



DIVISION FOR SPECIAL EDUCATION SERVICES AND SUPPORTS

Characteristics of Educationally Relevant Therapy and Medical/Clinical Therapy

IDEA requires the provision of related services, including occupational and physical therapy (OT/PT) in the school setting. OT and PT are related services provided to assist a student in accessing his/her educational program. The student must have a recognized disability or disorder which adversely affects his/her educational performance which includes developmental, academic and functional skills. A student may receive OT or PT as a related service under special education as directed by an Individualized Education Program (IEP) or as part of a Section 504 Plan, if an educational need is identified. Within the school environment, all OT and PT services are provided as a support to enhance the student's ability to access his/her educational program. It is important to realize that if a student has an identifiable therapy need which does not prevent the student from accessing or progressing in his/her educational program, then school-based therapy is not needed.

The priorities of educationally based and clinically based therapies are different. The therapists are equally trained and licensed, but the approach and goals for each setting is different. There are some students who have a medical need for therapy but do not have an educational need. Related services are provided only as needed to support the student in meeting his/her educational goals; therefore, the level of OT and/or PT support is dependent upon the student's educational goals. It is important to understand these differences and why the goals are specific for outcomes related to the setting for which the student/patient is present. The chart that follows focuses on these differences.



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The chart below provides some parameters for distinguishing between educationally-based and medically-based therapy.

	Educationally Relevant Therapy	Medical / Clinic Based Therapy
What Are The Laws/Rules Regarding the Provision of Service?	<ul style="list-style-type: none"> • Federal and state laws mandate the provision of related services, including educationally relevant occupational therapy (OT) and physical therapy (PT) • Under the Individuals with Disabilities Act (IDEA), occupational and physical therapy are provided “as may be required to assist a child with a disability to benefit from special education, ...”34 CFR 300.24 • Section 504 of the Rehabilitation Act of 1973 provides for accommodations and services to provide an appropriate education to students with disabilities who do not require special education. OT and PT may be included as related services in a 504 Plan, as needed, for a student to access the educational program, curriculum and/or school environment • Under IDEA, related services are provided as part of a free appropriate public education (FAPE) • Under 504, school systems are required to provide related services such as OT and PT, but special education funds cannot be used 	<ul style="list-style-type: none"> • Therapy services are not legally mandated. It is the parent’s choice to pursue or be involved in therapies • A physician referral for therapy is made based on a specific diagnosis or delay. The referral does not usually indicate the type of treatment, methodology, frequency and duration in pediatric referrals. This is written in the plan of care by the therapist and requires the physician’s signature to implement • Private or public funds are used to pay for services. These funds include insurance, parent pay, Medicaid, other government assistance, etc. • The availability of funding may determine if services can be provided and the amount of services
How Does It Start?	<ul style="list-style-type: none"> • The student must have an Individualized Educational Program (IEP) or a 504 plan • A parent, teacher or other team member requests that the team consider an OT and/or PT screening/evaluation. Consent may be required • The IEP team considers the student’s needs, access to the curriculum and environment, the current educational goals and objectives, and progress as evidenced by data collection. The team considers if additional accommodations or modifications will meet the identified need. If the team determines that additional support is required for a student to access the curriculum and benefit from special education, a referral is made for an OT and/or PT screening/evaluation • The 504 team must also consider OT and PT 	<ul style="list-style-type: none"> • A parent or guardian takes the child to a physician for a medical exam • The physician writes a prescription to refer for therapy evaluation and/or services • Services are provided as directed by the receiving therapist

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Who Decides? Need: Scope:	<ul style="list-style-type: none"> OT's and PT's use standardized testing but also consider a student's functional abilities in his/her educational environment The IEP or 504 team (which includes the parents and student) reviews the testing and data provided by the certified/licensed OT or PT and their recommendations. Included in the data are observations, parent interviews, doctor's prescription and teacher feedback The team as a whole makes decisions about what is educationally relevant OT and PT testing must be related to the educational need The IEP or 504 team considers the professional judgment of the OT and PT to determine the amount of service needed for the student to make progress on his/her educational plan A doctor's order/prescription is considered in the decision of the IEP or 504 team but does not determine therapy services 	<ul style="list-style-type: none"> The Rehab team determines the need and consists of the physician, therapist (s), family and child. The family is included in determining the goals Doctor's orders, insurance and the hospital/rehabilitation staff determine or influence the frequency, location and duration of services
What Is The Focus?	<ul style="list-style-type: none"> Therapy focuses on improving the student's ability to access his/her educational program and the school environment Therapy addresses making adaptations and improving functional skills needed to achieve the IEP goals and objectives 	<ul style="list-style-type: none"> Therapy is related to medical conditions, symptoms and/or disabilities and may focus on the quality of performance along with function Therapy addresses goals that are discipline or diagnosis specific as opposed to educationally related
Delivery Model? How: Where:	<ul style="list-style-type: none"> The Service Delivery Model is the method by which therapists deliver services to the students and is based directly on what each individual student requires Services for or on behalf of a student may be delivered through a combination of direct intervention, group intervention, consultation, monitoring, adaptation of materials, staff/ parent training, collaboration with staff and/or program development depending on the needs of the student. IDEA does not require IEP team to document delivery models, only type of service (eg. OT, PT.) Services may be provided as inclusion, pull-out, and community based, consultative, collaborative, or group/individual The setting for the therapy may be different for each student. Based on the goals and objectives identified in the IEP, the educational setting may include the school campus and community locations The school campus includes, but is not limited to the classroom, cafeteria, gymnasium, playground, restrooms hallways, and bus 	<ul style="list-style-type: none"> Service is typically provided in a direct one-on-one setting with some consultation with the patient/family Typical settings for the delivery of services are a clinic, hospital or in the home

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What are the Goals and Objectives?	<ul style="list-style-type: none"> • Educational in nature and in line with the individual student's needs to benefit from the school based program • Determined by the IEP team with therapist input • Related to skills needed to make progress toward the GPS standards and access the educational environment • Support educational needs across the curriculum and educational programs 	<ul style="list-style-type: none"> • Rehabilitative in nature • Written by the therapist in collaboration with the family and patient (with the physicians approval) • The goals and objectives are developed into a Plan of Care and approved by the physician • Treatment goals are geared to a diagnosis and can address functional limitations • Goals address underlying medical conditions and impairments • Goals are directed toward treatment of acute and chronic conditions
How are Services Discontinued?	<ul style="list-style-type: none"> • The IEP or 504 team (which includes the parent) must meet and discuss whether the educational progress of the student in the areas of academic, developmental and functional skills need continued therapy support. Services are discontinued when: <ul style="list-style-type: none"> ✓ there are no longer any goals, accommodations or staff/student training that require the intervention of the therapist ✓ the expertise of the OT or PT is no longer a necessary component of the student's educational program in order for the student to continue achieving identified academic, developmental and functional outcomes of the IEP • If discontinued, therapy supports may need to be considered at a later time as determined by the new goals of the IEP and a review of the data 	<ul style="list-style-type: none"> • Patient is discharged when the patient meets goals, progresses plateaus or when insurance/ funds are no longer available