



Ontario Society of  
Occupational Therapists

# Occupational Therapy in the Ontario School System

## Effective Practices that Fit with the Special Needs Strategy

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## Introduction and Background

In September 2014, the Ontario government announced the Special Needs Strategy. The ministries of Children and Youth Services, Health and Long-Term Care, Education, and Community and Social Services are working with local communities to develop local implementation plans for an integrated approach to the delivery of child and youth rehabilitation services (speech-language therapy, occupational therapy, and physiotherapy).

This paper provides a summary of current evidence regarding school-based occupational therapy. This evidence can be used to inform the development and implementation of evidence-informed and contextually relevant occupational therapy services in Ontario schools. The principles and approaches that are described can also be useful to the ministries of Children and Youth Services, Health and Long-Term Care, Education, and Community and Social Services that are working with local proposal development tables to develop implementation plans for an integrated approach to the delivery of child and youth rehabilitation services (speech-language therapy, occupational therapy, and physiotherapy) in their communities.

Under Ontario's Special Needs Strategy (SNS), service delivery areas will provide rehabilitation services for children and youth from birth to the end of school. Specific expectations for the development of local proposals for the delivery of integrated rehabilitation services have been outlined by the ministries. The SNS and, in particular the mandate for local communities to develop integrated delivery of rehabilitation services, provides a unique opportunity for occupational therapists to influence the development of occupational therapy services for children and youth in the province of Ontario. One of the requirements for local proposals is that the service model be '...of high quality, based on evidence-informed practices and the expertise of regulated health professionals' (Ontario Ministry of Children and Youth Services, Ontario Ministry of Community and Social Services, Ontario Ministry of Education & Ontario Ministry of Health and Long-Term Care, 2014, p. 11). This paper seeks to inform occupational therapists and the SNS local proposal development tables to assist them in addressing this requirement.

## Occupational Therapy in Ontario Schools

Occupational therapists have been providing services to children with special needs in the school setting for several decades. The Ontario Society of Occupational Therapy (OSOT) has supported its members who work in schools through a "School-based Occupational Therapists" Team. This Team has provided resources to occupational therapists (OSOT, 1995) and contributed to ongoing professional development through conferences and workshops.

Occupational therapists support children with special needs in the school environment to participate in their occupations which include: productive (academic, extracurricular); self-care tasks (e.g., dressing, toileting); and leisure activities (e.g., physical education, playground) (Hinder & Ashburner,

2010; Swinth, Spencer & Jackson, 2007). Occupational therapists work in collaboration with members of the education team, with students and their families, to enable achievement of meaningful participation within the educational context (Swinth et al., 2007). The unique body of knowledge that occupational therapists contribute to schools has evolved over time in response to evidence, legislation and changes within the school environment (Laverdure, 2014).

## Current evidence about school-based occupational therapy

The literature about school-based occupational therapy comes from around the world, and describes principles and approaches for best practice. An historical review of this literature demonstrates that occupational therapy practice in schools is shifting from a medical model to an occupation-centred, educationally-relevant approach that supports all students to perform everyday school occupations. (AOTA, 2011; Carlsson, Hocking & Wright-St. Clair, 2007; Roger, 2010). The focus for occupational therapists on school occupations fits with the trends in the education system towards outcomes of inclusion and participation. (Ontario Ministry of Education, 2007; 2013). An essential component or approach of effective service delivery is collaboration among occupational therapists, parents and educators.

## Collaborative practice in schools

School-based collaboration is described as “...an interactive team process that focuses student, family, education and related services partners on enhancing the academic achievement and functional performance of all students in school” (Hanft & Shepherd, 2008, p. 3). Collaborative practice supports inclusion as students are the central focus of service provision (Hinder & Ashburner, 2010). Research has demonstrated the benefits of collaborative practice within schools in terms of improved student outcomes in goal achievement and skill development in areas of handwriting, computer use and organization (Kennedy & Stewart, 2011; Sayers, 2008; Shasby & Schneck, 2011).

Collaborative practice in schools is described as a continuum services: Hanft & Shepherd (2008) identify three main types of services on this continuum - **direct or ‘hands-on’ services** embedded in the context of school activities and routines; **collaborative consultation for team support**; and **system supports**. The literature about the different types of services provided by occupational therapists within this continuum provides current evidence to guide best practice.

### 1. Direct service to students with special needs:

Direct services provided by occupational therapists in the school setting are explicitly related to supporting student engagement with curriculum content in the educational setting. This principle is a natural fit for occupational therapists with an occupation-centred approach to practice which focuses on the main occupations that students are expected to participate in, such as classroom work, physical education, lunch, playground and extracurricular tasks and activities. In contrast to the a traditional ‘pull out’ model of direct service, there is mounting evidence that the best place to

provide direct occupational therapy service is in the natural context of the school environment, including the classroom (Benson, 2013; Missiuna et al., 2012a;b).

## **2. Collaborative consultation for team support:**

Collaborative consultation for team support is an approach that involves an ongoing relationship or partnership among teachers, families and occupational therapists (everyone ‘around the child’) to support students with special needs (Missiuna et al., 2012a). Providing collaborative consultation services in the classroom enables occupational therapists to embrace principles of Universal Design for Learning (UDL) and embed strategies for educators to make curriculum, instruction, and the learning environment accessible and useable for all students with diverse learning needs (Klinger, Campbell & Knight, 2009; Post & Rainville, 2011).

Using principles of Universal Design for Learning, occupational therapists consult with educators about strategies to modify/adapt the environment and activities to promote skill development and access to learning for all students. For example, an occupational therapist can work collaboratively with a classroom teacher to modify the environment to reduce distractions; improve access to program materials; promote self-regulation activities; and occupational therapists can support educational teams in modifying the demands and/or time needed to complete school activities (Missiuna et al., 2015a; Post & Rainville, 2011; Reid et al., 2007).

## **3. System supports:**

In addition to direct service and collaborative consultation with students and educational teams, occupational therapists are also providing consultation, advocacy and education at the system level. Some examples of system level supports described in the literature include education/training for school staff and parents, knowledge translation activities and information to school boards and committees, and participation in meetings and task forces to develop new programs (Hanft & Shepherd, 2008; Missiuna et al., 2012).

Critical appraisal of the collaborative approach found that it was as effective as a traditional pull-out approach or small groups, but that there was greater educator satisfaction with services and increased implementation of therapists’ suggestions (Sayers, 2008). In a critical review of collaborative consultation, Villeneuve (2009) noted that research is still limited on the topic, but there are some encouraging results from studies in which occupational therapists worked in a collaborative partnership with educators, such as achievement of individualized goals for students, and stakeholder satisfaction with services.

## **Promising practice models**

Using current evidence to support the application of principles of collaborative practices in schools, occupational therapists are implementing models of practice that incorporate this evidence. Regehr (2013) describes a *School Wellness Team* approach in Saskatchewan, which provides occupational

therapy services in primary classrooms to address students' health and environmental challenges that influence their participation and access to learning.

In Ontario, the *Partnering for Change (P4C)* project implemented a service model that supports capacity building of educators and parents by fostering active collaboration between occupational therapists and educators, with coaching of educators taking place in the school context (Missiuna et al., 2012a). Occupational therapists identify strategies that enable children to be successful and share them with parents to help support children at home. Occupational therapists provide services in a tiered, response-to-intervention approach, which includes universal design for learning for whole classrooms, differentiated instruction, and individualized accommodations and strategies for students with more complex needs. Results of a demonstration project showed that the P4C model provides equal access to services, eliminates wait lists, and serves large numbers of children with a diverse array of special needs (Missiuna et al., 2012b). A current study funded by Ontario Ministries of Health and Long Term Care and Education is evaluating the P4C model in 40 schools within three different school boards. Preliminary results indicate this new model is relevant for children who have significant daily motor, self-care, and academic challenges, and that successful outcomes are possible when educators and rehabilitation professionals work collaboratively to support the participation of children with special needs (Missiuna et al., 2015b).

Collaborative practice has been part of the service delivery model for occupational therapists in several school boards in Ontario - Toronto District School Board, York Region Catholic School Board, and York Region District School Board. Other agencies that are implementing a collaborative occupational therapy service approach in Ontario schools include the John McGivney Children's Centre in Windsor, Niagara Public School Board, and the Waterloo-Wellington Community Care Access Centre. This demonstrates that the principles of collaborative practice can be adopted by diverse organizations that are providing school-based services.

## Conclusion and Recommendations

This paper has described current evidence about the evolving nature of school-based occupational therapy practice. **The evidence supports implementation of service delivery models for occupational therapy in school settings using collaborative practices that are educationally-relevant, contextually-based and focused on outcomes of participation and inclusion that support student achievement.** These principles and approaches fit with the expectations of the Ontario Special Needs Strategy for integrated rehabilitation services. It is the recommendation of The Ontario Society of Occupational Therapists, (and its School-Based OT team), that evidence-based principles and approaches such as collaborative practice for school-based occupational therapy services that meet the needs of all children and youth with special needs be adopted in the development of local proposals for integrated rehabilitation services.

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