

DOCUMENTATION GUIDELINES FOR ACADEMIC ACCOMMODATIONS

Any UVU student who requests accommodations due to a disability is required to establish eligibility through the Office of Accessibility Services (OAS). An essential component to establishing eligibility is documentation. It is the student's responsibility to ensure that his/her medical/mental health provider is informed of our documentation guidelines. Insufficient documentation will not be accepted.* All determinations for accommodations and disability eligibility are made on a case-by-case basis by the staff in OAS in consultation with the individual student.

Disability documentation must establish (diagnose) a disability and provide information on the functional impact of the disability.

Many conditions may now be considered a disability, but in order to qualify for accommodations, a major life function must be significantly, amply or substantially limited in the college environment. Documentation must provide a thorough understanding of a student's disability and enough information to anticipate the current impact of the disability in the environment of higher education. In short, how will any limitations associated with the disability impact the structure of individual courses, testing, program requirements, educational activities, practicum experiences, etc.? Disability Services requires all documentation to be timely and relevant to the student's *current* functional limitations.

Please Note: An Individual Education Plan (IEP) or 504 Plan from high school may not meet UVU's documentation requirements on its own.

Required Elements for Documentation of a Disability:

Learning disabilities: documentation must be in the form of a psycho-educational evaluation performed at the adult level and conducted by a licensed psychologist. This evaluation should incorporate tests such as the WAIS and Woodcock Johnson. Please note that the WRAT and GORT are not accepted.

All other disabilities: Documentation must be provided by a licensed medical/mental health provider qualified to diagnose and treat the condition. Documentation from a family member or someone with a personal relationship with the student (although they may be qualified by training and licensure) will not be accepted. **Providers may either complete the OAS Disability Documentation Form or write a comprehensive letter/report in accordance with the following criteria:**

Qualified Source:

1. All documentation must be written in English and typed on official letterhead of the professional describing the disability. It must include the most recent evaluation date (when student was last seen and assessed by the provider), as well as, the date of the documentation and the signature of the provider.
2. The provider must be a licensed or credentialed evaluator, with specific training or expertise related to the condition being diagnosed. All documentation provided must include the name, title, and professional credentials of the evaluator, including information about their license or certification (state and license #).

Contents of Documentation:

1. Identify the disability, including DSM or ICD diagnostic codes, and provide a full clinical description.
2. Summary of the professional relationship to the student, including duration of time providing care, and identification and description of assessment instruments, testing procedures, or other methods of evaluation. Possible diagnostic methods include formal instruments, medical exams, structured or unstructured interviews, objective performance measures, and observational data.
3. Describe the typical progression of the disability, such as the expected changes in the functional impact over time. If the condition is not stable, provide information on interventions (such as medications or therapy) and the anticipated or potential impact on the disability over time. Provide a timeline for re-evaluation where appropriate.
4. A discussion of whether the disability is permanent or temporary. If temporary, please provide information on the expected duration of the disability and timeline for re-evaluation.
5. Information regarding treatment plan, necessary elements of daily living, disability management, medication, and possible side effects.
6. **Functional Limitations:** Information on how the disability currently impacts the student is integral to identifying appropriate accommodations. Provide clear details on how a major life activity is substantially limited by the disability, focusing on such activities which may pertain to an educational environment. Provide a clear sense of the severity, frequency and pervasiveness of the disability.
7. **For episodic conditions:** Some disabilities have episodic flare-ups (i.e. PTSD, Panic Disorder, Depression, Generalized Anxiety Disorder, MS, Fibromyalgia, Arthritis, Chronic Migraines, Seizure Disorders, and Crohn's Disease). To help OAS understand the impact of these types of conditions, documentation should also discuss the following:
 - Triggers and warning symptoms of onset
 - Symptoms experienced during an episode
 - Frequency and duration of episodes
 - Care plan for management

* Insufficient documentation can result from one or more of the following:

- Insufficient information or outdated documentation. Documentation is considered outdated after 10 years for permanent disabilities, 7 years for learning disabilities, and 5 years for psychiatric and psychological disabilities
- Office visit notes, hospital discharge papers, online patient portals, prescription pad note
- Documentation developed by a relative
- Inappropriate professional making the diagnosis
- No diagnosis given
- For a Learning Disability, no IQ test data or no achievement test battery (with scores) administered to support the diagnosis
- Average range of test scores (having no scores representing a significant limitation)
- An unsigned report
- Report not written on evaluator's letterhead
- No functional limitations identified (for instance, how the diagnosis affects the student and how it relates to the accommodation request)
- Diagnosis based upon one subtest score with no additional support