

Disability Rights Nebraska

Protection and Advocacy for People with Disabilities

This is basic information and does not constitute legal advice.

Related Services

What are Related Services?

Related services are supportive services given to your child with a disability at no cost to you. These are services that are necessary to help your child to benefit from special education¹. Examples of related services may include, but are not limited to:

- **Speech-language services.** These include identifying children with speech or language impairments. These may also include referring the child for therapy and giving counseling to the child, parents, and teachers about speech and language impairments².
- **Audiology services.** These include identifying and serving children who are deaf or hard of hearing³.
- **Interpreting services.** These include services (such as transcription services) for children who are deaf or hard of hearing and special interpreting services for children who are deaf-blind⁴.
- **Assistive technology devices or services.** These include devices or services that are used to increase, maintain, or improve the functional capabilities of a child with a disability⁵.
- **Psychological services.** These include conducting psychological and educational tests, interpreting test results, planning and managing psychological services for children and parents, and help in creating behavioral intervention strategies⁶.
- **Occupational therapy.** This includes services given by a qualified occupational therapist to improve, develop, or restore impaired functions or functions lost through illness, injury, or deprivation. These also include services to improve ability to perform tasks for independent functioning if functions are impaired or lost, and to prevent further impairment or loss of function⁷.

¹ 34 CFR 300.34(a); Rule 51 sec. 003.50 (2006)

² 34 CFR 300.34(c)(15) (2006)

³ 34 CFR 300.34(c)(1) (2006)

⁴ 34 CFR 300.34(c)(4) (2006)

⁵ 92 NAC 51-007.07E3

⁶ 34 CFR 300.34(c)(10)

⁷ 34 CFR 300.34(c)(6) (2006)

- **Orientation and mobility services.** This includes services given to children who are blind or visually impaired by qualified personnel to allow them to learn safe movement within their environments in school, home, and community⁸.
- **Physical therapy.** This includes services given by a qualified physical therapist⁹.
- **Counseling services.** These include services provided by qualified social workers, psychologists, guidance counselors, or other qualified personnel¹⁰.
- **Parent counseling and training.** This includes helping parents to understand the special needs of their child, information about child development, and skills to be able to take an active role in developing their child's Individualized Education Program¹¹.
- **Medical services for diagnostic and evaluation purposes.** These include services given by a licensed physician to determine a child's medically related disability that requires special education and related services¹².
- **School health and school nurse services.** These include health services provided by a qualified school nurse or other qualified person to allow a child with a disability to receive a "free appropriate public education" as listed in the child's Individualized Educational Program¹³.
- **Recreation.** This includes therapeutic recreation services that restore or rehabilitate a child's functioning and independence, and reduce or eliminate the effects of illness or disability¹⁴.
- **Transportation.** This includes travel to, from, and between schools, in and around school buildings, and specialized equipment (such as adaptive buses) if appropriate¹⁵.

Who is eligible for related services?

Your child must first be evaluated through the school district's Multidisciplinary Team (MDT) Evaluation or the Independent Educational Evaluation processes (see "Multidisciplinary Team Evaluation" and "Independent Educational Evaluation" materials)¹⁶. The MDT decides whether your child has a disability.

If your child is found to be "a child with a disability" as defined under the Individuals with Disabilities Act (IDEA), he or she is eligible for an Individual Education Program (IEP)¹⁷.

The IEP Team decides, on a case by case basis, whether related services are necessary for your child in order to receive a "free appropriate education (FAPE)." The IEP Team must

⁸ 34 CFR 300.34(c)(7) (2006)

⁹ 34 CFR 300.34(c)(9) (2006)

¹⁰ 34 CFR 300.34(c)(2) (2006)

¹¹ 34 CFR 300.34(c)(8) (2006)

¹² 34 CFR 300.34(c)(5) (2006)

¹³ 34 CFR 300.34(c)(13) (2006)

¹⁴ 34 CFR 300.34(c)(11) (2006)

¹⁵ 34 CFR 300.34(c)(16) (2006)

¹⁶ Rule 51 sec. 006.02A (2006)

¹⁷ Rule 51 sec. 007.01 (2006)

base its decision on documented diagnostic evidence¹⁸. Related services can only be provided to your child if it is listed as necessary in your child's IEP¹⁹.

Is a school district required to provide related services to my child?

Maybe. If the IEP Team has decided that your child needs related services and has included this in the IEP, the school district must provide your child with the related services. However, if the related services are not included in your child's IEP, the school district is not required to provide them²⁰.

How do I request related services?

You may want to request an IEP meeting to discuss whether your child needs any related services (see "Individualized Independent Evaluation Program" material). It is a good idea to put all communications regarding your child's special education services between you and school administrators and staff in writing. Be sure to write down conversations and events that affect your child's schooling. Note the date, who was involved, what was said, and the resolution. You may want to create and maintain a file with all of your child's school information such as report cards, evaluation reports, and Individual Education Programs (IEPs).

All requests for evaluations or meetings should be made in writing to your child's school principal. You should keep a copy for your own records. Send your written request to the school via certified, return receipt requested mail. Attach the return receipt to your copy of the request and keep this in your file.

Additional resources:

- Multidisciplinary Team Evaluation. Disability Rights Nebraska
- Independent Educational Evaluation. Disability Rights Nebraska
- Individual Education Program. Disability Rights Nebraska
- Nebraska State Resources. NICHCY (2006). This is a list of organizations in Nebraska that you can contact for more information and to advocate for your child with a disability.
- Individualized Education Programs. NICHCY (1999). This article describes the federal regulations and what they require for a complete IEP.
- Developing Your Child's IEP. NICHCY (2002). This article walks through an IEP in detail and tells you how to be an advocate for your child.
- Parental Rights in Special Education. Nebraska Department of Education Special Populations Office (August 2005).

¹⁸ Rule 51 sec. 007.07E5 (2006)

¹⁹ Rule 51 sec. 007.07B4 (2006)

²⁰ Rule 51 sec. 007.11A (2006)

Sample Letter

You may wish to use similar language when requesting an Individualized Education Program (IEP) meeting for your child:

[Principal's Name]
[School's Name]
[School Address]
[City, State, Zip code]

Re: [Your child's name] – Request for an Individualized Education Program meeting

Dear [Principal's Name]:

Please consider this letter as a formal request for an Individualized Education Program (IEP) team meeting for my child, [Your child's name]. It is my understanding that I have a right to request an IEP meeting at any time, pursuant to the provisions of 92 NAC 51 (Nebraska Department of Education, Rule 51). I would like to specifically discuss related services for my child.

To prevent complications with my schedule, please notify me of the date and time of the meeting one week in advance. I appreciate your prompt attention to this request and ask that you respond in writing by [Insert a date two (2) weeks from the time mailed], and that the meeting be held by [Insert a date five-ten days later than the previous date]. Thank you.

Sincerely,

[Your Name]
[Your Address]
[Your City, State, Zip]
[Your Phone number]