

## OT/PT 04.10.20

### **Occupational Therapy** during the COVID-19 Public Health Emergency

Many practitioners, educators, and students are experiencing considerable unknowns and fears. Together, we will get to the other side of this pandemic by using our innate problem-solving skills, by coming together to advocate for the continued value of occupational therapy, and by recognizing that this challenging time may create new opportunities for occupational therapy practice now and in the future.

Read a [message about AOTA's response](#) to COVID-19.

Amidst the Covid-19 pandemic, occupational therapy practitioners and students are faced with unprecedented challenges impacting their psychosocial well-being and mental health. AOTA believes that it is crucial to support our professional community by offering tools and resources to assist with coping during this time and beyond. Read and share AOTA resources, along with guidelines to address [practitioner well-being](#).

[Link to AOTA COVID-19 Resources](#)

### **Physical Therapy** and Remote Learning and IEP Services

OSEP has stated that if a school district continues to provide educational opportunities to the general student population during a school closure, the school must ensure that students with disabilities also have equal access to the same opportunities, including the provision of free appropriate public education. IEP teams may, but are not required to, include distance learning plans in a child's IEP that could be triggered and implemented during a selective closure due to a situation such as the current COVID-19 outbreak. Such contingencies may include provision of special education and related services at an alternate location, or provision of online or virtual instruction, instructional telephone calls, and other curriculum-based instructional activities. They also may identify which special education and related services, if any, could be provided at the child's home.

**You are expected to use your ethical and clinical reasoning to determine if telehealth services are appropriate for a student, based on your assessment of that student. Considerations may include but are not limited to:**

- Your competence in providing telehealth service.
- The complexity of the student's needs and disability.
- The nature and complexity of the planned intervention.
- The requirements of school-based practice.
- Appropriate qualification and/or training for an onsite e-helper.
- Consensus of the IEP team or direct communication with the student, family, and e-helper.
- Your competence and fluidity with technology, as well as the competency of the student, parent(s) and other family or caregiver(s), and the e-helper.
- Student-specific information, the student's environment, and context.
- Compliance with laws, regulation, and policy at the federal, state, and local levels.

*Since we have no prohibition of telehealth in Maine, you should follow this guidance when considering providing services. Please find more information at [PT Pediatric Information](#).*

Our discussions with experts in the field support flexibility being offered to support families and children during extended alternate learning. We suggest you follow the federal guidelines and in a good faith effort, follow the intention of each student's IEP.

