Determining Eligibility for Disability Services

Documentation of a student’s disability serves two primary purposes in postsecondary education: (a) to establish protection from discrimination and (b) to determine the reasonable accommodations that a student may be entitled to receive (Association on Higher Education And Disability [AHEAD], 2010). Acceptable documentation should describe the individual’s condition, be current relative to the condition, validate the need for accommodations by including the functional limitations resulting from the condition, and include information to support educational planning. It also should anticipate the need for possible referrals to outside services and agencies. AHEAD presents the following principles and essential elements for postsecondary institutions as they establish disability documentation guidelines, create policies and best practices, and determine accommodations for students with disabilities. The principles and elements are designed to help ensure that all documentation guidelines are consistent, offer direction for the case-by-case review of documentation, clarify specific guidelines for diagnosticians, and provide information to individuals seeking services.

**Foundational Principles**

- **All documentation should be reviewed on an individual, case-by-case basis.** The institution’s documentation policy should be flexible, allowing for the consideration of alternative methods and sources of documentation, as long as the essential goal of adequately describing the current impact of the disability in relation to a requested accommodation is achieved.

- **Determination of a disability doesn’t require the use of any specific language.** Service providers should resist the temptation to require specific language, such as learning disability, in the documentation. A clinician’s training may result in the use of phrases other than specific diagnostic labels and should not be automatically interpreted to suggest that a disability does or does not exist.

- **Presented documentation can be augmented through interview.** An interview with the clinician is extremely valuable in substantiating the existence of a disability, understanding its impacts, and identifying appropriate accommodations.

- **Determination of accommodations is an interactive process.** In the context of documentation and accommodation planning, the individual with a disability is a rich, reliable, and valid source of information on the impact of the disability and the effectiveness of accommodations. While objective confirmation (documentation) is legitimate, so are the lived experiences of the individual.

- **Documentation of a specific disability does not translate directly into specific accommodations.** Reasonable accommodations are individually determined. As such, accommodation recommendations may vary from individual to individual with the same disability diagnosis and from environment to environment for the same individual.

*Continued on page 2*
Disability documentation should be treated in a confidential manner and shared only on a need-to-know basis.

Information on the individual’s disability is only one component of providing access. Many barriers (physical, curricular, attitudinal, informational) to full participation reside in the environment. Service providers are encouraged to work to increase overall accessibility through system change that makes the institution more inclusive and reduces the need for individual accommodation.

**Essential Elements**

- **The credentials of the clinician(s):** Documentation is provided by a licensed or otherwise properly credentialed professional who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated.

- **A diagnostic statement identifying the disability:** Documentation includes a clear diagnostic statement that describes how the condition was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition.

- **A description of the diagnostic methodology used:** Documentation includes a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and specific results. Diagnostic methods may include formal instruments, medical examinations, structured interview protocols, performance observations and unstructured interviews. If results from informal, non-standardized or less common methods of evaluation are reported, an explanation of their role and significance in the diagnostic process will strengthen their value.

- **A description of the current functional limitations:** Documentation is thorough enough to demonstrate whether and how a major life activity is substantially limited by providing a clear sense of the severity, frequency, and pervasiveness of the condition(s). While relatively recent documentation is recommended in most circumstances, discretion in accepting older documentation of conditions that are permanent or non-varying is recommended. Likewise, changing conditions and/or changes in how the condition impacts the individual may warrant more frequent updates in order to provide an accurate picture. Documentation is not time-bound.

- **A description of the expected progression or stability of the disability:** It is helpful when documentation provides information on the cyclical or episodic nature of a disability and known or suspected environmental triggers. Having this information assists everyone in providing opportunities to anticipate and plan for varying functional impacts. If the condition is not stable, re-evaluations and/or updates may be necessary.

- **A description of current and past accommodations, services, and/or medications:** Documentation includes a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations. It should also discuss any significant side effects from current medications or services that may impact physical, perceptual, behavioral or cognitive performance.

- **Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services:** Quite often an individual’s documentation includes recommended accommodations and strategies “blanketed” to the disability and not the individual’s specific functional limitations. While the post-secondary institution has no obligation to provide previously used accommodations or adopt recommendations made by outside entities, knowledge of the accommodations and/or services may still be useful in suggesting available alternatives.

**For More Information**
