

Immediate Temporary Accommodations Plan (ITAP)

SCHOOL DISTRICT NAME AND LOGO HERE

Oregon House Bill 3007 (2025) states that: *“Upon receiving written notification from a parent or guardian that a student has been diagnosed with a concussion or other brain injury by a health care professional and that accommodations are being requested, a public education provider shall initiate the procedure to develop and implement an Immediate and Temporary Accommodations Plan.”*

This ITAP may be adjusted or discontinued at the discretion of the ITAP team and must remain in effect until discontinued. Additional guidance is available via ODE’s [Procedures for Student Concussion or other Brain Injury](#). This form was developed to support compliance with HB 3007 and OAR 581-021-3007.

Student Background

Student First Name		Last Name	
Date of Birth	Grade	School	ID#
Parent/Caregiver Submitting Request		Phone	Email
Date of Injury		Description of Injury	
Documentation of Medical Diagnosis Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No		Medical Provider	
Medical Provider Recommendations / Activity Restrictions <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If “Yes” summarize recommended school participation, recovery guidance, and/or activity limitations.</i>			

ITAP Coordination

Date of Notification/Request	ITAP Start Date <i>(in effect within 10 school days of notification)</i>	
Staff Member Serving as ITAP Coordinator	Position	Email
Additional ITAP Team Member	Position	Email
Additional ITAP Team Member	Position	Email
Additional ITAP Team Member	Position	Email
Additional ITAP Team Member	Position	Email

Step 1: Determine Need for Activity Limitations

HB 3007: *“Determine if immediate physical activity limitations are necessary to ensure the safety and recovery of the student and to minimize the risk of reinjury or additional injury to the student, including activities such as physical education, recess, unstructured play and similar activities provided by or sponsored through the public education provider that involve running, jumping, climbing, throwing, catching or other movements that pose a risk of falls, collisions or physical injury.”*

Did the medical documentation include activity limitations or restrictions? Yes No

If “Yes”, describe:

If “No”, does the ITAP team determine that temporary activity limitations are necessary? Yes No

If “Yes”, complete section below.

Activity	Limit/Restrict	Notes
Physical Education	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Recess / Unstructured Play	<input type="checkbox"/> Yes <input type="checkbox"/> No	
School-Sponsored Sports / Athletics*	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**For student athletes, schools must comply with Max’s Law (ORS 336.485), which requires removal from play if a concussion is suspected and prohibits return to participation until the student receives written clearance from a licensed healthcare provider trained in concussion management. Jenna’s Law (ORS 417.875) extends these same requirements to non-school youth athletic activities such as community or recreational sports programs.*

Return to full physical activity during school? Yes No Date: _____

Step 2: Describe Present Challenges and Symptoms Associated with Brain Injury

HB 3007 states the ITAP must “Describe present challenges and symptoms associated with the student’s concussion or other brain injury” as they impact school functioning. Check all that apply.

Physical and Sensory	Description (e.g., triggers, time of day)
<input type="checkbox"/> Headaches	
<input type="checkbox"/> Fatigue or Low Energy	
<input type="checkbox"/> Dizziness or Balance Problems	
<input type="checkbox"/> Light or Noise Sensitivity	
<input type="checkbox"/> Nausea	
<input type="checkbox"/> Vision Issues (blurry, seeing double)	
<input type="checkbox"/> Slowed Physical Movement	
<input type="checkbox"/> Other:	

Cognitive and Academic Challenges	Description (e.g., triggers, time of day)
<input type="checkbox"/> Difficulty concentrating, sustaining attention	
<input type="checkbox"/> Slowed processing or reduced	
<input type="checkbox"/> Memory problems (forgetting directions, info)	
<input type="checkbox"/> Disorganization, trouble starting/switching tasks	
<input type="checkbox"/> Mental fatigue, short endurance for work tasks	
<input type="checkbox"/> Other:	

Social-Emotional-Behavioral Challenges	Description (e.g., triggers, time of day)
<input type="checkbox"/> Sadness, irritability, or emotional lability	
<input type="checkbox"/> Anxiety or frustration about recovery	
<input type="checkbox"/> Impulsivity, restlessness, or agitation	
<input type="checkbox"/> Social withdrawal or reduced peer connection	
<input type="checkbox"/> Other:	

Recovery and Adjustment	Description (e.g., triggers, time of day)
<input type="checkbox"/> Overexerts or pushes self too hard	
<input type="checkbox"/> Denies or minimizes challenges	
<input type="checkbox"/> Frustrated by limitations or assistance	
<input type="checkbox"/> Avoids discussing injury or progress	
<input type="checkbox"/> Other:	

Additional challenges:

Step 3: Identify Accommodations that Address Challenges

HB 3007 states the ITAP must “Identify and implement immediate and temporary academic, social-emotional, behavioral or other necessary accommodations determined to be appropriate for the student to support meaningful participation in educational activities at a level that is appropriate for the student’s recovery.”

Physical and Sensory Accommodations

- Provide quiet, dimly lit space for short, rest and recovery breaks as needed each day.
- Adjust lighting and noise levels; allow use of sunglasses, brimmed hats, or noise-canceling headphones.
- Limit or pace screen time; adjust brightness or font size as needed; provide preferential seating for visuals.
- Allow extra time for transitions, task completion, and verbal responses to reduce fatigue or overload.
- Permit early class transitions and minimize long treks between locations during recovery.

- Excuse or modify participation in large, noisy assemblies or similar high-stimulation events.
- Allow flexible access to water and snacks to maintain energy and symptom control.
- Other:

Cognitive and Academic Accommodations

- Allow extra time for tasks, tests, and transitions; provide frequent breaks to manage mental fatigue.
- Reduce workload, assignment length, and participation in cognitively demanding tasks when symptomatic.
- Chunk multi-step tasks into smaller, sequential parts with check-ins.
- Provide a quiet, low-distraction workspace as needed.
- Give written directions or checklists; use graphic organizers to support planning, reduce copying from board.
- Repeat instructions slowly, confirm understanding, and allow brief wait time before responses.
- Offer memory and note-taking supports (e.g., fill-in-the-blank notes, highlighted steps).
- Use organizational prompts or peer/teacher reminders to track materials and assignments.
- Allow flexibility in deadlines, task order, output format, grading expectations; oral answers, pass/incomplete.
- Preview upcoming tasks or schedule changes to reduce stress and support predictability.
- Other

Social-Emotional-Behavioral Accommodations

- Designate a trusted adult for daily or periodic check-ins to monitor mood, stress, and fatigue.
- Allow breaks in a calm, non-punitive space when the student feels overwhelmed.
- Maintain consistent routines and clear, predictable expectations to reduce anxiety.
- Reduce social demands as needed (e.g., no cold-calling, option for smaller or independent group work).
- Provide discreet prompts to support self-regulation and allow private signals to request help or breaks.
- Offer reassurance and positive feedback emphasizing effort, coping, and gradual progress.
- Monitor emotional changes and apply calm, de-escalation or coaching strategies as needed.
- Allow access to school counselor, psychologist, or mental-health supports when available.
- Other:

Recovery and Adjustment Accommodations

- Coordinate with the student's healthcare provider to align school self-pacing with medical guidance.
- Emphasize that gradual return to full performance supports long-term recovery and success.
- Involve the student in selecting and using accommodations to foster ownership and self-advocacy.
- Support development of self-awareness of strengths, challenges, and compensatory strategies.

<input type="checkbox"/> Set short-term, achievable goals and celebrate progress toward recovery.
<input type="checkbox"/> Provide positive feedback for effort, pacing, and use of strategies, not only results.
<input type="checkbox"/> Reassure that post-injury challenges are common and typically temporary; encourage patience & confidence.
<input type="checkbox"/> Other:

Step 4: Communicate Accommodations to Teachers and Staff

HB 3007 requires that the ITAP team “Communicate accommodations with: (1) All teachers who provide instruction to the student; and (2) Other employees of the public education provider who have regular responsibilities for the student’s supervision or health, including school nurses, counselors, physical education teachers, coaches, athletic trainers and staff supervising recess or other physical activities.”

Teacher or Staff Name	Position/Role
ITAP Shared with Parent/Caregiver <input type="checkbox"/> Yes <input type="checkbox"/> No	Date shared:

Step 5: Identify ITAP Review Dates

First review: Per OAR 581-021-3007, one or more members of the team that developed the ITAP will complete a follow-up review within five (5) school days of implementation to confirm that accommodations and activity restrictions have been implemented, assess whether they remain appropriate based on the student’s current recovery status, and revise the ITAP if needed. **Second Review:** HB 3007 requires that ITAP is reviewed as needed, but no later than every two months, based on the student’s recovery.

First review conducted by	Date of review
Second review conducted by (no later than 2 months after implementation)	Date of review

ITAP Discontinuation

This ITAP may be adjusted or discontinued at the discretion of the ITAP team and must remain in effect until formally discontinued. If the need for accommodations or other specialized assistance appears to be non-temporary, a referral for a 504 plan or Special Education may be considered,

Date ITAP Discontinued:	Referral for Section 504 <input type="checkbox"/> Yes <input type="checkbox"/> No	Referral to Special Education <input type="checkbox"/> Yes <input type="checkbox"/> No
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