OT Mastery

Caseload Vs. Workload

1. What is the main focus of a therapist using the caseload model at work?

A. Taking on students (cases) only and not completing evaluations
B. Providing direct services during working hours
C. Providing indirect services during working hours
D. Asking administration to delegate their work to someone with more time

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2. According to the research, what model allows therapists working in the school system to more easily adhere to best practices?

A. Concurrent treatment model
B. Caseload model
C. Cotreatment model
D. Workload model

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3. What is the definition of the workload approach as it pertains to school-based therapy?

A. The inclusion of indirect services (along with direct services) as part of a therapist's responsibilities to better manage their work duties
B. Therapists add more working hours to their day in order to get more done
C. Efficiently using working hours to complete both student treatments and evaluations
D. Using better time management to fulfill all direct services

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4. What is AOTA's stance on the caseload versus workload debate?

A. AOTA supports the caseload model, as they believe therapists should be able to get all their work done in standard working hours
B. AOTA is waiting for APTA and ASHA to put out a position statement before addressing this issue
C. AOTA supports the workload model, as they believe this offers the best balance between direct and indirect services that all therapists are responsible for
D. AOTA has not yet spoken out on this issue, as there are other emerging topics of greater concern

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5. What does AOTA think about setting caseload limits to assist with balancing work responsibilities for OTs?

A. AOTA has not spoken out about setting caseload limits

B. AOTA is not in favor of caseload limits because they feel OTs should use time management to deal with their workload instead
C. As with the workload approach, AOTA is also in support of setting caseload limits to help balance the duties of school-based therapists
D. AOTA is against setting caseload limits, since there are many factors that contribute to therapists having an overwhelming amount of job duties to fulfill and it would be too difficult to settle on an acceptable number

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6. What does the evidence say about caseload limits?

A. Caseload limits are helpful for SLPs and PTs, but not as much for OTs due to the hands-on nature of the field's work
B. Caseload limits have no effect on a school-based therapist's ability to do their job or feel satisfied with their work
C. When set by school administrators, caseload limits may or may not be effective; when set by therapists who have an understanding of their responsibilities, caseload limits are always effective
D. Caseload limits are a strong predicting factor for job satisfaction in school-based therapists

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7. What does NOT fall under the heading of indirect services OTs are responsible for?

A. Communicating with parents
B. Consulting with teachers
C. Documentation
D. Leading group therapy

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8. What is NOT considered a benefit of the workload approach?

A. Helping avoid burnout
B. Better pay for therapists
C. Allowing for more OT positions within school systems
D. Improved outcomes for students

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9. A school-based OT just began using the workload model. How might they structure their day in alignment with this approach?

A. Performing direct services in the morning, taking a lunch at midday, and focusing on indirect services in the afternoon
B. Performing indirect services for one week, followed by direct services for one month and alternating like this for the duration of the school year
C. Performing direct services for one week followed by indirect services the next week and alternating like this for the duration of the school year
D. Performing direct services for two days out of the week and saving three days out of the week for indirect services

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10. If a therapist wanted to advocate to their administrators about why they should adopt the workload approach, what step would they NOT take first?

A. Write up a summary with a range of resources the administrator can reference when discussing the workload approach with stakeholders and other relevant parties who may need to weigh in
B. Gather evidence on the benefits of the workload approach, especially those that cater to the administrator's objectives (i.e. cost savings, positive attention for the district, etc.)
C. Email the administrator to set up a meeting
D. Conduct a time study with all the therapists in the district and analyze the results to present to administration

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11. According to OT research, what are components of effective school-based therapy?

A. Individually-unique sessions, templates to streamline parent communication, teacher consultations in-person only
B. Collaborative, contextual practice in the least restrictive environment, teacher consultations, professional learning and/or community membership
C. Pull-out 1:1 therapy, group sessions only for FM skills, individual sessions only for ADL concerns
D. Community practice, program development with teachers only, point-of-service documentation

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12. What is the 3:1 model and how does it help therapists?

A. Students receive 3 weeks of direct services followed by 1 week of indirect services; this allows students to benefit from both direct and indirect services since indirect services are known to help kids generalize the skills addressed during direct services
B. Students receive 3 weeks of indirect services followed by 1 week of direct services; this allows therapists to focus more on in-class programming and teacher consultations to ensure child success rather than just 1:1 services, which are known to be less effective
C. Therapists participate in PBIS and RTI services for 3 weeks followed by focusing on indirect services (mostly documentation) for 1 week; this allows therapists to be most useful for other educational and behavioral curricula
D. Therapists see students for 3 weeks before discharging them and screening new students for 1 week, then starting over again; this helps get as many students connected with services as possible

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13. What does the evidence say about the 3:1 model?

A. SLPs, PTs, and OTs felt better able to consistently treat students with more quality services, collaborate with parents and teachers, help with carryover of skills in class, had fewer cancelations, more security in their role, better job retention, and higher job satisfaction
B. SLPs, PTs offered better services and had higher job satisfaction using this model, but OTs did not experience the same outcomes

C. SLPs, PTs, and OTs had better security in their role and felt better able to explain what they did due to the improved relationships with teachers, paraprofessionals, and parents who they worked closely with
D. OTs felt better able to treat students more consistently, but still did not feel they had the resources from their district to offer effective and quality treatment across the board

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14. How can a time study help therapists with the workload approach?

A. Time studies can only be used in conjunction with evidence from the field, otherwise they will be useless
B. Time studies not only help therapists minimize inefficiencies in their work, but they also demonstrate the need for the workload approach to administrators and other relevant parties by showing how much work they don't have time for
C. Time studies help therapists look at the work days of other therapists in similar school-based settings so they can structure their days in a similar manner
D. Time studies emphasize how much of a therapist's work day is taken up by indirect services, but they do not outline anything else

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15. What guidance does NOT apply when a therapist is conducting a time study?

A. It's most useful for all the therapists in a district to conduct a time study
B. Time studies should be performed in 15-minute increments
C. Time studies should be performed in 60-minute increments
D. It's most useful for only one therapist in a district to conduct a time study

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16. Will hiring another therapist in the district help alleviate a therapist's work duties?

A. Yes; this is the only way to avoid using the workload approach and is more effective
B. No; the workload approach on its own is the only way school-based therapists can succeed
C. Potentially; they can offload some of their responsibilities, but each therapist will still need to utilize the workload approach to maximize their own time across direct and indirect services
D. Potentially; they can have the other therapist do all the direct services while they retain all of the indirect services

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17. If a therapist is speaking to administration about the workload approach, what benefits can they highlight as being advantageous for the administration of the district?

A. Fewer complaints from teachers, fewer complaints from parents, fewer complaints from stakeholders
B. Reduced risk of litigation, increased funding, better ability to focus on principals of Universal Design for Learning
C. Increased risk of litigation, more funding secured for individual therapy visits, less funding for group sessions
D. More positive attention, greater therapist satisfaction, less complaints from students

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18. What organization would NOT be of use to therapists looking to transition to the workload approach?

A. Local OT organizations
B. NBCOT
C. Local school board
D. APTA

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19. What organization has partnered with AOTA, APTA, and ASHA to assist with advocating for the workload approach as it pertains job retention for school staff?

A. The National Coalition on Personnel Shortages in Special Education and Related Services (NCPSSERS)
B. ASHA
C. NBCOT
D. APTA

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20. What tools would likely NOT be helpful to a therapist who is conducting a time study?

A. Calculator
B. Software programmed with automatic calculations
C. Excel spreadsheets with preprogrammed formulas
D. Pulse oximeter

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