
Progress Monitoring and Documentation During Virtual School-based OT Service Delivery via Telehealth

Progress monitoring and documentation are important parts of carrying out the occupational therapy process. Occupational therapists and occupational therapy assistants (i.e., occupational therapy practitioners) working in the school setting collaborate to monitor and document student progress as it relates to individualized education plan (IEP) goals. This Decision Guide includes information occupational therapy practitioners may consider when monitoring and documenting progress when using telehealth or virtual OT service delivery.

Progress Monitoring

- Identify the student outcomes to be measured.
- Select a measurement strategy (i.e., quantitative and/or qualitative approach).
- Collect baseline data.
 - Track quantitative information (e.g., work completion, frequency of a certain behavior) to measure progress.
 - Collect qualitative information about progress through student and caregiver self-reports.
 - Document contextual features (e.g., distractions in the environment; cues provided; different person assisting the child with a task) that may affect the student's performance.
- Collaborate with the team to establish the parameters for data collection.
- Determine a data collection schedule (e.g., every session, every 2 weeks, one time a month). Establish a time for progress monitoring during regular individual or small group sessions.
 - Inform students, parents, and caregivers of schedule.
- Create a visual chart.
 - Plot data collected at regular intervals to show how progress has changed over time.
 - Include a goal line or target.
- Establish an intervention plan and record when interventions are introduced or discontinued.
- Involve students and parents in tracking progress.
 - Consider ways progress can be monitored asynchronously (e.g., checklists, photographs, student or caregiver journal entries).
 - Collect progress data during intervention to determine when goals have been met.
- Monitor trends and share information with the IEP team to guide decision making.

Documentation

- Review district and local education agency (LEA) requirements for documentation. Determine if new procedures have been developed specifically for documenting virtual services.
- Maintain copies of parental consent forms for virtual service delivery, if required by the district or LEA.

- Document how IEP goals are being addressed through virtual service delivery.
 - Consider documenting both synchronous and asynchronous opportunities.
 - Use an [IEP matrix](#) to demonstrate how IEP goals are embedded in daily routines outside of school.
 - For virtual service delivery, document the specifics of the session. Include any student or caregiver preferences or concerns. Note student engagement, activities performed, and assistance provided.
- Log attendance. Include the date, as well as start and end times of the session.
- Record communication with IEP team members (i.e., student, parents, educational personnel) outside of sessions.
- Document barriers and challenges associated with joining scheduled meetings and use of technology.
- Maintain the confidentiality of attendance logs and documentation in accordance with [Family Educational Rights and Privacy Act \(FERPA\) guidelines related to reporting and sharing student information](#).

Medicaid Billing

- Obtain and comply with state and local billing procedures for Medicaid.
- Document objective facts that can be substantiated by documentation and student records.
- Only sign Medicaid billing documents that are associated with services you rendered and/or supervised.

Web Resources

- AOTA—[Guidelines for the Documentation of Occupational Therapy](#)
- AOTA—[Legal, Ethical, and Procedural Considerations for Delivering Virtual OT Services in the Schools](#)
- AOTA—[State Actions Affecting Occupational Therapy in Response to COVID-19](#)
- Marshall Street—[Progress Monitoring](#)

Additional Resources

Clark, G. F. (2020). Documenting outcomes. In J.C. O'Brien & H. Kuhaneck (Eds.), *Case-Smith's occupational therapy for children and adolescents* (8th ed., pp.198–211). Elsevier.

Clark, G. F. (2019). Best practices in school occupational therapy documentation and data collection. In G. F. Clark, J. E. Rioux, & B. E. Chandler (Eds.), *Best practices for occupational therapy in schools* (2nd ed., pp. 373–384). AOTA Press.

Holahan, L. (2019). Best practices in school occupational therapy documentation and data collection. In G. F. Clark, J. E. Rioux, & B. E. Chandler (Eds.), *Best practices for occupational therapy in schools* (2nd ed., pp. 127–134). AOTA Press.

Created for the American Occupational Therapy Association by AOTA staff with contributions from Jean E. Polichino, OTR, MS, FAOTA; and Lisa A. Test, OTD, OTR/L.

It is expected that occupational therapy services are delivered in accordance with applicable state or jurisdictional and federal regulations, relevant workplace policies, and the Occupational Therapy Code of Ethics (2015).