

Office of Clinical and support Services
Occupational and Physical Therapist “Non-Contact” and “Child Related” Indirect Treatment Ideas

The following is a list of ideas to help therapists schedule their days with appropriate “non-contact” and “child-related” indirect treatment protocols.

The therapist’s day is divided into a multitude of components. With increased attention to accountability and outcomes, we have listed various ideas to help you organized your work day. We hope that these ideas (as well as many of your own), will enable you to plan your day effectively and efficiently. Sessions spent on phone calls, documentation, or teacher collaboration may be considered as “non-contact” time, while any activity that involves contact with a child may be considered as “child-related”. All services that are not specifically done based on a child’s mandate, are considered indirect. All treatment should be provided both in the classroom as well as in a treatment room.

Examples of “Child-Related” Indirect Service Treatment Ideas

- Classroom and group activities such as yoga, brain gym, strengthening and exercise, oro-motor skills, sensory integration activities, horticulture classes, or and other activity that may improve a child’s ability to participate in the classroom and school environment or which may be used as enrichment. These activities should be scheduled into your daily schedule and done on a continued basis throughout the year. Please discuss any plans with the classroom teacher prior to initiating any activity. The classroom teacher MUST remain in the classroom while you are there. Therapists may work together with another therapist while running these types of activities.
- Evaluations: initial or triennial (only DOE therapists may do initial evaluations).
- Equipment maintenance: wheelchairs, adapted classroom chairs, therapeutic equipment, feeding equipment and computers. A log listing each student with pertinent information such as name, address, phone #, MD contact, parent contact, clinic contact might be kept on each child so you may record any equipment maintenance you may do or have done. This log should be made available to appropriate school personnel in order to keep this record of maintenance in the school (the nurse might be a good person).
- Training: formal and informal training of school staff on the management of therapeutic equipment used in school. A log should be kept for all training sessions.
- Mealtimes: therapists may be asked to assist with breakfast and lunch. This time should be used to work on positioning, adaptive feeding, seating, teaching independence to child, etc. Therapists should not be used just as another set of hands to feed children. It is our responsibility to use this time therapeutically.

Examples of “Non-Contact” Indirect Treatment Ideas

- Collaboration with teachers, paraprofessionals speech, as well as other school based therapists, parents, doctors, clinics and other outside therapists. Therapists should discuss ways in which they may work with the classroom teacher in order to achieve IEP goals set for their child.
- Set-up for the day’s treatment sessions can be done prior to the arrival of the first bus and should not use an entire 30 minute session.
- Creating adaptive equipment: chairs, splints feeding, writing and mobility equipment without the presence of a child. (Adaptive design classes are available).
- IEPs: writing IEP’s and attending IEP meetings.
- Documentation: daily notes should be kept on each child. Your clinical supervisor may review notes periodically. Frequent correspondence with parents and/or parties involved with the child is encouraged. Indirect treatment activities should be documented on not less than a monthly basis.
- Peer support: establishing ongoing peer support sessions, making contact with clinical supervisor as needed, supervision of OT/PT students in clinical affiliations.
- Administrative duties: daily student attendance, personal time sheet, phone log, maintaining updated caseloads and schedules and ordering equipment for:
1)OT/PT treatment, 2)IEP driven equipment, 3)programmatic equipment.
- Phone calls: If you have access to a phone, calls to families, clinics, orthotists, doctors, etc., may be made during ;your indirect treatment time. **ALL CALLS SHOULD BE LOGGED**, listing child’s name, person contacted, phone number and a brief summary (purpose) of call. Logs should be kept in school for any future reference.

Cc:Helen Kaufman