

External Mental & Behavioral Health Providers

Operational Rules & Procedures

A. Definitions

- **Agency:** Licensed organization providing mental/behavioral health services (e.g., county MH, CCO affiliate, tribal provider, nonprofit clinic).
- **Provider:** Individual clinician (LCSW, LPC, LMFT, psychologist, BCBA, psychiatrist, PMHNP, SUD counselor, etc.).
- **On-site services:** Any evaluation, therapy, skills training, or case management delivered on District property or during District-sponsored activities.

B. Eligibility & Pre-Approval (Required Before Any Student Contact)

1. **Application packet** submitted **≥10 business days** before services begin, including:
 - Agency profile; proof of Oregon licensure/credentialing for all staff; resumes/CVs.
 - **Background checks** meeting District standard for all staff entering campuses.
 - **Liability insurance** (per occurrence & aggregate limits set by District; name District as additional insured).
 - **CPI (or District-approved equivalent) certification** for any staff expected to engage in behavioral de-escalation; documentation current within 12 months.
 - **Data privacy & security attestations** (encryption, no sale/secondary use, breach notice).
 - **Draft MOU/contract** meeting Section G requirements.
 - **Treatment plan template** and sample *session log* template.
2. **District vetting** (program, special education, risk/safety, data privacy, and building administration review).
3. **Approval decision** issued in writing (approve/approve with conditions/deny).

C. Parent/Guardian Consent & Releases

1. **Written consent** must identify agency/provider, service type, frequency, duration, location, and revocation clause.
2. **FERPA release** (separate) required for any education-record exchange.
3. **HIPAA release** (separate) if provider will share clinical information with the District.
4. Consent is *voluntary* and may be revoked at any time; schools must honor revocation immediately.

D. Treatment Plan & Alignment to IEP/504/MTSS

1. **Treatment plan must be submitted and approved by the District prior to beginning services** and:
 - **Support** the student's IEP/504 goals (where applicable); not conflict with specially designed instruction or behavior plans.
 - Identify therapeutic goals, modalities, anticipated frequency/duration, crisis plan, and coordination points with school staff.
2. For students with IEP/504, the case manager participates in coordination (with parental consent).
3. **Plan changes** that affect school routines or behavior supports must be submitted for review **before implementation**.

E. Entry to Campus & Classroom Rules

1. **Check-in/out** at front office with government ID; wear District-issued badge at all times.
2. **No drop-ins**. Sessions occur only at scheduled times/locations approved by administration.
3. **Pull-out limits**: Admin manages frequency and duration to protect core instruction; alternative times encouraged.
4. **Classroom entry** only when:
 - explicitly approved by the principal,
 - aligned to the treatment plan,
 - and **least disruptive** to instruction; providers defer to teacher direction.
5. **No unsupervised access** to students not authorized for services. No hallway intercepts.
6. **Space**: Sessions occur in private, observable locations (windows or open-door with privacy film) that ensure confidentiality and safety.

F. Professional Conduct, Safety & CPI

1. Providers follow District policies (conduct, boundaries, confidentiality, technology, equity, harassment-free environment).
2. **CPI (or equivalent) required** for providers engaged in behavior support; they must follow District crisis protocols and **may not** use restraint/seclusion unless expressly authorized by law and District policy **JGAB** (and then only by trained staff, with District notification and reporting).
3. **No recording** (audio/video) of students or sessions; no personal devices for documentation; no social media contact with students.
4. **Technology**: Provider devices on secure guest network only; no student PII stored locally or on unapproved apps.

G. MOU / Contract Minimums (District Template)

- Scope of services; sites and schedule controls.
- Staff roster and supervision; substitution rules.
- Background checks & **CPI** requirements.

- FERPA/HIPAA roles; **no secondary use/sale/profiling**; breach notification within 24 hours.
- **Data minimization**; permitted data elements; secure transmission/storage; retention & **certified destruction** on termination.
- **Insurance & indemnification**; hold harmless; independent contractor status (no agency).
- **Mandatory reporting** procedure (report to DHS/LE first, then District); Title IX crossover.
- **Incident reporting** timelines to District (same day for safety/abuse, 24h for others).
- **Audit & compliance** rights; access suspension & termination clauses.
- Nondiscrimination, language access, ADA accommodations for families.
- Dispute resolution & venue.

H. Documentation & Information Exchange

1. District requires **brief session logs** (attendance, general focus, next appointment) for scheduling and safety—not clinical notes.
2. Clinical notes remain with provider unless a HIPAA/FERPA release authorizes limited sharing.
3. Providers may request education records only via FERPA release; District will share *minimum necessary*.

I. Crisis, Abuse Reporting, and Emergencies

1. **Abuse reporting:** Providers are mandatory reporters; they must **report directly** to DHS/law enforcement immediately and then inform the principal/designee. No internal screening or delay.
2. **Crisis response:** Follow school crisis plan; immediately alert admin and follow CPI protocols.
3. **Threat/suicide risk:** Notify admin and parent/guardian per District protocol; coordinate with crisis team.

J. Equity, Language Access, and Accessibility

1. Participation must be voluntary and free of discrimination.
2. The District provides interpretation/translation for meetings and notices.
3. Reasonable accommodations provided for disability access.

K. Billing & Costs

1. Providers bill families/insurers directly. The District is not a party to billing and does not collect or store insurance numbers except where necessary and consented for coordination.
2. No fees to students for District-required services (e.g., evaluations) unless otherwise authorized by law and IEP/504 team.

L. Monitoring, Audits, and Quality Assurance

1. The District may conduct **compliance audits** (documentation sufficiency, schedule adherence, space use, credentials/CPI currency, data-security).

2. Findings will be shared with the agency; corrective actions may be required.

M. Noncompliance & Revocation of Access

Access may be suspended or revoked immediately for:

- safety violations, boundary concerns, or crisis protocol failures;
- missing/expired credentials, **CPI**, background checks, or insurance;
- privacy or data-security violations;
- unapproved plan changes or disruption to instruction;
- failure to follow District policies or this AR.

N. Records & Retention

District keeps: consent forms, releases, schedules, session-log receipts, incident and audit records, MOU/insurance/credential files, and access badges logs—retained per District schedule. Providers retain clinical records per their licensure and HIPAA.

Attachments (for implementation)

Appendix 1 — Agency Vetting Checklist

- Oregon business registration & agency license (if applicable)
- Clinician licenses; supervision plans (for associates)
- Background checks cleared (all staff); photo ID roster
- CPI certification (as applicable)
- Insurance certificates (limits per Risk Mgmt)
- Data-privacy/security attestations; breach plan
- MOU signed (scope, FERPA/HIPAA, incident, termination)
- Sample treatment plan & session log templates
- Crisis/escalation protocol alignment reviewed
- Building principal sign-off; SPED and Counseling sign-off

Appendix 2 — Required Pre-Service Documents (Provider to District)

- Signed parent consent & releases (FERPA/HIPAA)
- Treatment plan aligned to IEP/504/MTSS (if applicable)
- Weekly schedule (location/time); start date
- Contact tree for urgent issues; emergency backup clinician
- CPI certificate copy (if behavior work); background check clearance

Appendix 3 — Grounds for Immediate Removal (Examples)

- Failure to report suspected abuse directly to DHS/LE
- Attempted restraint/seclusion outside JGAB rules

- Recording sessions or storing PII on personal devices
- Contacting or transporting students without consent
- Boundary violations or social media contact
- Repeated drop-ins or disrupting instruction

Appendix 4 — Forms

#	Form	Purpose
1	<u>Parent/Guardian - FERPA/HIPAA Release</u>	Authorizes provider to meet with student on campus
2	<u>Agency/Provider Application & Vetting Form</u>	Used by District to vet the agency BEFORE approval
3	<u>MOU / Provider Agreement (District–Agency)</u>	Legal/operational contract
4	<u>Building Administrator Checklist</u>	Ensures campus-level compliance
5	<u>Session Log (Non-clinical)</u>	Required minimal documentation for District records