

**Certified NON-Teaching Evaluation Rubric
Occupational/Physical Therapist**

Staff Member's Name: _____

Supervisor's Name: _____

Date: _____

**Domain 1
Planning and Preparation**

1A: Demonstrating Knowledge of OT/PT Content, Skills, and Strategies

Innovating	Applying	Developing	Not Demonstrating
Has extensive knowledge of content, skills, and evidence- based strategies, and applies knowledge consistently to practice and within a context of interdisciplinary collaboration and problem-solving. Is committed to building on knowledge base and collaborating with other educators to facilitate collective expertise and improved outcomes.	Has adequate knowledge of content, skills, and evidence- based strategies, and applies knowledge consistently to practice and within a context of interdisciplinary collaboration and problem-solving.	Has some knowledge of content, skills, and strategies, and applies knowledge inconsistently to practice.	Makes treatment errors due to limited knowledge of content, skills, and strategies.
Notes:	Notes:	Notes:	Notes:
Evidence:			

1B: Uses Knowledge of his/her Specialty Area to Plan Programs That Meet Students' Needs

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist’s plans and practices take into account characteristics, skills, and needs of each individual student. Therapist uses this knowledge to create meaningful and realistic opportunities and to differentiate instruction.</p>	<p>Therapist’s plans and practices display solid understanding of developmental characteristics, skills, and needs of each individual student in his/her specialty. Therapist’s plans and practices display solid understanding of how disabilities impact students' attitudes, behaviors, and performances.</p>	<p>Therapist’s plans and practices display general knowledge of developmental characteristics, skills, and needs of students as a whole group in his/her specialty. Therapist’s plans and practices display general understanding of disabilities of students.</p>	<p>Therapist’s plans and practices display minimal knowledge of typical developmental characteristics, skills, and needs of students in his/her specialty. Therapist’s plans and practices display minimal knowledge of disabilities of students.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

1C: Established Clear Therapeutic Goals to address the needs of the Students Served

Innovating	Applying	Developing	Not Demonstrating
Therapist has deep and extensive knowledge of available resources within and external to the school and district. Therapist works closely with key stakeholders to identify additional resources.	Therapeutic goals are crisply defined and highly appropriate for informing a wide range of aligned program activities that address the needs and ages of the students served.	Therapeutic goals are clearly defined and appropriately designed for the ages and needs of the students served.	Therapeutic goals are somewhat clear and appropriate for the ages and needs of some of the students.
Notes:	Notes:	Notes:	Notes:
Evidence:			

1D: Demonstrating knowledge of governmental regulations and resources, both within and beyond the school and district

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist has deep and extensive knowledge of available resources within and external to the school and district. Therapist works closely with key stakeholders to identify additional resources.</p>	<p>Therapist is knowledgeable of resources available to support the program and students within the school and district and has some understanding of resources beyond these. Therapist continually seeks additional resources to support the program and students.</p>	<p>Therapist demonstrates limited knowledge of school or district resources available to support the program and students. Therapist makes limited attempts to develop this knowledge.</p>	<p>Therapist does not demonstrate knowledge of school or district resources to support the program and students and makes no attempts to gain this knowledge.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>

Evidence:

1E: Ensures the Therapeutic Program is Coherent and Integrated with the School Programs to Meet Student needs

Innovating	Applying	Developing	Not Demonstrating
The therapeutic program aligns and integrates program activities, program goals, and school goals to ensure a coherent and flexible approach that addresses the needs of most of the students served.	The planned therapeutic program is both coherent and well integrated with the school programs.	Planned therapeutic program includes activities that are somewhat coherent and not well aligned and integrated with the program goals and the school programs.	Planned therapeutic program is incoherent, made up of a series of activities and experiences that are poorly aligned with the goals of both the therapeutic program and the school programs.
Notes:	Notes:	Notes:	Notes:
Evidence:			

1F: Develops Plans to Assess and Improve the Therapeutic Services Offered to Students

Innovating	Applying	Developing	Not Demonstrating
Therapist has developed a plan for ongoing review and refinement of the services offered to individuals or groups of students, incorporating the recommendations of students and other stakeholders.	Therapist has developed a clear plan to assess the processes and impact of the services offered to individuals or groups of students and to use the evidence of impact to frame improvements.	Therapist has developed a limited approach to assessing and improving the therapeutic services offered to individuals or groups of students.	No plans have been developed to assess and improve the therapeutic services offered to individuals or groups of students.
Notes:	Notes:	Notes:	Notes:
Evidence:			

Domain 2 The Professional Environment

2A: Knows and Develops Positive and Respectful Interactions with Students

Innovating	Applying	Developing	Not Demonstrating
Students and Therapist collaborate to maintain the positive climate promoted by the Therapist. Students monitor their own interactions to ensure they are both respectful and supportive. Therapist continues to model respectful and supportive interactions, continuously promoting and supporting respect for diversity.	Therapist models and promotes respectful and supportive interactions with each student, actively encouraging students to interact with each other in respectful and caring ways. Therapist respects and celebrates the cultural and linguistic differences among the students. Adult/student rapport is high.	Therapist's interactions with students are generally appropriate, but there is limited success in promoting respectful and caring interactions among the youngsters. Therapist typically respects the cultural and linguistic diversity of the students, but there are some indicators of insensitivity. Levels of rapport vary.	Therapist does not know the students served and does not exhibit respectful and caring interactions with them. Students do not appear comfortable in the therapeutic setting.
Notes:	Notes:	Notes:	Notes:
Evidence:			

2B: Sets Priorities and Organizes Time

Innovating	Applying	Developing	Not Demonstrating
<p>Effective and efficient time management skills help ensure that therapeutic activities run smoothly and on schedule. Students, teachers, and families/ caregivers know and understand the schedule of services.</p>	<p>Priorities are well ordered, ensuring that the therapeutic work proceeds on time and efficiently. Schedules are defined and communicated to students and teachers.</p>	<p>Time is somewhat organized, ensuring that required activities are completed, although not necessarily efficiently.</p>	<p>Priorities are not clearly defined and time is not well managed, causing negative impact on scheduling and the timely completion of reports.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

2C: Develops and Promotes Referral Processes and Procedures

Innovating	Applying	Developing	Not Demonstrating
Therapist develops referral processes and procedures in collaboration with school staff. Referral processes and procedures are effectively communicated and understood by all.	Referral processes and procedures are well defined. All stakeholders know and understand what to do to refer a student.	Therapist has developed a rudimentary set of processes and procedures to guide referrals, but families/caregivers and teachers do not understand them.	There is no evidence of processes and procedures to guide referrals to the therapeutic program.
Notes:	Notes:	Notes:	Notes:
Evidence:			

2D: Develop and Enforces Standards for Student Conduct

Innovating	Applying	Developing	Not Demonstrating
<p>Students help define the standards of behavior and hold themselves and their classmates accountable for honoring these. Therapist helps promote the standards beyond the therapeutic space, framing a culture of expectations for student behaviors throughout the school.</p>	<p>Standards of conduct are evident and referenced by the Therapist and students. Student behavior is monitored relative to the standards. Students understand that there are consequences for misbehaviors, and misbehaviors are addressed appropriately.</p>	<p>Standards of conduct are posted, but these are inconsistently reinforced by the Therapist and inconsistently followed by the students. Misbehaviors are addressed inconsistently.</p>	<p>Standards for student conduct have been established and there is little or no attention paid to managing student behavior. Misbehaviors are addressed in ways that are harsh or inappropriate.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

2E: Organizes Physical Space to Support Program Goals and Activities

Innovating	Applying	Developing	Not Demonstrating
<p>The physical space is safe and organized in a flexible and inviting manner, fully supporting program activities. The students collaborate with the Therapist to maintain the physical space and reorganize as necessary to support emerging needs.</p>	<p>The physical space is safe and well organized to support the program activities and goals. Students can readily and independently access resources and equipment they need.</p>	<p>The physical space is safe and reasonably organized to support some program activities, but it is not flexible enough to support the various learning experiences that take place as part of the program. Students can usually locate and access resources and equipment, although time is wasted in looking for these.</p>	<p>The physical space is disorganized and not arranged to support program activities, compromising the achievement of program goals. Access to program resources and equipment is constrained.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

Domain 3
Delivery of Services

3A: Assesses Referred Students

Innovating	Applying	Developing	Not Demonstrating
Therapist responds quickly and professionally to referrals and helps teachers and administrators understand how to identify students for referrals. Assessments are comprehensive and competent.	Therapist responds to referrals in a timely and professional manner, making a complete and thorough assessment of the needs of each student.	Therapist reluctantly responds to referrals and makes an adequate assessment of the needs of students.	Therapist ignores referrals and does not see the students, or sees referred students but makes an inadequate assessment of their needs.
Notes:	Notes:	Notes:	Notes:
Evidence:			

3B: Implements Treatment Aligned with Students' Needs and Goals

Innovating	Applying	Developing	Not Demonstrating
Treatment is comprehensive in scope, inventive, and tightly aligned with the needs and goals identified through the referral and assessment process.	Treatment is effectively aligned with the identified needs and goals, and is appropriate to address student needs.	Treatment is only somewhat aligned with the needs and goals identified through the referral and assessment process, and so treatment is not entirely appropriate to address student needs.	Treatment is not aligned with the needs and goals identified through the referral and assessment process.
Notes:	Notes:	Notes:	Notes:
Evidence:			

3C: . Ensues the Use of Therapeutic Techniques and Strategies in Sessions and in Classrooms

Innovating	Applying	Developing	Not Demonstrating
A wide range of therapeutic strategies and techniques are fully implemented in sessions. Therapist works closely with teachers to help them adjust their instructional strategies, lesson goals, and physical space to best meet the needs of the students served.	A range of therapeutic strategies and techniques are fully implemented in sessions. Sufficient effort is made to work with teachers to implement strategies in classrooms that support student needs.	A limited number of therapeutic strategies and techniques are fully implemented in sessions. Minimal effort is made to work with teachers to implement strategies in classrooms that would support student needs.	Therapeutic treatment is either undefined or insufficiently defined to promote full implementation in one-on- one sessions or small group sessions with students. No effort is made to work with teachers to support these students in the classroom setting.
Notes:	Notes:	Notes:	Notes:
Evidence:			

3D: Uses Data to Adjust Treatment During Delivery of Services

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist has a sophisticated system for monitoring impact of treatment during delivery, and this system is shared with critical stakeholders. Data is used regularly to adjust treatment during delivery, and these adjustments are frequently reported to stakeholders.</p>	<p>Therapist uses a clearly defined system for monitoring impact of treatment during delivery. Data is used regularly to adjust treatment during delivery.</p>	<p>Therapist uses a somewhat defined system to monitor impact of treatment during delivery. Data is used minimally to adjust treatment during delivery.</p>	<p>Therapist does not use a defined system to monitor impact of treatment during delivery. Data is not used to adjust treatment during delivery.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

3E: Demonstrates Responsiveness to Students' Needs

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist regularly reviews the implementation and impact of the planned treatment, integrating this analysis with input from critical stakeholders, to inform ongoing revisions to the treatment plan. Developmental levels, cultural proficiency, and linguistic levels are critical factors in shaping revised plans.</p>	<p>Therapist uses existing and emerging evidence to guide appropriate changes to the planned services in order to better meet students' needs. Developmental levels, cultural proficiency, and linguistic levels are taken into consideration.</p>	<p>Moderate changes are made to the treatment plan when emerging needs foster a new view of the treatment. Developmental levels, cultural proficiency, and linguistic levels are taken into consideration in a limited way.</p>	<p>Therapist follows the planned program for service delivery, regardless of whether or not it continues to adequately address students' needs. Developmental levels, cultural proficiency, and linguistic levels are not taken into consideration.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

Domain 4 Professional Responsibilities

4A: Reviews and Reflects on Practice to Inform Recommendations for Improvement

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist’s reflections are both specific and perceptive, not only citing evidence for the reflections, but also applying professional judgment to determine why goals were or were not met. Recommendations are specific and focused on ongoing program improvement.</p>	<p>Therapist accurately reflects on the implementation and impact of the therapeutic services, providing concrete and specific examples of challenges and successes. Recommendations are specific and focused on program improvement.</p>	<p>Therapist’s reflections are generally accurate and focused on the effectiveness of services delivery. Recommendations are often too global to inform any meaningful recommendations for improvement.</p>	<p>Therapist either does not reflect on practice or provides inaccurate recommendations for improvement.</p>
Notes:	Notes:	Notes:	Notes:
Evidence:			

4B: Keeps Accurate Records and Writes Timely and Appropriate Reports

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist keeps records of student growth and needs from all services provided and incorporates data from other sources to inform next steps. Treatment reports are timely, accurate, comprehensive, and specifically developed for the intended audience.</p>	<p>Therapist keeps records of student growth and needs from each of the services provided. Treatment reports are timely, accurate, and appropriate for the intended audience.</p>	<p>Therapist keeps some records of services provided. Reports are often inappropriate for the intended audience but usually accurate.</p>	<p>Therapist keeps minimal or no records of services provided. Program reports are inadequate or inappropriate for the intended audience.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

4C: Communicates effectively with Families/Caregivers

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist provides oral and written information to families/caregivers in ways that are appropriate and culturally and linguistically sensitive, and reaches out to ensure the information is understood. Families/caregivers provide informed consent for the services.</p>	<p>The goals processes and procedures of the therapeutic program are presented to students and their families/caregivers in ways that are both appropriate and culturally and linguistically.</p>	<p>The goals processes and procedures of the therapeutic program are presented to students and their families/ caregivers in ways that are only partially successful. Necessary permissions are obtained but the reasons for the identified services are not always made clear.</p>	<p>Therapist does not effectively explain the goals, processes, and procedures of the therapeutic program in ways that are clear and appropriate for the students and their families/caregivers.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

4D: Engages with the Larger School and District Community

Innovating	Applying	Developing	Not Demonstrating
<p>Therapist seeks opportunities to engage in school and district events, projects, and/or committees and makes significant contributions to these, often taking a leadership role.</p>	<p>Therapist actively participates in, supports, and contributes to school and district committees, projects, and/or events. Professional relationships are positive, cooperative, and productive.</p>	<p>Therapist selectively engages with school and district committees, projects, and/or events, typically when asked. Professional relationships with colleagues are courteous.</p>	<p>Therapist does not participate in school or district committees, projects, and/or events. Professional relationships with peers are distant or negative.</p>
<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>	<p>Notes:</p>
<p>Evidence:</p>			

4E: Enhances Professional Capacity through Ongoing Professional Learning

Innovating	Applying	Developing	Not Demonstrating
Therapist seeks out formal and informal professional learning opportunities, including feedback from colleagues, and applies this learning to improve service delivery and to increase the professional knowledge and skills of colleagues.	Therapist seeks and engages in professional learning opportunities and schedules opportunities to share the professional learning with colleagues.	Therapist participates only in professional learning that is required by the district or state and does not share any professional learning with colleagues.	Therapist does not participate in professional learning.
Notes:	Notes:	Notes:	Notes:
Evidence:			

4F: Demonstrates High Standards of Professionalism

Innovating	Applying	Developing	Not Demonstrating
Therapist displays the highest standards of honesty and integrity, challenging negativity and/or lack of integrity in any aspect of the service delivery. School/district regulations and confidentiality are consistently observed.	Therapist's interactions are marked by honesty and integrity in the service of all clients. School/district regulations and confidentiality are observed.	Therapist is generally honest with stakeholders and typically acts with integrity. Confidentiality is honored, but school/district regulations are inconsistently addressed.	Therapist's professional interactions are marked by lack of honesty and questionable integrity. Basic principles of confidentiality and school/district regulations and/or requirements are violated.
Notes:	Notes:	Notes:	Notes:
Evidence:			

Additional Feedback by Supervisor:

Supervisor's Signature: _____

Date: _____

Staff Member's Signature: _____

Date: _____

*Employee should receive a copy

*Copy should be kept in site file

*Original evaluation to be sent to Employee Services

(Adapted from: *Charlotte Danielson's Framework for Teaching* and *Pennsylvania Dept. of Education*)

New Mexico Public Education Department, Educator Quality, 12/20/21