

General Guidelines for Disability Documentation

Concordia College uses documentation of disability to:

- 1) Establish whether an individual is a person with a disability
- 2) Provide a rationale for identifying and implementing reasonable accommodations.

Per Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990:

(1) DISABILITY: With respect to an individual, the term “disability” means —

- (A)** a physical or mental impairment that substantially limits one or more **major life activities**;
- (B)** a record of such an impairment; or
- (C)** being regarded as having such an impairment.

(2) MAJOR LIFE ACTIVITIES

(A) In general; major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.

(B) Major bodily functions; a major life activity also includes the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

***shall not apply to impairments that are *transitory* and *minor*; with an actual or expected duration of 6 months or less.**

Formal evaluation procedures, clinical narratives, historical evidence of accommodations and the individual's self-report are a part of what will be used to determine appropriate and reasonable accommodations for students with disabilities. The approved accommodations and strategies must logically relate to the functional limitations described in the documentation. *Concordia College Disability Services has incorporated the Association of Higher Education and Disability's (AHEAD) (2004) essential elements of quality documentation into their criteria for documentation.*

Disability Documentation should include answers to all applicable items below

A: Service Provider Credentials:

1. Name
2. Title
3. License or Certification Number
4. Address
5. Phone Number
6. Signature

B: Student/Patient/Client Information:

1. **Indicate your general nature of your relationship with the client** (i.e. Primary Care/Family, Physician, Counselor/Psychotherapist, Psychiatrist, Crisis Intervention/Trauma Therapy, Social Worker, Single Session Provider / File Reviewer)
2. **The date of client's last appointment**
3. **Number of sessions have you had with the client**

C: Disability Information:

1. Does the client have a physical or mental impairment that can be classified as a disability?
2. Please provide clear diagnostic statements describing:
 - a. Label(s) ascribed to the client's diagnosed condition(s)
 - b. Date(s) of original and current diagnostic evaluations
 - c. Method the condition was diagnosed
 - d. Information regarding the Functional Limitation the condition has on the student
A "functional limitation or impact" is defined as an adverse effect on a major life activity caused by the disability. Functional limitations should be described in terms of how severely the activity is affected by the disability; the frequency with which the activity is affected and how pervasive the disability is in the performance of the major life activity.
 - e. Details on the expected progression or stability of the disability
Please include the expected changes over time, information on the cyclical or episodic nature of the disability and any known suspected environmental triggers.
3. Is the requested Accommodation part of an active and ongoing treatment plan?
4. Provide a brief description and effectiveness of past, present and ongoing treatment plans, medications and/or accommodations. Include possible side effects caused by medication:
5. Recommendations: Although not required, professionals are invited to make recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or support services that are logically related to the functional limitation. College disability services offices, however, are not under any obligation to provide or adopt recommendations made by outside entities.
6. Additional Information: Please feel free to include additional information about this student

Documents that Disability Services does NOT find useful:

- Patient Medical Charts
- Patient Discharge Instructions
- Information written on prescription pads
- Information that is illegible
- Self-evaluations
- Information from non-professionals
- Documentation provided by a member of the student's family

Submit documentation to:

mail: **Matthew Rutten, Director of Counseling & Disability Services**
Counseling Center & Disability Services Office
Old Main 109A
Concordia College
901 8th St. S.
Moorhead, MN 56562
fax: **218-299-4557**

Please contact Mr. Matthew Rutten if you have questions: Email: mrutten@cord.edu
Phone: 218-299-3514