

Submitter: Ellen Mekjavich
On Behalf Of:
Committee: Senate Committee On Education
Measure: HB2618

SUBJECT: "Please support HBs 2736 (Occupational Therapy Licensure Compact) and

As a constituent and a school-based occupational therapist, I am asking you to support HB 2618. My understanding is that HB 2618 would require the Oregon Department of Education (ODE) to conduct a study to identify the best methodology for determining the appropriate workload for school-based health practitioners.

In my own 10 years of experience with PPS, my "caseload" has fluctuated between 60-95 students at up to 7 schools. As an OT, my job is to ensure that a student's disability does not impede their participation in school. With many students, including those who have experienced trauma, this means that I give them tools and strategies to help them feel safe so that they can learn. Another part of my job involves supporting students with physical access to school (assistive technology, seating, etc). These students are not less important, but often take second place to those exhibiting behaviors that put themselves or others at risk. This is not a tenable or equitable situation. We need a better way.

It is important to differentiate between workload and caseload. Caseload is simply the number of students with Individualized Education Programs (IEPs), Individualized Family Service Plans (IFSPs), and 504 Plans served by school-based professionals through direct and/or indirect service delivery options. Workload refers to all activities required and performed by school-based professionals in the school setting. These school-based health professionals have requirements for collaborating & consulting with school staff & parents as well as community-based professionals, facilitating access and participation in the general education curriculum, providing direct, indirect services, and response to intervention services (RTI) within the student contact day at school. Workload also includes non-therapeutic activities which include, but are not limited to, development and maintenance of adaptive equipment and visual aids, drive time between sites, time-spent in special education meetings, provision of professional development, research on low-incidence disorders and evidence based practices, etcetera. Additionally, they have an increased burden of billing and documentation requirements on top of the Individuals with Disability Education Act (IDEA) mandates.

There are currently no guidelines or requirements for how school-based agencies (birth-21 years of age) determine the workload assigned to occupational therapy

practitioners (OTs), physical therapy practitioners (PTs), and speech-language pathology practitioners (SLPs) in Oregon schools. The lack of workload requirements for school-based health practitioners has many potential negative impacts:

1) affect student outcomes and program quality; 2) potentially violate state & federal mandates, including Every Student Succeeds Act (ESSA), IDEA, and Free & Appropriate Public Education (FAPE); 3) may violate professionals' codes of ethics; 4) professionals become overburdened, have less job satisfaction leading to potential burn out. Many school-based health practitioners end up leaving the schools to seek employment in medical-based settings such as hospitals, out-patient clinics, and private practices. These settings typically have measures in place to control workload and offer significantly better compensation than schools provide.

Establishing a methodology, such as a workload calculator, would help school administration understand appropriate workload for school-based practitioners. Appropriate workloads for school-based health practitioners will ensure that these federally mandated services (occupational therapy, physical therapy, speech & language therapy) continue to be provided in Oregon schools in an efficacious manner while upholding the professional code of ethics. OTA Oregon, APTA Oregon, and OSHA are eager to work with and support the ODE in their establishment of a workload method.