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OAR 581-022-2220 (Health Services)

FREQUENTLY ASKED QUESTIONS



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Introduction

The Oregon Department of Education is providing this FAQ in response to questions from school districts related to the implementation of [OAR 581-022-2220](#) (Health Services). The Health Services OAR requires school districts, education service districts, and public charter schools to develop, implement, and annually update a written prevention-oriented health services plan for all students. The plan must describe a health services program for all students at each facility that is owned or leased, where students are present for regular programming. The Health Services OAR also includes additional health services requirements not included in the prevention-oriented health services plan. The following FAQ document is comprised of answers to questions that ODE has received through a series of engagements with Oregon’s education community.

Table of Contents

Introduction	2
Table of Contents.....	2
Provision of a Free Appropriate Public Education	3
Prevention-Oriented Health Services Plan	3
School Nursing.....	4
Health Care Space.....	6
Health Screening	7
Compliance.....	7
Resources.....	8
Contact Information.....	8

Provision of a Free Appropriate Public Education

The Individuals with Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973 require that school districts and programs provide health services if needed by a student to access their education. The requirement for school districts and programs to ensure every student access to a free appropriate education (FAPE) provides a guarantee that every student can learn regardless of ability or health need. The health services listed in a child's Individualized Family Service Plan (IFSP), Individualized Education Program (IEP), or Section 504 plan must be provided.

Prevention-Oriented Health Services Plan

Do all school districts, education service districts, and charter schools need a prevention-oriented health plan that shows how they meet each component of section 1 of OAR 581-022-2220?

Yes. OAR 581-022-2220 (1) states that school districts, education service districts, and public charter schools shall develop, implement, and annually update a written prevention-oriented health services plan for all students. OAR 581-022-2220 is contained in Chapter 581, Division 22 of Oregon Administrative Rules (OARs). Division 22 OARs are the educational standards that the Oregon Legislature or the State Board has determined must be met to be a standard school district, education service district, or a charter school. Compliance with the Division 22 Standards ensures every student in Oregon public schools is provided with a baseline level of service. The Division 22 Standards can be found on the [Secretary of State's Oregon Administrative Rules Database](#).

Do EI/ECSE programs need to be included in the school district, education service district, or charter school's prevention-oriented health service plan?

Yes. The plan must describe a health services program for all students at each facility that is owned or leased where students are present for regular programming. Children attending EI/ECSE are considered students as they qualify for public education services under part B of the IDEA.

Is there a template and instructions to help guide development of the prevention-oriented health services plan?

Yes. ODE has provided [this tool](#) and [corresponding instructions](#) to assist school districts, education service districts, and charter schools in drafting their prevention-oriented health services plan and meeting the other requirements of the OAR. The template is recommended but not required.

Are school districts, education service districts, and public charter schools required to submit their prevention-oriented health services plan to ODE?

No. The prevention-oriented health services plan is an internal document and is not submitted to ODE. School districts report compliance with the requirement to develop, implement, and annually update a written prevention-oriented health services plan for all students as part of

the annual Division 22 assurances process.

Are school districts, education service districts, and public charter schools required to submit a Communicable Disease Management Plan (CDMP) to ODE?

No. School districts, education service districts, and charter schools were required to submit assurances of completed school-level CDMPs to ODE as part of their Elementary and Secondary School Emergency Relief (ESSER) funding. This funding ends in September 2024 and school districts, education service districts, and charter schools are no longer required to submit their CDMP assurances. Communicable disease planning is now integrated into the prevention-oriented health services plan per OAR 581-022-2220 (1)(b) and (1)(c).

Does each school need a different plan or can it be district-level?

The prevention-oriented health services plan is to be created and maintained by school district, education service district, or charter school administration and can be a district-level plan that includes considerations for all students at each facility. The prevention-oriented health services plan includes school-level protocols for communicable disease management planning and communication as well as medical emergency planning and response found in OAR 581-022-2225.

Do districts need to create individual protocols for each part of the prevention-oriented health services plan, or can they link to existing plans and protocols?

School districts, education service districts and charter schools are welcome to link to their existing plans and protocols that include evidence or components of the prevention-oriented health services plan. ODE's [implementation tool](#) provides examples of district plans that may align with each component of the prevention-oriented health services plan and an opportunity for districts to link to their existing documents. For example, section (1)(b) of the OAR aligns with the school-level communicable disease management plans (CDMP) that districts have created for ESSER funding. A district could use the implementation tool in creating their prevention-oriented health services plan and link to their school-level CDMP to meet the plan requirements for the components of the rule that are addressed in their CDMP (e.g., (1)(b)).

School Nursing

Are school districts, education service districts, and charter schools required to ensure access to school nursing services?

Yes. A school district, education service district, or charter school must ensure availability of school nursing services. ORS 336.201 states that “a registered nurse or school nurse is responsible for coordinating the school nursing services provided to an individual student.” The statute also requires that “Decisions related to when or where a student receives school nursing services must jointly be made by the registered nurse or school nurse, the parent or guardian of the student and any appropriate school staff.” Furthermore, ORS 336.201 establishes specific minimum ratios for students to school nurses (1:125 for medically complex students, 1:225 for medically fragile students, and 1:1 for nursing dependent students).

OAR 581-022-2220 clarifies that school districts, education service districts and charter schools must provide school nursing services. The prevention-oriented health services plan must describe a health services program for all students that includes:

- Services for all students, including those who are medically complex, medically fragile or nursing dependent, and those who have approved 504 plans, individual education program plans, and individualized health care plans or special health care needs as required by ORS 336.201, 339.869, OAR 581-021-0037, 581-015-2040, 581-015-2045, and 851-045-0040 to 0060; and 851-047-0010 to 0030.
- A process to assess and determine a student's health services needs, including availability of a nurse to assess student nursing needs upon, during, and following enrollment with one or more new medical diagnose(s) impacting a student's access to education, and implement the student's individual health plan prior to attending
- Policy and procedures for medications, as per ORS 339.866 to 339.874 and OAR 581-021-0037.

In addition, nursing services may be required for a student if it is determined that nursing services are necessary for them access their education under IDEA, Section 504, and [OAR 581-015-2000 to 2930](#).

Does “prior to attending” mean that a student cannot start until the individual health plan (IHP) is completed?

Yes. However, school districts must work to complete this plan with no unreasonable delays and ensure that FAPE is enabled for students while they are completing the individual health plan. OAR 581-022-2220 requires:

1(h) A process to assess and determine a student's health services needs, including availability of a nurse to assess student nursing needs upon, during, and following enrollment with one or more new medical diagnose(s) impacting a student's access to education, and implement the student's individual health plan prior to attending.

The IHP should be written by the school nurse based on the nurse's assessment of the student's health needs. For the student to attend school safely, the services identified in the IHP must be made available when the student is attending school.

In the event a delayed start for a student due to the need to complete an individual health plan lasts for more than 10 school days, school districts would want to ensure they comply with the requirements of SB 819, as applicable.

Do school districts, education service districts, and public charter schools have to plan for students' health services needs beyond the school day (e.g., school-sponsored activities, transportation)?

Yes. The OAR 581-022-2220 requires that the prevention-oriented health services plan must include:

1(k) Guidelines for the management of students who are medically complex, medically fragile, or nursing dependent as defined by ORS 336.201, including students with life-threatening food allergies and adrenal insufficiency while the student is in school, at a

school-sponsored activity, under the supervision of school personnel, in before-school or after-school care programs on school-owned property, and in transit to or from school or school-sponsored activities.

The OAR does not stipulate what the plan, protocol, or procedure must be, but there must be a plan in place to ensure that students can access school-sponsored activities and transportation, which includes any health services that may be provided while the student is attending. All school-sponsored activities must be accessible to all students regardless of their disability. The OAR aligns with obligations found in IDEA and Section 504 that school districts ensure students have access to FAPE. The plan should be communicated with appropriate staff whose knowledge of the plan is necessary to protect the health and safety of the student or others. School districts must ensure that before school and after school programs on school property are accessible to students with health service needs as part of contractual agreements allowed under [ORS 336.014](#) and in alignment with federal and state nondiscrimination laws including [34 C.F.R. Part 104](#) and [ORS 659.850](#).

Health Care Space

What does an “appropriately supervised” and “adequately equipped” health care space mean?

The health care space should be a dedicated space (separate from the communicable disease isolation space) within a school where a school nurse or other school health staff provides health-related services and support to students. This office plays a critical role in promoting overall well-being and ensuring the health and safety of students. The prevention-oriented health services plan must include how the school district, education service district, or charter school ensures adequate supervision of students accessing the space. Though the OAR does not establish a minimum requirement of what a health care space must include, a school district should consider ensuring at least:

- Private and confidential meeting space
- Basic medical supplies (e.g., gloves, bandages, thermometer, ice pack, gauze, and medical tape)
- First aid kits
- Diagnostic equipment for nurses (e.g., pulse oximeter, blood pressure cuff)
- Emergency response equipment (e.g., AED, naloxone, emergency medications)
- Access to potable water
- Infection control measures (e.g., access to soap and water, surface disinfectant supplies and protocol)
- Phone and/or communication device to other staff in the building
- System for maintaining accurate health records including medication administration
- Equipment to secure medications

For additional information please see the National Association of School Nurses (NASN) [Health Suite Assessment Tool](#).

Health Screening

What are the requirements for school hearing, vision, and dental screenings?

[OAR 581-021-0031](#) and [581-021-0017](#) require a student who is seven years of age or younger and who is beginning an educational program with the education provider for the first time to submit certification within 120 days of the student beginning school that the student received a dental and vision screening. A school district or approved vision screening program may be reimbursed for each student vision screening they perform.

There is not a state law specific to the requirements of a school hearing screening program. IDEA and OAR 581-015-2000 to 2930 require that schools identify and evaluate children with disabilities, including those with hearing impairments. This may involve hearing screening to identify if a student needs further assessment or support.

Please visit ODE's School Health Screening [webpage](#) for more information.

Compliance

How does a school district report compliance with OAR 581-022-2220?

Each year, school districts report to their community on their compliance with all Division 22 Standards for Public Elementary and Secondary Schools. For each Division 22 Standard, the school district either certifies that the district complies or states that the district is out of compliance, provides an explanation, and proposes a corrective action plan. Districts must make a presentation to the local School Board by November 1 as set forth in [OAR 581-022-2305: District Assurances of Compliance with Public School Standards](#). After school districts have made their report at the local level, they then submit their assurances to the Oregon Department of Education by November 15. As part of our shared responsibility to provide quality service for our students and communities, this system promotes reciprocal accountability between school districts and ODE.

What is the timeline for completing the plan and reporting Division 22 Standards assurances?

OAR 581-022-2220 was adopted by the state board of education in June 2023. ODE anticipates that school districts will be drafting and implementing their prevention-oriented health services plans during the 2023-24 school year. The OAR requires school districts to update their plan annually. Districts will report on their compliance with this OAR for the 2023-24 school year in November 2024. More information can be found on the ODE [Division 22 Standards and assurance Compliance Webpage](#).

If a school district begins the 2023-24 school year out of compliance, but is in compliance by the end of the year, would they report out of compliance on the assurances?

Yes. As part of the Division 22 Standards compliance process, a school district must report if they were out of compliance and submit a corrective action plan. If the district has completed their corrective action plan, they include this information as part of the Division 22 Standards assurance process.

Can someone file a complaint if a school district, education service district, or charter school does not meet OAR 581-022-2220?

Yes. Every school district, education service district, or charter school is required to have a complaint process. A student, a parent or guardian of a student, or a person who resides in the district may file a Division 22 Standards complaint. Division 22 Standards complaints are filed first at the district level and then may be appealed to ODE using the process outlined on the [ODE Complaints and Appeals webpage](#).

Resources

The Oregon Department of Education has created a [tool](#) to assist districts with implementing requirements found in the recently updated [OAR 581-022-2220](#) (Health Services). This tool is designed to support districts, public charter schools, and education service districts in creating their prevention-oriented health services plan and ensuring that all other rule requirements are met. The [implementation tool](#), [instructions](#), and recordings of two related Office Hours can be found on ODE's [OAR 581-022-2220 \(Health Services\) Resources webpage](#).

Contact Information

For questions, please email the Oregon Department of Education at ODE.HealthySchools@ode.oregon.gov.