



Office of Academic Accessibility

DOCUMENTATION POLICY

In order to fully determine eligibility for services and evaluate requests for accommodations or auxiliary aids, the Office of Academic Accessibility (OAA) needs documentation of your disability.

Reasonable Accommodations

Reasonable accommodations include modifications to policy, procedure or practice and the provision of auxiliary aids and services that are designed to provide equal access to programs and services for qualified individuals with disabilities. Accommodations are reasonable when they do not pose a direct threat to health, safety, or quality of care; when they do not fundamentally alter the nature of a program or service; and when they do not represent an undue financial or administrative burden.

Definition of Disability

The United States' Americans with Disabilities Act (ADA) defines "disability" as "having a physical or mental impairment that substantially limits one or more of the major life activities." In addition, the ADA protects individuals from discrimination if they have a record of such impairments or if they are regarded as having such impairments. Additional protections are provided through Section 504 of the Rehabilitation Act of 1973.

Essential Elements of Disability Documentation

1. The credentials of the evaluator(s).

Documentation should be 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 good match between the credentials of the individual making the diagnosis and the condition being reported is expected (e.g., an orthopedic limitation might be documented by a physician, but not a licensed psychologist).

2. A diagnostic statement identifying the disability.

Documentation should include a clear diagnostic statement that describes how the condition was diagnosed, provide information on the functional impact, and detail the typical progression or prognosis of the condition. When appropriate include diagnostic codes from the Diagnostic Statistical Manual of the American

Psychiatric Association (DSM) or the International Classification of Functioning, Disability and Health (ICF) of the World Health Organization.

3. A description of the diagnostic methodology used.

As appropriate, documentation should include a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and specific results. Where appropriate to the nature of the disability, having both summary data and specific test scores (with the norming population identified) within the report is recommended. Diagnostic methods that are congruent with the particular disability and current professional practices in the field are recommended.

4. A description of the current functional limitations

Information on how the disabling condition(s) currently impacts the individual provides useful information for both establishing a disability and identifying possible accommodations. Documentation should be 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). A combination of the results of formal evaluation procedures, clinical narrative, and the individual's self-report will be reviewed.

While recent documentation is recommended in most circumstances, discretion will be used in accepting older documentation of conditions that are permanent or non-varying. 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. The need for recent documentation depends on the facts and circumstances of the individual's condition.

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

Information on the cyclical or episodic nature of the disability and known or suspected environmental triggers to episodes provides opportunities to anticipate and plan for varying functional impacts. If the condition is not stable, information on interventions for exacerbations and recommended timelines for re-evaluation are most helpful.

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

Documentation should include a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations, including their effectiveness (and side-effects) in ameliorating functional impacts of the disability.

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

Recommended accommodations and strategies should be logically related to functional limitations; if connections are not obvious, a clear explanation of their

relationship can be useful in decision-making. Mercy College has no obligation to provide or adopt recommendations made by outside entities. High school special education evaluations, Summary of Performance (SOP) or Individual Educational Program (IEP), while helpful, may not provide adequate information to document a disability. In addition, references to academic weaknesses/learning differences/test anxiety alone may not substantiate a learning disability diagnosis.

Additional Guidelines for Specific Disability Documentation

Learning Disabilities:

Psycho-educational assessment conducted by the diagnosing licensed psychologist, psychiatrist or other appropriately credentialed professional specializing in learning disabilities.

Psycho-educational Testing. The comprehensive psycho-educational test battery should include intelligence/ability testing and educational/achievement testing. A full diagnostic report, including all standard test scores as well as subtest scores and the evaluator's narrative is recommended. Assessments should be normed for adults, i.e. WAIS-III rather than WISC-III.

Attention Deficit Disorder:

Psychological/Psycho-educational assessment conducted by the diagnosing licensed psychologist, psychiatrist, or other appropriately credentialed professional.

Psychological Disabilities:

Psychological assessment conducted by the diagnosing licensed psychologist, psychiatrist, or other appropriately credentialed professional.

Speech and Hearing. Full report of assessments conducted by the diagnosing licensed speech/hearing specialist, audiologist, or other appropriately credentialed professional.

Visual. Full report of assessments conducted by the diagnosing licensed ophthalmologist, optometrist, or other appropriately credentialed professional.

Mobility. Evidence of substantial limitation in upper and/or lower extremity mobility. As appropriate, this may or may not include full report of assessments conducted by the diagnosing licensed medical or other appropriately credentialed professional.

Review of Documentation and the Determination of Accommodation

1. All documentation will be reviewed on an individual, case-by-case basis.

This calls for an individualized inquiry, examining the impact of a disability on the individual and within the specific context of the request for accommodations. There is no list of covered disabilities or accepted diagnostic criteria.

2. Determination of accommodations is an interactive process.

OAA will contact the evaluator, as necessary and with the student's permission, for clarification of any information (test results, conclusions, recommendations, etc.) contained in the documentation. An interview with the student will be conducted in order to inquire about the disability, understand its impacts and identify appropriate accommodations. The institution and the individual with a disability will determine appropriate accommodations.

3. Documentation of a specific disability does not translate directly into specific accommodations.

Reasonable accommodations are individually determined and based on the functional impact of the condition and its likely interaction with the environment. As such, accommodations may vary from individual to individual with the "same" disability diagnosis and from environment to environment for the same individual.

Accommodations granted at Mercy College in no way guarantee that the same accommodations will be granted at other institutions, testing centers or licensing agencies. Students are solely responsible for pursuing accommodations at other institutions, testing centers or licensing agencies. OAA may assist in the process at the student's request.