VERIFICATION OF A 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 must include a diagnostic interview, assessment of aptitude, academic achievement, information processing, and a diagnosis. Evidence of a substantial limitation to learning or other major life activity must also be provided.

I. Diagnostic Interview

An assessment report should include the summary of a comprehensive diagnostic interview. Learning disabilities are commonly manifested during childhood, but not always formally diagnosed. The diagnostician, using professional judgment, should conduct a diagnostic interview which may include the following relevant areas: (1) a description of the presenting problem(s) developmental, medical, psychosocial, and employment histories, (2) family history (includes primary language in the home and the student's current level of English fluency), and (3) a discussion of dual diagnosis where indicated.

II. 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 include a comprehensive assessment battery that does not rely on any one test or subtest.

The domains to be addressed must include the following:

1. **Aptitude** - A complete intellectual assessment with all subtests and standard scores reported.

2. **Academic Achievement** - A comprehensive academic achievement battery 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.

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

Other assessment measures such as non-standard measures and informal assessment procedures and observations may be helpful in determining performance across a variety of domains. In addition, other formal assessment measures may be integrated with the above instruments to determine a learning disability, and differentiate it from co-existing neurological and/or psychiatric disorders (i.e., to establish a differential diagnosis).

III. 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 disorders, or motivational problems that may interfere with learning, but do not constitute a learning disability. The diagnostician should use direct language in the diagnosis and documentation of a learning disability. The use of terms such as "suggests" or "is indicative of" should be avoided. If the data indicates that a learning disability is not present, the evaluator should state that conclusion in the report.
IV. 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 requested 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 develop a clinical hypothesis.

V. Summary of Documentation

Documentation must be current. In most cases, current means the evaluation was completed within the past three years or an evaluation that was completed when the student was an adult. The evaluation must include a diagnostic statement. Evidence of a substantial limitation in learning or other major life activity must be provided. Individual “learning styles,” “learning differences,” “academic problems,” and “test difficulty or anxiety,” in and of themselves, do not constitute a learning disability. Terms such as “suggests” or “is indicative of” should be avoided. Provision of reasonable accommodations and services for postsecondary education is based on the assessment of the impact of the disability on academic performance at the time of request for services. Therefore, accommodation planning requires recent and appropriate documentation.

VI. Clinical Summary

A diagnostic summary based on a comprehensive evaluation process is a necessary component of the report. Assessment instruments and the data they provide do not diagnose; rather, they provide important elements that must be integrated by the evaluator with background information, observations of the client during the testing situation, and the current context. It is essential, therefore, that professional judgment be utilized in the development of a clinical summary.

The clinical summary should include the following criteria:

• Demonstration of the evaluator(s) having ruled out alternative explanations for academic problems as a result of poor education, poor motivation, study skills, emotional problems, attention deficit problems, and 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 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 the accommodations are being requested.

• Indication as to why specific accommodations are needed and how the effects of the specific disability can be accommodated.

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