Template for Report of Caseloads for Physical Therapists:

District		Quest Preparatory	Academy	
2-Year Report for Period of	7/31/2021	through	6/30/2	2023
REPORT OF CASELOADS FOR PHYSI	CAL THERAPISTS	•		
(Must be submitted to the Nevada each odd-numbered year)	Department of Education	n and posted to the o	district's website	by October 1 in
1. Describe the factors used in dete	ermining caseloads (checl	k all that apply):		
Geographic considerations such as	distance PTs must travel	to get to sites		
Number of students who need serv	vices at a given site			✓
Number of students who need serv	vices in the district			
Level of intensity of students' need	S			
Number of PTs employed by the di	strict			
Number of existing vacancies				
Other – Describe:				
2. Describe the range of number of	pupils with disabilities a	t different school site	es who require se	ervices:
Minimum number of students who				0
Maximum number of students who	receive PT at any given s	site:		Ü
3. Describe the range of levels of in	tensity of the services re	anited.		
Number of pupils who receive direction				0
Number of pupils who receive direct	• • • • • • • • • • • • • • • • • • • •	·		0
Number of pupils who receive cons	• • • • • • • • • • • • • • • • • • • •	·		0
Number of pupils who receive cons	•			0
4. Describe the availability of appro	ppriately certified assistar	nts to assist with pro	vision of services	:
n/a The school did not utilize a certif				
5. Describe the geographic factors		herapists to travel to	provide the serv	vices (check all that
apply and provide a brief description	onj:			
Travel time / distance. Describe:				
Weather conditions. Describe:				

Other – Describe:	
6. Describe the degree to which the district expects physical therapists to participate in meetings pupils:	pertaining to the
The school expects physical therapists to participate in meetings pertaining to the students they provide service	ces to.
7. Provide the number of physical therapist vacancies experienced by the district in this	0
reporting period:	
8. Describe the efforts made by the district for the recruitment and retention of physical therapis	ts:
9. List the number and caseload of each OT employed in this reporting period:	

3. List the number and caseload of each of employed in this reporting period.					
Full Time Physical Therapists (OTs)	Part-Time Physical Therapist				

Full Time Physical Therapists (OTs)			Part-Time Physical Therapists (OTs)			
Full-Time PTs (FT PT)	Maximum Caseload	Employee (E) or Contracted (C)	Part-Time PTs (PT PT)	% FTE Worked	Maximum Caseload	Employee (E) or Contracted (C)
FT PT #1	n/a	n/a	PT PT #1	n/a	n/a	n/a
FT PT #2	n/a	n/a	PT PT #2	n/a	n/a	n/a
FT PT #3			PT PT #3			
FT PT #4			PT PT #4			
FT PT #5			PT PT #5			
FT PT #6			PT PT #6			
FT PT #7			PT PT #7			
FT PT #8			PT PT #8			
FT PT #9			PT PT #9			
FT PT #10			PT PT #10			
FT PT #11			PT PT #11			
FT PT #12			PT PT #12			
FT PT #13			PT PT #13			
FT PT #14			PT PT #14			

FT PT #15		PT PT #15		
FT PT #16		PT PT #16		
FT PT #17		PT PT #17		
FT PT #18		PT PT #18		
FT PT #19		PT PT #19		
FT PT #20		PT PT #20		