



General Documentation Guidelines

Disability Services Office

To receive accommodations, you must be perceived as one who has a disability. One way to do that is to submit documentation from physicians, psychologists, or other licensed professionals knowledgeable about your diagnosis/disability. It may also be sufficient to submit 504 plans and/or IEPs from high school.

Documentation that may be helpful:

1. Diagnosis (DSM IV, medical or other)
2. Statement of severity
3. Statement that identifies in which life activities the condition creates a "substantial impairment"
4. Suggested list of accommodations that may provide access for the student to campus programs, activities or events

Generally, documentation may include current medical reports, a recent IEP or 504 plan, and/or a psycho-educational assessment. Whatever documentation is provided will help to determine appropriate accommodations. Please note that a prescription pad diagnosis is not helpful as it doesn't address severity and potential accommodations.

After information is submitted and reviewed, an accommodation plan will be determined for your particular situation. We will assist you in communicating your accommodations to instructors and campus personnel.

Specific Documentation Guidelines

The Disability Services Office has adopted the Association on Higher Education and Disabilities (AHEAD) best practices guidelines for review of documentation and determination of accommodations. For those seeking accommodations under the ADA (and its amendments) or Section 504 of the Rehabilitation Act of 1973 documentation; if you submit material, it is helpful to follow these general guidelines:

1. The credentials of the evaluator(s):

Documentation completed by a licensed or otherwise credentialed professional who has undergone appropriate training, has relevant experience in the field of diagnoses, and has no personal relationship to the individual being evaluated. (e.g., an orthopedic limitation might be documented by a physician, not a licensed psychologist).

2. A diagnostic statement identifying the disability:

Documentation provides a diagnostic statement that describes how the condition was diagnosed, provides information on the present functional impact, and details the typical progression or prognosis of the condition. The Diagnostic Statistical Manual (DSM-IV) codes are helpful in providing this information, as is a clinical description.

3. A description of the diagnostic methodology used:

Documentation may include diagnostic criteria, evaluation methods, procedures, assessments, date of administration, clinical narrative, observation, and specific results. Where appropriate to the nature of the disability, it is helpful to include specific test scores. Results reported from informal, non-standardized assessments may also be helpful.

4. A description of the current functional limitations

How the disabling condition(s) currently impacts the student may provide useful information for identifying possible accommodations. So, including formal evaluation procedures, and clinical narrative may assist in indicating current impact, especially if the material submitted indicates the severity, frequency and pervasiveness of the condition(s). For best understanding of the student's needs, documentation that is recent is helpful; however, older documentation, such as for a static, permanent condition is useful, too.

5. A description of the expected progression or stability of the disability:

Information on expected changes in the functional impact of the disability over time is also helpful. For example, knowledge of cyclical or episodic concerns, or suspected environmental triggers, assists us in planning for varying functional impacts. If the condition is not fully stabilized, providing intervention methods is appropriate.

6. A description of current and past accommodations, services and/or medications:

A description of current medications, auxiliary aids, assistive devices, support services, and recent accommodations as well as services that may positively impact physical, perceptual, behavioral or cognitive performance is helpful.

7. Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or Academic Resources support services:

Suggestions of accommodations and strategies that are related to functional limitations of the disability are especially useful for determining appropriate college-level accommodations. While post-secondary institutions are not obligated to provide or adopt prior accommodations or current suggestions, having such information gives adequate information to make the most appropriate accommodation decisions for the student. If a transfer student matriculates at LBC, accommodations provided at the former college may provide insight in making accurate decisions in LBC's academic setting.

Adapted from AHEAD Best Practices Disability Documentation in Higher Education, 2006, www.ahead.org