



How Heavy Is Your Workload?



Background

OTPs are reframing their job responsibilities in terms of their workload, rather than their caseload (AOTA, APTA, & ASHA, 2014; Jackson, Polichino & Potter, 2006; Polichino & Jackson, 2014).

The concept of workload vs. caseload was 1st introduced in the speech & language literature (ASHA, 2002; ASHA, 2002b, Annett, 2003).

There is limited evidence in the OT literature to help therapists select & implement a workload-based service delivery model (Case-Smith & Holland, 2009; Kingsley & Mailloux, 2013)

Purpose of the Study & Research Question

The purpose of this study was to explore therapists' perceptions of the 3:1 Service Delivery Model and to explore whether or not the use of this workload-oriented approach would give a practitioner more time to manage all of their workload responsibilities.

What is the 3:1 Service Delivery Model?

Direct intervention is provided to students 3 weeks out of the month. During the fourth week, intervention takes place indirectly, on behalf of students in a variety of ways.



Methods

Design

- This study used a qualitative, phenomenological approach.

Sample Population

- 5 OT practitioners & 5 SLP's were recruited via web-based searches & networking. Attempts to recruit PT's were unsuccessful.

Inclusion Criteria

- OT, PT, & SLP school-based practitioners in the United States. with experience using the 3:1 Model.

Procedures

- Survey & interview questions were piloted prior to use with the subjects to ensure that they elicited the intended information.
- All participants signed a consent form.
- Interviews were conducted via teleconferencing, recorded, & transcribed verbatim.
- To enhance the rigor & validity of the findings, member checking & peer debriefing occurred.

Results

What do therapists do during the indirect week?

- Staff Training
- Documentation
- Attend Meetings
- Consultation & Collaboration
- Co-lead Groups in Classrooms
- Treatment & Observations in Natural Settings
- Whole-school Programming
- Evaluations & Screenings
- Preparation of Materials
- Make-Up Sessions
- Direct Treatment
- Medicaid Billing
- Parent contact

Results (continued)

Category #1: Initiation

- Why was it initiated?

"I get to see how my kids act in a larger group...and what kind of supports they need in their whole group classroom" (Theresa)

"Our district, instead of hiring extra therapists, decided to gift us with the 3:1 Model" (Brenda)

- How was it introduced?

"We didn't ease into it. We went full throttle" (Kelly)

"There was a speech therapist that spearheaded it" (Miranda)

Category #4: The Perceptions of Others

"General ed teachers always saw the benefit from it, but special ed teachers thought 'Why don't I get the week off too?'" (Sharon)

"Administration thought that it was going to be a way to solve some of their staffing issues. That ended up becoming problematic on multiple levels for them". (Brenda)

Category #2: Promotion of the Model with Stakeholders

"I don't think the Board of Education knew who I was and it got me out there" (Barbara)

"I think a lot of it is really how you promote it & sell it. If you don't understand it & believe in it, then it's not going to be successful in your building" (Sharon)

Category #3: Implementation

- Who's using it?

"There was talk about OT & PT doing it, but they didn't have a strong enough advocate" (Donna)

"I have some students on my caseload that require the structure and routine (that a more traditional model provides)". (Theresa)

- What are you doing?

"If we are absent....we are expected to make up that child during the indirect week" (Mary)

"I never got to see them at lunch or on the playground, so I was able to go & take observation notes so that I could go & alter my therapy" (Sharon)

Category #6: Benefits

"It's giving me more availability to start new programs and to help in the general population" (Barbara)

"I feel like I'm doing a better job. I don't feel nearly as overwhelmed as I did previously" (Betty)

"The really nice thing about the 3:1 Model is it can be done differently. There really is no right or wrong way to do it" (Sharon)

Category #5: Challenges

During the indirect week, "we're not going for manicures and pedicures which has been joked about by many teachers" (Miranda)

"Scheduling is tricky" (Kelly)

"I feel like we make little gains and then we'll take a step back because the changeover in staff" (Mary)

Discussion

5 Themes emerged when using the 3:1 Model:

- Services were provided in natural environments.
- The scope of services was expanded.
- Stakeholders decided who should use the Model on a case-by-case basis.
- The perceptions of others created both opportunities & challenges to implementation.
- Time management was more effective.

Implications for Practice

- The use of this workload-oriented model may support practitioners as they move away from a caseload approach.
- Through collaboration, the Model supports occupation-based practice in natural settings.
- Be mindful of your intentions. Is it being used to enhance practice? Manage paperwork?
- One size does not fit all. How can a workload-oriented model be implemented in your setting?
- All about the numbers. What is reasonable?

Limitations of the Study

- Small sample size
- Telephone interviews versus face-to-face interviews.
- Some subjects had not used the Model in more than a year and were relying on their memory to report.
- PT's were not represented in the study.

Conclusions

- All of the therapists reported that when faced with reasonable caseload numbers, the use of the 3:1 Model provided them with more time to manage their workload responsibilities and expand the scope of their practice.
- Successful implementation of this workload model is heavily tied to positive perceptions of collaborating professionals, such as teachers and administrators.

References

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