DETERMINING NEED FOR RELATED SERVICES

Relevance and Necessity

In public schools, the Individualized Education Program (IEP) team determines the need for related services based on the student's goals and objectives, the skills of the team members, desired student outcomes, and recommendations by the school-based related service provider/s (RSPs). To include related services in a student's IEP, that service must be required to assist the student to benefit from special education. This means:

- The student has a disability, as defined by the Individuals with Disabilities Education Act
- The related service is educationally relevant and clear in purpose
- The related service is necessary for the student to benefit from their IEP

If the team answers, "Yes" to the following questions, related services are likely to be **both** relevant and necessary:

- o If the student **does not** receive the related service, is there reason to believe that they **will not** have access to an appropriate education?
- o If the student **does not** receive the related service, is there reason to believe that they **will not** experience educational benefit?

If the team answers, "Yes" to any the following questions, related services are probably **not** relevant and necessary:

- Could the need be addressed appropriately by the exceptional children and/or general education teacher?
- Could the need be addressed appropriately through core school faculty or staff (e.g., school nurse, school counselor, school librarian, teachers, administrator, bus drivers, child nutrition staff, or custodians)?
- Could the student continue to benefit from their educational program without related services?
- Could the need be appropriately addressed during non-school hours?
- Does including related services in the student's program present any undesirable or unnecessary gaps, overlaps, or contradictions with other proposed services? (Giangreco, 2001a)

Students can clearly benefit from some services that are not educationally necessary but may be considered necessary or desirable by the family, instructional staff, other team members, or non-educational service providers. Because related services may not, in some cases, meet the educational relevance and necessity-to-benefit criteria (as required of related services under the IDEA) does not mean the service is not needed or unimportant. Rather, it may indicate that the service is not the responsibility of the public school.

Participation of the RSP in a Collaborative Assessment and IEP Process

Research indicates that if the need for related service is based solely on the RSP's evaluation (whether school- or community-based), important information from other sources may be overlooked or misinterpreted. According to IDEA [§ 300.306(c)], teams must draw upon varied sources and not rely on a single-test score in the evaluation process. Evaluations can include, but are not limited to, review of records, observations, interviews, behavior checklists, structured interactions, play assessments, adaptive and developmental scales, criterion- and norm-referenced instruments, clinical judgment, and other techniques and procedures as deemed appropriate by the evaluator.

If the need for a related service is determined prior to the development of a student's IEP, services may be duplicated, missed or student outcomes may not be adequately identified and addressed (Giangreco 2001b, Muhlenhaupt, 2000, Rainforth, 1996). The same applies to determining need for related services in schools based solely on a physician's order/prescription. When team members prematurely focus on which services are desired, or how services will be provided, they may not fully understand the role of related services within the context of the IDEA. In each of these situations, ineffective collaboration results in a fragmented program in which the related service is not provided to support the student's ability to participate in the educational program, but rather to improve a student's isolated skills (AOTA, 2007). In best/evidence-based practice, the related service provider contributes collaboratively in eligibility determination and the development of the student's program, based on all available evaluation data and team discussion. This is the essence of an integrated, functional IEP.

Intervention Planning

If the IEP goals warrant related services, the provider would, at that point, develop a plan of care (or intervention plan). There should be a clear distinction between IEP goals and therapy plan of care. IEP goals are determined by the team collaboratively as a whole; intervention plans are the methods or strategies that will be used by the provider to support goal attainment. Decision-making about the type of service should not be made until after the team develops IEP goals and determines what services are needed. Related service providers and the IEP team should not discuss intervention possibilities until the concerns (e.g., lack of skill, decreased performance) and expected performance or outcomes (goals) have been clearly defined (AOTA, 2007).

These questions may help guide decision-making on the extent, type, and duration of each service:

- What is the least restrictive means of providing support within the general education program?
- What evidence exists to support the focus and frequency of the intervention program?
- What impact will the intervention have on social participation with peers?
- How critical is it to the student's health and safety for the related service provider to be present in the educational environment?
- How much/often will the related service provider contribute to environmental changes that improve the student's ability to function in the present educational setting?
- Considering the student's strengths and weaknesses, what is the potential to not only improve this student's functional skills but also ultimately decrease or eliminate the need for specially designed instruction?
- Considering the student's chronological age, how might age-expected demands affect the student's ability to function independently?
- How well has the student responded to previous or other types of intervention?
- How much do this student's deficits interfere with their ability to participate and benefit from the educational process in the present setting?
- To what extent is the expertise of the related service provider needed to communicate adequately (verbally and in writing) with professionals within and/or outside the educational environment?

Discontinuation of Services

Reviewing each student's continued need for related services is an ongoing process; considered each time a new IEP is developed. As part of the intervention plan it is important to regularly discuss with team members what conditions will indicate a related service should be discontinued. This communication can help to avoid conflict when the provider feels services are no longer needed but others disagree. If the need for each related service is based on a student's disability (e.g., student has cerebral palsy or autism), team members may not understand why the provider would suggest discontinuing services. However, if related services are driven by student IEP goals within the context of an educational program, then the services are reasonably discontinued when goals are met or student priorities shift. Likewise, services should be resumed if a future IEP mandated the need for the intervention or expertise of a specific discipline in order for the student to benefit from specially designed instruction.

Use of Theoretical Models

When team members focus too specifically on a particular diagnosis or frame of reference to determine the need for service, they may easily overlook important student strengths, needs, and educational/functional outcomes. School-based practice, under IDEA, requires an individualized approach to assessment, goal development, and intervention. Providers must be able to work from many models and frames of reference to help a wide variety of students and IEP teams achieve desired outcomes in the least restrictive context.

Related services should always address the student role for each student and ways that specific school environment supports or hinders student performance. Focus should be on the student, activity, and environment to help the student reach satisfying outcomes throughout their school day. All school-based providers start with the basic question, "What does this student need to do to be successful in their educational program?" Providers then rely on research, clinical reasoning, and professional experience to guide and individualize intervention. This process is specific to the needs, environment and desired outcomes for each student.

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