

May 6, 2025 – Testimony in Support of HB 2670

Chair Frederick, Vice Chair Weber, Members of the Senate Committee on Education:

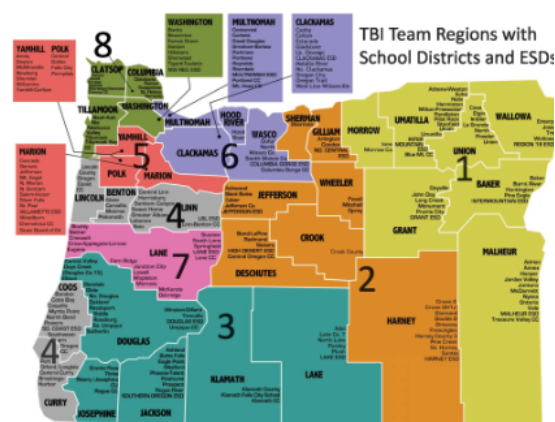
I bring nearly three decades of experience as a Speech-Language Pathologist in Oregon Public Schools. I am currently the Director of the Oregon Traumatic Brain Injury School Teams throughout the state of Oregon. I am also the Project Manager at the Center on Brain Injury Research and Training.

I train and provide technical assistance to Oregon TBI Teams. The state is divided into nine geographical areas with a Liaison (leader) assigned to each geographical area. I am proud to report that we have 255 team members throughout the state of Oregon. These volunteer team members are trained regarding brain injury awareness and causation, how to transition a student back to school after sustaining a brain injury, how to assess for a TBI eligibility, specially designed instruction, accommodations, and accommodations. Please see the map of our team below.

## Team Regional Contact Information

The TBI Team helps guide schools by providing training and support for educators working with students who have TBI. Each region in Oregon has a TBI liaison or contact person. To access the support of the TBI Team contact the liaison for your region.

- Region 1 - Joy Glidewell - [Joy.Glidewell@imesd.k12.or.us](mailto:Joy.Glidewell@imesd.k12.or.us), (541) 966-3143
- Region 2 - Wendy Beall - [wendy.beall@hdesd.org](mailto:wendy.beall@hdesd.org), (541) 610-4290
- Region 3 - Agnes Lee-Wolfe - [agnes\\_wolfe@soesd.k12.or.us](mailto:agnes_wolfe@soesd.k12.or.us), (541) 776-8555
- Region 4N - Brandi Lancaster - [brandi.lancaster@lblesd.k12.or.us](mailto:brandi.lancaster@lblesd.k12.or.us), (541) 812-2600
- Region 4S - Kelly Gill - [kellyg@scesd.k12.or.us](mailto:kellyg@scesd.k12.or.us), (541) 266-4004
- Region 5 - Jessica Dehm - [jessica.dehm@wesd.org](mailto:jessica.dehm@wesd.org), (503) 385-4571
- Region 6 - Brad Hendershott - [bhender1@pps.net](mailto:bhender1@pps.net), (503) 916-5570 ext. 78380
- Region 7 - Sara Preinitz - [spreinitz@lesd.k12.or.us](mailto:spreinitz@lesd.k12.or.us), (541) 901-9404
- Region 8 - Malory Turner - [maturner@nwresd.k12.or.us](mailto:maturner@nwresd.k12.or.us), (503) 614-1685



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I want to refute some testimony that I heard yesterday after attending the Oregon Senate Committee on Education. Firstly, it is incredibly important to correctly and appropriately place a child in the most appropriate eligibility category. This is why we have specific eligibility categories in the state of Oregon.

TBI is vastly different from other eligibility categories. A given child's challenges after sustaining a brain injury are secondary to an acute event. There will be a change from previous function. Possibly, there was a history of higher academic functioning. A given student's abilities and needs change with the recovery process. A given student's needs and interventions are not limited to a single area (i.e. reading) and tend to be across all settings (i.e. Needs frequent checks for comprehension, extended time, frequent assessments that are flexible).

One written testimony submitted on May 5, 2025, regarding HB 2670 stated, "I can attest that an OHI evaluation has many fewest requirements for assessment procedures, evaluation time, and documentation: at a minimum, all that is necessary is a medical statement and any assessments needed to determine the impact of that medical condition on learning or the need for special education." Is this what we want for our students? Professionals taking the path of least resistance! The school team needs to be conducting assessments in all areas of the suspected disability which is a definitive child find requirement. Legally, the school team opens itself up to liability if team members know there was a brain injury and decide to place a child in another category because it was easier.

The statement was also made that, “TBI eligibility is one of the most involved and lengthy evaluations in the special education realm.” This is also untrue. This characterization is inaccurate. In my nearly 30 years of experience, I can confidently say that evaluations for Autism Spectrum Disorder (ASD) are often far more extensive and time-consuming. Despite their complexity, we carry out these evaluations diligently because they are essential to accurately identifying and supporting the needs of the child. We do not default to more generalized categories like Other Health Impairment (OHI) when a more specific and appropriate eligibility category—such as ASD—is warranted. The same standard should apply to TBI evaluations. The goal is always to ensure accurate identification that leads to meaningful, individualized support.

Additionally, CBIRT offers comprehensive evaluation templates and clear, step-by-step guidance on how to conduct a TBI evaluation, all readily accessible at [returntoschool.org](https://returntoschool.org). Our website also includes sample goals and accommodations specifically designed to support students with TBI in educational settings.

It was also claimed that a student with TBI eligibility might lose access to special education services if they move to another state. This assertion is not only misleading—it is fundamentally flawed. Special education eligibility is determined by a student’s need for specially designed instruction. If a student requires such instruction, they will qualify under the appropriate criteria in any state. Conversely, if a student does not require specially designed instruction, then no eligibility category—TBI or otherwise—would grant access to services.

Professionals who graduate from accredited universities are thoroughly trained to conduct evaluations and determine appropriate eligibility across all eligibility categories. There is no additional financial burden to school districts when identifying a student under the TBI category. In fact, I regularly provide training and support to school district administrators, general education teachers, special education professionals, and classified staff—often presenting two to four times per week at no cost.

When school personnel reach out for support, CBIRT and the Oregon TBI Team are ready to respond. With 255 dedicated team members, we are well-equipped to guide schools through the process of reintegrating students following a brain injury. Our team ensures that Immediate Temporary Accommodations Plans (ITAPs), 504 Plans, and IEPs (Individualized Education Plans) are thoughtfully developed to reflect the student's evolving needs—just as they should be for any student requiring support. The infrastructure and expertise are already in place; what matters is a willingness to act in the best interest of students.

No two children are alike, and no two brain injuries are alike. It is incumbent upon us exercise our professionalism to appropriately assess students. This is why we need to broaden the definition of TBI to include ABI (Acquired Brain Injury) or internally caused brain injuries. As educators we are lifelong learners. When circumstances require it, we need to pivot and change. Our students are counting on us. I ask you to support HB 2670.

Melaney Grenz, M.S, CCC-SLP

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