Moravian College Services for Students with Disabilities

Office of Learning Services
1307 Main St.
Bethlehem, PA 18018
(610) 861-1510

Support Services for Students with Disabilities

Moravian College is committed to ensuring equal access and reasonable accommodations to students with documented disabilities. Students with disabilities are considered for admission to Moravian College on the same basis as all other applicants. Once admitted, students may request support services in accordance with Section 504 of the Rehabilitation Act (1973), the Americans with Disabilities Act (ADA 1990), and the Americans with Disabilities Act Amendments Act (ADAAA 2008).

Definition of a Disability

The United States’ Americans with Disabilities Act (ADA) defines “disability” as “having a physical or mental impairment that substantially limits one or more of the major life activities.” The ADA protects individuals from discrimination if they have a record of such impairments or if they are regarded as having such impairments. Additionally, specific protections are guaranteed through Section 504 of the Rehabilitation Act of 1973 (amended, 1978).
http://www.usdoj.gov/crt/ada/adahom1.htm

Types of Disabilities

- Learning disabilities and attention deficit hyperactivity disorder (ADD/ADHD)
- Physical, sensory, and neurological disabilities
- Psychiatric and psychological disabilities

Documentation Requirements

Moravian College follows the documentation guidelines recommended by the Association for Higher Education and Disability (AHEAD) for the seven essential elements of quality disability documentation. http://www.ahead.org.

Seven Essential Elements of Quality Disability Documentation*
1. The credentials of the evaluator(s)

The best quality documentation is provided by a licensed or otherwise properly credentialed professional who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated. A good match between the credentials of the individual making the diagnosis and the condition being reported is expected (e.g., an orthopedic limitation might be documented by a physician, but not a licensed psychologist).

2. A diagnostic statement identifying the disability

Quality documentation includes a clear diagnostic statement that describes how the condition was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition. While diagnostic codes from the Diagnostic Statistical Manual of the American Psychiatric Association (DSM) or the International Classification of Functioning, Disability and Health (ICF) of the World Health Organization are helpful in providing this information, a full clinical description will also convey the necessary information.

3. A description of the diagnostic methodology used

Quality documentation includes a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and specific results. Where appropriate to the nature of the disability, having both summary data and specific test scores (with the norming population identified) within the report is recommended.

Diagnostic methods that are congruent with the particular disability and current professional practices in the field are recommended. Methods may include formal instruments, medical examinations, structured interview protocols, performance observations and unstructured interviews. If results from informal, non-standardized or less common methods of evaluation are reported, an explanation of their role and significance in the diagnostic process will strengthen their value in providing useful information.

4. A description of the current functional limitations

Information on how the disabling condition(s) currently impacts the individual provides useful information for both establishing a disability and identifying possible accommodations. A combination of the results of formal evaluation procedures, clinical narrative, and the individual’s self report is the most comprehensive approach to fully documenting impact. The best quality documentation is thorough enough to demonstrate whether and how a major life activity is substantially limited by providing a clear sense of the severity, frequency and pervasiveness of the condition(s).
While relatively recent documentation is recommended in most circumstances, common sense and discretion in accepting older documentation of conditions that are permanent or non-varying is recommended. Likewise, changing conditions and/or changes in how the condition impacts the individual brought on by growth and development may warrant more frequent updates in order to provide an accurate picture. It is important to remember that documentation is not time-bound; the need for recent documentation depends on the facts and circumstances of the individual’s condition.

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

It is helpful when documentation provides information on expected changes in the functional impact of the disability over time and context. Information on the cyclical or episodic nature of the disability and known or suspected environmental triggers to episodes provides opportunities to anticipate and plan for varying functional impacts. If the condition is not stable, information on interventions (including the individual’s own strategies) for exacerbations and recommended timelines for re-evaluation are most helpful.

6. A description of current and past accommodations, services and/or medications

The most comprehensive documentation will include a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations, including their effectiveness in ameliorating functional impacts of the disability. A discussion of any significant side effects from current medications or services that may impact physical, perceptual, behavioral or cognitive performance is helpful when included in the report. While accommodations provided in another setting are not binding on the current institution, they may provide insight in making current decisions.

7. Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services

Recommendations from professionals with a history of working with the individual provide valuable information for review and the planning process. It is most helpful when recommended accommodations and strategies are logically related to functional limitations; if connections are not obvious, a clear explanation of their relationship can be useful in decision-making. While the post-secondary institution has no obligation to provide or adopt recommendations made by outside entities, those that are congruent with the programs, services, and benefits offered by the college or program may be appropriate. When recommendations go beyond equitable and inclusive services and benefits, they may still be useful in suggesting alternative accommodations and/or services.

Student Responsibilities

It is the responsibility of the student to self-identify and disclose their disability to the Office of Learning Services, specifically to the Assistant Director of Learning Services.
for Disability Support, Mr. Joseph Kempfer, if they wish to receive classroom accommodations. Declaration of a disability and adequate documentation must be provided in a timely manner to ensure that accommodations may be provided at the outset of the semester, which is to the student’s advantage; however, a student may submit appropriate documentation and request accommodations at any time. Reasonable accommodations are determined on an individual basis each semester and are based upon the specific nature of the disability and other factors. The documentation and information regarding the specifics of a student’s disability are confidential and not released by the Office of Learning Services. Students must sign an authorized release each semester in order to provide faculty with notification of their disability.

**Learning Disabilities and ADHD**

For learning disabilities, and in some cases for ADHD, the following three functional domains must be addressed within the evaluation:

**I. Intellectual Functioning**
A complete intellectual assessment is required with all subtest and standard scores. The preferred instrument is:
- **Wechsler Adult Intelligence Scale- III (WAIS III)**
- **Woodcock-Johnson Psycho-Educational Battery: Tests of Cognitive Ability**

**II. Achievement**
A complete achievement battery, including all subtest and standard scores, must be provided. The battery should include current levels of academic functioning in reading (decoding and comprehension), mathematics, and written language. Acceptable instruments include but are not limited to:

- **Woodcock-Johnson Psycho-Educational Battery-Revised: Tests of Achievement**
- **Nelson-Denny Reading Test**
- **Scholastic Abilities Test for Adults (SATA)**
- **Woodcock Reading Mastery Tests-Revised**
- **Wechsler Individual Achievement Test-III (WIAT- III)**

Please note: The **Wide Range Achievement Test-III (WRAT-III)** is **not acceptable** if used as the only measure of achievement.
III. Information Processing
Short and long-term memory, auditory and visual processing, and processing speed should be assessed. Acceptable instruments include, but are not limited to

- Detroit Tests of Learning-III (DTLA-III)
- WAIS-III
- Woodcock-Johnson Psycho-Educational Battery: Tests of Cognitive Ability
- Bender Visual-Motor Gestalt
- Wechsler Memory Scale

Standard scores and percentiles must be provided for all normed measures. Grade equivalents alone are not acceptable unless standard scores and/or percentiles are also included.

Students with disabilities may obtain continued support throughout the academic year by meeting regularly with the Assistant Director for Disability Support. The Assistant Director is available for consultation with faculty members who are providing accommodations. All students are strongly encouraged to use all the support services available to help them reach their academic goals. It is the responsibility of the student to seek all support services.

Academic Support Services

Learning Services provides the following academic support services:

- Tutoring for selected courses
- Study skills assessment
- Study skills workshops
- Time Management
- Note taking
- Test preparation
- Test-taking strategies
- Learning Styles Inventories
- Individual consultation and academic counseling and advising
- Walk-in or by appointment
- 1:1 and group assistance

For Departmental Tutoring Contact the following academic departments:

- Mathematics
- Foreign Languages
Accounting and Economics

The Writing Center
Help is available with the writing process from initial concept to finished paper.

For further information and to request services, contact:

Mr. Joseph Kempfer
Assistant Director of Learning Services for Disability Support
Office of Learning Services
1307 Main Street
Bethlehem, PA 18018
Phone (610) 861-1510
Fax (610) 625-7935

Learning Services Staff:

Laurie M. Roth
Director of Learning Services
lroth@moravian.edu

Joseph E. Kempfer
Assistant Director of Learning Services for Disability Support
jkempfer@moravian.edu

Nichelle D. Hunt
Assistant Director of Learning Services
nhunt@moravian.edu

Annette Chopin Lare
Administrative Assistant
larea@moravian.edu

Moravian College
1200 Main Street
Bethlehem, Pennsylvania 18018
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* Association for Higher Education and Disability (AHEAD)