Documenting Psychiatric Disabilities

Vermont Law School provides equal access to services and programs to all qualified individuals with disabilities. If you have a psychiatric condition, you may be entitled to reasonable accommodations under the Americans with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973. If you request accommodations, it is recommended that you provide VLS with documentation indicating that a specific disability exists and that the identified disability substantially limits or restricts the condition, manner, or duration under which an average person in the population can perform a major life activity, including learning. The documentation should ideally also support **each** request for accommodation, academic adjustment or modification, or auxiliary aid.

Please read VLS Documentation Guidelines carefully. You may want to share this document with your provider, to ensure the documentation is prepared in accordance with these requirements.

Relevant Terminology

Psychiatric disabilities: These comprise a range of conditions characterized by emotional, cognitive, and/or behavioral dysfunction. Diagnoses are provided in the *DSM-IV-TR* or the *ICD-10*. Note that not all conditions listed in the *DSM-IV-TR* are disabilities or even impairments for purposes of the ADA.

Major life activity: Examples of major life activities include walking, sitting, standing, seeing, hearing, speaking, breathing, learning, working, caring for oneself, and other similar activities. In particular, individuals with psychiatric disabilities may also experience thinking disorders/psychotic disorders that may interfere with learning and exam taking tasks.

Functional limitation: A substantial impairment in the individual's ability to function in the condition, manner, or duration of a required major life activity.

Documentation Guidelines

I. A Qualified Professional Should Conduct the Evaluation

- Documentation that provides assessments or diagnoses of psychiatric disabilities should be prepared by a professional qualified to evaluate and diagnose psychiatric disabilities.
- Appropriate professionals *may* include psychologists, neuropsychologists, psychiatrists, neuropsychiatrists, other relevantly trained medical doctors, clinical social workers, licensed mental health counselors, and psychiatric nurse practitioners.

- The name, title and credentials of the qualified professional writing the report should be included. Information about license or certification, as well as the area of specialization, employment, and state or province in which the individual practices, should also be clearly stated in the documentation. All reports should be typed or printed on professional letterhead, dated and signed.
- VLS will not accept diagnoses of psychological disabilities documented by family members.

II. Documentation Should Be Current

- Initial documentation to support a request should be based on **evaluations performed within six months of the date of application.**
- Follow-up and supplemental documentation will be required. Depending on the diagnosis, updates may be required every 3, 6 or 12 months.
- Documentation (including any updates) should describe the student's <u>current</u> level of functioning and the need for accommodations
- All documentations should describe any currently mitigating factors, such as medication or other treatment.
- All documentation should make recommendations currently appropriate to a law school environment.

III. Documentation Necessary to Support the Diagnosis Should Be Comprehensive

- *History:* The diagnostic report should include a history of the student's psychiatric problems, including a history of presenting symptoms; duration and severity of the disorder; and relevant medical and medication history. The report should include any prior behavior that was violent or destructive.
- *Diagnosis:* The report should include a specific diagnosis, or more than one, indicating that DSM-IV criteria have been met for each condition.
- The report should include the individual's current medication regimen compliance, side effects (if relevant to the student's academic performance) and response to medication.
- The report should include a description of the expected progression or stability of the impact of the condition over time.
- *Rule out:* The evaluator should investigate and rule out the possibility of other potential diagnoses involving neurological and/or medical conditions or substance abuse, as well as educational, linguistic, sensorimotor, and cross-cultural factors that may result in symptoms mimicking the purported psychiatric disability.
- *Impact:* The evaluator should describe the degree of impact of the diagnosed psychiatric disorder on a specific major life activity, as well as the degree of impact on the individual.
 - A statement regarding potential for harm to self or others should be included.

- Accommodations: The documentation should include suggested accommodations. Nevertheless, students and providers should be aware that VLS has ultimate responsibility for deciding which accommodations are reasonable in the context of VLS's academic program.
 - Accommodations will be provided only when there is a clear link between the requested accommodations and the functional limitations of the individual.
 - If the recommendations include testing accommodations, a psychoeducational, neuropsychological or behavioral assessment may be required.
 - If an accommodation is not clearly identified in the diagnostic report, Vermont Law School will seek clarification, and, if necessary, more information. VLS will make the final determination as to whether accommodations are warranted and can be provided for the individual.
 - VLS cannot approve accommodation requests for conditions for which the functional limitations are not reasonably predictable. Thus, requests for blanket deadline waivers, or permissions to reschedule exams in anticipation of possible disability-related problems will not be granted. If a sudden or unanticipated problem renders a student, (1) unable to start a scheduled exam; (2) unable to complete an exam already started or (3) unable to complete a paper or take home exam by its due date, accommodations may be granted on a case-by-case basis. See VLS Temporary Disability Policy.
 - A prior history of accommodations, without demonstration of current need, does not warrant the provision of accommodations.
 - If there is no prior history of accommodations, the evaluator and/or the student should include a detailed explanation of why accommodations were not needed in the past, and why they are now currently being requested.

IV. Multiple Diagnoses

Multiple diagnoses may require a variety of accommodations beyond those typically associated with only a single diagnosis, and therefore the documentation should adhere to VLS policy. For example, when accommodations are requested based on multiple diagnoses (e.g., a psychological disability with an accompanying learning disability), documentation should also comply with the VLS guidelines pertaining to the documentation of these specific disabilities.

Confidentiality

Information concerning a student's disability, including all documentation submitted in support of a request for accommodations, is treated as confidential under applicable laws and school policies. The information is provided only to individuals who are privileged

to receive such information on a need to know basis. VLS will maintain confidential records and all documentation pertaining to disabilities within the Office of the Deputy Vice Dean for Academic Affairs. A copy of the letter determining eligibility for and granting accommodations is submitted to the Registrar's Office. Upon graduation or termination of enrollment, these records shall be archived apart from official educational records.

Summary Cover Sheet for Documentation of Psychiatric Condition

INSTRUCTIONS

To the Certifying Mental Health Professional: this cover sheet should be attached to your diagnosis report. In order to support the student's request for accommodations, the documentation explaining the diagnosis should be comprehensive. Whenever applicable, please follow the guidelines below:

- *History:* The diagnostic report should include a history of the student's psychiatric problems, including a history of presenting symptoms; duration and severity of the disorder; and relevant medical and medication history. The report should include any prior behavior that was violent or destructive.
- *Diagnosis:* The report should include a specific diagnosis, or more than one, indicating that DSM-IV criteria have been met for each condition.
- The report should include the individual's current medication regimen compliance, side effects (if relevant to the student's academic performance) and response to medication.
- The report should include a description of the expected progression or stability of the impact of the condition over time.
- *Rule out:* The evaluator should investigate and rule out the possibility of other potential diagnoses involving neurological and/or medical conditions or substance abuse, as well as educational, linguistic, sensorimotor, and cross- cultural factors that may result in symptoms mimicking the purported psychiatric disability.
- *Impact:* The evaluator should describe the degree of impact of the diagnosed psychiatric disorder on a specific major life activity, as well as the degree of impact on the individual.
 - A statement regarding potential for harm to self or others should be included.
- *Accommodations:* The documentation should include recommendations for accommodations. A link should be established between the requested accommodations and the functional limitations of the individual.
 - Psychoeducational, neuropsychological or behavioral assessments are often necessary to support the need for testing accommodations based on the potential for psychiatric disorders to interfere with cognitive performance.
 - Accommodations will be provided only when a clear and convincing rationale is made for the necessity of the accommodation.
 - A diagnosis in and of itself does not automatically warrant approval of requested accommodations. For example, test anxiety alone is not a sufficient diagnosis to support requests for accommodations.
 - If there is no prior history of accommodations, the evaluator and/or the student should include a detailed explanation of why accommodations were not needed in the past, and why they are now currently being requested.

Summary Cover Sheet for Documentation of Psychiatric Condition

<u>Student</u>	
Name	
D/O/B I	Phone
Address	
Report date	
Certifying mental health professional	
Name	
Phone	Email
Address	
Professional title	Highest degree
License/certification, number, and state	
In your opinion, does any diagnosed condition above Yes No Not sure If yes, identify the condition above with an asterisk a here (or refer to full report).	
Medication/turest-mont	
Medication/treatment Does this student take any medication or require any performance or behavior? Yes No	type of treatment that may adversely affect
If yes, please <u>list in the full report and explain effect</u>	<u>-</u>
Current compliance with treatment plan? Poor GoodExcellentUnknown N/A	A
Current prognosis for functioning effectively in law Poor Good Excellent Unknown	school?

Summary of recommended accommodation(s) in law school, if any (should be supported in the full report with a description of specific functional limitations and rationale for each accommodation suggested):	
In your opinion, how often should this student be reevaluated?	
3 mos 6 mos 1 year Other (specify)	
In your opinion, does this student represent a potential danger to self or others?	
Yes No Not Sure	
If "yes" or "not sure," PLEASE DISCUSS on full report.	
Signature Date	