What is the Caseload Method?
The Caseload Method. . .

designates staff based on a specific number of students assigned to IEPs and 504 Plans (direct and indirect services) without regard to the amount of time requests to meet each student’s needs or the therapist other responsibilities
Characteristics of Caseload

- Refers to the number of students assigned to practitioners at any given time
- All students are of equal weight
- Time, frequency and duration for each student is not considered
• Intensity of each student’s need is not considered (e.g., complexity of disability, teacher knowledge, supporting 1 goal v 4 goals, etc.)

• Variety and range of service demands is not considered

• Therapist(s) duties/responsibilities beyond IEP/504 plans are not considered
Complicating Factors for a Caseload Approach in Schools

- Nation-wide shortage/mal-distribution of therapists
- In some cases, shortage of funded positions for therapists
- Changing roles of practitioners – continuum now includes UDL, PBIS, RtI and all students in general education
- High job turnover due to unmanageable caseloads (poor working conditions)
- Evidence across disciplines does not sport this approach for yielding positive student outcomes
What is a reasonable caseload for school therapists?
The Caseload Method is reflective of a traditional medical model.
What is the Workload Method?
The Workload Method

• Refers to all activities required and performed by the practitioner
• Includes time demands for meetings, travel, student documentation, materials management, etc.
• Includes best practices
• Includes services in the LRE
• Activities vary school district to district depending on district priorities/preferences
Characteristics of Workload

- Reflects a continuum of activities required of practitioner(s) on behalf of student (direct and indirect)
- Addresses the range of demands on the therapist(s)
- Includes support of all students in the least restrictive environment (LRE)
- Includes support of participation in the general ed curriculum
- Includes support of school-wide initiatives supporting all struggling learners - UDL, PBIS, RtI
What is the Impact of Large Caseloads?

- Preventative activities may be eliminated/limited, including
  - Training of school personnel to foster transfer and generalization of strategies
  - Whole classroom/programmatic supports

- Planning time may be eliminated/limited, making it difficult to collaborate with teachers for embedding curriculum-based and routines-based strategies
• Opportunities for collaborative teamwork may be reduced, creating a barrier to consultation with parents and other professionals

• Individualization of IEP and/or 504 services may be negatively impacted, including
  ▪ Recommendations regarding program intensity Model of service delivery
  ▪ Time constraints may limit delivery of full continuum of services for each student
  ▪ Scheduling to address issues in natural contexts is compromised
• Student documentation becomes overwhelming

• Time for supervision of therapy assistants becomes more challenging

• Supervision/training of professional students and becomes very difficult
• Professional development for therapy practitioners becomes expendable

• Recruitment and Retention of therapists may be compromised

- AHSA, 2014
The Workload Method is reflective of an educational model.
How is the Workload Method Beneficial for Students?

• Allows for appropriate alignment of services with educational practice
• Supports early identification of struggling learners (allows for EI/RtI contributions)
• Encourages collaboration with staff and family so all stakeholders are engaged in student success
• Addresses practitioner concerns regarding quality services and ethical practices to support positive outcomes in the best interest of students
• Allows for development of staffing models that meet the needs of students, schools and practitioners
• Correlates with increased job satisfaction (therefore reducing turnover)

- AOTA, APTA, ASHA, 2015
How is the Workload Method Beneficial for Practitioners?

- Recognizes the complexity of the therapists’ role in best practice scenarios

- Promotes equity and access for all students

- Recognizes the role of the practitioner beyond direct services

- Supports provider flexibility to be where children need them – at the point of performance -- applying strategies and techniques to classroom activities and tasks.
• Fosters development of work patterns that optimize effectiveness and impact.

• Supports service delivery in the LRE

• Increases opportunities to use full scope of practice, including skills in supporting
  • Student mental health
  • Student heath and wellness
  • Positive recreation/leisure pursuits
  • Prevocational and vocational activities

• Improves therapist job satisfaction, supporting recruitment/retention efforts