

Guidelines for Documentation of a Learning Disability

The term learning disabilities refers to a heterogeneous group of disorders characterized by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. Adults with a diagnosis of LD must be of at least average intellectual functioning and exhibit a deficit in one or more of the following areas of neuropsychological functioning: auditory processing, visual processing, information processing speed, memory, spoken and written language skills, reading skills, mathematical skills, spatial skills, motor skills, abstract or general reasoning or executive functioning.

Under the Americans with Disabilities Amendments Act (2008) 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 the interest of assuring that LD documentation is appropriate to verify eligibility and to support requests for accommodations, academic adjustments and/or auxiliary aids, the following guidelines have been adopted from the Association on Higher Education and Disability (AHEAD) and established for Seton Hall University.

I. Qualifications of the Evaluator

Professionals conducting assessments, rendering diagnoses of learning disabilities, and making recommendations for appropriate accommodations must be qualified to do so. Training and experiencing in working with an adult population is essential. The following professionals would generally be considered qualified to evaluate specific learning disabilities: trained and certified and/or licensed psychologists, educational psychologists, learning disabilities specialists (LDTCs), and other professionals.

II. Documentation

Testing needs to be comprehensive. It is not acceptable to administer only one test for the purpose of diagnosis. Minimally, the domains addressed must include, but are not limited to, the following:

- 1. *Aptitude*: A complete intellectual assessment with all subtests and standard scores reported. The preferred instrument is the Wechsler Adult Intelligence Scale III.
- 2. *Achievement*: Current levels of functioning in reading, mathematics, and written language are required. A comprehensive academic achievement battery, with all subtests and standard scores reported, is essential. The Woodcock-Johnson III is preferred.
- 3. *Information Processing*: Specific areas of information processing (e.g., short- and long-term memory, sequential memory, auditory and visual perception/processing, processing speed) should be assessed. Information from the Woodcock-Johnson III may be used to address these areas.

This is not intended to be an exhaustive list or to restrict assessment in other pertinent and helpful areas, such as vocational interests and aptitudes. *A complete WJ-III is also acceptable providing that it covers all of the above domains.*

Testing must be current. Because the provision of reasonable accommodations and services is based upon assessment of the current impact of the student's disabilities on her/his academic performance at the postsecondary level, it is in the student's best interest to provide recent and appropriate documentation.

III. Substantiation of the Learning Disability

Documentation should validate the need for services based on an individual's current level of functioning. A comprehensive assessment battery and the resulting diagnostic report should include a diagnostic interview, assessment of aptitude, academic achievement, information processing, and a diagnosis.

The evaluation must provide *clear and specific* evidence that a learning disability does or does not exist. Individual "learning styles" and "learning differences," 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 expected 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.

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

- 1. A written summary of background information about the student's educational, medical, and family histories that relate to the learning disability;
- 2. 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, and cultural or language differences;
- 3. Indication of how patterns in the student's cognitive ability, achievement and information processing reflect the presence of a learning disability;
- 4. 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 at the postsecondary level for which the accommodations are being requested;
- 5. Indication as to why specific accommodations are needed and how the effects of the specific disability are accommodated; and
- 6. An addendum of scores.

The report should be printed on letterhead, signed and dated. Credentials of the evaluator should be included.

IV. Recommendations for Accommodations

The diagnostic report should include specific recommendations for accommodations, as well as an explanation as to why each accommodation is recommended. A description of any accommodation or auxiliary aid that has been used at the secondary or postsecondary level should be discussed. If no accommodations have been previously provided, a detailed explanation as to why none has been used and the rationale for the student's current need for accommodations must be provided.

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 an accommodation does not, in and of itself, warrant the provision of a similar accommodation at the postsecondary level. Final determination for providing appropriate and reasonable accommodations rests with the institution.