Tiered Occupational Therapy (OT) Services in Schools: Unpacking Myths and Facts for Educators

Note: The questions and responses provided in this document are specific to the Ontario school context. Procedures and practices may differ in other jurisdictions.

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How to Use this Resource

This resource was created to clarify common misconceptions and show how tiered occupational therapy services can strengthen the work educators already do. It offers straightforward guidance about what tiered occupational therapy is (and isn't) and how it supports your role in helping all students succeed. This document includes quick, easy to understand explanations of how tiered occupational therapy services can enhance collaboration.

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Unpacking Myths and Facts for Educators

1. Myth: Occupational therapists can only help with children's handwriting and fine motor skills.

Fact: School-based occupational therapists can do more than support handwriting and fine motor skills, especially in tiered service models. They help children participate fully in school life, using their knowledge to enhance:

- **Safety**: Helping children engage safely in school environments, activities, and routines, by designing environments and sharing strategies that reduce risk and support independence.
- **Classroom accessibility**: Making learning environments more safe, inclusive, and supportive.
- **Self-care**: Assisting with tasks like safely using the washroom and dressing for recess.
- **Self-regulation**: Helping children understand and manage emotions and behaviours safely and effectively.
- **School activities**: Supporting safety, organization, and planning for classroom tasks, transitions, social interactions, play, and school events.
- **Social participation**: Encouraging safe engagement in extracurricular activities and positive peer relationships.

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2. Myth: Occupational therapists are unable to help with challenging and/or unsafe behaviours, and these arise without reason and cannot be anticipated or prevented.

Fact: All behaviour is a form of communication. Challenging or unsafe behaviours rarely occur without reason; they often signal unmet needs, distress, or a mismatch between a child's abilities and the demands of the environment. When we understand the factors contributing to behaviour, we can anticipate patterns, reduce triggers, and prevent many behaviours from escalating.

Challenging behaviours frequently emerge when children experience barriers to participation, including:

- **Physiological needs** (e.g. fatigue, hunger, illness)
- **Mismatches between task demands and developmental level**
- **Communication challenges**
- **Social–emotional factors** (e.g., anxiety, stress, attachment needs)
- **Sensory processing differences**
- **Environmental or task-related demands**
- **Changes to routine**

Educators can use their expertise to observe behaviour patterns, identify potential triggers, and make developmentally appropriate adjustments to routines, tasks, and expectations. This helps by creating predictable environments, fostering emotional safety, and building strong relationships further reduce the likelihood of challenging behaviours.

How Occupational Therapists Can Help

Occupational therapists who work in a tiered model can support educators to understand the *root causes* of challenging behaviour and develop proactive strategies that promote safety, engagement, and regulation. Occupational therapists can:

- **Identify underlying factors** contributing to unsafe or disruptive behaviours.
- **Interpret what the behaviour may be communicating** about the child's needs.

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- **Develop supports, tools, and strategies** to reduce behavioural triggers (e.g., check-in strategies with children).
- **Modify the environment** to promote regulation, autonomy, and participation (e.g., soft adjustable lighting, reduced visual or auditory clutter, flexible seating options, regulation spaces).
- **Guide children toward safer and more effective ways** to express their needs.
- **Collaborate with educators and families** to build consistent, supportive approaches across settings.

These proactive approaches can help children feel more regulated, safe, and capable, reducing the likelihood of behaviours that interfere with learning.

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3. Myth: Occupational therapists only provide one-on-one support for individual children.

Fact: Although occupational therapists work with individual children, in a tiered model they can also play an important role in supporting the entire class and the broader school community.

Occupational therapists can help educators create inclusive learning environments by:

- Shaping classroom routines and instructional strategies that address the diverse needs of all students;
- Modelling best practices, such as universal design for learning (UDL), to ensure every child can participate meaningfully;
- Contributing to broader school and school board initiatives.

Educators can help others understand the role of occupational therapy by explaining that the therapist is there to support learning for everyone in the school, creating opportunities for all children to participate and to seek help when needed.

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4. Myth: Only children with identified special education needs or an individual education plan (IEP) can benefit from occupational therapy.

Fact: Occupational therapy services can benefit all students, not just those with identified special education needs or an IEP. A tiered approach ensures support is needs-based so children receive the right help at the right time, promoting equitable access to occupational therapy services for every child.

5. Myth: Occupational therapists are external experts who only visit the school when there is a need.

Fact: In a tiered service model, occupational therapists are in the school more frequently, rather than occasionally, which makes it easier to collaborate with educators and staff, build strong relationships, and become a true part of the school team. The goal is partnership. Through ongoing engagement, the occupational therapist can collaborate with educators to support students through universal, targeted, and individualized services. Instead of responding only when a need arises, the occupational therapist is available to help implement proactive solutions.

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6. Myth: There is no need for educators and occupational therapists to understand each other's roles because we are experts in our own fields.

Fact: Tiered service models rely on collaboration and a shared commitment to student success. Understanding each other's roles is essential because every team member contributes unique expertise that directly shapes learning and participation.

- **Occupational therapists** bring deep knowledge of child development, health and developmental conditions, sensory processing and motor skills, mental health and well-being, and how to design environments, routines, and tasks that help students thrive. Their work often includes supporting social participation, such as turn-taking, play skills, peer interactions, and emotional readiness for group activities, areas some educators may not realize fall within occupational therapy practice.

- **Educators** bring expertise in instruction, curriculum, classroom management, and strategies that draw on students' strengths and needs within the learning environment.

In the school setting, occupational therapists can collaborate closely with educators and other professionals and may apply approaches that cross traditional discipline boundaries. Together, educators and occupational therapists can co-develop practical, evidence-based strategies that fit naturally into the classroom. Equal partnership with a focus on children's goals is key.

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7. Myth: Occupational therapists only work with children outside of the classroom.

Fact: In a tiered model, occupational therapists work with children and educators in context whenever possible. You may find the occupational therapist working in classrooms, on the playground, in gymnasiums, and libraries to promote accessibility, participation, safety, and success for everyone in the school environment.

8. Myth: Children receive better occupational therapy support outside of the classroom.

Fact: Providing occupational therapy in the classroom supports children in their natural learning environment. Working directly in the classroom allows occupational therapists to trial task and environmental modifications and recommend strategies that are realistic and suited to where learning happens.

While some children may still receive and benefit from occupational therapy services outside the classroom, classroom-based occupational therapy fosters collaboration with educators and helps create strategies that are practical, inclusive, and responsive to real classroom demands.

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9. Myth: Occupational therapy is only for children in elementary school; children and youth in secondary schools do not require occupational therapy support.

Fact: Occupational therapy can support children and youth across all grade levels, including the secondary schools. The needs of children and youth are not static; they change and evolve over time and in response to the changing demands of the academic setting and curriculum. In secondary schools, occupational therapists can support:

- The development of skills in areas such as organization, time management, executive functioning, and vocational preparation.
- Transition planning.
- Access to supportive tools and equipment.
- Environmental adaptations and design.
- …and more, depending on individual and school needs.

While *tiered* occupational therapy services are common in elementary settings, they are not typically provided at the secondary level.

In secondary schools, occupational therapy support is usually individualized rather than universal or school-wide, partly due to structural differences (e.g., multiple educators, complex schedules), resource constraints, and a focus on transition planning.

Tiered approaches *can* work at the secondary level, but currently, research and resources for tiered occupational therapy models in secondary schools remain limited.

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10. Myth: Children will grow out of needing occupational therapy support.

Fact: Children do not simply "grow out of" needing occupational therapy support. While some children may no longer need direct occupational therapy services as they develop skills and strategies, others may require ongoing or intermittent support as needs arise. When a tiered service approach is used, support can range from universal strategies for all students, to targeted interventions for some, to individualized services for those with the greatest needs. The goal is always to equip children, families, and educators with tools that last beyond therapy, but the duration and intensity of services depend on each child's unique needs.

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11. Myth: Tiered occupational therapy service delivery is a new concept that requires extensive learning for educators.

Fact: Tiered approaches are not new in education. Canadian schools have been using frameworks like Universal Design for Learning (UDL) and Differentiated Instruction (DI) for many years to promote inclusive learning for all children (Ontario Ministry of Education, 2013).

Tiered occupational therapy models build on these familiar approaches by applying similar principles to support skill development, inclusion, and participation. Tiered occupational therapy services provide proactive, flexible support at universal, targeted, and individualized levels. This familiar framework makes integration easy, requiring little additional learning for educators. One example of a tiered service model is Partnering for Change.

12. Myth: Tiered occupational therapy models of service create more work for educators.

Fact: Tiered occupational therapy models may feel different at first, but they are designed to integrate seamlessly into classroom routines, not add extra work for educators. In this approach, occupational therapists and educators collaborate to identify challenges, trial strategies and tools that fit naturally within existing practices. This partnership builds educator capacity, creating a toolbox of strategies that can be used every day. Over time, these proactive and inclusive approaches become embedded in routines, reducing workload.

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13. Myth: My classroom runs smoothly. I don't think I need an occupational therapist's support.

Fact: Even in a smoothly running classroom, children may still have needs that are not immediately obvious. In a tiered service model, occupational therapists can work alongside educators to support the whole class, not just those with identified needs. They can also help build educator capacity by offering and trialing proactive strategies and providing practical tools that promote regulation, engagement, participation, independence, and smoother transitions for all children. Educators can communicate with the occupational therapist before classroom visits to share concerns and discuss needs. This helps the occupational therapist understand current routines and determine where to focus their support.

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Additional Resources

For more information, please refer to the following resources:

- CanChild Centre for Childhood-Onset Disability Research
    - https://canchild.ca/
- Partnering for Change (P4C) Tiered Occupational Therapy Service Model
    - https://www.p4cguide.com
- Partnering for Change (P4C) Webinar: P4C Foundations for Educators
    - https://p4cguide.com/webinars/

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