

Guidelines for Documentation of a Learning Disability (LD) in Gallaudet University Students

**Gallaudet University
Office for Students with Disabilities
Washington, D.C. 20002**

Guidelines for Documentation of a Learning Disability in Adolescents and Adults

Table of Contents

Table of Contents.....	2
Acknowledgements.....	3
Introduction.....	5
I. Qualifications of the Evaluator.....	5
II. Documentation.....	5
III. Diagnostic Interview and History Taking.....	6
IV. Substantiation of the Learning Disability.....	6
A. Diagnostic Interview.....	6
B. Assessment.....	7
C. Specific Diagnosis.....	7
D. Test Scores.....	7
E. Clinical Summary.....	8
V. Recommendations for Accommodations.....	8
VI. Confidentiality.....	9
Appendix A: Recommendations for Deaf Students Seeking Psycho educational Evaluations.....	10
Appendix B: Tests for Assessing Deaf College Students Suspected of Having a Learning Disability.....	11

This publication is available in alternative formats upon request.

This publication was adapted from:

**The Association on Higher Education and Disability
(AHEAD)**

**Dr. William Kachman
Gallaudet University
Mental Health Center**

**Dr. Patricia Marie Tesar
Gallaudet University
Office for Students with Disabilities**

Guidelines for Documentation of Learning Disability (LD) in Gallaudet University Students

Introduction

Under the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973, individuals with learning disabilities are guaranteed certain protections and rights of equal access to programs and services

In response to the expressed need for guidance related to the documentation of a learning disability in deaf adults, Gallaudet University has developed these guidelines. The primary intent of these guidelines is to provide students, professional diagnosticians and service providers with a common understanding and knowledge base of those components of documentation that are necessary to validate a learning disability in deaf college students and the documented need for accommodation. The information and documentation that establishes a learning disability should be comprehensive in order to make it possible for a student to be served in a postsecondary setting.

I. Qualifications of the Evaluator

The diagnostician must have comprehensive training in the field of learning disabilities and must have comprehensive training and direct experience in working with the adult population.

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. The following professionals would be generally considered qualified to evaluate specific learning disabilities:

Clinical or Educational Psychologists

School Psychologists

Neuropsychologists

Learning Disabilities Specialists

Medical Doctors

All reports should be on letterhead, typed, dated, signed and otherwise legible.

II. Documentation

Documentation should indicate that the disability substantially limits some major life activities. Flexibility in accepting documentation is important. In some instances, documentation may be outdated or inadequate in scope or content. It may not address the student's current level of functioning or need for accommodation because observed changes may have occurred in the student's performance since the previous assessment was conducted. In such case, the Gallaudet University Office for Students with Disabilities may request updated documentation. Since the purpose of the update is to determine the student's current need for accommodations, the update

conducted by a qualified professional must include a rationale for ongoing services and accommodations.

At a minimum, the professional report and supporting documentation must include the following:

III. Diagnostic Interview and History Taking

The professional report and supporting documentation must include a summary of a comprehensive diagnostic interview that includes relevant background information to support the diagnosis. In addition to the candidate's self report, the professional report and supporting documentation should include:

- A description of the presenting problem(s);
- A developmental history;
- Relevant family history, including primary language of the home and current level of communication fluency;
- Relevant psychosocial history;
- Relevant medical history including the absence of medical basis for the present symptoms;
- Relevant employment history;
- A discussion of dual diagnosis, alternative or co-existing mood, behavioral, neurological and/or personality disorders along with any history of relevant medication and current use that may impact the individual's learning; and
- Exploration of possible alternatives that may mimic a learning disability when, in fact, one is not present.

Relevant academic history including results of prior standardized testing, reports of classroom performance and behaviors and may include transcripts, study habits and attitudes and notable trends in academic performance.

IV. 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 school plan such as an individualized education program (IEP) or a 504 plan is insufficient documentation, but it can be included as part of a more comprehensive assessment battery. A comprehensive assessment battery and the resulting diagnostic report should include a diagnostic interview, assessment of aptitude, academic achievement, information processing, and a diagnosis.

A. Diagnostic Interview

An evaluation report should include the summary of comprehensive diagnostic interview. Relevant information regarding the student's academic history and learning processes in elementary, secondary and postsecondary education should be investigated.

The diagnostician, using professional judgment as to which areas are relevant, should conduct a diagnostic interview which may include:

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

B. 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 based upon the following:

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

- A complete intellectual assessment with all subtests and standard scores reported.
- A comprehensive academic achievement battery is essential with all subtests and standard scores reported for those subtests administered. The battery should include current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language. (*See Appendix B*)

C. 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.

D. 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 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 accommodations.

The tests used should be reliable, valid and standardized for use with an adolescent/adult population. The test findings should document both the nature and severity of the learning disability. Informal inventories, surveys and direct observation by a qualified professional may be used in tandem with formal tests in order to further a clinical hypothesis.

E. Clinical summary

A well-written diagnostic summary based on a comprehensive evaluation process is a necessary component of the report. It is essential that professional judgment be utilized in the development of a clinical summary. The clinical summary should include:

1. Demonstration of the evaluator's having ruled out alternative explanations for academic problems as a result of poor education poor motivation and/or study skills, emotional problems, attention problems and cultural/language differences;
2. Indication of how patterns in the student's cognitive ability, achievement and information processing reflect the presence of a learning disability;
3. Indication of the substantial limitation to learning or other major life activity presented by the learning disability and the degree to which it impacts the individual in the learning context for which accommodations are being requested; and
4. 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).

V. 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 accommodations 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.

If accommodations are not clearly identified in a diagnostic report, the Disability Support Service faculty may seek clarification and, if necessary, more information. The final determination for providing appropriate and reasonable accommodation is determined by the Student Disability Office.

VI. Confidentiality

Gallaudet University has a responsibility to maintain confidentiality of the diagnostic report and may not release any part of this documentation without the student's informed and written consent.

APPENDIX A

Recommendations for Deaf Students Seeking Psycho educational Evaluations

1. For assistance in finding a qualified professional:

- Contact the Coordinator, Office for Students with Disabilities at Gallaudet University, to discuss documentation needs; and
- Discuss your future plans with the Coordinator, Office for Students with Disabilities. If additional documentation is required, seek assistance in identifying a qualified professional.

2. In selecting a qualified professional:

- Ask for the credentials of the evaluator;
- Ask what experience the evaluator has in working with deaf adults suspected of having a learning disability; and
- Ask if he or she has ever worked with the Office for Students with Disabilities at Gallaudet University prior to your appointment.

3. In working with the professional;

- Take a copy of these guidelines;
- Encourage him or her to clarify questions with the person who provided you with these guidelines;
- Be prepared to share important information that will assist with the assessment; and
- Know that professionals must maintain confidentiality with respect to your records and testing information.

4. As follow-up to the assessment by the professional:

- Request a written copy of the assessment report;
- Request the opportunity to discuss the results and recommendations;
- Request additional resources if you need them; and
- Maintain a personal file of your records and reports.

APPENDIX B

Tests for Assessing Deaf College Students Suspected of Having a Learning Disability

When selecting a battery of tests, it is critical to consider the technical adequacy of instruments including their reliability, validity and standardization on an appropriate norm group. Because many of these instruments have not been normed on the deaf population, evaluators must not only have access to available research on deaf adults suspected of having a learning disability but must possess expert judgment in interpreting test data and drawing conclusions when assessing deaf adults.

Standardized intelligence and psycho-educational tests acceptable for use among deaf adults suspected of having a learning disability include the following list. This list is provided as a helpful resource, but is not intended to be definitive or exhaustive.

Aptitude/Ability

- *Wechsler Adult Intelligence Scale – IV(WAIS-IV)*
- *Reynolds Intellectual Assessment Scales (RAIS)(Nonverbal subtests)*
- *Test of Nonverbal Intelligence III (TONI – 3)*
- *Woodcock-Johnson III: Tests of Cognitive Ability(Fluid Reasoning)*

Academic Achievement

- *Woodcock-Johnson – III Revised: Tests of Achievement*
- *Nelson-Denny Reading Skills Test*
- *Scholastic Abilities Test for Adults (SATA) Reading Comprehension*
- *Wechsler Individual Achievement Test III (WIAT)*
- *Wide Range Achievement Test-4 (Sentence Comprehension)*
- *Woodcock Reading Mastery Tests – Revised*

Memory

- *Tests of Memory and Learning*
- *Wechsler Memory Scale-IV(Nonverbal Memory Tests)*
- *Wide Range Assessment of Memory and Learning-2*
- *Woodcock-Johnson – III Nonverbal memory Subtests*
- *Signed Paired Associate Test*

Executive Functioning and Attention

- *Conners Adult ADHD Rating Scale*
- *Attention Deficit Scales for Adult: Sign Language Version (ADSA-SLV)*
- *Connors’ Continuous Performance Test: II*
- *Rey Complex Figure Test*
- *Delis-Kaplin Executive Function System (nonverbal subtests)*
- *Wisconsin Card Sorting Test*
- *Test of Variables of Attention*

Social and Emotional Functioning

- *Clinical Interview*
- *Questionnaires*
- *Rotter Incomplete Sentence Blank*
- *Thematic Apperception Test (Test administrator must be fluent in sign language or an interpreter should be qualified to interpret for psychological testing)*
- *Rorschach Inkblot Test (Test administrator must be fluent in sign language or an interpreter should be qualified to interpret for psychological testing)*
- *Beck Depression Index II (interpret cautiously due to verbal nature of test)*
- *Beck Anxiety Index (interpret cautiously due to verbal nature of test)*