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Dear Sponsor(s),

I am an occupational therapist working with children in the school system. I currently serve children ages birth to 21, visiting children in their home until the age of 3, and then serving them in their school from 3 years to 21. As an OT, I work with children with a variety of disabilities (intellectual, physical, social-emotional, and other) on my caseload to maximize their abilities to function as an optimal human beings with emphasis on their role as a student after age 3. For birth to 3, these children have motor challenges, sensory challenges, feeding challenges that impact their entire lives, and for many those difficulties persist way beyond age three. My caseload of 80 students and babies is so high, that my service to these children is minimal at best. Some children have OT services on their IEP for only a couple hours a year because that is all I can feasibly give, considering the high caseload. Schools have gotten use to this minimal service, and sometimes complain about increasing needed OT time (as that means more cost to the schools). However, OT is a federally mandated service (see IDEA). Because our workloads have gotten so high, and our service time spread so thin, it is not only compromising service delivery, but also the value of and respect of OT in the schools itself. I feel that every time I give one child everything they need to succeed despite their disability, I am leaving others behind because I literally do not have the time to give them all what they deserve.

In addition to a caseload of 80, I cover a large area - - I have students at 7 schools in Albany, and serve birth to 3 in Albany, and I also cover birth to 5 in Lincoln County, as well as the severely physically impaired school age students in Lincoln County. I drive to the coast (1.5 to 2 hours each direction) 2-3 days a week. My stress level, from trying to reach them all and give them all what they need, is astronomical.

It is saddening, when we get babies or students who move here from other states, who are used to getting therapy services 2-3x per week, and the best we can do is twice per month for babies, and monthly (at the very best) for school age. It should be noted, that not giving a child the support they need early on, affects their success in the future - - - and could be the difference between spending their life receiving disability (Medicaid dollars), and being an independent member of society. Please consider a caseload cap, or a formula for determining caseload size that takes travel time into consideration. The most vulnerable children in Oregon depend on it.

-Brooke Gentle