|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| District/School | | | | | |  | | | | | | |
| 2-Year Report for Period of | | | | 7/1/2019 | | through | | | 6/30/2021 | | | |
| REPORT OF CASELOADS FOR OCCUPATIONAL THERAPISTS | | | | | | | | | | | | |
| (Must be submitted to the Nevada Department of Education and posted to the district’s website by October 1 in each odd-numbered year) | | | | | | | | | | | | |
| 1. Describe the factors used in determining caseloads (check all that apply): | | | | | | | | | | | | |
| Geographic considerations such as distance OTs must travel to get to sites | | | | | | | | | | 9 miles | | |
| Number of students who need services at a given site | | | | | | | | | | 13 | | |
| Number of students who need services in the district | | | | | | | | | | 13 | | |
| Level of intensity of students’ needs | | | | | | | | | |  | | |
| Number of OTs employed by the district | | | | | | | | | | 1 | | |
| Number of existing vacancies | | | | | | | | | | 0 | | |
| Other – Describe: | | | | | | | | | |  | | |
| NA- Needs Meet | | | | | | | | | | | | |
| 2. Describe the range of number of pupils with disabilities at different school sites who require services: | | | | | | | | | | | | |
| Minimum number of students who receive OT at any given site: | | | | | | | | | | 13 | | |
| Maximum number of students who receive OT at any given site: | | | | | | | | | | 13 | | |
|  | | | | | | | | | | | | |
| 3. Describe the range of levels of intensity of the services required: | | | | | | | | | | | | |
| Number of pupils who receive direct services approximately 1-2 times per week: | | | | | | | | | | 13 | | |
| Number of pupils who receive direct services approximately 1-2 times per month: | | | | | | | | | | 2 | | |
| Number of pupils who receive consultation services approximately 1 time per week: | | | | | | | | | | 0 | | |
| Number of pupils who receive consultation services approximately 1 time per month: | | | | | | | | | | 0 | | |
| 4. Describe the availability of appropriately certified assistants to assist with provision of services: | | | | | | | | | | | | |
| NA- None Required | | | | | | | | | | | | |
| 5. Describe the geographic factors that affect the ability of therapists to travel to provide the services (check all that apply and provide a brief description): | | | | | | | | | | | | |
| Travel time / distance. Describe: | | | | | | | | | |  | | |
|  | | | | | | | | | | | | |
| Weather conditions. Describe: | | | | | | | | | |  | | |
|  | | | | | | | | | | | | |
| Other – Describe: | | | | | | | | | |  | | |
|  | | | | | | | | | | | | |
| 6. Describe the degree to which the district expects occupational therapists to participate in meetings pertaining to the pupils: | | | | | | | | | | | | |
| Attend IEP Meetings | | | | | | | | | | | |  | |
| 7. Provide the number of occupational therapist vacancies experienced by the district in this reporting period: | | | | | | | | | | 0 | |
| 8. Describe the efforts made by the district for the recruitment and retention of occupational therapists: | | | | | | | | | | | |
| NA- Needs Meet | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| District | | | |  | | | | | | | | |
| 2-Year Report for Period of | | 7/1/2019 | | through | | | 6/30/2021 | | | | | |
| 9. List the number and caseload of each OT employed in this reporting period: | | | | | | | | | | | | |
| Full Time Occupational Therapists (OTs) | | | | Part-Time Occupational Therapists (OTs) | | | | | | | | |
| Full-Time Ots (FT OT) | Maximum Caseload | Employee (E) or Contracted (C) | | Part-Time OTs (PT OT) | | % FTE  Worked | Maximum Caseload | | | | Employee (E) or Contracted (C) | |
| FT OT #1 | 13 | C | | PT OT #1 | |  |  | | | |  | |
| FT OT #2 |  |  | | PT OT #2 | |  |  | | | |  | |
| FT OT #3 |  |  | | PT OT #3 | |  |  | | | |  | |
| FT OT #4 |  |  | | PT OT #4 | |  |  | | | |  | |
| FT OT #5 |  |  | | PT OT #5 | |  |  | | | |  | |
| FT OT #6 |  |  | | PT OT #6 | |  |  | | | |  | |
| FT OT #7 |  |  | | PT OT #7 | |  |  | | | |  | |
| FT OT #8 |  |  | | PT OT #8 | |  |  | | | |  | |
| FT OT #9 |  |  | | PT OT #9 | |  |  | | | |  | |
| FT OT #10 |  |  | | PT OT #10 | |  |  | | | |  | |
| FT OT #11 |  |  | | PT OT #11 | |  |  | | | |  | |
| FT OT #12 |  |  | | PT OT #12 | |  |  | | | |  | |
| FT OT #13 |  |  | | PT OT #13 | |  |  | | | |  | |
| FT OT #14 |  |  | | PT OT #14 | |  |  | | | |  | |
| FT OT #15 |  |  | | PT OT #15 | |  |  | | | |  | |
| FT OT #16 |  |  | | PT OT #16 | |  |  | | | |  | |
| FT OT #17 |  |  | | PT OT #17 | |  |  | | | |  | |
| FT OT #18 |  |  | | PT OT #18 | |  |  | | | |  | |
| FT OT #19 |  |  | | PT OT #19 | |  |  | | | |  | |