**Physical Therapy, Occupational Therapy, Speech-Language Therapy Services**

**Services at School May Look Different Than Those Provided in a Clinic**

Physical therapy (PT), Occupational Therapy (OT), and Speech-Language Pathology (SLP) are three of the related services listed in the **Individuals with Disabilities Education Act, IDEA** (300.34.) These services are provided to support students ages 3-21, who have disabilities that interfere with their educational performance and their ability to participate and benefit from their school experience.

When a student’s Individualized Education Program (IEP) Team identifies one of these services as a needed resource, a professional from the identified area (PT, OT and/or SLP) will be included as a member of the IEP team. The IEP team, that includes the parent, will determine what services are needed, what that will look like, and where those services will be provided.

Because Physical Therapy, Occupational Therapy and Speech-Language Pathology services may be provided in a variety of places (hospitals, homes, clinics, schools, etc.) there are usually questions about the role these specialists (OT, PT, SLP) play in the school setting. This document was developed to help families, teachers, and others understand how these services may be provided in the school setting as part of a student’s Individualized Education Program (IEP) and to clarify some of the differences between school-based and clinic-based services.

**How are therapy services similar in a clinic and at school?**

In Iowa, Physical Therapists, Occupational Therapists, and Speech-Language Pathologists, must adhere to all state licensure laws, regulations, and professional standards regardless of where they are providing services.

Therapists, whether in a clinic or a school, work collaboratively with other team members, including families, medical providers, and others in setting goals, planning services and supports, and monitoring goal progress.

Therapists provide information and support to the patient/student, family and other team members about strategies that can be used at home and in other places to promote growth and well-being.

**How do services compare between school and clinic?**

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|  | **School-based** | **Clinic-based** |
| **What is the focus of the service?** | Help the student achieve goals in his/her IEP  Promote access to learning and other school activities  Support access to the school environment  Plan and prepare for transition from high school to adult life | Assist the patient in achieving goals that improve performance at home or in the community  Address medical needs, including those related to the disability and functional limitations  Improve access to the home and community environment |
| **Who is eligible for the service?** | Any student eligible for an IEP who requires the service to benefit from his/her education program considering:   * Educational progress * Instructional needs * Access to school | A patient who needs the services of PT, OT, or SLP to address limitations from a documented medical condition  A patient referred by a physician  A patient whose parent reports has functional needs |
| **Who is the referral source?** | Parent/guardian, or educator can request an evaluation to determine need for the service.  Referral sources may include childcare providers, Pre-K programs, DHS, physicians, clinics, or hospitals | Health care provider or the family  Physician referral may be required for insurance purposes |
| **Who identifies Service Needs?** | IEP Team (which includes the parent) with therapist recommendations  IEP Team defines goals and services needed to meet goals; physician input and outside evaluation information is considered by the team, but does not override decision of the IEP Team | Therapist in collaboration with the patient and family (and physician and/or outside evaluator, if applicable) develop a plan of care based on assessment results |
| **Who pays for services?** | Services provided at no cost to the family  School may receive reimbursement through Medicaid if appropriate and with parent permission. | Services paid through insurance, family, or other means. |
| **Where are services provided?** | At school, as identified in the student’s IEP (Classroom, hallway, stairs, lunchroom, playground, bathroom, bus, worksite, community, etc.)  Services are provided in the least restrictive environment. | Clinic, hospital, home, community, and other settings |
| **How are services delivered?** | Services are integrated into the student’s school day  When needed, services may be provided individually or in small groups  Consultation and collaboration occurs with school staff and parents/guardians | Services may be provided directly to the patient or through consultation with the patient/family.  Services typically provided individually, but may occur in groups. |
| **How are services documented and progress monitored?** | Services are provided and documented consistent with federal and state education requirements  Goal progress is monitored and reported to students and families as scheduled in the IEP  Additional documentation as required by Medicaid if reimbursement is involved | Services are documented in the patient’s medical records  As required by insurance to justify medical necessity and skilled care  As required by the facility’s accreditation standards and guidelines |
| **Who determines when services end?** | Exit from services may occur when goals have been met; the student is no longer eligible for special education; other school personnel can implement the needed supports; the student no longer benefits from the services or can function in the school setting without therapeutic services; the parent/guardian requests that services be ended. | Discharge may occur when goals have been met, progress is limited, or funding is not available through insurance or other sources. |

School-based and clinic-based services can support each other. It is common for therapists who work in schools and hospitals or clinics to work together to develop complementary plans for the students they serve.

If you have questions about therapy services, talk to the teachers and others on the IEP Team who work with your student.

**For more information, contact your local school district, Area Education Agency, or the Iowa Family & Educator Partnership.**

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Resources used in the creation of this document:

*Physical Therapy in School Settings,* American Physical Therapy Association (APTA) Updated 10/14/16

*Physical Therapy for Educational Benefit,* Section on Pediatrics, American Physical Therapy Association (APTA) 2014

*Physical Therapy Services in Iowa for Children 3 years to 21 years of age,*Iowa Department of Education, Iowa Area Education Agencies, and hospital/community agencies, 2004

*Our Occupational Therapy Services,* Heartland Area Education Agency, 2018

*Iowa Speech Pathology Therapy Services: School Based vs Medical Based,* Mississippi Bend AEA,

*Speech Language Pathology Services, School-Based and Clinic-Based*, Central Rivers AEA,



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