

Logan College of Chiropractic/University Programs Student Services

Documentation Guidelines



DOCUMENTATION GUIDELINES

The Association on Higher Education and Disability has published guidelines for acceptable documentation of disabilities to provide institutions with guidance regarding what disability documentation is acceptable as proof of the need for accommodation. Documentation of disabilities in **all categories** must meet the following four conditions to be considered acceptable:

- Must be provided by a qualified examiner
- Must be current
 - Learning Disability – no older than three years
 - Psychiatric Disability – every six months
- Must be comprehensive
- Any accommodations that are recommended must be justifiable and a rationale provided for each accommodation

I. Learning Disabilities

Learning Disability is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and the use of listening, spelling, reading, writing, reasoning, or mathematical ability.

Qualifications of the Evaluator – Qualified examiners include:

- Clinical or educational psychologists
- Neuropsychologist
- Psychiatrists
- Learning disabilities specialist
- Medical doctors trained or experienced in the differential diagnosis of AD/HD

The name, title, credentials and area(s) of specialization must be clearly stated in the documentation provided by the professional who conducted the evaluation. All written reports must be on the professional's letter head, dated and signed by the evaluator.

Documentation – Logan University requires current documentation of a learning disability using well known psychometric instruments that have been standardized using adult population norms.

Substantiation of the Learning Disability – Documentation should validate the need for services based on the individual's current level of functioning in the educational setting. A comprehensive assessment battery and the resulting diagnostic report should include:

- a diagnostic interview
- assessment of aptitude
- academic achievement
- information processing
- and a diagnosis

□ **Diagnostic Interview** – This includes the following:

- a description of the presenting problem(s);
- developmental, medical, psychosocial, and educational history; family history (including primary language of the home and the student's current level of English fluency);
- and a discussion of dual diagnosis where indicated.

□ **Assessment** – The neuropsychological or psychoeducational evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not exist. Assessment, and any resulting diagnosis, should consist of and be based on a comprehensive assessment battery, which does not rely on any one test or subtest. Evidence of a substantial limitation to learning or other major life activity must be provided. Minimally, the domains to be addressed must include the following:

Aptitude – A complete intellectual assessment with all subtests and standard scores.

Academic Achievement – A comprehensive academic achievement battery is essential with all subtests and standard scores reported for those subtests administered including current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language.

Information Processing – Specific areas of information processing (e.g., short- and long-term memory, sequential memory, auditory and visual perception/processing, processing speed, executive functioning, and motor ability).

□ **Specific Diagnosis** – Individual “learning styles,” “learning differences,” “academic problems” and “test difficulty or anxiety,” in and of themselves, do not constitute a learning disability. It is important to rule out alternative explanations for problems in learning such as

emotional, attention or motivational problems that may be interfering with learning but do not constitute a learning disability. The diagnostician is encouraged to use direct language in the diagnosis and documentation of a learning disability, avoiding the use of terms such as “suggests” or “is indicative of.”

Test Scores – Standard scores and/or percentiles should be provided for all measures. Grade equivalents are not useful unless standard scores and percentiles are also included. The data should logically reflect a substantial limitation to learning for which the student is requesting the accommodation. The particular profile of the student’s strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodation. The tests used should be reliable, valid and standardized for use with an adult population. The test findings should document both the nature and severity of the learning disability.

Clinical Summary – A well-written diagnostic summary based on a comprehensive evaluation process is a necessary component of the report. The clinical summary should include:

- Demonstration that the evaluator has ruled out alternative explanations for academic problems as a result of poor education, poor motivation and/or study skills, emotional problems, attention problems or cultural/language differences.
- Indication of how patterns in the student’s cognitive ability, achievement and information processing reflect the presence of a learning disability
- Indication as to why specific accommodations are needed and how the effects of the specific disability are accommodated.

The summary should also include any record of prior accommodation or auxiliary aids, including any information about specific conditions under which the accommodations were used (e.g., standardized testing, final exams, licensing or certification examinations).

Recommendations for Accommodations – It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation does not, in and of itself, warrant the provision of a similar accommodation. The diagnostic report should include specific recommendations for accommodations as well as an explanation as to why each accommodation is recommended. The evaluators should describe the impact the diagnosed learning disability has on a specific major life activity as well as the degree of significance of this impact on the individual. The evaluator should support recommendations with specific test results or clinical observations.

Confidentiality – The receiving institution has a responsibility to maintain confidentiality of the evaluation and may not release any part of the documentation without the student’s informed and written consent.

Tests for Assessing Adults with Learning Disabilities – The following list is provided as a helpful resource, but it is not intended to be definitive or exhaustive.

Aptitude Tests

- Wechsler Adult Intelligence Scale III (WAIS-III)
- Kaufman Adolescent and Adult Intelligence Test
- Stanford-Binet Intelligence Scale (4th ed.)

The Slosson Intelligence Test-Revised and the Kaufman Brief Intelligence Test are primarily screening devices that are not comprehensive enough to provide the kinds of information necessary to make accommodation decisions.

Academic Achievement Tests

- Woodcock-Johnson Psychoeducational Battery-III: Tests of Achievement
- Stanford Test of Academic Skills
- Wechsler Individual Achievement Test (WIAT)

and/or specific achievement tests such as:

- Nelson-Denny Reading Skills Test
- Stanford Diagnostic Mathematics Test
- Test of Written Language-3 (TOWL-3)
- Woodcock Reading Mastery Tests-Revised

Information Processing – Acceptable instruments include:

- Detroit Tests of Learning Aptitude-3 (DTLA-3)
- Detroit Tests of Learning Aptitude-Adult (DTLA-A)
- information from subtests on the WAIS-III
- Woodcock-Johnson Psychoeducational Battery-III: Tests of Cognitive Ability

as well as other relevant instruments.

II. Psychological/Psychiatric Disorders

Qualifications of the Evaluator – Professionals conducting assessments, rendering diagnoses of psychological or psychiatric disorders, and

making recommendations for appropriate accommodations must be qualified to do so. Qualified examiners include:

- Clinical or educational psychologists
- Neuropsychologist
- Psychiatrists
- Medical doctors trained or experienced in the differential diagnosis of mental disorders

The name, title, credentials, and area(s) of specialization must be clearly stated in the documentation provided by the professional who conducted the evaluation. All written reports must be on the professional's letter head, dated and signed by the evaluator.

Documentation — The documentation should be comprehensive and should clearly discuss the impact of the mental disorder on the individual's ability to function. To establish the impact of a mental disorder on the individual and to determine which accommodations are the most appropriate, a full psycho-educational and/or psychological battery is strongly recommended. A need for reasonable accommodation must be documented and supported by test results. Standard or scaled scores from all test batteries and sub-tests within these test batteries must be included in the diagnostic report.

Accommodations — It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation does not, in and of itself, warrant the provision of a similar accommodation. The diagnostic report should include specific recommendations for accommodations as well as an explanation as to why each accommodation is recommended. The evaluators should describe the impact the diagnosed disability has on a specific major life activity as well as the degree of significance of this impact on the individual. The evaluator should support recommendations with specific test results or clinical observations.

Tests for Assessing Psychological/Psychiatric Disorders

The following list is provided as a helpful resource, but it is not intended to be definitive or exhaustive:

- Beck Anxiety Inventory (BAI)
- Beck Depression Inventory (BDI)
- Brief Symptom Inventory (BSI)
- Incomplete Sentence Blank
- Revised NEO Personality Inventory
- Rorschach Projective Technique (RPT)
- Minnesota Multiphasic Personality Inventory (MMPI)

III. Sensory (e.g. blind, deaf) and Physical/Orthopedic Disabilities

Qualifications of the Evaluator— Professionals conducting assessments, rendering diagnoses of learning disabilities, and making recommendations for appropriate accommodations must be qualified to do so. Medical doctors trained or experience in the diagnosis of the various conditions included in this category must provide the diagnosis. The name, title, credentials, and area(s) of specialization must be clearly stated in the documentation provided by the professional who conducted the evaluation. All written reports must be on the professional's letter head, dated and signed by the evaluator.

Documentation – Must be comprehensive and should clearly discuss the impact of the disabling condition on the individual's ability to function. Accommodations must be clearly linked to the examiners impressions of the patient. The documentation must clearly identify both the limitations imposed as well as accommodations suggested. The documentation should include:

- History, including date of onset and how the injury/illness occurred
- Assessment, including the part of the body affected, supporting data and estimated date of release
- Recommendation for accommodations
- In cases of optometric examinations where perceptual deficiencies are diagnosed, appropriate academic skills testing must be conducted to verify the impact of the condition on the examinee

Recommendations for Accommodations — It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation does not, in and of itself, warrant the provision of a similar accommodation. The diagnostic report should include specific recommendations for accommodations as well as an explanation as to why each accommodation is recommended. The evaluators should describe the impact the diagnosed learning disability has on a specific major life activity as well as the degree of significance of this impact on the individual. The evaluator should support recommendations with specific test results or clinical observations.

Summary

- Establishing Credentials

Original documentation of the student's disability must be sent directly to the Dean of Students office from the doctor testing service that performed the testing. Dates (or updates) of testing, examination, etc. can be no more than three years old (Effective 9/1/98). When the credentials are received, they are placed in the student's permanent file in the Student Services Office.

- Availability of Services

After the student's credentials are received, the needs are determined. The Director of Student Services or the Associate Director of Student Services will work with the student to make accommodations to meet those needs. The established services offered to students are note taking, extended time on tests (50% is the established guideline at Logan) in a non-distracting environment, and private tutoring. Other accommodations are assigned as needed.

- Faculty Notification of Disability

At the beginning of each trimester each faculty member is notified of who the disabled students are in their classes. It is the responsibility of the student to inform the instructor if they are having difficulty in the classroom or if they want to take an exam with the extended time in a non-distracting environment through the Dean of Students Office. Paperwork requesting to take a test in Student Services is available in that same office. The faculty member is required to provide all testing instruments to the Student Services offices prior to the exam.