

EMPLOYEE NAME: _____

 Created: 1/86; 3/86; 2/88; 8/89; 12/91; 6/92; 3/93; 11/94;
 2/95; 10/96; 2/97; 12/97; 11/98; 2/07; 4/14; 7/17; 6/18

JOB DESCRIPTION

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| POSITION TITLE: Occupational Therapist | JOB CODE: 483A |
| DIVISION: Academic, Support and Specialized Services | SALARY SCHEDULE: Occupational & Physical Therapist |
| DEPARTMENT: Special Education | WORK DAYS: 188 |
| REPORTS TO: Supervisor, Special Education | PAY GRADE: NP0 (1, 2, 3, or 4) |
| FLSA: Exempt | PAY FREQUENCY: Monthly |
| PRIMARY FUNCTION: Facilitates the development and performance of everyday self-care, pre-academic and pre-vocational activities for eligible disabled students. | |

REQUIREMENTS:

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| 1. | Educational Level: Bachelor Degree |
| 2. | Certification/License Required: Occupational Therapist license |
| 3. | Experience: None |
| 4. | Physical Activities: Ability to lift a student up to a weight of 40 pounds without assistance; ability to perform a two-person lift for students over 40 pounds |
| 5. | Knowledge, Skills, & Abilities: Written and oral communication, planning and organization |

The Board of Education and the Superintendent may accept alternatives to some of the above requirements.

ESSENTIAL DUTIES:

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| 1. | Demonstrates prompt and regular attendance. |
| 2. | Performs appropriate assessment procedures. |
| 3. | Interprets assessment results to teachers, parents and other personnel. |
| 4. | Develops an individual education plan for occupational therapy goals and treatment for eligible students. |
| 5. | Administers occupational therapy in accordance with the treatment plan as stated in the individual education plan. |
| 6. | Performs on-going evaluation of treatment programs and adapt programs as necessary to maximize results. |
| 7. | Selects and manages adaptive equipment and/or assistive devices for use with upper trunk, arms and hands and aids in elimination of architectural barriers. |
| 8. | Maintains records and reports. |
| 9. | Lifts, positions, transfers and performs other special duties using lumbar belts as required to meet the needs of moderately intellectually disabled, severely and profoundly intellectually disabled and orthopedically impaired students. |
| 10. | Performs other duties as assigned by appropriate administrator. |

Signature of Employee _____ Date _____

Signature of Supervisor _____ Date _____