

# Superintendent's Circular

NUMBER: SHS-13 Version 01

## TRANSPORTATION, MEDICAL ACCOMMODATION

This circular will remain in effect unless rescinded or superseded by a subsequent version

Some students may be eligible for transportation accommodation based on medical needs. The following guidelines and processes refer to transportation for student medical indications only. Transportation accommodations for medical needs do not include transportation accommodations written into an Individualized Education Program (IEP).

#### **BACKGROUND**

Medical transportation is warranted when a student's illness, managed by a health care professional, requires the assistance of transportation as an accommodation to enable the student to attend school. Transportation accommodations for medical needs should not substitute for treatment of specific medical conditions. The school, through the Student Support Team, is encouraged to explore creative solutions to assist these families with extraordinary needs. Children with chronic medical conditions that cannot be remediated by medication or therapy may be granted renewal each year. Renewal is collaboratively determined by the school nurse and central office staff. Schools will be notified in the spring to begin the transportation renewal process. No student should be considered "renewed" until

receiving written notification that will be sent according to the Transportation Office policy.

#### POLICY IMPLEMENTATION GUIDELINES

## Parent/Guardian Role:

- Inform the school nurse of medical diagnosis and provide supporting medical documentation that may require transportation as an accommodation.
- Communicate with the school nurse and their child's health care provider regarding the need for medical transportation.
- All participants in the process may seek further assistance by contacting Health Services at 617-635-6788 or the Department of Transportation at 617-635-9520.

## School Principal/Head of School Role:

- Review, discuss, and approve each case with the Student Support Team and/or school nurse.
- Designate a member of the Student Support Team to collaborate with the school nurse to inform parents/guardians of eligibility determination.
- All participants in the process may seek further assistance by contacting Health Services at 617-635-6788 or the Department of Transportation at 617-635-9520.

#### **School Nurse Role:**

• Provide parents/guardians with a release of medical information form to be signed to obtain consent to speak with the student's licensed health care provider.

- Contact the licensed healthcare provider to inform them of the BPS transportation accommodation policy, discuss the request submitted by the parent/guardian, and share clinical observations related to the child's medical condition.
- Present the case to the Student Support Team, including notes taken during discussions with the parent/guardian and licensed health care provider to determine the appropriate accommodations, if any.
- Document all relevant and objective information related to transportation in the student's electronic health record.
- If the school nurse does not believe transportation is warranted based on the above criteria, but any other participant in the process disagrees, the case is referred to School Health Services for further clarification and resolution.

## **Student Support Team Role:**

- Discuss medical transportation request cases as referred by the school nurse.
- Each request should be considered individually, and other options must be reviewed prior to authorization of medical transportation. If additional support is needed, the Student Support Team may make referrals for 504 or special education concerns.
- All participants in the process may seek further assistance by contacting Health Services at 617-635-6788 or the Department of Transportation at 617-635-9520.

## Coordinator of Special Education (COSE) Role:

- If a student is eligible for a 504 accommodation plan (or is being evaluated for a 504 accommodation plan), the team shall discuss eligibility for transportation.
- If a student already has an IEP (or is being evaluated) and transportation may be necessary for the medical condition (but not necessarily the area of educational disability), the team shall consider transportation needs. As part of this consideration, the team shall include the school nurse. If special transportation is found to be necessary for the student to benefit from special education services and make meaningful educational progress, it can be added to the IEP.
- If a student is referred for consideration for a 504
  accommodation plan and/or special education and related
  services, the COSE will process the request for
  transportation as appropriate.
- All participants in the process may seek further assistance by contacting Health Services at 617-635-6788 or the Department of Transportation at 617-635-9520.

#### **School Health Services Role:**

- A member of the Health Services administrative team will be available to discuss any request for transportation as an accommodation for medical needs.
- School Health Services will consult with any party involved in the transportation as an accommodation for the medical needs process regarding the eligibility determination.
- In some cases, School Health Services may overturn the

initial determination or provide recommendations for alternative accommodations to support the student's needs.

## **Department of Transportation Role:**

- After approval, the parent/guardian of the student will be notified by mail of transportation specifics (time of pickup/drop-off/bus numbers/effective date). School staff may access route information via Aspen.
- Collaborate with School Health Services regarding the medical transportation renewal process.
- Transportation requests for students who are healthy, but whose parents or guardians are ill, will not be approved.

#### **ELIGIBILITY DETERMINATION**

## A student determined to be eligible:

- The school nurse will fill out the Request for Medical Transportation form provided below and submit it to school-based leadership for final approval; the signed form will be sent via email to the school's Transportation Officer within the Department of Transportation by the school leader and/or school transportation coordinator.
- Once approved, the parent/guardian of the student will be notified by mail of transportation specifics (time of pickup/drop-off/bus numbers/effective date). School staff may access route information via Aspen.

### A student determined *NOT* eligible:

- The parent/guardian will be notified by the principal designee in collaboration with the school nurse.
- All participants in the process may seek further assistance by contacting Health Services at 617-635-6788 or the Department of Transportation at 617-635-9520.

#### SPECIFIC GUIDELINES

Asthma: Transportation as an accommodation for asthma is reserved for severe asthmatics that are adhering to a treatment plan, have a rescue inhaler at school, and have an Asthma Action Plan on file with the school nurse. If asthma impacts a student's ability to walk to a school bus or MBTA stop, further medical evaluation and treatment may be necessary and should be discussed with the child's health care provider. Even the most compliant students with asthma may need medical transportation during the cold winter months. Mild, episodic asthmatic students on intermittent medications do not qualify for medical transportation.

Sickle Cell: Please refer to Superintendent's Circular SHS-25.

Ambulation: Students with conditions that significantly affect ambulation, such as leg braces, crutches, lower extremity fractures, or amputations may be eligible for transportation as an accommodation. Students who can ambulate and fully participate in the school program should not be authorized for medical transportation.

Seizure Disorder: Students experiencing current, intermittent

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seizure activity are eligible for transportation accommodation until stabilized. In general, if seizures are well controlled, medical transportation will not be provided.

Emotional/Behavioral Problems: Children with emotional and/or behavioral issues which impact their transportation to or from school should be discussed at the Student Support Team meeting before any referral is made for this type of transportation accommodation. ADHD, depression/anxiety, impulsivity, and other behavioral issues have an impact on teaching and learning as well as school access. Behavioral modification and other modalities may be more beneficial to the child's overall functioning than just transportation alone. The school nurse will gather the *medically relevant information* for the team.

**Other:** Neuromuscular disorders, cardiac disease, and other medical conditions should be reviewed on an individual basis; consult with School Health Services as needed.

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# For more information about this circular, contact:

Owner:	Director, Office of Health Services	
Department:	Office of Health Services	
Mailing Address:	443 Warren Street Suite 2, Dorchester, MA	
	02121	
Phone:	617-635-6788	
Email:	Operations-Department-	
	Heads@bostonpublicschools.org	

Mary Skipper, Superintendent

# REQUEST FOR TRANSPORTATION ACCOMMODATION, MEDICAL NEEDS

(For school system use only)

Student Name	Student ID #
School	
Hours:	
Transportation will only be provious school.	ded for the official hours of the
School Nurse (please print)	
Principal/Head of School (please	print)
Does the student currently receing from Boston Public Schools?	·
If yes, please describe why the acbeing requested.	
Does the student currently receivable? □Yes □No	ve services related to a 504 or
If yes, please discuss adding this current educational plan, instead this manner. Call Health Services support.	

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MEDICAL CERTIFICATION:
Reason for request:
Healthcare Provider/ Clinic Name:
Is all relevant data documented in the student's electronic health record? ☐ Yes ☐ No
DURATION OF MEDICAL TRANSPORTATION: Any accommodation lasting longer than 6-8 weeks will be reviewed by School Health Services in collaboration with the BPS Department of Transportation.
□ Wheelchair van #weeks
□ Cold winter months □ School year
AUTHORIZATION:
Date the request was submitted to school nurse:
Date the request was discussed at SST meeting:
Principal/head of school signature
Date:
School nurse signature

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Date:
Name of Transportation Officer:
Date faxed/emailed to Transportation Officer:
*******
DEPARTMENT OF TRANSPORTATION ONLY

Date processed by Transportation Unit: \_\_\_\_\_

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