

**UCR Student Disability Resource Center**  
**Specific Learning Disabilities, Documentation Standards -revised (July 2019)**  
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Federal and State law<sup>i</sup> and University of California policies<sup>ii</sup> require the University to provide reasonable accommodation in its academic programs to qualified<sup>iii</sup> students with disabilities, including students with specific learning disabilities (SLDs). Please note that the DSM V has updated diagnostic criteria, and has discontinued the IQ-Achievement discrepancy criterion, as it resulted in an overreliance in low achievement as sole criterion, that resulted in a high rate of false positives, as academic struggle to achieve academically may result for many reasons, not just due to learning disabilities.

The University is committed to providing reasonable accommodations appropriate to the nature and severity of the individual's documented SLDs in all academic programs, services, and activities.

University of California students with SLDs typically have average to superior ability, yet experience marked difficulty in one or more academic areas as a result of difficulties learning and using academic skills. Per the DSM-V, a SLD is one of several neurodevelopmental disorder (other neurodevelopmental disorders include Intellectual Disabilities, Autistic Spectrum Disorders, Communication Disorders, Developmental Motor Co-Ordination Disorder, and Attention-Deficit/Hyperactivity Disorder), that begins by school-age, although it may not be recognized until later. It involves ongoing problems learning key academic skills, including reading, writing and math, with low academic achievement causing significant impairment. To be considered a disability that warrants accommodations, the disorder must limit a major life activity.

#### **DOCUMENTATION FOR SPECIFIC LEARNING DISABILITIES**

It is the responsibility of each student who requests services from the University of California to provide a comprehensive written evaluation of their SLD. To verify the student's eligibility under Federal<sup>3</sup>, State<sup>4</sup>, and University<sup>5</sup> mandates and to document their need for reasonable accommodations and support services, this evaluation must demonstrate a clinical diagnosis of a specific learning disability, as indicated in the DSM 5.

#### **A. Testing Must Be Comprehensive**

It is not acceptable to administer only one test in making a diagnosis. The domains to be addressed must include, but are not limited to, the following:

##### **1. Aptitude**

The Wechsler Adult Intelligence Scale (WAIS-1V) with scaled scores and percentiles and/or the Woodcock–Johnson Psycho–Educational Battery (WJ-IV): Tests of Cognitive Abilities (with standard scores and percentiles) are acceptable.

##### **2. Achievement**

The student's current levels of functioning in reading, mathematics, and written language must be assessed under timed and untimed conditions to corroborate underachievement in specific academic areas. Acceptable instruments include: (a) the *Woodcock–Johnson Psycho–Educational Battery: Tests of Achievement (WJ-IV) including academic fluency tests* or (b) the Wechsler Individual Achievement Test IV (WIAT IV) and (c) specific achievement tests such as the *Nelson–Denny Reading Test (NDRT)*, or the *Woodcock Reading Mastery Tests–Revised*. (*The Wide Range Achievement Test (WRAT-4)* is not a comprehensive measure of achievement and, therefore, is not suitable by itself.) Additional formal and informal tests, as

well as observations, may be integrated with the above assessments to assist in determining the presence of a learning disability and differentiating from co-existing disorders.

### **3. Information Processing**

Specific areas of information processing (for example, short- and long-term memory, reasoning, sequential memory, auditory and visual processing, processing speed, pragmatic expressive and receptive language and attention) are areas which should be considered. Suitable instruments include: the *WAIS–V*; the cognitive portion of the (*WJ–IV*); the *Wechsler Memory Scale (WMS–IV)*; the *Comprehensive Test of Phonological Processing*; or the *Learning Efficiency Test-II*, designed to assist in corroborating the existence of processing disorders as identified by the *WAIS–V* or the *WJ–IV*, *Tests of Cognitive Abilities*, are recommended.

### **B. Test Instruments**

The test instruments used to determine eligibility must be statistically valid and reliable, and standardized with age-appropriate norms.

### **C. Test Score Data**

Test score data must be included in the diagnostic reports to document the basis of the diagnosis. Test data must be reported in standard scores and percentiles based on national norms. Additionally, diagnosing professionals are required to report standard scores using age norms when available (as they are for the *WJ-IV*).

### **D. Testing Must Be Current**

Reasonably current documentation is needed to enable staff to determine the current functional limitations requiring reasonable accommodations and support services in the academic setting. Written reports must include the date(s) of testing. The appropriateness of documentation will be determined by a Disabilities Specialist, the Disabilities Services Director, or other qualified staff member designated by the Disability Services Director. Additional testing may be required to determine the most appropriate accommodation(s).

### **E. Diagnosing Professionals**

The professional(s) conducting the assessment and rendering clinical diagnoses of specific learning disabilities must be qualified to do so. Qualified professionals include licensed clinical psychologists, licensed neuropsychologists, or licensed educational psychologists. These professionals must have expertise in learning disabilities, training in administering the tests used, and be experienced in working with adults. The diagnosing professional's name, title, signature, license number and state issuing the license must be included on letterhead stationery.

### **F. Non-Diagnosing Professionals**

Non-diagnosing professionals conducting the assessment, employed by a school district, for the purpose of qualifying a student for special education services based student exceptionality (i.e., cognitive, emotional, behavioral, medical, social, or physical), or meeting an eligibility criteria adopted by the academic setting, are intended for that setting, and may not apply or be accepted at other institutions. It is up to the discretion of the receiving institution(s) to accept educational reports written by non-diagnosing, qualified professionals, such as credentialed school psychologists, learning disabilities specialists, and speech and language pathologists, who have expertise in learning disabilities, training in administering the tests used, and be experienced in working with adults. The report writer's name, title, credential/certificate number, employing academic setting, and must be on corresponding letterhead stationery.

### **G. Written Report:**

## **Intake History and Presenting Concerns**

A written intake summary must include several components: a) of the student's developmental, educational, medical, and family history of learning difficulties and health histories, b) the presenting concerns (referral question/s) that may relate to learning difficulties, c) should demonstrate a thorough analysis and demonstrated impact of alternative explanations that may contribute to the learning difficulties, such as educational under-preparation, sensory impairment (i.e., problems in hearing or seeing), psychological or neurological factors (i.e., anxiety, history of brain injuries, seizure disorders, pediatric stroke...), cultural differences, or insufficient instruction, e) should demonstrate that the student's difficulties in acquiring and using various academic skills are due to a neurodevelopmental, lifelong history of a specific learning disability(s), which cannot be explained by other circumstances.

The four diagnostic criteria, 1) key characteristics of the disorder, 2) measurement of the key characteristics, 3) age of onset of symptoms, and 4) exclusionary criteria, must be met based on clinical synthesis of the individual's history (developmental, medical, family, educational), school reports and response to the provision of interventions targeting the identified difficulties, and psychoeducational assessments. All academic domains and subskills that are impaired must be specified, and severity must be indicated.

## **Testing Procedures**

The report must describe the testing procedures, name the instruments used to assess the individual, validity consideration of assessment tools, reason for selecting the identified assessment tools, composite and subtests results, and interpretation of the test results, and behavioral observations during assessment.

## **Exclusionary Criteria**

The difficulties in learning must not be better explained by alternative factors, and should include a thorough clinical review of the individual's developmental, medical, educational, and family history, reports of test scores and educational history observations, and response to academic interventions. The diagnosing professional is encouraged to use direct language in the written report, including whether an SLD is confirmed or ruled out, and the evidence to support the stated conclusions. There must be clear and specific evidence and identification of the student's SLD. Individual learning or processing differences do not, by themselves, constitute an SLD.

## **Determination of Diagnosis**

The determination of a diagnosis of a Specific Learning Disability as described by the *Diagnostic and Statistical Manual of Mental Disorders 5<sup>th</sup> Edition, 2013 (DSM V)* should be based on: (a) an educational history (including familial educational history), (b) behavioral observations, and (c) significant cognitive processing deficit and clearly marked impact on one or more areas of achievement. The diagnosis requires persistent difficulties in reading, writing, arithmetic, or mathematical reasoning skills during formal years of schooling. Symptoms may include inaccurate or slow and effortful reading, poor written expression that lacks clarity, difficulties remembering number facts, or inaccurate mathematical reasoning. The affected academic skills are substantially and quantifiably below those expected for the individual's chronological age, and cause significant interference with academic or occupational performance, or with activities of daily living, as confirmed by individually administered standardized achievement measures and comprehensive clinical assessment.

Based on individually administered, culturally appropriate, and psychometrically sound norm-referenced measures of academic achievement, it is expected that academic achievement score(s) be at least 1.5 SD below the mean for age and educational level ( $SS \leq 78$ , or  $< 5\text{th}\%$ ile), at least average IQ, and persistence of learning difficulties.

To establish eligibility for accommodations under state and federal law, the documentation must show current functional limitations imposed by the learning disability in the academic setting, and evidence that the learning disability limits a major life activity.

## ACADEMIC ACCOMMODATIONS AND SUPPORT SERVICES

University academic accommodations refers to the provision of services that ensure equal access to a student with a specific learning disability. Academic accommodations and support services are determined on an individual basis. Each accommodation is based on specific and current functional limitations as identified in the documentation, survey of the academic environment, and interview with the student, and is designed to create equal access to the academic environment (i.e., acquiring academic information or demonstrating knowledge) without fundamentally altering the nature of the student's instructional program(s), or degree requirements.

It is the responsibility of a Learning Disabilities Specialist, the Program Director, or other staff member designated by the Director to determine appropriate accommodations and services. This determination will be made following an intake interview conducted by a Disabilities Specialist or the Disability Services Director with the student, reviewing the information furnished by the diagnosing professional(s) and the students' requests. There must be an illustrated connection between the impact of disability, the described barrier and the accommodation request. If there is not appropriate and sufficient evidence on which to base decisions concerning accommodations and services for a student with a specific learning disability, the student may be referred for additional assessments (e.g. tests of intelligence, cognition/information processing, and academic achievement).

Each campus has procedures for resolving complaints or grievances regarding the provision of academic accommodations and support services.

1. These *UC LD Practices* were revised within the scope of the *Guidelines for Documentation of a Learning Disability in Adolescents and Adults*, the national model published by the Association on Higher Education and Disability (*AHEAD*).
2. The *Practices* (formerly *Guidelines*) were originally issued in August, 1988. The revised version was adopted by the Directors of the University's Disabled Student Services on October 27, 1994. The current *UC LD Practices* were adopted by the Directors in July, 1998. Updated in June 2009 and June 2013.
3. Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990 (ADA), and the ADA Amendments Act of 2012 are the pertinent Federal laws; Section 504 of the Rehabilitation Act of 1973 uses the term "academic adjustments" when referring to ways of promoting instructional and programmatic access for students with disabilities. The term "reasonable accommodation and support services" is used in these Practices because it emphasizes the goal of addressing the student's disability-related need for equal access in the academic setting.
4. California Education Code Part 40, Chapter 14.2 (conditions for State funding of services to disabled students) and Government Code sections 1135 and 12926 are the pertinent State law.
5. University of California Policies Applying to Campus Activities, Organizations, and Students, Section 140.00: Guidelines Applying to Non-discrimination on the Basis of Disability.
6. Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition. (DSM-5) American Psychiatric Association. American Psychiatric Association Publishing. 2013.
7. Gerber PJ: The impact of learning disabilities on adulthood: a review of the evidenced-based literature for research and practice in adult education. *J Learn Disabil* 45(1):31–46, 201
8. Gabbard, GO. *Gabbard's Treatments of Psychiatric Disorder*, Fifth Edition. American Psychiatric Publishing. 2014

<sup>i</sup>. Section 504 of the Rehabilitation Act of 1973, the Americans with Disabilities Act of 1990, and the ADA Amendments Act of 2012 are the pertinent Federal laws. For pertinent State law, see Chapter 14.2, Section 67310 of the California State Education Code.

<sup>ii</sup>. University of California *Policies Applying to Campus Activities, Organizations and Students*, Section 140 (*Guidelines Applying to Non-discrimination on the Basis of Disability*).

<sup>iii</sup>. "Qualified" with respect to post-secondary educational services, means "a person who meets the academic and technical standards requisite to admission or participation in the education program or activity, with or without reasonable modifications to rules, policies, or practices."