

Miami University
Bernard B. Rinella, Jr. Learning Center

Documentation Guidelines for Learning Disability and Attention Deficit/Hyperactivity Disorder

Under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973, some “otherwise qualified” individuals with disabilities are protected from discrimination and assured equal access to educational programs. **In order to establish that an individual with a disability is covered under the ADA, the documentation of the disability must indicate that it substantially limits a major life activity, including learning.** In turn, the implementing regulations and guidance that have been adopted by the Department of Justice state that the existence of a substantial limitation is to be determined by comparing the individual in question “to most people – that is, to the average person in the general population.” The following documentation guidelines are provided to help the evaluating professional document his/her findings in a manner that meets the requirements of ADA and supports the request for accommodation, including academic adjustments and/or auxiliary aids.

These guidelines provide students, professional diagnosticians, and University service providers with a common understanding of the components of documentation which are necessary to validate the existence of LD and, or ADHD; its impact on the student’s educational performance, and the need for accommodation. The documentation should be comprehensive in order to avoid unnecessary time delays in a student becoming eligible to work with Learning Disabilities Services and in the subsequent determination of appropriate accommodation and services for that student.

Documentation Guidelines for Diagnosed Students

This brochure outlines the guidelines that specify the procedures to be followed and the information that optimally should be contained in all documentation of a student’s LD and, or ADHD report. Please note that the specific reporting format is left to the professional, but the requested information must be clearly presented and easily discernable. **Regardless of format used, quality documentation includes a clear diagnostic statement that describes how the condition was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition. Assessment reports should include information about the student’s presenting concerns, history (developmental, family, medical, psychological, education, employment), educational assessment, psychological functioning, and a summary/recommendation.**

It is the responsibility of the student to obtain his/her documentation and to present a copy to the office of Learning Disabilities Services. Any correspondence regarding the adequacy of the submitted documentation will be sent to the student. It is the student's responsibility to obtain additional information or clarification if requested.

A school plan such as an Individualized Education Program (IEP) or a "504 Plan" alone is insufficient documentation to support a student's eligibility for accommodation and/or services at Miami University.

The Office of Learning Disabilities Services is responsible for collecting and maintaining disability files. Disability documentation (e.g., psycho-educational report) must adhere to the following criteria established by the university for full consideration:

1. **A qualified evaluator must complete the assessment.** The best quality documentation is provided by a licensed or otherwise properly credentialed professional who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated. The following professionals would generally be considered qualified to evaluate and diagnose LD/ADHD provided they have comprehensive training in the differential diagnosis of LD/ADHD and direct experience with an adolescent or adult LD/ADHD population: an appropriately licensed/certified psychologist, qualified member of a medical specialty (e.g., psychiatrist, neuropsychiatrist, neurologist or other relevantly trained medical doctors), or other relevantly trained clinical practitioners (or qualifying diagnosticians). The diagnostician must have comprehensive training and direct experience in working with adult populations. Diagnosticians should describe the academic credentials and qualifications that allow them to diagnose the disability and recommend accommodations.
2. **Testing must be current and use adult normed measures** because the provision of all reasonable accommodation and services is based upon assessment of the current impact of the student's disabilities on his or her academic performance.
3. **Tests and assessment processes used to document LD/ADHD eligibility should optimally be technically sound (i.e., statistically reliable and valid), standardized for use with an adult population, and representative of a comprehensive test battery.**

A comprehensive test battery includes:

Intellectual/Aptitude Assessment: a complete intellectual assessment including all sub-tests and standard scores. Appropriate measures include batteries like the *Wechsler Adult Intelligence Scale*, the *Stanford-Binet* or the *Woodcock-Johnson Tests of Cognitive Ability and DAS-Nagleri*.

Academic Achievement: A comprehensive academic achievement battery is important with all sub-test and standard scores reported, and should include current levels of academic functioning in such relevant areas as reading (decoding and comprehension), mathematics, and oral and written language. Samples of appropriate measures include: the *Woodcock Johnson Psycho-educational Battery*, the *Wechsler Individual Achievement Tests*, or the *Scholastic Abilities Tests for Adults (SATA)*.

Information Processing: Appropriate areas of specific information processing (e.g., perception/processing; processing speed) should optimally be assessed.

Behavior: Appropriate observational or self-report indices of behaviors can be obtained with instruments like the Connor's BASCII, or any other widely accepted measurement of behavior.

Optimally, all diagnoses of ADHD or any co-morbid psychological disorders should follow the diagnostic procedures presented in the most recent edition of the Diagnostic and Statistical Manual (DSM) published by the American Psychiatric Association (APA). For practical considerations this would include, but not necessarily be limited to, the following diagnoses (fourth edition of the DSM-IV):

Attention Deficit/Hyperactivity Disorder, Combined Type

314.00 Attention Deficit/Hyperactivity Disorder, Predominantly
Inattentive Type

314.01 Attention Deficit/Hyperactivity Disorder, Predominantly Hyperactive/Impulsive Type
Attention Deficit/Hyperactivity Disorder, NOS

When students are diagnosed with ADHD and/or co-morbid psychiatric disorders (including, but not limited to, depression, anxiety disorder, and bipolar disorder), this section of the report should also include information about any course of therapy and/or pharmacological treatment that has been prescribed.

4. **Test results should present clear and specific evidence and identification of a disability**, and must specifically verify the nature and extent of the disability. Individual “learning styles,” “learning difficulties,” and “learning differences” in and of themselves do not constitute a disability. For ADHD, the documentation report should include a specific diagnosis of ADHD based on the DSM-IV diagnostic criteria. Individuals who report only problems with organization, test anxiety, memory, or concentration in selective situations do not fit the diagnostic criteria for ADHD. Given that many individuals benefit from prescribed medications and therapies, a positive response to medication by itself does not confirm a diagnosis, nor does the use of medication in and of itself either support or negate the need for accommodation. Quality documentation includes a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and specific results. Where appropriate to the nature of the disability, having both summary data and specific test scores (with the norming population identified) within the report is recommended.
5. **When submitting test results with documentation, actual raw scores and accompanying standardized scores provide a better context for meaningful interpretation.** In order for a learning difference to be considered a disability, documentation should support that it is of substantial limitation to the major life function of learning. It is most helpful when recommended accommodations and strategies are logically related to functional limitations; if connections are not obvious, a clear explanation of their relationship can be useful in decision-making. While the post-secondary institution has no obligation to provide or adopt recommendations made by outside entities, those that are congruent with the programs, services, and benefits offered by the college or program may be appropriate. When recommendations go beyond equitable and inclusive services and benefits, they may still be useful in suggesting alternative accommodations and/or services.
6. **It is most helpful if the diagnostic report includes specific recommendations for accommodation as well as a rationale for why each adjustment is recommended.** The recommendations should be based on the specific assessment results and/or observations. These recommendations, and the data that support them, will be used by the staff of Learning Disabilities Services to determine the specific accommodation needed by that student, on a class by class basis. While documentation is always the most important factor in determining the provision of “reasonable” accommodation, other factors that could be considered during the decision making process include the student’s interest in receiving accommodation, the academic demands in a particular class, the availability of educational supports

in that class, the student's response to medications, as well as the student's development of effective strategies over time.

- 7. In order to determine the most appropriate accommodation plan, the clinical summary should include any record of prior accommodation or auxiliary aids and may include specific recommendations regarding curriculum and testing considerations.** All documentation pertaining to an individual's disability will remain confidential and will be used only to provide the student with reasonable accommodations.

These guidelines have been partially adapted with permission from the Consortium on ADHD Documentation (copyright 1998). AHEAD (Association of Higher Educational And Disability guidelines were also used for this policy).

Registration Procedures for Diagnosed Students

To register for services, students with disabilities must (a) provide the documentation to the Office of Disabilities Services and (b) request services as a student with a disability. Students are strongly encouraged to request accommodation prior to or at the beginning of each semester.

Services Available for Diagnosed Students

Services available to diagnosed students are most often specific to individual course requirements and the student's evaluation data. Specific information contained in the psycho-educational evaluation is used in determining the reasonableness of accommodation. Accommodation is judged to be reasonable and appropriate when, without the accommodation, the student might not be afforded equal access to course content.

Guidelines Policy for Students Not Previously Identified as Learning Disabled

Should the Office of Learning Disabilities Services determine that a student exhibits traits highly correlated with those exhibited by students legally identified as learning disabled, the L.D. staff will provide the student with information relative to public or private testing services. Miami's Learning Centers are not responsible for formal testing of any sort, at any stage of the screening process

Admission

Admission applications from students with learning disabilities are reviewed under Miami's regular admission criteria. The Office of Admission accepts untimed or taped ACT/SAT scores. The office immediately forwards all disability documentation to the Learning Disability Coordinator in the Bernard B. Rinella, Jr. Learning Center in 14 Campus Avenue Building, (513) 529-8741.

Compliance

The Office of Equity and Equal Opportunity (OEEO) is the University's designated department for compliance with federal statutes including the ADA and Section 504. Under the ADA and Section 504, individuals with disabilities are assured equal access to educational programs. In order to establish that an individual with a disability is covered under the ADA, the documentation must support that the individual's diagnosis of a disability includes how the impairment is a substantial limitation of a major life activity, including learning. Documentation guidelines under *Section 504* have been established in order to help the evaluating professionals establish eligibility, document findings and determine reasonable accommodations that may include academic adjustments and/or auxiliary aids.

Local Resources for Assessment

Hollister Center
26 E. Hollister Street
Cincinnati, OH 45219
513-621-5001

Affinity Center
7826 Cooper Road
Montgomery, OH 45242
513-984-1000

Olympus Center
2230 Park Avenue
Walnut Hills, OH 45206
513-559-0404

If you have additional questions that have not been addressed in this booklet, please visit our website at: <http://www.muohio.edu/saf/lrn>, or call the Rinella Learning Center and ask to speak with a Learning Disability Coordinator.