VII. Related Services
**Related Services**

**Definition**

"Related services" means transportation and such developmental, corrective, and other supportive services as are required to assist a child with a disability to benefit from special education, and includes speech-language pathology and audiology services, interpreting services, psychological services, physical and occupational therapy, recreation, including therapeutic recreation, early identification and assessment of disabilities in children, counseling services, including rehabilitation counseling, orientation and mobility services, and medical services for diagnostic or evaluation purposes. Related services also include school health services and school nurse services, social work services in schools, and parent counseling and training. Sec. 300.34(a).

**Exception; services that apply to children with surgically implanted devices, including cochlear implants**

- Related services does not include a medical device that is surgically implanted, the optimization of that device’s functioning (e.g., mapping), maintenance of that device, or the replacement of that device. Sec. 300.34(b)(1).

Nothing in paragraph (b)(1) ... limits the right of a child with a surgically implanted device ... to receive related services ... that are determined by the IEP Team to be necessary for the child to receive FAPE; limits the responsibility of a public agency to appropriately monitor and maintain medical devices that are needed to maintain the health and safety of the child, including breathing, nutrition, or operation of other bodily functions, while the child is transported to and from school or is at school; or prevents the routine checking of an external component of a surgically im-

**What the Federal Regs. Say ...**

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**What the Regulations Mean ...**

The federal law provides a non-inclusive (not intended to be complete) list of related services that may be provided to a child with a disability. In deciding whether a child with a disability will receive any related services, the IEP Team will, through the evaluation process, determine whether such services are needed to assist the child to benefit from the child’s special education program.

A child must first be determined eligible for special education services under IDEA before a child may receive a related service. Related services cannot “stand alone” without a special education program under IDEA. If a student does not qualify for services under IDEA, but would benefit from a related service, those services could be provided under Section 504 of the Rehabilitation Act, as related services can “stand alone” under Section 504.

**What Parents Should Know ...**

All agreed-upon related services must be included in the child’s IEP, which must specifically state the type and amount of services, and the frequency, location, and duration of the services. Once included in the IEP, the school has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

Other types of developmental, corrective or supportive services have also been provided for children with disabilities as related services. Some examples include a one-on-one aide, assistive technology devices/services, music therapy, vision therapy, and hippotherapy (specialized therapeutic horseback riding).
What the Federal Regs. Say ...  
Audiology includes identification of children with hearing loss; determination of the range, nature, and degree of hearing loss, including referral for medical or other professional attention for the habilitation of hearing; provision of habilitative activities, such as language habilitation, auditory training, speech reading (lip-reading), hearing evaluation, and speech conservation; creation and administration of programs for prevention of hearing loss; counseling and guidance of children, parents, and teachers regarding hearing loss; and determination of children’s needs for group and individual amplification, selecting and fitting an appropriate aid, and evaluating the effectiveness of amplification. Sec. 300.34(c)(1).

What the Regulations Mean ...  
After parents and school professionals (IEP Team) have determined through evaluations that the child requires audiology services, those services must be included in the child’s IEP, which must specifically state the type and amount of services, and the frequency, location, and duration of the services, as well as specific annual goals if appropriate for the audiology services being provided. Once included in the IEP, the school has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61). The school’s duty to provide these services exists even if the audiology services are not currently available within the school system. If not available within the school system, the school must contract with outside professionals to provide the services.

What Parents Should Know ...  
The South Dakota School for the Deaf will complete hearing tests for all children birth through 21 who are residents of South Dakota at no cost to parents. For more information, contact the South Dakota School for the Deaf at: (605) 367-5200.

In South Dakota ...  
The following is a partial listing of Audiology resources:

Communication Services for the Deaf (CSD) provides a wide variety of services throughout the State. 1-866-246-5759 (Voice/TTY).

Center for Disabilities Deaf-Blind Program provides information and training on screening and identification of children who have a combination of a hearing loss and a vision loss. (605) 357-1439 or 1-800-658-3080 (Voice/TTY).

South Dakota School for the Deaf provides services to local schools which include audiological testing. There are several outreach specialists who provide ongoing contact for parents and public school teachers. (605) 367-5200 (Voice/TTY).
Related Services
Counseling / Parent Counseling and Training / Rehabilitation Counseling Services

What the Federal Regs. Say …

Counseling services means services provided by qualified social workers, psychologists, guidance counselors, or other qualified personnel. Sec. 300.34(c)(2).

Parent counseling and training means assisting parents in understanding the special needs of their child; providing parents with information about child development; and helping parents to acquire the necessary skills that will allow them to support the implementation of their child’s IEP or IFSP. Sec. 300.34(c)(8).

Rehabilitation counseling services means services provided by qualified personnel in individual or group sessions that focus specifically on career development, employment preparation, achieving independence, and integration in the workplace and community of a student with a disability. The term also includes vocational rehabilitation services provided to a student with a disability by vocational rehabilitation programs funded under the Rehabilitation Act of 1973, as amended, 29 U.S.C. §701 et seq. Sec. 300.34(c)(12).

What the Regulations Mean …

IEP Teams should determine whether the child requires counseling services and/or rehabilitation counseling services. If a child requires counseling services to benefit from the child’s special education program, the service must be contained in the IEP and specify who will provide it, the type and amount of counseling services, and the frequency, location, and duration of the services, as well as specific annual goals if appropriate for the counseling services being provided. Once included in the IEP, the school has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61). Based on the child’s unique needs, the child may require counseling from a school counselor, a licensed professional counselor, a psychologist and/or a rehabilitation counselor. The school must contract with outside professionals to provide the service if necessary. Sometimes parents may need training in understanding their child’s disability and/or allowing them to support implementation of the IEP. These training experiences must be included in the child’s IEP and provided at no cost to the parents.

What Parents Should Know …

If the IEP Team determines, based on evaluation results, that a child needs some form of counseling services to benefit from the child’s IEP (such as for a child with an emotional disturbance, but certainly not limited to that disability), it is the school’s responsibility to pay for those services. If the school does not have the service available in the school system, the school must contract with (pay) outside professionals to provide the service if necessary to meet a child’s needs.
What the Federal Regs. Say ...

Early identification and assessment of disabilities in children means the implementation of a formal plan for identifying a disability as early as possible in a child's life. Sec. 300.34(c)(3). (See Section III on “Child Find”).

Medical services means services provided by a licensed physician to determine a child's medically related disability that results in the child's need for special education and related services. Sec. 300.34(c)(5).

What the Regulations Mean ...

Generally, schools are not required to pay for “medical services,” which means services that must be provided by a physician. The lone exception is where a child requires an evaluation by a physician to help determine the child’s disability for purposes of determining the child’s eligibility or continuing eligibility and/or determining services that the child requires as a result of the child’s disability.

What Parents Should Know ...

During the course of the evaluation process, if the school or IEP Team finds that a medical evaluation is needed to determine the existence of (diagnose) a particular disability, or the services a child requires, the school is responsible for paying for that evaluation.

For example, if the IEP Team suspects a child may have ADD/ADHD and believes a diagnosis is required from a medical doctor to validate the IEP Team's concerns, the school must pay for that evaluation.

Medical evaluations may also be required in instances of a child with an emotional disturbance to determine the nature of the child's emotional impairments (e.g., depression, anxiety, etc.) and to determine services the child may require.

Many of the conditions that fall under the category of “other health impairment” may require a medical diagnosis in order to determine the existence of the disability and/or determine what services the child may require. In these instances, the school district should pay for the medical evaluation to diagnose the child's disability. The school is not responsible for paying for a child's ongoing medical treatment, including medication.

What Parents Should Know ...

During the course of the evaluation process, if the school or IEP Team finds that a medical evaluation is
What the Federal Regs. Say ...

Interpreting services includes the following, when used with respect to children who are deaf or hard of hearing: Oral transliteration services, cued language transliteration services, sign language transliteration and interpreting services, and transcription services, such as communication access real-time translation (CART), C-Print, and TypeWell; and special interpreting services for children who are deaf-blind. Sec. 300.34(c)(4).

What the Regulations Mean ...

Children who are deaf or hard of hearing must be provided with interpreting services based on the unique needs of each child, if needed to benefit from the child’s special education program. Interpreting services must be included in the IEP, which must specifically state the type and amount of services, and the frequency, location, and duration of the services. Once included in the IEP, the school has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

What Parents Should Know ...

While interpreting services, which can consist of a wide variety of services based on the child’s unique communication needs, is now listed in the law as a related service, the IEP Team must also consider the requirements listed previously (in Section VI) for children with special communication needs. The IEP Team must consider opportunities for direct communications with peers and professional personnel in the child’s language and communication mode, academic level, and full range of needs, including opportunities for direct instruction in the child’s language and communication mode.

While parents should always insist on teachers, other providers, and evaluators who can provide direct instruction, at the very least a child who is deaf or hard of hearing must be provided with appropriate interpreting services by personnel qualified to effectively interpret given a child’s cognitive level and current signing abilities. For example, if a child’s signing abilities are at a higher level than the interpreter’s, there would certainly be a question as to the appropriateness of the interpreting services and the appropriateness of the education the child was receiving.
What the Federal Regs. Say ...

Occupational therapy means services provided by a qualified occupational therapist; and includes improving, developing or restoring functions impaired or lost through illness, injury, or deprivation; improving ability to perform tasks for independent functioning if functions are impaired or lost; and preventing, through early intervention, initial or further impairment or loss of function. Sec. 300.34(c)(6).

What the Regulations Mean ...

Part of a child’s right to an appropriate education is the receipt of related services necessary for him/her to benefit from special education.

Once it is determined through the evaluation process that a child needs occupational therapy services, it must be included in the IEP, which must specifically state the type and amount of services, and the frequency, location, and duration of the services, as well as specific annual goals. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60: What Parents Should Know, p. 61). This duty exists even if occupational therapy services are not currently available within the school system. If a student needs occupational therapy to benefit from the program, the school system would have to provide these services by contracting with outside professionals.

What Parents Should Know ...

Occupational therapy (OT) is generally oriented toward the development and maintenance of functions and skills necessary for daily living. An OT in school programs attempts to prevent deterioration of those functions and helps remediate deficits that impair performance. Occupational therapists often have special expertise in prescribing and constructing adaptive devices (especially for fine motor activities) and in conducting mealtime activities for individuals with physical or sensory involvement.

A student may be identified as needing occupational therapy as a related service if the student has a disability and requires special education, needs occupational therapy to benefit from special education, and the student demonstrates performance on a standardized assessment instrument that falls at least 1.5 standard deviations below the mean in one or more of the following areas: fine motor skills, sensory integration, and visual motor skills. ARSD 24:05:27:23.

TIP - Make sure the tests are administered by a licensed/registered occupational therapist. Ask him/her questions about the test and how it is scored and how it assesses skills.
Related Services
Occupational Therapy (OT) Services

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Occupational therapy (OT) is generally oriented toward the development and maintenance of functions and skills necessary for daily living. An OT in school programs attempts to prevent deterioration of those functions and helps remediate deficits that impair performance. Occupational therapists often have special expertise in prescribing and constructing adaptive devices (especially for fine motor activities) and in conducting mealtime activities for individuals with physical or sensory involvement.

What the Federal Regs. Say ...

Orientation and mobility services means services provided to blind or visually impaired children by qualified personnel to enable those students to attain systematic orientation to and safe movement within their environments in school, home, and community; and includes teaching children the following, as appropriate: spatial and environmental concepts and use of information received by the senses (such as sound, temperature and vibrations) to establish, maintain, or regain orientation and line of travel (e.g., using sound at a traffic light to cross the street); to use the long cane or a service animal to supplement visual travel skills or as a tool for safely negotiating the environment for children with no available travel vision; to understand and use remaining vision and distance low vision aids; and other concepts, techniques, and tools. Sec. 300.34(c)(7).

What Parents Should Know ...

IEPs for children who require orientation and mobility services should be very specific as to what services the child will receive. The IEP should include the type and amount of orientation and mobility services, the location, frequency and duration of the services to be provided, and the person or persons responsible for providing the services, as well as specific annual goals. This service should be provided by a trained professional. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

Children with disabilities OTHER THAN blindness or visual impairments who require assistance in developing an awareness of the environment and learning skills necessary to move effectively and safely from place to place (in school, at home, at work, in the community), should have "Travel Training" contained in their IEPs as a form of special education. (See definition of “Travel Training” in Section I).

What the Regulations Mean ...

While always assumed to be a related service, orientation and mobility services were officially added to IDEA with the 1997 amendments and 1999 regulations.
What Parents Should Know ...

The physical therapist (PT) is trained to prescribe and supervise the following types of activities: gross motor activity and weight-bearing, positioning, range of motion, relaxation, stimulation, postural drainage, and other physical manipulation and exercise procedures. The physical therapist often provides information and direct instruction to team members on appropriate positioning and handling and on the use and construction of adaptive equipment.

In South Dakota ...

Physical therapy, as a related service, includes gross motor development; mobility; use of adaptive equipment; and consultation and training in handling, positioning, and transferring students with physical impairments. ARSD 24:05:27:24.

A student may be identified as needing PT if the student has a disability and requires special education services, needs physical therapy to benefit from special education, and demonstrates a delay of at least 1.5 standard deviations below the mean on a standardized motor instrument. ARSD 24:05:27:25.

TIP - Make sure the tests are administered by a registered/licensed physical therapist, and ask him/her questions about how the test assesses the skills and how it is scored.
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**TIP**
Make sure the tests are administered by a registered/licensed physical therapist, and ask him/her questions about how the test assesses the skills and how it is scored.

In South Dakota...

**What the Regulations Mean**
Part of a child's right to an appropriate education is the receipt of related services necessary for him/her to benefit from instruction. Once the parents and school professionals have determined through the evaluation process that a student needs physical therapy services, it must be included in the IEP. Once included in the IEP, the school system has a legal duty to provide those services. This duty exists even if physical therapy services are not currently available within the school system. If a child is determined to need physical therapy services, the school would then have to provide these services by contracting with outside professionals.

**What Parents Should Know**
The physical therapist (PT) is trained to prescribe and supervise the following types of activities: gross motor activity and weight-bearing, positioning, range of motion, relaxation, stimulation, postural drainage, and other physical manipulation and exercise procedures. The physical therapist often provides information and direct instruction to team members on appropriate positioning and handling and on the use and construction of adaptive equipment.

**What the Federal Regs. Say**
Physical therapy means services provided by a qualified physical therapist. Sec. 300.34(c)(9).

Psychological services includes administering psychological and educational tests, and other assessment procedures; interpreting assessment results; obtaining, integrating, and interpreting information about child behavior and conditions relating to learning; consulting with other staff members in planning school programs to meet the special education needs of children as indicated by psychological tests, interviews, direct observation, and behavioral evaluations; planning and managing a program of psychological services, including psychological counseling for children and parents; and assisting in developing positive behavioral intervention strategies. Sec. 300.34(c)(10).

**What Parents Should Know**
While school psychologists, social workers, and/or counselors may be involved in assisting in developing a positive behavioral intervention plan, parents can and should also be involved in creating behavioral strategies. It is also important for parents to remember that other appropriate professionals in a school district may play a role in positive behavioral intervention plans.

**What the Regulations Mean**
Psychological services are delivered as a related service when necessary to help eligible students with disabilities benefit from their special education. In some schools, these services are provided by a school psychologist, but some services are also appropriately provided by other trained personnel, including school social workers and counselors. IDEA requires that, in the case of a child whose behavior impedes his or her learning or that of others, the IEP Team consider the use of positive behavioral interventions and supports and other strategies to address that behavior. The interventions may focus on the results of an absent, inadequate, inconsistent, or negative behavior that interferes with learning. Or, they may focus on curricular instructional issues that may trigger problem behaviors. Positive behavioral interventions and supports involve a comprehensive set of strategies aimed at providing students with a disability an improved lifestyle that includes reductions in problem behaviors, changes in social relationships, expansion of appropriate social skills, and an increase in school and community inclusion.
Providing therapeutic recreation services

What the Federal Regs. Say ...

Recreation includes assessment of leisure function; therapeutic recreation services; recreation programs in schools and community agencies; and leisure education. Sec. 300.34(c)(11).

What the Regulations Mean ...

Recreation services generally are intended to help students with disabilities learn how to use their leisure and recreation time constructively. Through these services, students can learn appropriate and functional recreation and leisure skills. According to IDEA, recreation activities may fall into one or more of the following classifications:

1. Physical, cultural, or social;
2. Indoor or outdoor;
3. Formal or informal;
4. Spectator or participant;
5. Independent, cooperative, or competitive; or
6. Sports, games, hobbies, or toy play.

Recreational activities may be provided during the school day or in after-school programs in a school or a community environment. Districts have made collaborative arrangements with local parks and recreation programs or local youth development programs to provide recreational services. As part of providing this related service, persons qualified to provide recreation carry-out activities such as:

- Assessing a student's leisure interests and preferences, capacities, functions, skills, and needs;
- Providing therapeutic recreation services and activities to develop a student's functional skills;
- Providing education in the skills, knowledge, and attitudes related to leisure involvement;
- Helping a student participate in recreation with assistance and/or adapted recreation equipment;
- Providing training to parents and educators about the role of recreation in enhancing educational outcomes;
- Identifying recreation resources and facilities in the community; and
- Providing recreation programs in schools and agencies.

What Parents Should Know ...

It is important for parents to remember that recreational services may be provided through IDEA. Goals regarding leisure-time activities should be included in the IEP when deemed appropriate by the student's IEP Team. If the IEP Team determines that a student needs recreation services, it must be included in the IEP, which must specifically state the type and amount of services, and the frequency, location, and duration of the services, as well as specific annual goals if appropriate for the recreation services being provided. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60: What Parents Should Know, p. 61).
What the Federal Regs. Say ...  
School health services and school nurse services means health services that are designed to enable a child with a disability to receive FAPE as described in the child’s IEP. School nurse services are services provided by a qualified school nurse. School health services are services that may be provided by either a qualified school nurse or other qualified person. Sec. 300.34(c)(13).

What the Regulations Mean ...  
While “medical services” provided by a school are narrowly defined as evaluations performed by a medical doctor, “school health services and school nurse services” is a very broad term.

School health services/school nurse services includes a number of services that can be provided by someone who is not a physician, such as a school nurse, LPN, or other qualified person. They can include a variety of different services, from providing a child with medications (if the child must take them during school hours), to the provision of a full-time nurse to monitor and assist a child with severe health conditions throughout the school day. They could include the availability of a nurse, or training for staff, to assist a child who has a seizure disorder or other medical conditions.
Related Services
Social Work Services in Schools

What the Federal Regs. Say …

Social work services in schools includes preparing a social or developmental history on a child with a disability; group and individual counseling with the child and family; working in partnership with parents and others on those problems in a child's living situation (home, school, and community) that affect the child's adjustment in school; mobilizing school and community resources to enable the child to learn as effectively as possible in his or her educational program; and assisting in developing positive behavioral intervention strategies. Sec. 300.34(c)(14).

What the Regulations Mean …

Issues or problems at home or in the community can adversely affect a student's performance at school, as can a student's attitudes or behaviors in school. "Social work services in schools" may become necessary in order to help a student benefit from his or her educational program. Social work services should be carried out by a licensed social worker.

If the IEP Team determines a child requires "social work services in schools" in order to benefit from the child's special education program, the services needed should be detailed in the child's IEP and provided at no cost to the parents. The IEP must specifically state the type and amount of services, and the frequency, location, and duration of the services. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

What Parents Should Know …

The need for social work services should be included in the student's IEP as determined by the child's IEP Team. If social work services are determined appropriate by the IEP Team, the school must hire or contract for those services. If parents believe a child requires social work services in school and the school denies the service, parents may request mediation or file a Due Process Complaint to have the issue addressed at a due process hearing.
Related Services
Speech-Language Pathology Services

What the Federal Regs. Say ...

Speech-language pathology services includes identification of children with speech or language impairments; diagnosis and appraisal of specific speech or language impairments; referral for medical or other professional attention necessary for the habilitation of speech or language impairments; provision of speech and language services for the habilitation or prevention of communicative impairments; and counseling and guidance of parents, children, and teachers regarding speech and language impairments. Sec. 300.34(c)(15).

What the Regulations Mean ...

Speech-language professionals and speech-language assistants, in accordance with State regulations, provide speech-language pathology services. These services address the needs of children and youth with communication disorders.

If a child with a disability requires speech-language therapy as a related service, it must be detailed in the child’s IEP, including the type and amount of services, and the frequency, duration, and location of the services, as well as specific annual goals. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

Speech-language pathology services can also “stand alone” as a child with a disability’s special education program, so long as the services are considered special education rather than a related service. Sec. 300.39(a)(2)(i).

What Parents Should Know ...

As part of the IEP Team, parents, along with the rest of the student’s IEP Team, should determine whether a child with a disability requires appropriate speech-language services in order to benefit from the child’s special education program. If a child is determined to need speech-language services, they must be included in the child’s IEP.
What the Federal Regs. Say ... 
Transportation includes travel to and from school and between schools; travel in and around school buildings; and specialized equipment (such as special or adapted buses, lifts, and ramps), if required to provide special transportation for a child with a disability. Sec. 300.34(c)(16).

(IDEA’s LRE requirements apply to transportation services. See Secs. 300.107, 300.117). (See also Section X).

What the Regulations Mean ... 
A child may be determined to require the related service of transportation if the child needs transportation (or some specialized form of transportation) to get to and from school in order to benefit from special education. For example, transportation may be needed as a related service if the child cannot safely walk to school or ride a regular school bus as a result of the child’s disability.

It can also include transportation to and from a related service. For example, if a child with a disability needs to be transported to a different school building or to a private provider for physical therapy, that transportation would need to be provided by the school district and included in the child’s IEP.

It can include transporting a child to and from a residential placement, including trips home on weekends/holidays as appropriate. It can also include trips for the parents to visit the child, including the cost of room and board. The number of trips home for the child and/or the number of trips for the parents to the residential placement must be determined by the IEP Team.

Transportation must also be provided for out-of-town evaluations paid for by the school. If parents are asked and agree to provide this related service for the school district, transportation costs would include reasonable room and board for parents if the distance involved or length of the evaluation would require an overnight stay.
What Parents Should Know …

If a child with a disability is determined to require the related service of transportation, a school can never require that the parent provide the service. A school may “ask” the parent to provide the service (and be reimbursed), but cannot require that the parent provide the service as a condition to including transportation in the child’s IEP. If parents agree to provide the transportation, they may negotiate the rate, but it must be at least the current State rate. Given the fluctuation in gas prices, reimbursement at the minimum State rate may well result in the service not being provided “free of charge” to parents; thus a reason for parents to seek a higher rate than the State rate.

If the school offers appropriate transportation and the parent turns down that offer and wants to transport the child, the parent may choose to provide the transportation but would not be entitled to reimbursement.

Transportation arrangements must be specifically stated in the child’s IEP. The IEP must specifically state the type and amount of transportation services, and the frequency, location, and duration of the services. Once included in the IEP, the school system has a legal duty to provide those services. (See TIP Box, p. 60; What Parents Should Know, p. 61).

In South Dakota …

If transportation is required for the child to benefit from the special education program, transportation shall be written in the IEP and provided at no cost to the parent. A district may not require that a parent provide transportation; however, if both parties agree that the parent will provide the transportation, it shall be noted on the IEP and the parent shall be reimbursed by the district in accordance with SDCL 13-30-3 and 13-37-8.9. ARSD 24:05:27:07.
VIII. Transition Services
What the Federal Regs. Say …

Transition services means a coordinated set of activities for a child with a disability that is designed to be within a results-oriented process, that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child’s movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation; is based on the individual child’s needs, taking into account the child’s strengths, preferences and interests; and includes instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and if appropriate, acquisition of daily living skills and provision of a functional vocational evaluation. Sec. 300.43(a).

Transition services for children with disabilities may be special education, if provided as specially designed instruction, or a related service, if required to assist a child with a disability to benefit from special education. Sec. 300.43(b).

What the Regulations Mean …

Transition services provided by the school and/or other participating agencies must be carried out in a coordinated manner that does not duplicate services.

Transition planning must include specific anticipated outcomes that the student will achieve by the time the student graduates, ages out of, or otherwise leaves the public school system. Thus, unlike annual goals in the IEP, transition goals will necessarily extend for several years.

Transition services should provide the student a seamless transition from school to post-school activities. One or more post-school activities may be appropriate.

In determining transition services for a student, it is imperative that the services provided be based on the student’s strengths, preferences, and interests. The student’s transition goals, based on his/her strengths, preferences and interests, should be the first matter discussed at an IEP Team meeting addressing a student’s transition needs.

In each outcome area, e.g., postsecondary education, employment, etc., the child’s IEP should include instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and if appropriate, acquisition of daily living skills and provision of a functional vocational evaluation. Appropriate annual and long-term goals must be developed based on the child’s unique transition needs.

Appropriate linkages to services and supports the student will need when finished with school should be in place before he/she leaves the school setting and documented in the IEP.
What Parents Should Know ...

In each area of post-school activities appropriate for a student - postsecondary education, vocational training, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation) - the school or other participating agency must provide instruction (special education), related services (if needed to benefit from the instruction), community experiences, the development of employment and other post-school adult living objectives, and if appropriate, acquisition of daily living skills and a functional vocational evaluation.

Starting with the IEP to be in place when the child turns age 16 (or younger if determined appropriate) and continuing until the student is no longer eligible for special education services, the IEP Team must:

- actively involve the child in his or her IEP development;
- base the IEP on the child’s strengths, preferences, and interests;
- determine the child’s post-school goals;
- determine needed transition services; and
- ensure the transition services the student requires in order to meet the student’s postsecondary goals are provided.

The components of the IEP — the present levels of academic achievement and functional performance (PLAAFP), transition services, least restrictive environment, related services, participation in general education curriculum, annual goals (including short-term objectives/benchmarks when required), etc. — are interrelated and connected. Beginning no later than development of the IEP to be in place when the child turns 16 (or younger if appropriate), the IEP should be heavily influenced by transition planning and services to prepare the student for adult life.

If transition planning is to be effective, all of the discussion and decision-making in the IEP Team meeting must result in a comprehensive, coordinated program that brings the parts of the IEP together to prepare young people for the adult world.

TIP - The entire IEP for every student, beginning no later than the IEP in place when the student turns 16 years of age (or younger if determined appropriate), should become future-directed, goal-oriented, and based upon the student’s strengths, preferences, and interests. The student should be actively involved in planning his or her transition goals and services and participating in all meetings. The postsecondary goals should be those of the student’s, not the teachers’ or parents’.
In many instances, it will be important to address and provide transition services to children at age 14 or younger, such as children with disabilities deemed “at risk” of dropping out of school or children who need to make decisions regarding their academic track. As a child moves through the public school system, there are certain dates or deadlines when decisions must be made regarding the child’s academic path. This is usually done in 7th or 8th grade. Prior to a child with a disability reaching that point, it would be appropriate for transition services to begin, if they are not already in place.

**What the Federal Regs. Say ...**

Beginning not later than the first IEP to be in effect when the child turns 16, or younger if determined appropriate by the IEP Team, and updated annually, thereafter, the IEP must include appropriate measurable postsecondary goals based upon age appropriate transition assessments related to training, education, employment, and, where appropriate, independent living skills; and the transition services (including courses of study) needed to assist the child in reaching those goals. Sec. 300.320(b).

**What Parents Should Know ...**

Transition services are the culmination of a child with a disability’s public school education. Everything the school has provided prior to the actual transition services should have been leading in that direction, as a purpose of IDEA is to prepare a child for further education, employment, and independent living.

 Schools must conduct evaluations to help determine a child’s needs in the area of transition services. Then, the services provided should be dictated by what the child wants for life beyond high school, such as employment, independent living, and/or further education, etc. The student’s classes and special education services should be sufficient to prepare the student for those outcomes.

Parents should insist that transition services be provided when they believe it to be appropriate for their child.
What the Federal Regs. Say …

The public agency must invite a child with a disability to attend the child’s IEP Team meeting if a purpose of the meeting will be the consideration of the postsecondary goals for the child and the transition services needed to assist the child in reaching those goals. Sec. 300.321(b)(1). If the child does not attend the IEP Team meeting, the public agency must take other steps to ensure that the child’s preferences and interests are considered. Sec. 300.321(b)(2).

To the extent appropriate, with the consent of the parents or a child who has reached the age of majority, in implementing the requirements of paragraph (b)(1) of this section, the public agency also must invite a representative of any participating agency that is likely to be responsible for providing or paying for transition services. Sec. 300.321(b)(3).

What the Regulations Mean …

If a purpose of an IEP Team meeting is to consider a student’s postsecondary goals or transition services, the school must invite the student to be a part of the IEP Team. The student’s preferences and interests are paramount to appropriate transition planning. If the student does not attend an IEP Team meeting, the school must take whatever steps are necessary to make sure the student’s preferences and interests are known and considered by the IEP Team. It would do little good for the rest of the IEP Team to attempt to determine a student’s postsecondary goals and needed transition services without the student’s input.

Transition services may require services beyond what can be provided by a school, such as vocational rehabilitation services, independent living services, employment, etc. The school must make sure that a representative from other agencies that may be responsible for providing transition services is invited to be part of the student’s IEP Team. The parents or child (if of age of majority) must consent to such participating agency’s participation. If the representative from a participating agency cannot attend, the school must take other steps to ensure the agency’s participation at the IEP Team meeting, such as through conference calls, written reports, or other means.

What Parents Should Know …

Parents should encourage their child to attend IEP Team meetings. If parents want the school to invite a representative from another agency to an IEP Team meeting, they should let the school know in advance of the meeting and be sure to provide written consent for that person to attend.
What the Federal Regs. Say ...

Failure to meet transition objectives - Participating agency failure. If a participating agency, other than the public agency, fails to provide the transition services described in the IEP in accordance with Sec. 300.320(b), the public agency must reconvene the IEP Team to identify alternative strategies to meet the transition objectives for the child set out in the IEP. Nothing in this part relieves any participating agency, including a State vocational rehabilitation agency, of the responsibility to provide or pay for any transition service that the agency would otherwise provide to students with disabilities who meet the eligibility criteria of that agency. Sec. 300.324(c).

What the Regulations Mean ...

Responsibilities for providing transition services may be assigned to different participants (school personnel, agency representatives of state, local, and private agencies) at the IEP Team meeting, but the school district has ultimate and overall responsibility for ensuring the services have been provided. Where participating agencies are providing transition services, the school should have ongoing communication with such agencies to make sure the services are being provided, such as through written progress reports or other means of communication, or by contacting the parent or student, or conducting a review of the IEP.

The IEP must document which participating agencies, in addition to the district, are responsible for providing or paying for transition services to the child and what specific services those agencies will provide.

If a participating agency fails to provide agreed-upon services, the district must initiate an IEP Team meeting as soon as possible to identify alternative strategies. Possible alternative strategies might be: referral to another agency, identifying another funding source, or for the school itself to provide the needed service. Schools should not, however, automatically bear the cost of transition services that should be borne by another agency. For example, if a public agency is obligated under federal or state law to provide or pay for transition services, that public agency must fulfill that obligation, either directly or through contract or other arrangement.

What Parents Should Know ...

The child’s school district is responsible for ensuring that the child receives a FAPE. This includes planning and coordination of transition services through development of an IEP.

Parents/students may be assigned specific transition services activities, such as visiting college campuses, adult residential placements, etc. However, the ultimate responsibility for ensuring tasks are completed falls on the school.

TIP - Parents should be wary of schools that refuse to invite appropriate participating agencies and should insist on their participation.