ Examines intervention effectiveness. ❑ Modifies the intervention plan based on changes in the student's needs, goals, and performance. ❑ Facilitates the transition or exit process in collaboration with IEP team. ❑ Adapts, accommodates, and modifies environment, including assistive technology and training instructional staff.	**. . . and** **The Occupational Therapist:** ❑ Demonstrates innovative and unique occupation-based intervention planning. ❑ Demonstrates consistent energy and enthusiasm for providing intervention. ❑ Leads collaborative, long-term, and/or project-based interventions at the classroom and school level. ❑ Describes/explains instances of therapeutic use of self.	**. . . and** **The Occupational Therapist:** ❑ Presents at state or national conferences on innovative interventions.	

Examples of artifacts that may be used to demonstrate performance:
☐ Collaborative IEP development documentation
☐ Peer, family, and/or student feedback
☐ Professional development records
☐ Student evaluation reports
☐ Referrals
☐ IEP documentation
☐ Peer review documentation
☐ Documentation of inservice provision
☐ Peer and family feedback
☐ Case studies
☐ Publications
☐ Student evaluation reports
☐ Documentation of continuing competence activities
☐ Article reviews
☐ Data collection records
☐ Intervention plans and notes
☐ Progress reports
☐ Professional development documentation
☐ Student evaluation reports
☐ Documentation of collaboration with instructors

Evaluator Comments: (Required for all "Not Demonstrated" ratings, recommended for all ratings.)

Comments of Person Being Evaluated: (Optional)

Standard 5: School-based Occupational Therapists use all available data to examine their effectiveness and to adapt and improve professional practice.

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element a. Professional Development. School-based Occupational Therapists continually participate in high quality professional development specific to school-based occupational therapy practice that reflects a global view of educational practices, includes 21st century skills and knowledge, and aligns with the State Board of Education priorities and initiatives. They use input from stakeholders, to continually assess, maintain, expand, and document their competence in school-based practice.				
The Occupational Therapist: ☐ Identifies strengths and needs drawing from multiple data sources. ☐ Adheres to the approved professional development plan.	. . . and The Occupational Therapist: ☐ Participates in relevant continuing competence activities to improve school-based practice. ☐ Completes formal self-assessment.	. . . and The Occupational Therapist: ☐ Presents at local, regional or state, professional conferences. ☐ Routinely shares new knowledge with others.	. . . and The Occupational Therapist: ☐ Earns a specialty certification relevant to school-based practice. ☐ Presents at state or national professional conferences.	

	❑ Participates in peer-review.		❑ Participates as an occupational therapy representative on state or national committees and organizations.	

Developing	Proficient	Accomplished	Distinguished	Not Demonstrated (Comment Required)
Element b. Outcomes. School-based Occupational Therapists systematically and critically evaluate the effectiveness of comprehensive occupational therapy services on student performance. They collect and interpret data from a variety of sources to assess student response to intervention and progress, plan future services, and adapt practice to best meet the needs of students, staff, and families.				
The Occupational Therapist: ❑ Monitors and documents student progress. ❑ Reports student progress to team members.	**. . . and** **The Occupational Therapist:** Evaluates effectiveness of occupational therapy services using: ❑ Multiple methods; and ❑ Multiple data sources. ❑ Selects outcome measures related to the student's ability to engage in occupations at school. ❑ Identifies and uses progress monitoring tools.	**. . . and** **The Occupational Therapist:** ❑ Leads the collection, interpretation, and reporting of student outcome data within multi-disciplinary teams. ❑ Synthesizes data on student progress and current research to design and inform future actions.	**. . . and** **The Occupational Therapist:** ❑ Creates innovative progress monitoring tools ❑ Publishes or presents an efficacy study or case study in an occupational therapy text or journal.	

Examples of artifacts that may be used to demonstrate performance:
❑ Intervention plans and notes
❑ Student work samples/data sheets
❑ Formal or informal publication
❑ Continuing competence activity log
❑ Progress reports
❑ IEP documents
❑ School-wide student performance data
❑ Professional development plans
❑ Documentation of formal and informal mentoring
❑ Professional portfolio
❑ Self-assessment
❑ Continuing competence activity log
❑ Peer review documentation
❑ Documentation of certifications
Evaluator Comments: (Required for all "Not Demonstrated" ratings, recommended for all ratings.)
Comments of Person Being Evaluated: (Optional)

Rubric Signature Page

_____   _____

Occupational Therapist Signature   Date

_____   _____

Principal/Evaluator Signature   Date

_____   _____

Principal/Evaluator Signature   Date
(Signature indicates question above regarding comments has been addressed)

Note: The occupational therapist's signature on this form represents neither acceptance nor approval of the report. It does, however, indicate that the occupational therapist has reviewed the report with the evaluator and may reply in writing. The signature of the principal or evaluator verifies that the report has been reviewed and that the proper process has been followed according to the State Board of Education Policy for the School-Based Occupational Therapist Evaluation Process.

School-Based Occupational Therapist Summary Rating Form

This form is to be jointly reviewed by the occupational therapist and evaluator during the Summary Evaluation Conference conducted at the end of the year.

Name:_____

School: _____ School Year:_____

Evaluator: _____District:_____

Date Completed:_____ Evaluator's Title:_____

Standard 1 School-based occupational therapists demonstrate leadership, advocacy, and collaborative and ethical practice.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. Leadership					
Element b. Teamwork					
Element c. Vision					
Element d. Ethics					
Element e. Advocacy					
Element f. Supervision and Oversight					
Overall Rating for Standard 1					

Comments:	**Evidence or documentation to support ratings:**
	❑ Communications/observations of mentoring/supervisory activities
	❑ Reports of formal and informal peer review
	❑ Documentation of professional development/continuing competence activities
	❑ Documentation of services provided (evaluations, IEP development, intervention plans, data sheets, contact notes, progress monitorin
	❑ Documentation of service on committees, work groups and special projects
Recommended actions for improvement:	❑ Communications, feedback and/or surveys from stakeholders (parents, students, community members, colleagues)
	❑ Minutes, attendance logs and agendas from meetings
	❑ Documentation of trainings, in-services and workshop presentations; and related materials (agendas, handouts, feedback)
	❑ Documentation of program review and planned/implemented development activities
	❑ Documentation of use of professional, student, program, and school wide data in making service/intervention decisions
Resources needed to complete these actions:	❑ Documentation of professional certifications/ memberships / specialty certifications
	❑ Documentation of self-improvement plan, continuing competence activities and/or grants, aligned with professional, district/school and department's vision/mission and goals/ improvement plans.

Standard 2: School-based occupational therapists promote a respectful environment for diverse populations.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. Communication					
Element b. Least Restrictive Environment					
Element c. Embraces diversity					
Overall Rating for Standard 2					

Comments: Recommended actions for improvement: Resources needed to complete these actions:	**Evidence or documentation to support rating** ❑ Communications/observations of mentoring/supervisory activi ❑ Reports of formal and informal peer review ❑ Documentation of professional development/continuing compe ❑ Documentation of services provided (evaluations, IEP development, intervention plans, data sheets, contact notes, progress monitoring, progress notes, service logs, etc.) ❑ Documentation of service on committees, work groups and special projects ❑ Communications, feedback and/or surveys from stakeholders (parents, students, community members, colleagues) ❑ Minutes, attendance logs and agendas from meetings ❑ Documentation of trainings, in-services and workshop presentations; and related materials (agendas, handouts, feedback) ❑ Documentation of program review and planned/implemented development activities ❑ Documentation of use of professional, student, program, and school wide data in making service/intervention decisions ❑ Documentation of professional certifications/memberships/ specialty certifications ❑ Documentation of professional development/continuing competence activities on diversity, cultural attitudes and awareness ❑ Service on committees, work groups and special projects to support diversity, cultural awareness and range of student environments ❑ Student profiles documented in written reports ❑ Documentation of collaboration/cooperation with ESL teacher ❑ Documentation of activity planning/implementation to ❑ incorporate cultural awareness

Standard 3: School-based occupational therapists apply the skills and knowledge of their profession within educational settings..	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. Program Administration and Management					
Element b. Policies and Laws					
Element c. Work Behaviors.					
Overall Rating for Standard 3					

Comments:	**Evidence or documentation to support rating:**
	❑ Communications/observations of mentoring/supervisory activities
	❑ Reports of formal and informal peer review
	❑ Documentation of professional development/continuing competence activities
	❑ Documentation of services provided (evaluations, IEP development, intervention plans, data sheets, contact notes, progress monitoring, progress notes, service logs, etc.)
Recommended actions for improvement:	❑ Documentation of service on committees, work groups and special projects
	❑ Communications, feedback and/or surveys from stakeholders (parents, students, community members, colleagues)
	❑ Minutes, attendance logs and agendas from meetings
	❑ Documentation of trainings, in-services and workshop presentations; and related materials (agendas, handouts, feedback)
Resources needed to complete these actions:	❑ Documentation of program review and planned/implemented development activities
	❑ Documentation of use of professional, student, program, and school wide data in making service/intervention decisions
	❑ Documentation of professional certifications/ memberships/ specialty certifications
	❑ Documentation of data collection, interventions and outcomes to guide student/program services
	❑ Service on committees and work groups for program and policy changes
	❑ Documentation of program administration and management activities (referral logs, caseloads, student files, calendars, schedules, year-end reports, equipment inventory)
	❑ Use of local, state and national standards and best practice guidelines in student services and documentation
	❑ Documentation of special awards, recognitions, letters

Standard 4: School-based occupational therapists apply the skills and knowledge of their profession within educational settings.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. State Standard Course of Study					
Element b. Evidence-based Practice.					
Element c. Evaluation and Identification					
Element d. Planning and Intervention					
Overall Rating for Standard 4					

Comments:	**Evidence or documentation to support rating:**
Recommended actions for improvement:	☐ Communications/observations of mentoring/supervisory activities ☐ Reports of formal and informal peer review ☐ Documentation of professional development/continuing competence activities ☐ Documentation of services provided (evaluations, IEP development, intervention plans, data sheets, contact notes, progress monitoring, progress notes, service logs, etc.) ☐ Documentation of service on committees, work groups and special projects ☐ Communications, feedback and/or surveys from stakeholders (parents, students, community members, colleagues) ☐ Minutes, attendance logs and agendas from meetings
Resources needed to complete these actions:	☐ Documentation of trainings, in-services and workshop presentations; and related materials (agendas, handouts, feedback) ❑ Documentation of program review and planned/implemented development activities ❑ Documentation of use of professional, student, program, and school wide data in making service/intervention decisions ❑ Documentation of professional certifications/memberships/ specialty certifications ❑ Documentation of professional development plan, including progress towards goals and self-assessment ❑ Documentation of professional development/competence activities in use of occupations, assessment tools and educationally relevant services ❑ Documentation of research activities, publications, article reviews.

Standard 5: School-based occupational therapists use all available data to examine their effectiveness and to adapt and improve professional practice.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. Professional Development.					
Element b. Outcomes					
Overall Rating for Standard 5					

Comments:	**Evidence or documentation to support rating**:
	☐ Communications/observations of mentoring/supervisory activities
	☐ Reports of formal and informal peer review
	☐ Documentation of professional development/continuing competence activities
	☐ Documentation of services provided (evaluations, IEP development, intervention plans, data sheets, contact notes, progress monitoring, progress notes, service logs, etc.)
Recommended actions for improvement:	☐ Documentation of service on committees, work groups and special projects
	☐ Communications, feedback and/or surveys from stakeholders (parents, students, community members, colleagues)
	❑ Minutes, attendance logs and agendas from meetings
Resources needed to complete these actions:	❑ Documentation of trainings, in-services and workshop presentations; and related materials (agendas, handouts, feedback)
	❑ Documentation of program review and planned/implemented development activities
	❑ Documentation of use of professional, student, program, and school wide data in making service/intervention decisions
	❑ Documentation of professional certifications/memberships/specialty certifications
	❑ Documentation of leadership activities in data collection, staff training and/or tool development

_____   _____
School-Based Occupational Therapist Signature   Date

_____   _____
Principal/Evaluator Signature   Date

Note: The school-based occupational therapist's signature on this form neither represents acceptance nor approval of the report. It does, however, indicate that the occupational therapist has reviewed the report with the evaluator and may reply in writing. The signature of the principal or evaluator verifies that the report has been reviewed and that the proper process has been followed according to the State Board of Education Policy for the Occupational Therapists Evaluation Process.

Summary Rating Sheet

This form summarized ratings from the rubric or observation form and requires the rater to provide a description of areas needing improvement and comments about performance. It should be completed as part of the Summary Evaluation discussions conducted near the end of the year. It should be used to summarize self-assessment and evaluator ratings.

Name:_____ Date: _____

School: _____ District: _____

Evaluator: _____ Title: _____

	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Standard 1: School-based occupational therapists demonstrate leadership, advocacy, and collaborative and ethical practice.					
Element a. Leadership					
Element b. Teamwork					
Element c. Vision					
Element d. Ethics					
Element e. Advocacy					
Element f. Supervision and Oversight					
Overall Rating for Standard 1					
Standard 2: School-based occupational therapists promote a respectful environment for diverse populations.					
Element a. Communication					
Element b. Least Restrictive Environment					
Element c. Embraces Diversity					
Overall Rating for Standard 2					
Standard 3: School-based occupational therapists apply the skills and knowledge of their profession within educational settings.					
Element a. Program Administration and Management					
Element b. Policies and Laws					
Element c. Work Behaviors					
Overall Rating for Standard 3					

Standard 4: School-based occupational therapists facilitate student learning for optimal student performance and functional independence.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. State Standard Course of Study					
Element b. Evidence-based Practice					
Element c. Evaluation and Identification					
Element d. Planning and Intervention					
Overall Rating for Standard 4					
Standard 5: School-based occupational therapists use all available data to examine their effectiveness and to adapt and improve professional practice.	Not Demonstrated	Developing	Proficient	Accomplished	Distinguished
Element a. Professional Development					
Element b. Outcomes					
Overall Rating for Standard 5					

Professional Development Plan

School Year:_____
Name: _____Position/Subject Area:_____
School:_____

NC School-Based Occupational Therapy Standards

1. Demonstrate leadership, advocacy, and collaborative and ethical practice. 2. Promote a respectful environment for diverse populations. 3. Apply the skills and knowledge of their profession within educational settings. 4. Facilitate student learning for optimal student performance and functional independence. 5. Use all available data to examine their effectiveness and to adapt and improve professional practice.	Standard(s) to be addressed: Elements to be addressed:

School-Based Occupational Therapist's Strategies

Goals for Elements	Activities/Actions	Expected Outcomes and Evidence of Completion	Resources Needed	Timeline
Goal 1:				
Goal 2:				
Goal 3:				

School-Based Occupational Therapist's Signature: _____
Date: _____

Administrator's Signature: _____
Date: _____

Professional Development Plan – Mid-Year Review

To be completed by (date) _____

Occupational Therapist_____   Academic Year:_____

Evidence of Progress Toward Specific Standards or Elements to be Addressed/Enhanced

Narrative

School-Based Occupational Therapist's Comments:	Administrator's Comments:
School-Based Occupational Therapist's Signature: Date:	Administrator's Signature: Date:

Professional Development Plan – End-of-Year Review

To be completed by (date) _____

School-Based Occupational Therapist _____
Academic Year:_____

Evidence of Progress Toward Specific Standards or Elements to be addressed/Enhanced

Goal 1 was successfully completed.	Yes □	No □
Goal 2 was successfully completed.	Yes □	No □
Goal 3 was successfully completed.	Yes □	No

Narrative

School-Based Occupational Therapist's Comments:	Administrator's Comments:
School-Based Occupational Therapist's Signature: Date:	Administrator's Signature: Date:

Record of School-Based Occupational Therapist's Evaluation Activities

Name: _____ID# _____
School: _____SchoolYear:_____
Position/Assignment: _____
Evaluator: _____Title: _____

School-Based Occupational Therapist Background: (Briefly describe the school-based occupational therapist's educational background, years of experience, assignment, and any other factors that may impact the evaluation)

The State School-Based Occupational Therapist Evaluation is based, in part, on informal and formal observations and conferences conducted on the following dates:

Activity	Date	School-based Occupational Therapist Signature	Evaluator Signature
Orientation			
Pre-Observation Conference			
Observation			
Post-Observation Conference			
Summary Evaluation Conference			
Professional Growth Plan Completed			

From *North Carolina School-Based Occupational Therapist Evaluation Process: Users' Guide* (pp. 63–92).

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