Transforming *Caseload* to *Workload* in School-Based and Early Intervention Occupational Therapy Services

**Occupational therapists and occupational therapy assistants working in schools and early intervention (EI) settings** often are faced with growing caseloads, and so they ask “What is a reasonable caseload?” Expanding caseloads can involve increased demands on time, including use of consultation; innovation in direct services in general education environments; meetings with teachers, families, and others; obtaining and evaluating information about children’s performance; and traveling between schools or homes. How well one manages these and other tasks will affect the quality and availability of occupational therapy services, student outcomes, and a child’s success in the natural environment or at school.

Transforming caseload into workload requires thinking not only about caseload “numbers” but also about what is the most effective “work” that occupational therapy professionals can perform. The question for therapists and administrators is not “Are you doing things right?” but rather “Are you doing the right things?” Recognizing and defining what is appropriate work in school-based and EI practice are important tasks for occupational therapy practitioners and their supervisors.

**What Is the Difference Between Workload and Caseload?**

The concept of *workload* encompasses all of the work activities you perform that benefit students directly and indirectly. *Caseload* refers only to the number of children seen by occupational therapy as part of the individual education program (IEP) or individualized family service plan (IFSP).

A traditional caseload “counting” approach does not fully appreciate the complexity of the occupational therapy role in current best-practice scenarios. Pull-out services built around a clinical model of predictable, routine “appointments” have limited support in the educational literature and do not necessarily promote the generalization of skills to the classroom or other appropriate settings. Many school districts still use this approach. A simple caseload also does not recognize the potential occupational therapy contribution to the Individuals with Disabilities Education Improvement Act of 2004’s (IDEA’s) participation focus or its mandate that services support access to and progress in the general education curriculum or natural environments.
To meet the needs of children, teachers, parents, and school or EI programs, a workload approach helps in the development of work patterns (workflow) that optimize effectiveness and impact. Practitioners must redesign their work patterns so they are able to serve students in their least restrictive environment and at the same time support their performance needs (e.g., in language arts, during the restroom break, during lunch, on the playground or during PE, getting on or off the bus). Practitioners also must have time in their work day for collaborative teamwork and data collection. A workload approach allows practitioners the flexibility to be where children need them, when they need them to be there—at the point of performance—applying strategies and techniques to classroom or home activities and tasks.

**Why Manage Your Workload?**

Expanded roles are now required of providers, including increased teaming and ongoing assessment and documentation of the effectiveness of interventions. The academic focus of No Child Left Behind and IDEA requires that supports be provided in the child's natural environment. Interventions are most effective when provided where performance occurs. Managing your workload helps ensure that you are using your time efficiently, are providing appropriate and effective services that support the child’s learning and education, and are ensuring proper implementation of IDEA and other legal requirements. In addition, managing your workload can help you

- Advocate for additional occupational therapy staff positions
- Clearly define the role of occupational therapy in your school
- Facilitate discussions to address therapy roles and responsibilities
- Determine occupational therapy service needs and program capacity.

Determining and managing your workload does not have to be a daunting task. Many school and EI administrators continue to view occupational therapy in relation to how many children can be served in a set period. Clearly identifying your workload—and using this approach to meet the resulting demands—can help redefine your role in your school or EI program. Defining and understanding your workload in the context of a more collaborative or consultative model can help you move your practice from isolated service delivery to one that involves you in the day-to-day, hour-to-hour progress of a child’s learning and education. It also may result in significant changes in how you approach your work; you will discover information that you can use to affect how your role in the system is defined. Thinking about your workload and your work goals can transform the debate around your “caseload” from one of numbers to one that focuses on achievements in process and outcomes.

Getting support to address the role of occupational therapy from a workload context may not come easily. However, understanding a better way to organize and think about your contributions and duties is the first step to transforming your role from a “direct/hands-on”-only service model to an inclusive, collaborative, and integral role.

**How to Begin a Workload Management Approach**

Developing a workload approach can be as easy as 1-2-3: Collect data, group tasks into categories, and analyze results.

**Step 1: Collect Data**

The easiest way to capture all of the things you do in the delivery of your duties is to complete a time study, a written snapshot that includes all of the child-related activities and tasks you perform that benefit your students over a specific time (e.g., 2 weeks, 1 month; see table below). A variety of time increments can be used to capture what you are doing; 15-minute intervals are a good place to start. Data should be collected during the same time period for each occupational therapist and occupational therapy assistant that is providing services. If you receive requests for service that you are unable to fulfill, keep a separate record of the request and the anticipated amount of time needed to complete the request.

**Sample Time Study**

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00–8:30 a.m.</td>
<td>Team meeting</td>
<td>Evaluation</td>
<td>Billy in Language Arts</td>
<td>Documentation</td>
<td>Bobby in PE</td>
</tr>
<tr>
<td>8:30–9:00 a.m.</td>
<td>Sensory group</td>
<td>Evaluation</td>
<td>Training/supervision of</td>
<td>Handwriting in-service</td>
<td>Case management</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Billy’s aide</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:00–9:15 a.m.</td>
<td>Documentation</td>
<td>Set up for next</td>
<td>Travel to next site</td>
<td>Early intervening</td>
<td>Parent consult</td>
</tr>
<tr>
<td></td>
<td></td>
<td>preschool motor group</td>
<td></td>
<td>services in Mrs. Smith’s</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>class</td>
<td></td>
</tr>
<tr>
<td>9:15–9:45 a.m.</td>
<td>Travel to next site</td>
<td>Consult with</td>
<td>IEP meeting</td>
<td>Katie tx</td>
<td>Collect data on Katie’s</td>
</tr>
<tr>
<td></td>
<td></td>
<td>kindergarten teachers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>on fine-motor centers</td>
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</tbody>
</table>

Collect data on Katie’s progress
The following are examples of what might be included in the study:

- Intervention
- Documentation
- Evaluation, screening, and assessment
- Team meetings
- Consultation with other staff
- Travel between sites
- Corollary duties
- Amount of other available support
- Child-specific data collection
- IEP/IFSP development
- Case management
- Transition services
- Parent and staff training or in-service
- Research
- Advocacy
- Participation in schoolwide activities
- Participation in EI or pre-referral activities

**Step 2: Group Tasks Into Categories**

After the time study is complete, review your data, and group related activities into categories, such as

- Services to the child, hands-on services (individual and small groups)
- Activities that support child/student programming (e.g., collaborating with team, planning meetings)
- Activities that support children/students in natural environments or general education curriculum (e.g., in-service to kindergarten teachers on fine-motor centers)
- Activities that support other federal, state, and local requirements (e.g., documentation, data collection).

For each category, calculate the percentage of your time spent per week performing each activity. Once you have calculated your time allocations, put the information in a chart or table so that you have a visual record of your workload.

**Step 3: Analyze Results**

The information you collect represents the current demand for occupational therapy services in your program or district. If you are unable to meet all of the demands of your workload, use this information to collaborate with your team, administrators, or supervisors to determine solutions. Achieving a more manageable workload may require a compromise. Some suggestions include

- Increasing opportunities for indirect services (e.g., training aides on behalf of the child, increasing accommodations or modifications)
- Increasing use of group sessions, including classroom-based groups that model strategies and techniques teachers can use every day.

Once you’ve collected, grouped, and analyzed the data, you and your supervisor can use it to guide future decision making about the availability and delivery of occupational therapy services in your program or district.

**References**


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For more information, contact the American Occupational Therapy Association, the professional society of occupational therapy, representing nearly 36,000 occupational therapists, occupational therapy assistants, and students working in practice, science, education, and research.

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Occupational Therapy: Skills for the Job of Living

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