

EES 2021-2022

Rubric for Evaluating and Enhancing Professional
Practice:

Occupational and Physical Therapists



THERAPIST EFFECTIVENESS RUBRIC OT, & PT

DOMAIN 1: PURPOSEFUL PLANNING and PREPARATION						
Competencies		Highly Effective (4)	Effective (3)	Needs Improvement (2)	Ineffective (1)	N/A
Assessment or Evaluation process	1.1	Therapist uses standardized assessments when relevant to the student, educational need, or setting and consults with other professionals regarding the student assessment.	Therapist uses standardized assessments when relevant to the student, educational need, or setting and faithfully administers and scores tests accurately and according to the directions of the assessment tool.	Therapist has a fragmented approach to assessments. Does not administer a comprehensive battery of tests to determine functional performance.	Therapist does not use standardized assessments.	
Assessment or Evaluation process	1.2	Therapist interprets assessment data and communicates its findings to the student's team <i>before</i> the case conference.	Therapist interprets assessment data and communicates its findings to the student's team <i>during</i> the case conference.	Therapist inconsistently interprets assessment data and communicates its findings to the student's team.	Therapist does not interpret assessment data and/or communicates findings to the student's team.	
Purposeful planning	1.3	Therapist trains other staff to select and adapt materials, equipment and devices to meet student needs.	Therapist selects and adapts material, equipment and devices to meet student needs.	Therapist uses the same materials, equipment and devices for multiple students regardless of student need.	Therapist does not use materials, equipment and devices when identified in the IEP.	
Purposeful planning	1.4	Therapist intentionally provides <ul style="list-style-type: none"> ● physically ● developmentally ● verbally appropriate activities within the multiple settings to enhance the overall quality of services provided. 	Therapist provides <ul style="list-style-type: none"> ● physically ● developmentally ● verbally appropriate activities within the therapy setting to enhance the overall quality of services provided. 	Therapist provides the same learning activities regardless of their physical, verbal and developmental level within the therapy setting.	Therapist lacks planning and does not create appropriate learning activities for students.	
Meeting Student Needs according to Educational Disability Classification	1.5	Therapist educates others on <ul style="list-style-type: none"> ● normal developmental sequences ● learning patterns in the areas of sensory, motor, psychosocial and cognitive development. 	Therapist demonstrates knowledge of <ul style="list-style-type: none"> ● normal developmental sequences and ● learning patterns in the areas of sensory, motor, psychosocial and cognitive development. 	Therapist inconsistently demonstrates knowledge of <ul style="list-style-type: none"> ● normal developmental sequences ● learning patterns in the areas of sensory, motor, psychosocial and cognitive development. 	Therapist does not demonstrate knowledge of normal developmental sequences and learning patterns.	

Meeting Student Needs according to Educational Disability Classification	1.6	Therapist demonstrates knowledge of <ul style="list-style-type: none"> • etiology • characteristics • functional prognosis of student's disabilities and shares them with the team <i>consistently and proactively.</i> 	Therapist demonstrates knowledge of <ul style="list-style-type: none"> • etiology • characteristics • functional prognosis of student's disabilities and shares them with the team as requested. 	Therapist inconsistently demonstrates knowledge of etiology, characteristics and functional prognosis of student's disabilities and shares them with the team <i>after</i> requested.	Therapist consistently shares incorrect knowledge regarding etiology, characteristics and functional prognosis of student's disabilities or <i>does not share</i> information with the team when requested.	
Meeting Student Needs according to Educational Disability Classification	1.7	Therapist <ul style="list-style-type: none"> • reviews data to consider dismissal from related service according to student's abilities, needs having been met, and resources. • consistently recommends dismissal <i>with supporting evidence</i> when necessary 	Therapist <ul style="list-style-type: none"> • reviews data to consider dismissal from related service according to student's abilities, needs having been met, and resources. • consistently recommends dismissal when necessary 	Therapist inconsistently recommends dismissal from related service according to student's abilities, needs having been met, and resources and training having been put in place.	Therapist does not recommend dismissal and maintains a large caseload of students far after they no longer need services.	
Space and Resources	1.8	Therapist actively seeks outside and community materials and resources to enhance therapy and applies in various combinations to maximize individual student achievement.	Therapist utilizes resources available through the school, district, and cooperative resulting in student successes.	Therapist is aware of available resources, but utilizes a limited repertoire of the available resources.	Therapist displays little or no knowledge of available resources.	

DOMAIN 2: EFFECTIVE INSTRUCTION, TREATMENT AND/OR INSTRUCTIONAL SUPPORT						
Competencies		Highly Effective (4)	Effective (3)	Needs Improvement (2)	Ineffective (1)	N/A
Client Rapport	2.1	Therapist demonstrates positive and respectful student interactions by intentionally addressing desired behaviors significantly more than undesired behaviors. With a goal of a ratio of interaction of 13:1 positive: corrective	Therapist demonstrates positive and respectful student interactions by intentionally addressing desired behaviors more than undesired behaviors. With a goal of a ratio of interaction of 3:1 positive: corrective.	Therapist inconsistently demonstrates positive and respectful student interactions by providing more attention and time to correcting than praising (e.g. 1:3 positive: corrective).	Therapist does not demonstrate positive and respectful student interactions as evident by spending significantly more attention and time to correcting than praising (e.g. 1:13 positive: corrective).	
Monitoring	2.2	Therapist <ul style="list-style-type: none"> engages the student in the process of data collection teaches student why the data is relevant to therapy related service interventions 	Therapist collects data relevant to therapy related service interventions.	Therapist inconsistently collects data or collects data irrelevant to therapy related service interventions.	Therapist does not collect data or the data is irrelevant to therapy related service interventions.	
Revise interventions based on new information	2.3	Therapist seeks input from the teacher when considering a new strategy that may impact classroom routines.	Therapist collaborates with teachers when introducing a new strategy that impacts classroom routines.	Therapist inconsistently collaborates with teachers whenever introducing a new strategy that impacts classroom routines.	Therapist fails to collaborate with teachers regarding strategies that impact classroom routines.	
Revise interventions based on new information	2.4	Therapist <ul style="list-style-type: none"> confirms that therapy strategies or interventions applied in the classroom are producing the intended outcome documents the progress makes necessary revisions 	Therapist <ul style="list-style-type: none"> confirms that therapy strategies or interventions applied in the classroom are producing the intended outcome makes necessary revisions 	Therapist inconsistently confirms that therapy strategies or interventions applied in the classroom are producing the intended outcome.	Therapist does not follow up to determine if the therapy strategies or interventions applied in the classroom are producing the intended outcome.	
Effective Use of Therapy Time	2.5	Therapist increases effectiveness of therapy by taking action to improve <ul style="list-style-type: none"> efficient transitions to and from the session pacing of the session allowing sufficient wait time for student demonstration of skills 	Therapist uses time with student effectively by ensuring <ul style="list-style-type: none"> efficient transitions to and from the session appropriately pacing the session allowing sufficient wait time for student to demonstrate skill acquisition 	Therapist's use of session time is negatively impacted by <ul style="list-style-type: none"> inefficient transitions inappropriate pacing insufficient wait time for student demonstration of skill 	Therapist's demonstrates lack of student progress due to <ul style="list-style-type: none"> inefficient transitions inappropriate pacing insufficient wait time 	

Technology and equipment	2.6	Therapist identifies need for and requests assistive technology/ adaptive equipment to support student learning and teaches the student the purpose and benefit from using assistive technology.	Therapist identifies need for and requests assistive technology/adaptive equipment to support student learning.	Therapist identifies need for and requests assistive technology/ adaptive equipment to support student learning but does not request the equipment or support the student in using the equipment.	Therapist does not identify need for assistive technology or adaptive equipment.	
Technology and equipment	2.7	Therapist educates staff, students and families in proper and safe use of equipment and equipment maintenance then monitors fidelity of use over time.	Therapist educates staff, students and families in proper and safe use of equipment and equipment maintenance.	Therapist must have requests made to educate staff, students and families in proper and safe use of equipment and equipment maintenance.	Therapist fails to educate staff, students or families in proper and safe use of equipment and equipment maintenance resulting in injury or damage.	
Reporting	2.8	Therapist reports on or within annual case conference paperwork according to local, state and federal guidelines. Reports are free of errors and presented <i>before</i> the case conference.	Therapist reports on or within annual case conference paperwork according to local, state and federal guidelines. Reports are free of errors and presented <i>during</i> the case conference.	Therapist inconsistently reports on or within annual case conference paperwork according to local, state and federal guidelines. Reports contain errors and/or are presented <i>after</i> the case conference.	Multiple requests must be made to ensure the therapist completes reports on or within annual case conference paperwork according to local, state and federal guidelines. Reports contain consistent errors.	
Manages Physical Structure	2.9	Therapist created a space which is flexible and changes within the day to accommodate the activity and student need.	Therapist created a space which is arranged with intentional consideration for session need and adaptations are made for individual student needs. Space is visually appealing, organized, and safe.	Therapist has no intentional consideration for structure. Space appears cluttered and unorganized.	Therapist created a physical structure that is unsafe for students or staff.	

DOMAIN 3: LEADERSHIP AND PROFESSIONAL RESPONSIBILITIES						
Competencies		Highly Effective (4)	Effective (3)	Needs Improvement (2)	Ineffective (1)	N/A
Collaboration	3.1	Therapist proactively seeks out the teacher of record about upcoming case conferences and suggests objectives based on student's present level of performance, disability limitations, and potential.	Therapist communicates with teacher of record about upcoming case conferences and suggests objectives based on student's present level of performance, disability limitations, and potential.	Teacher of record must seek out the therapist to receive information about upcoming case conferences for suggested objectives based on student's present level of performance, disability limitations, and potential.	Teacher of record must make multiple attempts to contact the therapist to receive suggested objectives based on student's present level of performance, disability limitations, and potential.	
Collaborates & Communicates Professionally to Promote Student Success	3.2	Therapist initiates and engages in ongoing professional communication with colleagues in a manner which enhances student outcomes.	Therapist maintains professional communication with colleagues for consistent implementation of IEPs and is mindful of student confidentiality.	Therapist maintains communication with colleagues, but over- or under-shares student information that does not follow the guidance of "the educational need to know."	Therapist does not maintain professional communication with colleagues or violates FERPA.	
Collaborates & Communicates Professionally with Families	3.3	Therapist proactively engages with families by <ul style="list-style-type: none"> • providing a high ratio of positive interactions while interacting with families in a professional, positive, and empathic manner that is sensitive to differences. • eliciting information about parents' visions and concerns for their child • working collaboratively with the family. 	Therapist <ul style="list-style-type: none"> • engages with families in a professional, positive, and empathic manner that is sensitive to differences. • addresses concern of parents. 	Therapist engagement with families is minimal or limited to negative feedback. <ul style="list-style-type: none"> • Communications are one-sided and do not provide families opportunities to respond. • Consistently fails to address concerns of parents. 	Therapist lacks engagement, is disrespectful, or becomes unprofessionally involved with families.	
Evidence-Based Practice	3.4	Therapist remains current regarding evidence-based practices and shares new knowledge with colleagues to apply new strategies.	Therapist reflects on practice to identify areas for growth and seeks out related opportunities for professional development.	Therapist takes opportunities for professional development when requested to do so.	Therapist does not take part in professional development opportunities.	

Evidence-Based Practice	3.5	<p>Therapist</p> <ul style="list-style-type: none"> ● seeks ways to implement new evidence-based practices into service delivery ● tracks effectiveness data to determine if the new practice is producing the intended outcomes. 	Therapist routinely seeks ways to implement new practices into service delivery, where applicable based on identified areas of need.	Therapist inconsistently seeks out ways to implement new practices into service delivery, where applicable.	Therapist does not seek out ways to implement new practices into service delivery, and fails to implement new strategies when requested.
Advocacy	3.6	<p>Therapist</p> <ul style="list-style-type: none"> ● makes or recommends referrals on behalf of students and families ● proactively provides information for staff and/or parents on differentiating between appropriate developmental milestones and atypical indicators. 	Therapist makes or recommends referrals on behalf of students and families after considering the student's case and gathering initial information.	Therapist only considers referrals after several requests from the team.	Therapist consistently fails to consider referrals on behalf of students and families and according to local, state and federal guidelines.
Holds High Expectations for Students	3.7	Therapist teaches students to hold high expectations for themselves and the value of success through strategies to increase self-motivation, self-worth, and resiliency.	Therapist holds and communicates high expectations for students.	Therapist expectations for student success varies depending on the student.	Therapist actions and expectations result in adverse outcomes for students. (eg, lack of progress, learned helplessness, inappropriate LRE, or denial of FAPE).
Training	3.8	Therapist provides staff training and follows up to determine if the training positively impacts student outcomes.	Therapist provides staff training for student learning strategies.	Therapist does not provide staff training for student learning strategies.	Therapist does not provide staff training when requested.
IEP Goal Effectiveness	3.9	<p>Therapist engages with colleagues in peer review of IEP goals to ensure that goals are</p> <ul style="list-style-type: none"> ● appropriately ambitious ● identify the skill to be acquired based on student's present level of performance ● goals are linked to students' identified area of need 	<p>Therapist writes goals that are</p> <ul style="list-style-type: none"> ● appropriately ambitious ● identify the skill to be acquired based on student's present level of performance ● goals are linked to students' identified area of need 	<p>Therapist periodically writes goals that</p> <ul style="list-style-type: none"> ● are not appropriately ambitious ● do not identify the skill to be acquired based on student's present level of performance ● are not linked to students' identified area of need 	<p>Therapist consistently writes goals that are not measurable or are not clearly written. Goals consistently do not</p> <ul style="list-style-type: none"> ● not identify the skill to be acquired based on students' present level of performance ● link to students' identified area of need ● adjusted to ensure student progress or individualized for students

Progress Monitoring	3.10	<p>Therapist</p> <ul style="list-style-type: none"> engages the student in the self-monitoring IEP goals works with students to identify necessary adjustments to ensure progress on goals. 	<p>Therapist</p> <ul style="list-style-type: none"> documents student progress on goals by frequently assessing reports student performance as needed 	Therapist only assesses student performance once each reporting period.	Therapist does not collect and/or report progress on goals at the end of the reporting period.	
Record Maintenance	3.11	Therapist documents activities and correspondence, including parent communication in IIEP under the Communications Tab.	Therapist documents activities and correspondence, including parent communication, relating to students on caseload.	Therapist does not consistently document parent communication.	Therapist does not document parent communication.	
Therapist Assistant supervision	3.12	<p>Therapist</p> <ul style="list-style-type: none"> maintains records of accurate implementation of APTA Guidelines for Supervision. frequently evaluates the workload of Assistants and initiates reassignment as indicated. 	Therapist implements APTA Guidelines for Supervision. Expectations are clear and Assistant is assigned for maximum productivity.	Therapist is unclear of APTA Guidelines for Supervision. Limits scope of Assistant to clerical duties, with minimal student contact.	Therapist is unwilling to follow APTA Guidelines for Supervision.	
Manages schedules	3.13	Therapist clearly communicates schedules to teachers, students, and supervisors/building personnel and monitored/updated weekly for accuracy.	Therapist efficiently manages and adjusts schedules by appropriately grouping and scheduling students to maximize therapy time with minimal interruptions to general education instruction.	Therapist's time-management skills are developing. Essential activities are carried out, but enhancements could be made to the schedule to improve efficiency.	Therapist displays poor judgment which results in frequently missed deadlines, confusion amongst co-workers, and conflicting schedules.	

DOMAIN 4: CORE PROFESSIONALISM - These indicators illustrate the minimum competencies expected in any profession.

	Indicator	Meets Standard	Does Not Meet Standard	If one or more indicator(s) does not meet standard, a -1.0 deduction is taken from the total score. (CHECK)
1	Attendance & On-Time Arrival	School Professional has demonstrated a pattern of consistent attendance and on-time arrivals and departures to work and all related functions.	School Professional has demonstrated a pattern of unexcused or inconsistent attendance and on-time arrivals and departures to work and all related functions.	
2	Policies and Procedures	School Professional follows all local, state, & Federal laws related to school and the community and follows all locally established policies and procedures.	School Professional has not followed all local, state, & Federal laws either related to school or the community and/or has demonstrated a pattern of failing to follow locally established policies and procedures.	
3	Respect	School Professional interacts with students, colleagues, administrators, parent/families and community members in a respectful manner.	School Professional has demonstrated a pattern of failing to interact with students, colleagues, administrators, parent/families and/or community members in a respectful manner.	
4	Ethical	School Professional exhibits behavior in accordance with the established EES code of conduct and performs the function of the job in an ethical manner.	School Professional exhibits behavior contrary to the established EES code of conduct and/or has not performed the job in an ethical manner.	

References:

- AOTA – aota.org
- Council for Exceptional Children. (2008). *What every special educator must know: Ethics, standards, and guidelines* (6th ed.). Arlington, VA: Author. Appendix 6: CEC Initial Common Core and INTASC Knowledge and Skills Index
- Occupational Therapy Performance Evaluation Rubric, Version 10.1, INOTA.com
- OT/PT Personnel Evaluation Committee of Earlywood Educational Services
- Sprick, R., (2009). *Safe & Civil Schools: CHAMPS A Proactive & Positive Approach to Classroom Management* (2nd ed). Eugene, Oregon: Pacific Northwest Publishing, INC.