



Brock University  
Niagara Region  
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T905-688-5550

## **Student Wellness and Accessibility Centre**

### **STUDENT HEALTH SERVICES SERVICES**

T 905-688-5550 x3243  
F 855-700-4793

### **PERSONAL COUNSELLING SERVICES**

T 1-833-276-2533  
F 905-688-7260

### **STUDENT ACCESSIBILITY**

T 905-688-5550 x3240  
F 905-688-7260

## **Student Accessibility Services Documentation Guidelines**

**Brock University Student Accessibility Services facilitates academic accommodations** and provides supports to students with permanent disabilities or temporary and/or cyclical health conditions.

### **Definition of Disability**

The definition of disability should be interpreted very broadly. "Disability" is based on Human Rights and the intersection between impairment and the environment. Impairment is a functional issue which causes limitations or difficulties in completing a task or action, or participating in life's activities.

Accommodations and supports for students with a diagnosed Learning or Health Disability is a shared responsibility between the student, Student Accessibility Services (SAS), faculty and all university personnel.

Students are required to provide the appropriate supporting documentation to SAS and are advised to communicate requests as early as possible to allow the service provider adequate time to respond.

### **Temporary Disabilities and Academic Accommodations**

Students who experience a temporary, short-term medical, physical or mental health condition unrelated to a documented permanent disability, but affecting academic functioning for one to three academic terms may require temporary academic accommodations. Similarly, interim accommodations may be provided pending receipt of documentation.

A **brief** medical issue that is common to the general population (such as a flu virus) and requires academic consideration should be discussed with an instructor who will then advise the student of the appropriate university policy (i.e., exam deferral, make-up exam) and accommodate the student.

**Medical forms should be forwarded directly by the Health Care Practitioner.**

## Temporary Mental Health Issues

For students who are experiencing academic difficulties due to a **temporary mental health issue**, SAS can provide support in the form of referrals in order to help students access other available health, assessment, and therapeutic resources. Temporary mental health accommodations may be arranged on an individual basis while students are actively engaged in addressing their particular symptoms and/or pending documentation.

Please note: Prior history of receiving accommodations in previous academic environments is not a guarantee that accommodations will be granted at Brock University. SAS makes independent judgement about the appropriateness of all accommodation requests.

## Documentation Guidelines

The following guidelines list the documentation components required to confirm a need for, and assist in the determination of appropriate academic accommodation.

### ***Documentation must:***

- Support the request for accommodations or academic adjustments and/or aids and devices.
- Verify the functional impact of the disability on the student's academic performance.
- Be issued by a qualified practitioner who is certified in the areas of the disability such as:
  - Family Physician
  - Psychologist
  - Psychiatrist
  - Audiologist
  - Neurologist
  - Ophthalmologist
  - Occupational Therapist
  - Optometrist
  - RN (EC)

This information will assist us in determining the most appropriate aids, services and accommodations which will address the functional limitations of the disability.

Should you have any questions about documentation, please feel free to contact the Student Accessibility Services staff and we will be happy to provide more information and/or answer any of your questions. You can reach the department by calling 905688-5550 x3240.

## **Guidelines for Required Documentation of a Medical, Physical, Sensory or Mental Health Disability**

***Please provide:***

A completed **SAS Medical Documentation Form** which is available from the SAS reception in ST400 or by emailing [askSAS@brocku.ca](mailto:askSAS@brocku.ca).

**OR**

A letter or original functional assessment report from a licensed medical practitioner, qualified in the appropriate specialty area (or a general medical practitioner who has preferably been treating the patient over the last 6 months), which must be current (within the last 6 months) and include:

1. Name.
2. Date of birth.
3. Nature of disability or health condition.
4. Date(s) of initial diagnosis(es) and any pertinent treatment.
5. Frequency and duration of care.
6. Current functional impact/assessment including (where appropriate): Physical tolerance/activity; engagement; gross and fine motor function; situational responses; cognition; impact on communication, memory, concentration, test-taking, group work, attendance, etc.
7. Any recommended assistive devices, specialized equipment, environmental adaptations required.
8. Expected progression or stability.
9. Patient's recommended follow-up.
10. Name of practitioner, professional credentials, address, phone number, typed, dated and signed.

**Students with a hearing loss (deaf, deafened, hard of hearing) should also include:**

1. Audiologist report.
2. Use of assistive devices, e.g. hearing aids, FM System, etc.

**Students with a visual impairment should also include:**

1. Visual acuity (best corrected).
2. Visual field limitations.

### **Guidelines for Required Documentation of a Learning Disability**

These guidelines describe standard criteria for documenting a Learning Disability according to the Diagnostic and Statistical Manual, V (DSM-V) and the Learning Disabilities Association of Canada (LDAC)/Learning Disabilities Association of Ontario (LDAO) diagnostic criteria and associated supporting document.

1. **A copy of your latest psychoeducational assessment**, which has been completed within the last three to five years by a registered psychologist or psychological associate. The assessment should have been completed within the last 3 years or a diagnosis made at 18 years of age or older. Documentation that is more than 3 years old is reviewed on an individual basis.
2. A report must contain a clear diagnostic statement indicating the presence of a learning disability. Statements such as “suggest the presence of” or “may indicate” are not acceptable diagnostic statements. Also, the report should make every effort to identify the underlying psychological processing deficit.
3. A previous I.E.P. or letter from your high school/college detailing the types of academic accommodations you have utilized in the past few years.

#### **A psychoeducational assessment report should contain the following:**

1. A detailed interview to obtain relevant background information.
2. Review of relevant educational records.
3. A formal intelligence test (e.g., WAIS IV).
4. A formal measure of academic achievement (e.g., WIAT III, WJ-IV).
5. Note: the WRAT is not considered an acceptable measure when used on its own.
6. A formal measure of Memory skills (e.g., WRAML-2, WMS IV).
7. Summary section should include a detailed description of how the student's psychological processing deficit impacts their current learning endeavours.
8. Efforts to rule out differential diagnoses
9. Recommendation section should include ideas that may assist in meeting the students disability related needs.

## **Guidelines for Documentation of Adult Attention-Deficit/Hyperactivity Disorder**

In order to support the needs of adults with Attention-Deficit/Hyperactivity Disorder (AD/HD) in a university setting, it is necessary that supporting documentation be based on the following criteria. It is strongly recommended that students also be screened for possible vision, hearing, or health problems that may be contributing to attention and/or academic difficulties.

A clinical assessment by a licensed mental health professional, such as a psychiatrist, neuropsychologist, a clinical or educational psychologist or psychological associate, using the current version of the DSM is required. Evaluation by clinicians who have extensive training and experience in differential diagnosis with adults is recommended.

### **This assessment should include:**

1. Early indicators of difficulties with attention and/or hyperactivity and impulsivity in the student's school history and/or through consultation with someone who has known the student well over a significant period of time (e.g., family, teachers)
2. A thorough family, social, academic and/or occupational history which includes consultation with individuals who know the student well
3. Information regarding the functional impact of the student's disability on his/her ability to participate in the post-secondary educational setting
4. Recent diagnosis (within the last 3 years) or a diagnosis made at 18 years of age or older. Documentation that is more than 3 years old will be evaluated on a case-by-case basis.

SAS recognizes that previous evaluation by a physician/pediatrician may be accepted by the current evaluator as evidence of the existence of the disorder since childhood, but may be questioned as the sole indicator of adult AD/HD and the functional impact in the postsecondary environment. Therefore, students with AD/HD who request accommodations and support at the university level may be asked to provide a current assessment report to support the request for academic accommodations. SAS can provide assistance with screening, interim accommodation, funding information and referral.

### **Content of the Assessment Report**

The assessment report should include the following:

- Disclosure of AD/HD as a diagnostic statement, including the nature (type) of the disorder as outlined in the current version of the DSM.

- Information regarding the functional impact and severity of symptoms that will influence academic performance.
- Implications for appropriate accommodations in a university environment indicated by the recommendations.
- Impact of any co-existing conditions (psychiatric and/or learning) that may be affecting functioning.
  - Other associated disorders (e.g., anxiety disorders, mood disorders) frequently co-exist with AD/HD. It is therefore important to consider such information when recommending appropriate support.
- Assessment of cognitive and academic functioning.
  - Due to the fact that learning disabilities frequently co-exist with attention-deficit disorders, it is important to investigate the student's learning profile, and the presence of possible learning disabilities, in order to provide appropriate support.
- Assessment and description of social-emotional functioning either through formal assessment and/or clinical interview to rule out other explanations for the difficulties.

[Adapted from the University of Guelph's Centre for Disabilities documentation guidelines.]