

**Reference Guide Regarding Taxonomy
Related to Driver Rehabilitation Specialists,
Driver Education Services, and Specialized
Driver Education Providers**



ADED

The Association for Driver
Rehabilitation Specialists

Each State, in collaboration with the State Driver Licensing Agency (SDLA), driving school programs, and driver rehabilitation specialists, should create and execute public and consumer service campaigns to educate prospective drivers and their parents/guardians about the challenges of driving with specific medical conditions. These campaigns aim to raise awareness regarding the potential complexities and responsibilities involved in driving while managing certain health conditions.

It is important for consumers to be informed that in certain States, individuals with medical conditions or changes in mental or physical status are required to self-report this information to the SDLA and adhere to the State's recommended guidelines. Depending on the situation, obtaining medical clearance to drive may be necessary, and a comprehensive driver evaluation conducted by a driver rehabilitation specialist might be requested.

By providing accurate information through these campaigns, potential drivers and their parents/caregivers can make informed decisions and take appropriate steps to ensure that they are receiving services most appropriate to their needs.

The spectrum of driver services available to the public are distinguished by the delivery of service, type of providers, credentials required, and services offered¹. Traditional driver education programs are considered community-based services with the goal of enhancing skills for healthy drivers. Whereas driver rehabilitation programs are considered specialized evaluation and training services for the purposes of serving those with disabilities or medically at risk.

Driver rehabilitation programs encompass specialized evaluation and training provided by professionals with advanced training and credentials, such as Driver Rehabilitation Professionals (DRP), Certified Driver Rehabilitation Specialists (CDRS), and occupational therapists with Specialty Certification in Driving & Community Mobility (SCDCM). These experts possess knowledge and expertise in medical conditions and their implications for driving.

The primary role of driver rehabilitation providers is to assess various factors that can affect driving performance, including cognitive, visual, perceptual, behavioral, and physical limitations. They integrate clinical findings with on-road performance to gain a comprehensive understanding of an individual's driving abilities and fitness to drive, including potential for learning.

Furthermore, driver rehabilitation specialists collaborate with clients and parents/guardians to address the student's specific needs. They assist in making decisions regarding appropriate equipment and vehicle modifications based on individual requirements. Additionally, they often coordinate with multidisciplinary teams, including driver education providers, healthcare or

¹ Lane A, Green E, Dickerson AE, Davis ES, Rolland B, Stohler JT. Driver rehabilitation programs: defining program models, services, and expertise. *Occup Ther Health Care*. 2014 Apr;28(2):177-87. doi: 10.3109/07380577.2014.903582. PMID: 24754768

rehabilitation professionals, vehicle modification experts, community services, funding agencies, SDLA personnel, and caregiver support networks.

By combining their expertise and resources, driver rehabilitation providers aim to provide comprehensive support to individuals seeking to gain or maintain their driving independence while ensuring safety on the road.

The role of providers offering driver rehabilitation is to:

1. Navigate driver license compliance and basic eligibility through intake of driving and medical history.
2. Evaluate and interpret risks associated with changes in vision, cognition, and sensory-motor functions in the driving context by the medically trained provider.
3. Perform a comprehensive driving evaluation including clinical and behind the wheel assessments.
4. Advise client and caregivers about evaluation results, and provide resources, counseling, education, and/or an intervention plan.
5. Offer training with compensatory strategies, skills, and vehicle adaptations or modifications for drivers and passengers.
6. Advocate for clients in access to funding resources and/or reimbursement.
7. Provide documentation about fitness to drive to the physician and/or SDLA in compliance with regulations.
8. Prescribe equipment in compliance with State regulations and collaborate with a Mobility Equipment Dealer for fitting and training.
9. Present resources and options for continued community mobility if recommending driving cessation or transition from driving.
10. Follow the State licensing procedure for medical reporting and/or adaptive equipment licensing process.

Outcomes of a comprehensive driver evaluation for the client includes²:

- Fitness to drive (no evidence of risk for driving)
- Training or remediation, or
- Unfit to drive

Student drivers with disabilities that are unable to participate in traditional driver's education or whose disability may interfere with the ability to operate a motor vehicle ideally should be serviced by a driver rehabilitation specialist through a driver evaluation program. If deemed appropriate as evidenced by the comprehensive driver evaluation, behind the wheel training services may be provided by specialized driver education instructor according to an individualized driver plan designed by the specialist. Driver education programs that offer services for students with disabilities (e.g.: *attention deficit hyperactivity disorder, autism, anxiety, visual disturbances, hearing, communication, or physical impairments*), should work closely with the driver rehabilitation specialist who has performed the evaluation. Driver

² The Role of Driver Rehabilitation in Determining Fitness to Drive: Recommendations for State Driver License Agencies (ADED, Inc.)

education programs that offer services to students with disabilities should ensure that qualified providers are available and that the programs can be tailored to the individual needs of the student. Intermittent progress checks and lesson observation by the specialist should be the standard of care for any medically at-risk student driver.

Students with limited accessibility or funding for specialized driver rehabilitation services, may require a collaborative service provision, guided by the specialist. This service model may be demonstrated by, but not limited to, the following service providers:

1. School-based or pediatric Occupational Therapist
2. Pediatric healthcare practitioner providing portions of the pre-driving assessment
3. Parent interview for driving readiness
4. Traditional driving instructor for individualized driver plan approach
5. Vocational rehabilitation counselor or other payor sources for funding for services
6. State Driver Licensing Agency

To enhance safety for both the consumer and the public, driver education programs should have procedures in place to make appropriate referrals to physicians and driver rehabilitation specialists when a student reports a medical condition, or when the instructor determines that specialized services would be more appropriate. Additionally, these programs should educate students about driving with medical conditions and provide general information and resources upon registration, while ensuring compliance with HIPAA and privacy regulations.

To mitigate potential liability risks, it is advisable for driver education programs to ensure that students sign a waiver acknowledging the legal, safety, liability, and risk implications of driving with undisclosed medical conditions. This extra step can provide an additional layer of protection for the school and instructors.

Moreover, in the interest of public and consumer safety, driver education programs, instructors, and specialists should be required to clearly define their educational background, experience, training, approach, certification, and licensure when working with special population drivers. This ensures transparency and allows students to make informed decisions when selecting professionals to assist them.

This addendum aims to clarify terminology and establish guidelines to ensure the safest outcomes and ethical scope of practice for professionals involved in driver education. By adhering to these practices, driver education programs can prioritize safety while providing effective support to students with disabilities or at-risk medical conditions.

Traditional vs. Specialized: The following section describes and defines the roles for providers working in traditional driver education programs as distinguished from those working with drivers who have disabilities and need specialized services.

a. Driver Education Students

- Traditional: students with no known medical condition, no suspected disability (*including learning, social, language, or behavioral*), and no prescription

medication or other factors (i.e., *cultural difference*) that could impair learning to drive using basic instruction methods.

- Specialized: students with a known medical condition, known or suspected disability (i.e., *learning, social, language, behavioral*), prescription medication risk to driving, or other factors that requires a specialized approach to driver instruction.
- b. Driver Education Instruction
- Traditional: program that serves traditional driver education students (i.e., *without any necessary modification or accommodation*) in both classroom and behind the wheel settings.
 - Specialized: program that can serve specialized population driver education students and meeting their distinct needs. This would include modifying language, content, or pace and approach, as well as providing adaptive equipment as necessary. Specialized driver education instruction should be provided by a specialized driving instructor or special education professional with the appropriate certification or credential.
- c. Driver Education Behind the Wheel Assessment and Instruction
- Traditional: provided in a vehicle without modification, accommodation, or customization for the student. The assessment is designed to evaluate a traditional student's ability to pass a road test for licensure, while instruction is designed to teach skills to healthy drivers.
 - Specialized: requires either modification or accommodations to the vehicle, or customized lessons for the student. Specialized behind the wheel assessments and instruction should be completed by a driver rehabilitation specialist with credentials to offer behind the wheel services. This service may also be provided by a specialized driving instructor with the appropriate credentials. The program should provide a vehicle that meets the needs of drivers with disabilities, including capacity to properly stow a wheelchair or mobility device, and equipment appropriate to address the client's limitations (*such as hand controls, steering devices, and left foot accelerator*). This equipment should either be removable or capable of locking to avoid inadvertent, unsafe use.
- d. Driver Education Instructor
- Traditional: meets the minimum State teaching requirements and is licensed in their jurisdiction for this purpose but has no other formal specialization or credential.
 - Specialized: meets the minimum State teaching requirements and is licensed in their jurisdiction for this purpose. The instructor shall also have formal training and/or credentials specific to teaching drivers with disabilities. As there are extensive differences between specialized instructors, it is important that instructors clarify to consumers their specific experience or training to ensure a good fit for the client needs. Specialized instructors shall also have knowledge of State laws regarding the use and allowances for vehicle modifications and adaptive driving equipment.

The driver rehabilitation program providing services for novice drivers with disabilities shall have a qualified driver rehabilitation specialist or other professional with appropriate credentials and experience³.

1. Credentials

- a. Certified Driver Rehabilitation Specialist (CDRS) credentialed by ADED **OR**
 - i) In the absence of a CDRS, the recommended professional should:
 - (1) Possess the Driver Rehabilitation Professional (DRP) microcredential by ADED **OR**
 - (2) Be eligible to take the CDRS examination with the goal of obtaining the credential within one-year **OR**
 - (3) Actively working toward CDRS eligibility, under the mentorship of an active CDRS **OR**
 - (4) Possess a medically licensed degree (i.e., occupational therapy, physical therapy) along with documented training and experience working with drivers who have disabilities
- b. **And:** Possess additional licenses as required by the State agencies (i.e., *certified driving instructor, licensed driving instructor, etc.*).

2. Experience & Training

In addition to credentials, the preferred provider shall also demonstrate experience and training in this specialized field. Experience and training may be demonstrated through a variety of methods including earning credentials specific to the field (*badge, microcredential, certification*), attestation Statement, or proof of post-graduate certificate.

- For clinical assessments of clients where cognition is a concern, the medically licensed provider should have experience evaluating and treating cognitive medical conditions.
- For evaluations in which mobility equipment is indicated, the CDRS® or DRP or driver rehabilitation specialist must be proficient in the application and operation of mobility equipment. The driver rehabilitation specialist should be selected based on their proficiency with the specific type(s) of equipment as defined in the *Spectrum of Driver Services (basic, low tech, high tech)*.
- Professional development is expected through appropriate continuing education as well as adherence to the ADED Code of Ethics (or professional equivalency) and ADED's *Guidelines for the Delivery of Driver Rehabilitation Services*.

Driver rehabilitation specialists determine fitness to drive and/or provide rehabilitation services. These programs can be distinguished by the level of service provided:

- a. Basic: no adaptive equipment is available. Provides evaluation and training for clients with cognitive and/or visual deficits. A provider possessing the DRP or the CDRS credential may provide this service.
- b. Low tech: includes a vehicle with basic, mechanical adaptations for gas, brake, and steering. Typically, a client would have to be able to transfer independently into the

³ The Role of Driver Rehabilitation in Determining Fitness to Drive: Recommendations for State Driver License Agencies (ADED, Inc.)

driver seat to access this type of program. A provider possessing the DRP or the CDRS credential may provide this service.

- c. High tech: includes a vehicle that can accommodate wheelchair users who are unable to independently access a driver seat as well as those who require electronic equipment or relocated gas/brake/steering for safe driving. These programs also have capacity to properly stow a wheelchair. A provider possessing the CDRS credential may provide this level of service.

References:

Spectrum of Driver Services and Driver Rehabilitation Programs. Occup Ther Health Care. 2014 Apr;28(2):177-87

The Role of Driver Rehabilitation in Determining Fitness to Drive; Recommendations for State Driver License Agencies (ADED)

Best Practice Guidelines for the Delivery of Driver Rehabilitation Services (ADED)

Code of Ethics (ADED)