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CALIFORNIA STATE UNIVERSITY

Guidelines for the Assessment and Verification of Students with Learning Disabilities

The California State University prohibits unlawful discrimination against students on the basis of disability in its programs, services, and activities, in accordance with sections 504 & 508 of the Federal Rehabilitation Act of 1973, as amended; Title 2 of the ADA Amendments Act of 2008 (ADAAA); applicable state laws and regulations including fair employment and housing laws; and pursuant to the California State University “Policy for the Provision of Accommodations and Support Services to Students with Disabilities” (hereafter referred to as CSU Policy). Guidelines for the assessment and verification of students with learning disabilities for the purpose of providing accommodations and support services are presented in this document, “California State University Guidelines for the Assessment and Verification of Students with Learning Disabilities” (hereafter referred to as CSU Guidelines).

The CSU Guidelines are designed to provide an equal educational opportunity to students with learning disabilities who are otherwise qualified for admission. The guidelines are based on consultation with qualified professionals in the field of learning disabilities in the CSU and other state university systems and are consistent with those issued by nationally known professional organizations [e. g., AHEAD]. These CSU Guidelines supersede eligibility criteria issued by the Office of the Chancellor in 2002. If any of the laws and regulations upon which the CSU Guidelines are based are amended, the most current applicable laws and regulations shall apply.

I. CSU Definition of a Learning Disability

The CSU system adheres to the definition of learning disabilities as developed by the National Joint Committee on Learning Disabilities (1998). Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability. Although learning disabilities may occur concomitantly with other disabling conditions (e. g., sensory impairment, serious emotional disturbance) or with extrinsic influences (such as, cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences (adapted from NJCLD, 1998).

II. Qualifications to Diagnose

To be considered qualified to diagnose specific learning disabilities, the professional(s) external and internal to the CSU shall have training and experience in the assessment and diagnosis of learning disabilities in adolescents and adults. Qualified professionals include clinical or educational psychologists, school psychologists, neuropsychologists, and credentialed learning disabilities specialists and other professionals whose training and experience includes the diagnostic practice of adolescents and adults.

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For campuses that do not have a dedicated Learning Disability Specialist, certain other professionals within the Disability Services Department, such as disability counselors or educational resource specialists, may verify the existence of a Learning Disability for the purpose of program eligibility by critical analysis of appropriate documentation submitted by an applicant if they have training and experience to do so.

All documentation must be legible, (preferably typed), presented on letterhead, dated, and signed. It must also include the professional's title, professional credentials, and/or license number as appropriate. It is not considered appropriate or acceptable for professionals to evaluate members of their families.

III. Assessment and Substantiation of a Learning Disability

A. Background

The guidelines for the appropriate elements of assessment and verification of students with learning disabilities are consistent with the AHEAD Guidelines (2008) and the CSU Policy for the Provision of Accommodations and Support Services to Students with Disabilities (2008). Documentation should validate the need for accommodations and support services based on the student's current level of functioning in the educational setting. A school plan, such as an individualized education program (IEP) or a 504 plan is insufficient documentation but may be included as historical information in a more comprehensive assessment battery.

Confidential records will be protected in accordance with the Family Education Rights and Privacy Act (FERPA) and its regulations as stated in the CSU Policy:

Each CSU campus shall maintain appropriate confidential records that identify students with disabilities. These records shall include the student's name, address, campus student identification number, nature of disability, support services needed, and verifying statement of the director or designee of services to student with disabilities, and any documentation provided by the student. All such records, including student medical records, shall be considered "education records" protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) and its regulations. Although certain medical records are exempt from FERPA's definition of "education records," that exemption does not apply to student medical records maintained by a campus program for services to students with disabilities. Accordingly, confidential records will be protected in accordance with FERPA regulations with the purpose of providing appropriate academic accommodations or support services. Information about the student may be released with the student's informed written consent in accordance with FERPA or other applicable legislation.

Reasonable accommodations are based on the current impact of the disability on academic performance. In most cases this means that a diagnostic evaluation should be age appropriate and relevant to the student's learning environment, and show the student's current level of functioning. (AHEAD 2008)

B. Assessment Process

The proper diagnosis of a learning disability involves an orderly, deductive process during which a wide range of information must be considered. Reliance on a single test instrument, no matter how comprehensive it appears, may be misleading. A comprehensive assessment

and the resulting diagnostic report must include a diagnostic interview, evaluation of aptitude, academic achievement, information processing, clinical observations/processes and a diagnosis. Other possible reasons for the learning difficulties need to be discussed and ruled out where appropriate. Tests scores including standard scores, index scores, cluster scores and percentiles should be included with the report.

1. *Diagnostic Interview*

The assessment of learning disabilities requires a comprehensive diagnostic interview. Relevant information from across a lifespan should include the following areas: presenting problem(s), academic history, developmental history, medical history, psychosocial history, family history, primary language of the home, student's current level of English fluency, any other existing diagnosis(es), and medication(s), past and present. During the interview, the professional will explore possible alternative explanations for the presenting problem(s) other than learning disabilities.

2. *Testing Process*

When selecting a battery of tests, it is critical to consider the technical adequacy of instruments, including their reliability, validity, and standardization on an appropriate norm group. It is essential for the evaluator to utilize appropriate judgment in the selection of the assessment instruments utilized. The following is a suggested list of assessment instruments for the assessment of students suspected of having a learning disability. This list is not intended to be definitive or exhaustive.

a. *Aptitude/Cognitive Ability*

- Wechsler Adult Intelligence Scale-Third Edition (WAIS-III)
- Wechsler Adult Intelligence Scale-Fourth Edition (WAIS-IV)
- Woodcock-Johnson-Third Edition: Tests of Cognitive Ability (WJ-III)
- Kaufman Adolescent and Adult Intelligence Test
- Reynolds Intellectual Assessment Scale (RIAS)
- Stanford-Binet (SB5)
- Test of Non-Verbal Intelligence (TONI-3)

b. *Academic Achievement*

- Woodcock-Johnson-Third Edition: Tests of Achievement (WJ-III)
- Wechsler Individual Achievement Test (WIAT-III)
- Or specific achievement tests such as:
- Nelson-Denny Reading Skills Test (Form G& H)
- Stanford Diagnostic Mathematics Test
- Test of Written Language-3 (TOWL-3)
- Gray Oral Reading Test (GORT 4th ed.)

- Spadafore Diagnostic Reading Test

Specific achievement tests are useful instruments when administered under standardized conditions and when the results are interpreted within the context of other diagnostic information. For example, the Wide Range Achievement Test-3 or 4 (WRAT-3 or 4) is not a comprehensive measure of achievement and, therefore, should not be used as the sole measure of achievement.

c. *Information Processing*

Acceptable instruments include, but are not limited to:

- Wechsler Memory Scale
- Rey Osterrieth Complex Figure
- Trails A & B
- Peabody Picture Vocabulary Test-Third Edition (PPVT-III)
- Rey Auditory Verbal Learning Test
- Bender Visual-Motor Gestalt Test
- Beery Visual-Motor Integration Test
- Wisconsin Card Sorting Test

The testing process should utilize current, technically adequate and appropriate standardized instruments and should be based on a thorough examination of the student in the following areas. Any revisions or successors to the tests listed above would be included upon publication.

3. *Factors to be Measured by the Assessment*

a. *Aptitude:*

A complete and comprehensive intellectual/cognitive assessment is required. Students with learning disabilities enrolled at the university level characteristically display average to superior intelligence and significant intra-cognitive discrepancies.

b. *Academic Achievement:*

A comprehensive academic achievement battery is essential, including current levels of academic functioning (under timed and un-timed conditions) in relevant areas such as reading decoding and comprehension, mathematics, oral language, and written language.

c. *Information Processing:*

Specific areas of information processing (e.g., short-term memory, working memory, long-term memory, sequential memory, auditory and visual perception/processing, processing

speed, executive functioning, psychomotor ability) should be assessed as the information processing deficit and it must have the logical nexus that explains the academic difficulty.

d. Clinical Observations:

Other assessment instruments, such as non-standardized measures and informal assessment procedures or observations, may be helpful in determining performance across a variety of domains. In addition to standardized tests, clinical observations are essential to the assessment. It may also be useful to include information derived from “testing to the limits.”

4. Test Scores

All subtests, factor, index, and cluster scores should be reported and considered when making a diagnosis. Standard scores and percentiles should be provided for all normed measures when intrinsic to the instrument. Whenever possible, age-based scores are preferred for an adult population; grade or age equivalent scores alone are not useful.

5. Interpretation

Assessment instruments and the data they provide do not diagnose; rather, they provide important elements that must be integrated by the evaluator with background information, observations of the client during the testing situation, and the current context. It is essential, therefore, that professional judgment be utilized in all cases. An indication of how patterns in the student’s cognitive ability, achievement, and information processing reflect the presence of a learning disability is critical. The particular profile of the student’s strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodations and support services. Moreover, it is critical that the evaluator has ruled out alternative explanations for academic problems, such as those resulting from poor education, poor motivation and/or study skills, emotional problems, problems of attention, and cultural/language differences.

Students with learning disabilities typically fall in the Average to Very Superior range intellectual/cognitive ability with difficulty in one or more academic areas due to a presumed underlying cognitive deficit that interferes with their performance in an academic setting. Eligibility criteria for learning disability support services should be in line with the following specific guidelines.

- a. Significant intra-cognitive discrepancy(ies) of at least one standard deviation as measured by technically adequate, standardized instruments of aptitude (e. g., Verbal Comprehension vs. Perceptual Organization, Verbal Comprehension vs. Working Memory on the Wechsler Adult Intelligence Scale-Fourth Edition (WAIS-IV).

Students with learning disabilities characteristically display significant Intra-cognitive scatter as compared to students without learning disabilities.

OR

- b. Significant aptitude-achievement discrepancy(ies) at least one standard deviation as measured by technically adequate, standardized instruments of aptitude (e. g., Wechsler Adult Intelligence Scale-Fourth Edition, Woodcock-Johnson-Third Edition Tests of Cognitive Abilities and Woodcock-Johnson Third Edition Tests of Achievement).

This component refers to the difference between students' predicted ability levels and their assessed achievements levels (e. g. Factor Scores on the Wechsler Adult Intelligence Scale-Fourth Edition vs. Reading decoding, Reading comprehension, Math calculation, Math applications scores on the Woodcock-Johnson-Third Edition).

Students with learning disabilities characteristically illustrate a significant aptitude-achievement discrepancy (ies).

AND

- c. At least one standard score in the Average Range, or above of aptitude (i.e., Standard Score =90 or above / 25th percentile or above) as measured by technically adequate, standardized instruments of aptitude.

AND

- d. An average or greater score (i.e., Standard Score =90 or above / 25th percentile or above) in at least one academic area as measured by technically adequate, standardized instruments of achievement.

OR

- e. Professional Certification.

To address the possibility that a student with a learning disability may not be identified by standard diagnostic procedures, clinical judgment may be exercised in up to 10% of all students tested during an academic year. Recognizing that currently available assessment instruments may be biased when utilized with individuals who have cultural/language differences, the percentage of students who may be determined eligible on the basis of clinical judgment may be increased when the population of students assessed includes large numbers of such students.

6. *Diagnosis and Summary*

All of the aforementioned information should lead to a written diagnostic summary regarding the presence or absence of a learning disability(ies). This summary should include specific recommendations for accommodations and support services, as well as an explanation as to why such accommodations and support services are recommended. The evaluator should support recommendations with specific test results and/or clinical observations.

7. *Prior Verification*

Flexibility in accepting documentation is important, especially in settings with significant numbers of non-traditional students. In some instances, documentation may be outdated or inadequate in scope or content. In other instances, it may not address the student's current level of functioning or need for accommodations and support services because observed changes may have occurred in the student's performance since the previous assessment was conducted. Testing/evaluation results should generally be dated no more than three (3) for high school students and five years (5) for adults. Consequently, it may be appropriate for a qualified professional to update the evaluation report. The purpose of this update is to determine the student's current need for accommodations and support services and should include a rationale for ongoing accommodations and support services. In order to receive accommodations and support services, prior verification must meet the same guidelines as outlined previously. A diagnosis of a learning disability documented by a qualified professional (whether in private practice or in a previous school setting) does not automatically guarantee that identical accommodations and support services will be provided. Documentation for students who have been determined eligible for accommodations and support services according to the criteria established by the California Community College system will be reviewed in accordance with the above prescribed CSU methodology and criteria. If accommodations and support services are not clearly identified and supported by history and test results, the CSU will seek clarification and more information. The final determination for providing appropriate and reasonable accommodations and support services rests with the CSU campus.

8. *Recommendations for Accommodations and Support Services*

It is important to recognize that needed accommodations and support services can change over time and are not always identified through an initial diagnostic process. Conversely, a prior history of accommodation(s) does not, in and of itself, warrant the provision of a similar accommodation(s). Accommodations and support services will be directly related to the diagnostic results. The final determination of appropriate and reasonable accommodations and support services rests with the CSU campus.

IV. Student Appeal Process

Pursuant to Section 504 and the ADA, students with disabilities who are denied a requested accommodation may appeal the decision through on-campus informal and formal accommodation dispute resolution processes