

# DOCUMENTATION GUIDELINES

## **1. Credentials of the evaluator(s)**

Documentation should be provided by a licensed treatment provider (e.g., psychiatrist, licensed clinical psychologist, licensed social worker, etc.), a properly credentialed professional for the area being evaluated, who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated.

## **2. A diagnostic statement identifying the disability**

Documentation should include a date of diagnosis, date(s) of examination and date of last contact as well as a summary of past and present symptoms and a formal assessment of the current psychological and health status.

## **3. A description of the diagnostic methodology used**

Documentation should provide information and detail the typical progression or prognosis of the condition, include a description of the diagnostic criteria, evaluation methods, procedures, tests, and a formal diagnosis including an ICD or DSM V.

## **4. A description of the current functional limitations as they directly relate to the stated disabilities and necessitate any accommodations**

Documentation should include a current impact of the disability aids in establishing a disability and identifying accommodations and include severity, frequency, and pervasiveness of the condition. If condition is episodic in nature, level of functioning should be assessed based on active phase of symptoms, medical information relating to the student's needs should be included, including the impact of medication on the student's ability to meet the demands of a postsecondary education environment.

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

If possible, documentation should provide a description of the expected change in the functional impact of the condition(s) over time. If the condition is variable, describe the known triggers that may exacerbate the condition.

## **6. Documentation must be current.**

Accommodations are based on an assessment of current nature and impact of the disability. Because conditions may change over time, current evaluations are critical for providing reasonable accommodations. In general, this means that depending upon the nature of the disability; some evaluations must be completed within the last twelve (12) months. In addition, depending on the nature of the disability, evaluations may need to be updated on a semester-by-semester or yearly basis. *However, DSS uses professional judgment and discretion in accepting older documentation of conditions that are permanent and stable.*

## **7. A description of current and past accommodations, services and medication list**

Documentation should include a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations including the effectiveness in minimizing the functional impact of the disability. There should be a discussion of significant side effects from current medications or services that may impact physical, perceptual, behavioral, or cognitive performance. This information may provide insight into making current decisions.

## **8. Recommendations for accommodations**

Recommended accommodations and strategies should be logically related to functional limitations. If there is not an obvious connection, a clear explanation of the relationship in making current accommodation decisions is helpful. While DSS has no obligation to provide or adopt recommendations made by outside entities, those that are congruent with the programs, services, and benefits currently offered by DSS may be appropriate.

### **Documents MUST be on letterhead, typed, dated, and signed and include the Evaluator's:**

- Name
- Title
- License number
- Phone number
- Address