

Chair Neron, Vice-Chairs Dobson and McIntire, and Members of the Committee,

My name is Michael Haliski, and I serve as a Social Skills Specialist in Clackamas Education Service District. I have been in this role for 1, during which I have had the opportunity to provide essential health services to our students while collaborating closely with the educational team.

I am writing in support of House Bill 2423, which proposes the establishment of the School-Based Health Professionals Taskforce.

In my role as Social Skills Specialist, I am responsible for Provide mental health case management services including teaming with families and outside services providers, crisis intervention services, assessment for suicidality and threat, teaching of Social Emotional Learning.. Over the course of my career, I have observed that current licensing requirements—despite their good intentions—do not always align with the unique needs of the school environment. For example, Over the last two years, I have been asked to teach Social Emotional Learning for classrooms comprised entirely of students on Individual Education Plans five days a week for two periods a day. During the 23-24 school year, this was done explicitly so that the Special Education teacher could take their planning time. I am not a licensed teacher through the TSPC, I hold no teaching credentials and certainly no Special Education teaching credential. I am a Licensed Clinical Social Worker.

At the time, I was told by the TSPC that I could not do this, that it could be considered a violation of FAPE for our students and that I could be considered to be working outside the bounds of my license. As a Social Worker, I am bound by a code of ethics and the insistence at the time by my school district that my license allowed me to teach as well as create Specially Designed Instruction created an enormous ethical dilemma. When I reached out to the Oregon Board of Licensed Social Workers, they were unable to clarify if the district was correct in this assertion, however the TSPC was quite clear and the matter left me in a high-stress situation. Asking someone without a teaching license to design and deliver content to students in Special Education is something we should all be concerned about.

In my current position, a similar arrangement is happening, but with some changes. I have been asked to "co-teach" the classroom, which still comes with having to design and deliver instruction to classrooms comprised entirely of students on IEP's. Having to cover a classroom for an entire period also interferes with my ethical mandate to ensure that students with whom I work have access to mental health professionals when in crisis. There are times routinely when I cannot respond to a crisis because I am being asked to teach/cover a classroom. .

Clarification regarding the work expectations for Health Professionals must consider the reality of our training as well as the adherence to civil rights and other legal protections for our students. Without this clarity, students may not receive the education nor the medical and mental health care they are legally entitled to. With new legislation, practitioners such as myself will be able to enter the field without the anxiety connected to risking our licenses while providing a understanding to our employers as to what we are truly prepared to provide. This clarity will surely contribute to better retention in these positions as well. I look forward to changes that allow licensing entities to help provide needed clarification and to help set parameters that reflect the needs of students. .

I humbly request that the committee support HB 2423 and the impact it will have on students and Health Professionals.

Thank you for your time and consideration.

Sincerely,
Michael Haliski
Social Skills Specialist
Clackamas Education Service District