California Department of Education
Human Resources Division
HRD-002 (Revised 06/2024)

☒CURRENT
☐PROPOSED

PR LOG #:

DUTY STATEMENT

CIVIL SERVICE CLASSIFICATION	WORKING TITLE
Occupational Therapist	Occupational Therapist

BRANCH
Building Educational Success Together Branch

DIVISION	OFFICE
State Special Schools and Services Division	California School for the Deaf, Riverside

CBID	WWG	PCN	POSITION NUMBER	SPECIFIC LOCATION
R19	2		205-040-8288-001	Riverside

PROBATIONARY PERIOD	TENURE	TIME BASE	BILINGUAL POSITION
6 Months	Permanent	Full-Time	Yes

TELEWORK OPTION	SAFETY SENSITIVE POSITION	CONFLICT OF INTEREST CLASSIFICATION
In-Office	Yes	No

DIRECTION STATEMENT AND GENERAL DESCRIPTION OF DUTIES

Under the direction of the Supervising Teacher I (Supervisor of Assessment & Intervention Services), the Occupational Therapist at the California School for the Deaf, Riverside (CSDR) provides direct services to students, and works with students/staff to design accommodations that allow students with additional disabilities to access the common curriculum.

CONDUCT, ATTENDANCE, AND PERFORMANCE EXPECTATIONS

All employees are expected to work cooperatively with others, maintain regular, consistent, predictable attendance, and possess integrity, initiative, dependability and good judgment.

SUPERVISION BY

The Occupational Therapist reports directly to and receives the majority of assignments from the Supervising Teacher I (Supervisor of Assessment & Intervention Services); however, direction and assignments may also come from the Supervising Teacher III (Director of Student Services) at CSDR.

SUPERVISORY RESPONSIBILITIES

No supervisory duties or responsibilities.

WORKING CONDITIONS AND PHYSICAL REQUIREMENTS

Work will take place in classrooms, outdoors, indoors, and on the CSDR campus. The Occupational Therapist will have physical contact with students during therapy sessions.

ESSENTIAL/NON-ESSENTIAL FUNCTIONS

Relative % of Time Required: 45	☒ Essential Function	☐ Non-Essential Function

Duties Performed

Assist with Occupational Therapy evaluations, and provide direct services to students who are referred by their Individualized Education Program (IEP) team. Coordinate or assist in assistive technology evaluations, prepare and present written reports at student IEP meetings. Conduct classroom observations and consult with teachers and parents to provide suggestions for classroom accommodations that will enable a student to be more successful. Provide ongoing and follow up consultation services to teachers and parents. Teach students self-care activities. Adapt classroom environment to support instruction. Assist in instructing parents in the use of suitable activities and adapted equipment for use at home.

Relative % of Time Required: 25	☒ Essential Function	☐ Non-Essential Function

Duties Performed

Document all services provided using the school IEP, participate in IEP meetings as needed.

Relative % of Time Required: 15	☒ Essential Function	☐ Non-Essential Function

Duties Performed

Provide both formal and informal consultative services to school staff, parents, THRIVE assessment applicant families, and professionals in the community.

Relative % of Time Required: 10	☒ Essential Function	☐ Non-Essential Function

Duties Performed

Improve professional competence through participation in staff development activities (e.g., conferences, workshops, staff development days, department meetings, etc.), and by providing in-services on relevant topics to staff as needed).

Relative % of Time Required: 5	☐ Essential Function	☒ Non-Essential Function

Duties Performed

Miscellaneous duties as assigned.

Relative % of Time Required:	☐ Essential Function	☐ Non-Essential Function

Duties Performed

SPECIAL/ADDITIONAL REQUIREMENTS AND DESIRABLE QUALIFICATIONS

Desirable qualifications:
-Experience working with disabled students in an educational environment
-Knowledge of American Sign Language (ASL) or willingness to learn

PERSONAL CONTACTS

The incumbent will have contact with students, CSDR staff, parents, and school district representatives.

EMPLOYEE ACKNOWLEDGEMENT

I have read and understand the duties and requirements listed above, and I am able to perform these duties with or without an accommodation. (If you believe an accommodation may be necessary, or if unsure of a need for an accommodation, inform the hiring supervisor or the Accommodations Coordinator at Accommodations@cde.ca.gov.)

EMPLOYEE NAME	EMPLOYEE SIGNATURE	DATE

MANAGER/SUPERVISOR ACKNOWLEDGEMENT

I certify this duty statement represents a current and accurate description of the essential functions of the position. I have discussed the duties of this position with the employee and provided the employee a copy of this duty statement.

MANAGER/SUPERVISOR NAME	MANAGER/SUPERVISOR SIGNATURE	DATE

HRD C&P ANALYST	HRD APPROVAL DATE	EFFECTIVE DATE	DATE UPLOADED

This form will be kept in the employee's Official Personnel File.

Original - Classifications & Pay Office

Copies - Employee and Supervisor