

Why documentation?

Thorough knowledge of your disability is a key to college success and is the foundation of effective advocacy. By providing current, comprehensive, clinical documentation of your disability we can insure the integrity of the process and enlist the needed support and cooperation throughout the academic community.

Your documentation gives us our best understanding of the impact of your disability in an academic environment so that we can provide the most appropriate and comprehensive accommodations and interventions. A full understanding of the impact of your disability is essential to fostering greater self-awareness and self-advocacy and helps to insure the continuity of services for your future accommodation needs.

Learning Disabilities

When seeking evaluation for a learning disability it is to the benefit of the student to get as comprehensive an evaluation as possible as this will allow for a more detailed understanding of the impact of the disability and provide for more effective methods of accommodation. These guidelines are designed to provide assistance to the student as an effective consumer of professional evaluation services. Below is an overview of the required documentation guidelines for a learning disability.

A. Qualifications of the Evaluator

Professionals conducting assessments, rendering diagnoses of learning disabilities, and making recommendations for appropriate accommodations must be qualified to do so. Comprehensive training and direct experience with an adolescent and adult LD population is desirable. The name, title and professional credentials of the evaluator, including information about license or certification (e.g., licensed psychologist) as well as the area of specialization, employment and state/province in which the individual practices should be clearly stated in the documentation. All reports should be on letterhead, typed, dated, signed and otherwise legible.

B. Documentation

The provision of all reasonable accommodations and services is based upon assessment of the impact of the student's disabilities on his or her academic performance at a given time in the student's life. Therefore, it is in the student's best interest to provide recent and appropriate documentation relevant to the student's learning environment.

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C. 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. Commonly used measures of aptitude include the Wechsler Adult Intelligence Scale-Third Edition (WAIS-III) (Fourth Edition released by fall of 2008), Woodcock-Johnson Psychoeducational Battery-III (WJ-III) Tests of Cognitive Abilities, and the Stanford-Binet Intelligence Scale-Fourth Edition (SB-IV).

Commonly used measures of achievement include the Woodcock-Johnson Psychoeducational Battery-III Tests of Achievement, the Wechsler Individual Achievement Test-II (WIAT-II), and the Nelson-Denny Reading Test. Use of subtests from the WAIS-III or the WJ-III Tests of Cognitive Abilities may be used for measures of information processing, or it may be assessed more in-depth by the Wechsler Memory Scale (WMS-III) (Fourth Edition released by spring of 2009).

D. Specific Diagnosis

According to the DSM-IV-TR, learning disorders are diagnosed when the individually administered, standardized tests in a particular achievement area is substantially below that expected for age, schooling, and level of intelligence. Individual "learning styles," "learning differences," "academic problems" and "test difficulty or anxiety," in and of themselves, may not constitute a learning disability. It is important to rule out alternative explanations for problems in learning such as emotional, attentional or motivational problems that may be interfering with learning but do not constitute a learning disability by definition in the DSM-IV-TR. 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." If the data indicate that a learning disability is not present, the evaluator should state that conclusion in the report.

E. Test Scores

Standard scores and/or percentiles should be provided for all normed measures. Grade equivalents are not useful unless standard scores and/or percentiles are also included. The test findings should document both the nature and severity of the learning disability.

F. 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 of the evaluator having ruled out alternative explanations for academic problems, the impact of the learning disability, 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).

G. Recommendations for Accommodations

The diagnostic report should include specific recommendations for accommodations as well as an explanation as to why each accommodation is recommended. The evaluator 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.

If accommodations are not clearly identified in a diagnostic report, the Coordinator may seek clarification and, if necessary, more information. The final determination for providing appropriate and reasonable accommodations rests with UMKC.

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Checklist for Reviewing Documentation for Learning Disabilities

- Are the qualifications of the evaluator clear and evident? Is the evaluation on letterhead, typed, signed, dated and otherwise legible?
- Does the evaluation represent the current state of functional limitations caused by the learning disability?
- Is the evaluation comprehensive including a diagnostic interview, an assessment of aptitude, of academic achievement and of information processing?
- Are all relevant test scores included in the evaluation?
- Is there a clear diagnosis?
- Is there a well-written clinical summary? Have alternate diagnoses been ruled out? Is there evidence of early impairment or a record of prior accommodation?
- Is there a clear description of the current impact of the learning disability?
- Are all accommodation recommendations carefully supported by information within the evaluation?