

2.3 OT and PT School-Aged Referral and Service Guidelines

Priority Level Very High	Student Classification Severe impairment, severe function challenges and safety concerns.	Impairment/Functional Deficit Examples (not exclusive lists) Physically dependent Deaf-Blind Choking risk Post-surgery (for students with underlying neurological/orthopedic conditions) Acute brain injury At risk of further physical impairment (needs splinting/stretching)	Concerns Addressed Safe lifts and transfers Safe use of positioning and mobility equipment Splinting Stretching programs Safe feeding and swallowing protocols Self-care protocols Pressure management Post-surgical rehab Safe access to school areas Inclusion/participation in school, home and community	Service Available Ongoing assessment and consultation as needed with both school and family.	Timeline of Service Service available within two weeks of referral.
High	Moderate to severe impairment and function challenges.	 Moderate to severe physical impairment Moderate to severe chronic health condition Moderate to severe intellectual impairment Moderate to severe autism spectrum disorder Moderate to severe visual impairment 	Provision of adaptations and suggestions to improve: • physical function and participation • self-care /independence • academic output (i.e., access to technology) • school activity participation • home and prevocational skills • community participation	Ongoing assessment and consultation as needed with both school and family. Discharge if no concerns after one year.	Service available within nine months of referral. Referrals for concerns related to sensory functioning or academic output must be made by The school-based team (SBT).

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Priority	Student	Impairment/Functional Deficit			
Level	Classification	Examples (not exclusive lists)	Concerns Addressed	Service Available	Timeline of Service
Moderate	Mild impairment and function challenges.	 Mild intellectual impairment Mild physical impairment Mild autism spectrum disorder Mild global developmental delay Developmental coordination disorder Moderate to severe sensory processing deficits 	Recommendations to team for improvement of: • physical function and participation • self-care /independence • academic output (i.e., access to technology) • school activity participation • home and prevocational skills • community participation	One-time assessment, then follow up consultation for a period of 6-8 weeks, with school and/or family, then discharge.	Service available within 12 months of referral. Referrals for concerns related to sensory functioning or academic output must be made by the SBT.
Low	No diagnosed Impairment or mild function challenges.	 Delayed development in: Gross motor skills Fine motor skills/written output Self-care skills Mild sensory processing deficits 	Training/Workshops and recommendations for staff and family related to: • physical function and participation • self-care /independence • academic output (i.e., access to technology) • school activity participation	One-time assessment with recommendations to school and family. No follow up (immediate discharge). Exceptions: Toe walking, scoliosis, gait assessment. No individual assessment. Referral only to community services.	Service available within 12 months of request. Referrals for concerns related to sensory functioning or academic output must be made by the SBT.
Low	Mental health concerns only (e.g., anxiety, emotional regulation, attention regulation)	 Trauma/attachment concerns ADHD Anxiety disorders 	Training/Workshops for staff related to development of self-regulation/executive function.	No individual assessment.	Referral to other school district and community services related to mental health.

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