DEFINITION OF MOTOR SCREENING - NC 1500-2.11 (b)(8)
Motor screening includes reviewing written and verbal information, observing the student in a variety of settings and/or administering screening instruments to determine adequacy of motoric functioning and need for further evaluation. Persons who may screen motor skills are psychologists, specially trained teachers of students with disabilities including adapted physical education teachers, occupational therapists, physical therapists, and other health professionals.

Several North Carolina special education eligibility areas now require specified screenings. A motor screen is required for:
- Autism Spectrum Disorder
- Deaf-Blindness
- Deafness
- Developmental Delay
- Intellectual Disability

While not required by policy, we strongly encourage completing a motor screen for the following areas of eligibility:
- Hearing Impairment
- Other Health Impairment
- Visual Impairment

A motor screen can be administered by:
- Psychologists
- Special education teachers
- Adapted physical education teachers
- Occupational therapists
- Physical therapists
- Other health professionals.

Other areas of eligibility require a motor evaluation, which can only be conducted by a licensed physical and/or occupational therapist. These areas are:
- Multiple Disabilities
- Orthopedic Impairment
- Traumatic Brain Injury

DPI does not endorse specific motor screening instruments. Many instruments are commercially available and many LEAs develop their own motor screening tool. However, employing an instrument focused on specific skills (such as the Visual Motor Integration/VMI) would be insufficient to serve as motor skills screen. Physical and occupational therapists frequently develop a motor screen for use in their LEA. These are often derived from existing assessment tools (e.g., key or select items) and clinical expertise, and should reflect the following features:
- address adequacy of motor function/skills at school
- make efforts to identify suspicious signs of delay
• clearly indicate whether there is a need for further evaluation
• include: natural observation in a variety of settings; review of existing data/record review; and/or input from team members
• relate to school environment, schedule/routine, function, student role, and general curriculum
• address need for assistance in:
  o mobility throughout school environment (e.g., moving throughout classroom and campus, play)
  o personal care activities
  o handling school-related materials and tools
  o transfers (e.g. in/out of chair, desk, lunch table, car/bus)
  o safety
• require no narrative or description (e.g., yes/no or checklist format)
• provides an overview of motor skills-gross motor skills and fine motor skills
• use simple, accessible language
• are able to be completed independently by trained first time screener
• do not exceed two pages
• can be administered over several sessions/locations (i.e., do not need to be completed all at once)
• are intended to be fast

A School Motor Screen:
• does not provide comprehensive, in-depth information about motor function (e.g., quality of movement, strength, developmental appropriateness)
• does not address all motor skills or components of movement
• does not require a physical therapist or occupational therapist
• does not qualify a student for related services
• does not require special equipment, location, or materials
• does not rely on isolated skill assessment (e.g., single leg stance, copying figures, VMI)
• does not remove the student from instruction or typical routine, but is observation-based

There are sample motor screens posted at https://www.med.unc.edu/ahs/physical/schoolbasedpt/additional-resources/sample-forms/

If you have questions or would like assistance in developing your LEA’s motor screen, please contact:

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