

OCCUPATIONAL THERAPY TIER/REFERRAL PROCESS

When a student has been identified by teacher as having a FM/handwriting concern:

1. Complete FM and/or handwriting screener (see appendix of this binder). OTR will assist and train teachers how to administer.
2. This student should be part of the intervention/tier 2 team discussions within your building.
3. Students targeted will participate in FM/handwriting interventions within the classroom
 - Examples: Establish a FM/handwriting center, FM/handwriting morning work stations/baskets
 - OTR will provide ideas/suggestions for activities to incorporate into tier 2 interventions. Ideas will be in binder provided to each building and teachers will be sent an electronic copy of the binder.
 - Recommend that targeted students participate in these activities/interventions a minimum of 30 minutes weekly, though increased daily participation is encouraged.
4. Data will need to be collected regarding center activity and “attendance” in the activity. Recommend using the student “sign in” sheet as attendance tracker which will also provide 1 method of progress monitoring.
5. Teachers should also monitor progress using screener and/or other quick checks of deficit skills. OTR can assist teacher in determining best method for progress monitoring dependent on skill(s) being targeted.
6. OTR will check in with each building monthly during the first semester (September-December). Check-ins will occur quarterly during second semester (January-May).
 - Check ins will either be during team/grade level meetings and/or observation time scheduled with the teacher.
7. Progress should be discussed at tier 2/intervention team meetings within your buildings. Please contact OTR to attend these meetings.
8. If student is not making adequate progress with reasonable amount of time in the interventions, next steps can be discussed with team including OTR during the tier 2/intervention team meetings. Data/documentation should be provided to OTR and a team decision will be made on next steps (either additional observations or blue form completion to generate a formal OT evaluation).