

Guide for Obtaining Appropriate Assessment and Support for School Health Services Appendix I

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Functional Category	Examples of Altered Functional Skills Suggesting a Related Medical Condition	Primary Health Care Provider ²
Speech/Language	Articulation, pronunciation, verbal abilities, vocabulary, understanding and following directions (refer also to hearing)	Speech Pathologist School Nurse
Gross Motor (Large Muscles)	Walking (including crutch walking with braces and using walkers), skipping, running throwing, balance, coordination, wheelchair transfers	Physical Therapist School Nurse
Fine Motor (Small Muscles)	Handwriting, buttoning, eye tracking, feeding, cutting, pasting, playing a musical instrument, keyboarding, feeding (see nutrition)	Occupational Therapist School Nurse
Cognition/ Learning	IQ achievement, reasoning, comprehending, level of attention, memory	Psychologist
Hearing	Auditory abilities	Audiologist Speech Pathologist School Nurse Primary Health Care Provider
Vision	Visual abilities	School Nurse Primary Health Care Provider
Nutrition	Deviations from normal growth and development patterns, feeding capabilities (e.g. sucking, chewing, swallowing)	Registered Dietitian/Nutritionist School Nurse
Physiological (Medical Conditions)	Deviations from normal pattern of managing daily living activities (e.g. altered breathing, mobility, elimination); known medical conditions (e.g. allergy, seizures, needs medication at school)	School Nurse Primary Health Care Provider Dentist Respiratory Therapist Physical Therapist
Social/Emotional	Dysfunctional (abusive, not providing basic needs)/interrupted (experienced move, loss) family processes; stressed, ineffective coping/problem solving; behavioral problems	Counselor/Social Worker/Psychologist School Nurse Primary Health Care Provider

¹ Districts must use appropriate service providers when a student initially presents with a diagnosed medical condition or symptoms possible suggesting an altered health status. To practice outside the scope of licensed practice is punishable by fine and/or imprisonment.

² The first listed specialist is generally acknowledged in the school community to have the highest level of professional preparation and experience to address school-based health issues related to the functional category. The additionally listed clinicians may usually provide consultation to the district, if not a complete assessment and care planning. In the community, primary health care providers are generally considered to include general or family physicians, internists, pediatricians, OB/GYN doctors and nurse practitioners. (Athletic trainers may work with physicians.)

Legal Regulations for Licensed Health Care Providers Having Implications for the School Community

- The intent of licensure is to ensure an appropriate academic and clinical preparation and knowledge base to safely practice in a domain of health care (for example, nursing, medicine, occupational therapy, speech therapy or physical therapy). School districts should determine that their professional health service staff are in good standing in their professions and, when pertinent, are currently licensed.
- The licensed health care provider is accountable to the Board of Examiners for his/her practice regardless of the responsibilities to his/her employer for employment activities. Failure to practice within standards of practice can result in loss of licensure. To avoid conflicts with practice and licensure standards, school districts should include health care representatives in pertinent policy and procedure development. To afford current clinical competency and avoid practicing health care without a license, school districts should ensure clinical performance evaluation by a qualified, licensed provider in the same domain (such as a registered nurse with expertise in school nursing practice to evaluate school nursing or a physician with expertise in school health to evaluate physicians practicing in/providing services for the school setting).
- Only the pertinent Board of Examiners (e.g. Nursing, Medicine, etc.) has the authority to determine what professional functions can be provided by unlicensed individuals. School districts should always include the school nurse or other pertinent health care specialists when working with students having health conditions (such as diabetes, allergies, asthma and special dietary needs) to ensure that scope of practice are being correctly interpreted.

Following is an example of licensure specifications from the Board of Nursing that it prohibits:

1. The delegation of health assessment, diagnosis and care planning to unlicensed staff,
2. School personnel from providing health care based on instruction by a parent, and
3. Delegation of a task to a staff member (who is less prepared or not licensed) when determining such delegation may put a student at risk for unsafe/poor quality of care.

To avoid breaching nursing practice regulations, the school system must ensure that the school nurse (or other appropriate professional):

1. Complete a health assessment of the student,
2. Determine that delegation of care is appropriate in the school, and
3. Is prepared to train and supervise school personnel to whom care is delegated.

It is important to respect nursing practice, collective bargaining agreements and job descriptions by collaboratively determining with the school administrator, school nurse and the designated delegate (staff person) to whom an activity will be delegated. As pertinent, the administrator and nurse should keep parents informed and involved in the process.

Legal Regulations for Licensed Health Care Providers Having Implications for the School Community

To fulfill the obligation to protect the health and safety of its citizens, the regulation of many health professions is delegated to respective Boards of Examiners. Otherwise, the regulating body is the Oregon State Health Division. Regulating boards in Oregon are listed in the chart below.

Regulating Board	Definition of Licensed Practice
<p>Oregon Board of Athletic Trainers 503-378-8667 700 Summer St., Ste. 320 Salem, OR. 97301 http://www.oregon.gov/OHLA/AT/index.shtml</p>	<p>A person who is a registered athletic trainer under sections 1 to 13 of this 1999 Act may use the title “Athletic Trainer, Registered” and the abbreviation “ATR”. A person who is a registered athletic trainer under sections 1 to 13 of this 1999 Act and who is certified by the National Athletic Trainers Association Board of Certification may use the title “Athletic” Trainer, Certified/Registered” and the abbreviation “ATC/R” (331-120-0010).</p> <p>The scope of practice of athletic training by a registered athletic trainer shall consist of the following:</p> <ol style="list-style-type: none"> (1) The education, instruction, application and monitoring of facts and circumstances required to protect the athlete from athletic injury, including but not limited to: <ol style="list-style-type: none"> (a) The identification, through physical examinations or screening process, of preexisting physical conditions that may pose a risk of injury to an athlete; and (b) The supervision and maintenance of athletic equipment to assure safety. (2) The recognition, evaluation and immediate care of injuries occurring during athletic events or in the practice for athletic events including the following: <ol style="list-style-type: none"> (a) Performance of strength testing using mechanical devices or other standard techniques; (b) Application of tape, braces and protective devices to prevent injury; (c) Administration of standard techniques of first aid; (d) Use of emergency care equipment to aid the injured athlete by facilitating safe transportation to an appropriate medical facility; and (e) Determination of the level of functional capacity of an injured athlete in order to establish the extent of an injury. (3) The gathering and accurate recording of all information required in the assessment of athletic injuries. (4) The development and implementation of an appropriate course of rehabilitation and/or reconditioning by the use of therapeutic modalities, including but not limited to: water, cold, heat, electrical, mechanical and acoustical devices; massage; manual techniques; gait training exercise; and physical capacity functional programs that are determined to be needed to facilitate recovery and to restore athletic function and/or performance. (5) Athletic trainers may dispense only non-scheduled medications under the supervision of a physician. <p>Athletic trainers shall not perform invasive procedures. Athletic Trainers may dispense and apply topical non-prescription medication. (6) The determination and implementation of a plan for appropriate health care administration. (7) Referral of an athlete to appropriate medical personnel as needed. (8) Organization of a medical care service delivery system for athletes when needed. (9) Establishment of plans to manage an athlete’s medical emergencies. (10) The education and/or providing of athletic training guidance to injured</p>

	<p>athletes for the purpose of facilitating recovery, function and/or performances of the athlete.</p> <p>[Stat. Auth.: OL 1999, Ch. 736, Sec. 1 (4); Stats. Implemented: OL 1999, Ch. 736, Sec. 1 (4)]</p>
<p>Oregon Board of Licensed Social Workers 503-378-5735 700 Summer NE, Ste. 30 Salem, OR. 97310 http://www.oregon.gov/BLSW/index.shtml</p>	<p>(675.510 Definitions for ORS 675.510 to 675.600)</p> <p>“Clinical social work: means the professional practice of applying principles and methods with individuals, couples, families, children and groups, which include, but are not restricted to: (a) Providing diagnostic, preventive and treatment services of a psychosocial nature pertaining to personality adjustment, behavior problems, interpersonal dysfunctioning or deinstitutionalization; (b) Developing a psychotherapeutic relationship to employ a series of problem-solving techniques for the purpose of removing, modifying or retarding disrupted patterns of behavior, and for promoting positive personality growth and development; (c) Counseling and the use of psychotherapeutic techniques, such as disciplined interviewing that is supportive, directive or insight-oriented depending upon diagnosed problems; observation and feedback; systematic analysis; and recommendations; (d) Modifying internal and external conditions that affect a client’s behavior, emotions, thinking or intrapersonal processes; (e) Explaining and interpreting the psychosocial dynamics of human behavior to facilitate problem solving; and (f) Supervising, administering or teaching clinical social work practice.</p>
<p>Oregon Board of Licensed Professional Counselors and Therapists 503-378-5499 3218 Pringle Rd. SE, Ste. 250 Salem, OR. 97302 http://www.oregon.gov/OBLPCT/</p>	<p>(675.705 Definitions for ORS 675.715 to 675.835. As used in ORS 675.715 to 675.835).</p> <p>“Licensed professional counselor” means a person issued a license under ORS 675.715.</p> <p>“Professional counseling” means counseling services provided to individuals, couples, families, children, groups, organizations or the general public through the therapeutic relationship, developing understanding of personal problems, defining goals and planning action reflecting interests, abilities, aptitudes and needs as these relate to problems and concerns in personal, social educational rehabilitation and career adjustments. “Professional counseling” includes, but is not limited to: (a) Application of counseling theories and techniques designed to assist clients with current or potential problems and to facilitate change in thinking, feeling and behaving; (b) Research activities including reporting, designing, conducting or consulting on research in counseling with human subjects; (c) Referral activities including the referral to other specialists; (d) Consulting activities that apply counseling procedures and interpersonal skills to provide assistance in solving problems that a client may have in relation to an individual, group or organization; and (e) Record-keeping activities, including documentation of counseling treatment or therapeutic services.</p>
<p>Oregon Board of Dentistry 971-673-3200 1600 SW 4th Ave, Ste. 770 Portland, OR. 97201 http://www.oregon.gov/Dentistry/</p>	<p>“Dentist” means a person who may perform any intraoral or extraoral procedure required in the practice of dentistry. (679.010)</p> <p>“Dentistry” means the healing art that is concerned with the examination, diagnosis, treatment planning, treatment care and prevention of conditions within the human oral cavity and maxillofacial region and conditions of adjacent or related tissues and structures. The practice of dentistry includes but is not limited to the cutting, altering, repairing, removing, replacing or repositioning of hard or soft tissues and other acts or procedures as determined by the board and included in the curricula of dental schools accredited by the Commission on Dental Accreditation of the American Dental Association, post-graduate training programs or continuing education courses. (679.020)</p>

	<p>“Dental hygiene” means a person who, under the supervision of a dentist, practices dental hygiene.</p> <p>“Dental hygiene” means that portion of dentistry that includes the rendering of educational, preventative and therapeutic dental services in general, but specifically, scaling, root planning, curettage and any related intraoral or extraoral procedure required in the performance of such services.</p>
<p>Oregon Board of Examiners of Licensed Dietitians 971-673-0190 800 NE Oregon, Ste. 407 Portland, OR. 97232 http://www.oregon.gov/OBELD/</p>	<p>“Licensed dietitian” means a dietitian licensed as provided in ORS 691.435. [1989 c. 487 s.1]</p> <p>“Dietetics practice” means the integration and application of principles derived from the sciences of nutrition, biochemistry, food, management and physiology and the behavioral and social sciences to achieve and maintain the health of people through: (a) Assessing the nutritional needs of clients; (b) Establishing priorities, goals and objectives that meet nutritional needs of clients; (c) Advising and assisting individuals or groups on appropriate nutritional intake by integrating information from a nutritional assessment with information on food and other sources of nutrients and meal preparation; and (d) Evaluating, making changes in and maintaining appropriate standards of quality in food and nutrition services.</p>
<p>Oregon Medical Board 971-673-2700 1500 SW 1st ., Ste 620 Portland, OR. 97201 http://www.oregon.gov/OMB/</p>	<p>“Physician” means any person who holds a degree of Doctor of Medicine or Doctor of Osteopathy. A person is practicing medicine if the person does one or more of the following: (1) Advertise, hold out to the public or represent in any manner that the person is authorized to practice medicine in this state. (2) For compensation directly or indirectly received or to be received, offer or undertake to prescribe, give or administer any drug or medicine for the use of any other person. (3) Offer or undertake to perform any surgical operation upon any person. (4) Offer or undertake to diagnose, cure or treat in any manner, or by any means, methods, devices, or instrumentalities, any disease, illness, pain, wound, fracture, infirmity, deformity, defect or abnormal physical or mental condition of any person.</p> <p>[Formerly 677.030; 1989 c. 830 s. 3]</p>
<p>Oregon State Board of Nursing 971-673-0685 17938 SW Upper Boones Ferry Rd. Portland, OR. 97224 http://www.osbn.state.or.us/</p>	<p>(678.010-678.410. Licensure required for the level of practice.)</p> <p>“Practice of registered nursing” means the application of knowledge drawn from board in-depth education in the social and physical sciences in assessing, planning, ordering, giving, delegating, teaching and supervising care that promotes the person’s optimum health and independence.</p>
<p>Oregon Occupational Therapy Licensing Board 971-673-0198 800 NE Oregon, Ste. 407 Portland, OR. 97232 http://www.otlb.state.or.us/</p>	<p>“Occupational therapist” means a person licensed to practice occupational therapy under ORS 675.210 to 675.340.</p> <p>“Occupational therapy” means the analysis and use of purposeful activity with individuals who are limited by physical injury or illness, developmental or learning disabilities, psychosocial dysfunctions or the aging process in order to maximize independence, prevent disability and maintain health. The practice of occupational therapy encompasses evaluation, treatment and consultation. Specific occupational therapy services include but are not limited to: Activities of daily living (ADL); perceptual motor and sensory integrated activity; development of work and leisure skills; the design, fabrication or application of selected orthotics; the use of specifically designed crafts; guidance in the selection and use of adaptive equipment; exercises to enhance functional performance;</p>

	<p>prevocational evaluation and training; performing and interpreting manual muscle and range of motion test; and appraisal and adaptation of environments for people with mental and physical disabilities. The services are provided individually, in groups or through social systems.</p>
<p>Oregon Physical Therapists Licensing Board 971-673-0200 800 NE Oregon St., Ste. 407 Portland, OR. 97238 http://www.oregon.gov/PTBrd/index.shtml</p>	<p>“Licensed physical therapist” means a professional physical therapist licensed as provided in ORS 688.010 to 688.230.</p> <p>“Physical therapy” means the evaluation, treatment and instruction of a human being to assess, prevent, correct, alleviate and limit the signs and symptoms of physical disability, bodily malfunction and pain. “Physical therapy” does not include chiropractic as defined in ORS 684.010. “Physical therapy” includes: (a) The performance of tests and measurements as an aid to evaluation of function and the administration, evaluation and modification of treatment and instruction, including the use of physical measures, activities and devices, for preventive therapeutic purposes; and (b) The provision of consultative, educational and other advisory services for the purpose of reducing the incidence and severity of physical disability, bodily malfunction and pain.</p> <p>[1959 c. 461 s.l.; 1965 c. 314 .s.l.; 1969 c. 339 s.l.; 1971 c. 585 s.l.; 1975 c. 111 s.l.; 1987 c. 726 s.5]</p>
<p>Oregon Board of Psychologist Examiners 503-378-4154 3218 Pringle Rd. SE, Ste. 130 Salem, OR. 97302 http://www.obpe.state.or.us/</p>	<p>“Licensed psychologist” means a person licensed to practice psychology under the provisions of ORS. 675.010 to 675.150.</p> <p>“Practice of psychology” means rendering or offering to render supervision, consultation, evaluation or therapy services to individuals, groups or organizations for the purpose of diagnosing or treating behavioral, emotional or mental disorders.</p>
<p>Oregon Respiratory Therapist Licensing Board 503-378-8667 700 Summer St. NE, Ste. 320 Salem, OR. 97301 http://www.oregon.gov/OHLA/RT/index.shtml</p>	<p>“Respiratory care practitioner” means a person licensed under ORS 688.800 to 688.835.</p> <p>“Respiratory care” means the treatment, management, diagnostic testing, control and care of patients with deficiencies and abnormalities associated with the cardiopulmonary system in accordance with the prescription of a licensed physician and under a qualified medical director. “Respiratory care” includes, but is not limited to: (a) Direct and indirect respiratory care services, including but not limited to the administration of pharmacological, diagnostic and therapeutic agents related to respiratory care procedures necessary to implement a treatment, disease prevention, pulmonary rehabilitative or diagnostic regimen prescribed by a physician; (b) Transcription and implementation of the written or verbal orders of a physician pertaining to the practice of respiratory care; (c) Observing and monitoring signs and symptoms, reactions, general behaviors and general physical responses to respiratory care treatment and diagnostic testing, physical responses exhibit abnormal characteristics; (d) Implementation based on observed abnormalities, or appropriate reporting, referral, respiratory care protocols or changes in treatment, pursuant to a prescription by a person authorized to practice medicine under the laws of this state; and (e) The initiation of emergency procedures under the rules of the board or as otherwise permitted under ORS 688.800 to 688.835.</p>
<p>Oregon Board of Examiners for Speech-Language Pathology and Audiology 971-673-0220</p>	<p>(ORS 681.250) License in speech-language pathology or audiology required.</p> <p>(1) A license shall be issued to qualified persons either in speech-language pathology or audiology. A</p>

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<http://www.oregon.gov/BSPA/index.shtml>

person may be licensed in both areas if the person meeting the respective qualifications and in such instances the license fee shall be as though for one license. (2) No person shall practice speech-language pathology or audiology or purport to be a speech-language pathologist or audiologist in this state unless the person is licensed in accordance with the provisions of this chapter.

[Formerly 694.335; 1987 c. 158 s. 142; 1995 c. 289 s. 4]
(ORS 681.205)

“Practice audiology” means to apply the principles, methods and procedures of measurement, prediction, evaluation, testing, counseling, consultation and instruction that related to the development and disorders of hearing, vestibular functions and related language and speech disorders to prevent or modify the disorders or to assist individuals in auditory and related skills for communication. “Practice audiology’ includes the fitting or selling of hearing aids.

“Practice speech-language pathology’ means to apply the principles, methods and procedures of measurement, prediction, evaluation, testing, counseling, consultation and instruction that relate to the development and disorders of speech, voice, swallowing and related language and hearing disorders to prevent or modify the disorders or to assist individuals in cognition-language and communication skills.

“Speech-language pathologist” means one who practices speech-language pathology and who uses publicly any title or description of services including but not limited to the words “speech-language pathologist,” “speech correctionist”, “speech therapist”, “speech clinician” and/or “language pathologist”.

Revised March 2012