

# Ohio Initiative for Persons with Learning Disabilities: An Interagency Collaboration



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# Preface

February 2007

The development of this manual and the *Ohio Initiative for Persons with Learning Disabilities (OIPLD)* Training has been made possible through the efforts of many people, most of whom are members of the Project's Steering Committee and Training Team. These people and others are listed below:

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## With technical assistance and support from:

National Institute for Literacy (NIFL) Bridges to Practice  
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**Ohio Initiative for Persons with Learning Disabilities:**  
**INTERAGENCY COLLABORATION**  
**Project Summary 2007**

Ohio is participating in a national project to **build program capacity to meet the needs of TANF clients with learning disabilities. Some studies estimate that at least 40% of TANF clients have some form of a learning disability and are included in those often referred to as “hard-to-serve” clients. People with disabilities comprise 50% or more of the adult education and literacy program population. The project goal is to** assist state TANF agencies in developing collaborative interagency systems to move TANF clients from welfare to work. This project, initially funded through the National Institute for Literacy (NIFL), is a partnership with the U.S. Department of Health and Human Services Administration for Children and Families and the U.S. Department of Education, Office of Vocational and Adult Education. The purpose of the project is to build program capacity in meeting the needs of TANF clients with learning disabilities by using appropriate screening instruments to identify clients with probable disabilities, providing the appropriate referral for diagnosis, and ensuring equal access with accommodated services. The National Council on Disabilities estimates that between 20-30% of persons receiving TANF benefits are learning disabled. It is further estimated that as many as 50-80% of persons in adult education, social service programs, or employment-seeking programs may have some form of a learning disability that has prevented them from achieving academic and employment success in their lives.

In Ohio, the **The Ohio Department of Job and Family Services (ODJFS)** in partnership with the Ohio Department of Education’s Adult Basic and Literacy Education (ABLE) unit and the Ohio Rehabilitation Services Commission (ORSC) has established a Learning Disability Training Team. The Training Team attended an Academy in Seattle on March 11-15, 2002, to gain a better understanding of learning disabilities, disability law and public policy, proven curriculum, and systems change. The expectations for participation in the project were outlined at the Academy. **The expectation of training in their home state was also explained.**

The Training Team returned to Ohio and held three regional trainings on August 6th, 7th, & 8th, 2002, for 28 local county teams (115 participants). Most local teams consisted) **consisting** of the following individuals:

1. Work Activities Supervisor and/or WIA Supervisor  
(Job and Family Services Agency)
2. ABLE Director/Coordinator  
(Local Educational Agency)
3. ORSC Counselor  
(County Rehabilitation Service Commission Office)

The local county teams were trained on learning disabilities characteristics, learning disabilities laws, assessments, screenings, and diagnosis. They were also provided with **The Ohio Department of Education’s ABLE Office** has a draft guidance document from ODJFS titled *Addressing Employment Barriers*. The Ohio Department of Education’s State ABLE Office contributed significantly to the development of the training building upon its long history in providing learning disability training for local ABLE programs. **through its Resource Center Network (RCN). They currently offer LD Core trainings in each of the four regions of the state. The RCN staff from one of the regional centers has contributed significantly to the training team.**

A follow-up training for local LD/TANF teams took place in Columbus on September 10, 2002, at which counties presented their local action plans. The featured speaker was Dr. James Koller who is a professor in the Department of Educational and Counseling Psychology at the University of Missouri/Columbia. He is also the Director for the Center for the Advancement of Mental Health Practices in the Schools. Dr. Koller’s research interests are focused on learning disabilities, ADHD, behavior disorders, School-to-Work transition, and psycho-educational and neuropsychological assessment. Dr. Koller’s work has been recognized and honored by numerous agencies/organizations including The Presidential Task Force for the National Transition Summit on Young People with Disabilities.

**The local county teams were trained on the basics of learning disabilities, LD laws, assessments, screenings, and diagnosis. They were also provided with a draft guidance document from ODJFS entitled *Addressing Employment Barriers*.**

The LD/TANF Task Force conducted a statewide learning disabilities videoconference on January 14, 2003, with the purpose of raising the awareness level of Ohio’s 88 counties’ local ABLE, Job and Family Services, and Rehabilitation Services Commission departmental staff. The videoconference was transmitted to all local county departments of Job and Family Services who hosted their local LD/TANF partners. Videotapes and CD-ROMS of this teleconference were also provided to all counties to help them orient local staffs and other stakeholders to this initiative.

**A follow up training for local LD/TANF teams took place in Columbus on September 10, 2002, at which counties presented their local action plans. The featured speaker included Dr. James Koller. Dr. Koller is a professor for the Department of Educational and Counseling Psychology for the University of Missouri/Columbia. He is also the Director for the Center for the Advancement of Mental Health Practices in the Schools. Dr. Koller's research interests are focused on learning disabilities, ADHD, behavior disorders, transition School-to-Work, and psycho-educational and neuropsychological assessment. Dr. Koller's work has been recognized and honored by many agencies/organizations including The Presidential Task Force for the National Transition Summit on Young People with Disabilities.**

The Hamilton County LD/TANF team was featured at the second **LD/TANF Task Force presented a statewide** videoconference held on April **January 14, 2003.** The successful Hamilton County team presented information on the elements **which raised the awareness level** of its collaboration **Ohio's 88 counties' local ABLE, Job** and LD assessments. This team's information was supplemented by William Baker, the representative from the Ohio Rehabilitation Services Commission on the LD/TANF Task Force. **Family Services and Rehabilitation Services Commission departmental staff around this important set of issues. This videoconference was transmitted to all local county departments of Job and Family Services Agencies who hosted their local LD/TANF partners. Videotapes and CD-ROMS of this teleconference have been provided to all counties to help them orient local staffs and other stakeholders to this initiative.**

The project's ongoing goal is to facilitate state and local level collaborations that result in integrated services for persons with learning disabilities and/or learning differences. It is believed that improved services will help these individuals achieve their goals as workers, family members and citizens of Ohio. In pursuit of this goal, the LD/TANF Task Force is planning to continue videoconferences, distribution of appropriate resources, and support to local teams.

**The LD/TANF Task Force facilitated another statewide videoconference on April 14, 2003, featuring the Hamilton County LD/TANF team. This local team presented information on the elements of their successful collaboration as well as information about LD assessment. Information on this topic was supplemented by William Baker, a member of the LD/TANF Task Force who is employed by the Ohio Rehabilitation Commission.**

The state LD/TANF TANF Task Force work has been formalized through an interagency memorandum of understanding (MOU) among developed an interagency memorandum understanding (MOU) among the three state agencies. The purpose **identification and distribution** of the MOU is to ensure the MOU is to ensure support for each agency's responsibilities and efforts in the implementation of the Initiative for People with Disabilities, thus providing evidence of the strong commitment of the agencies and to provide a model MOU for the local teams. This agreement has been signed by the administrative head of each agency.

An LD/TANF Steering Committee has been created to provide input and guidance to this initiative. The state agency representatives enhance the potential for collaboration at the state and local levels. This interagency team meets monthly to review the progress being made by this initiative and communicate current and emerging trends in LD and TANF issues. Please see the attached roster of state agency steering committee members. This agreement will be signed by the administrative head of each agency.

In 2004, an online Policy and Planning Guide for Serving Students with Learning Disabilities and Other Special Learning Needs was developed. This online policy guide contains information, laws and resources about learning disabilities; lists Ohio ABLE's policies addressing learning disabilities; and allows programs to develop a service plan for those with suspected or diagnosed learning disabilities. The steering committee is also developing an online network of psychologists to join our partnership and provide affordable diagnostic services. To access the online guide or psychologist network, visit: [www.able-ohiou.org](http://www.able-ohiou.org)The project's ongoing goal is to facilitate state and local level collaboration that will result in integrated services to better serve all persons with learning disabilities and/or learning differences to help them achieve their goals as workers, family members and citizens of Ohio.

. Also in 2004, the project supported training for new county teams consisting again of representatives from ABLE, Job and Family Services, and the Rehabilitation Services Commission, This was an interactive training that featured up-to-date information and resources that addressed learning disabilities awareness, laws and legal implications, implementing an LD screening process, and developing policies and procedures.

In 2005 and 2006, this training was provided to the one-stop systems in the Cleveland and Toledo areas. Because the emphasis was on serving all clients with learning disabilities through the one stop system and not just TANF clients, the title of the project was changed from LD/TANF to the Ohio Initiative for Persons with Learning Disabilities. New members were invited to participate on both the steering committee and training team. The steering committee again revised the basic training agenda and training materials to reflect up-to-date information on learning disabilities and a renewed spirit of systems collaboration -encouraging One-stop partners to work together to most effectively serve all clients with barriers, particularly those with learning disabilities. In early 2007, the training team offered this revised training regionally to One-stop staff.

**Ohio Initiative for Persons with Learning Disabilities Steering Committee – FY 2007**

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## OIPLD Trainer Bios

### **Paul Mosher**

With over twelve years of experience in the field of rehabilitation counseling, I have served in various capacities while assisting people with disabilities as they enter the workforce. As an RSC employee for the past seven years, I have been a counselor with BVR in Painesville and Columbus offices, handling general caseload and transitional age youth populations. I have also worked as a counselor with BSVI in Columbus, serving a general caseload for consumers with visual impairments. After graduating with my Master's Degree from the Rehabilitation Counseling program at Kent State University in 1993, I was employed with BWC in Cleveland as a case manager and program coordinator at their regional industrial rehabilitation center, serving injured workers for northern Ohio. Also, I was employed with MetroHealth Medical Center in Cleveland, where I provided driver rehabilitation and vocational evaluation services. I hold professional membership with the Ohio Rehabilitation Association and currently serve on the board for the Ohio Rehabilitation Counseling Association as their President-Elect. I recently began new duties at RSC as the Rehabilitation Program Specialist, where I serve as the liaison for BWC and ODJFS agencies, as well as WIA and the One-stop Systems for Ohio.

### **Jeffrey A. Fantine**

Jeff Fantine is the Director of the Center for the Study and Development of Literacy and Language in the College of Education at Ohio University located in Athens, Ohio. The primary focus of the Center is to address literacy issues of Appalachians in southeastern Ohio. The Center's largest grant project is the Resource Center for Adult Basic and Literacy Education, which provides professional development, resources, technical assistance, research and leadership to adult education programs in Ohio. The Center's two main areas of research are: services to those with learning disabilities and other special learning needs, and GED preparation.

Jeff holds degrees from Miami University, Georgetown University, and The Ohio State University – specializing in adult education and literacy.

His primary experience prior to working at the Center was with volunteer literacy programs, serving as Assistant Director of the Talawanda Adult High School in Oxford, Ohio; Tutor Trainer and Board Member for the Washington Literacy Council in Washington, D.C.; and Program Director of the Columbus Literacy Council in Ohio.

Jeff joined the National Institute for Literacy's Bridges Project, a project addressing services to adults with learning disabilities, in 1998. He is currently a Bridges Master Trainer and is coordinating a large effort in Ohio to implement systemic program changes and collaboration among service providers to improve services to those with learning disabilities and other special learning needs.

### **Jeffrey C. Gove**

Jeffrey C. Gove, State ABLE Consultant, has been employed by the Ohio Department of Education since 1992. He was hired initially to manage a new state interagency agreement between ODHS and ODE to expand adult education services to eligible JOBS adults and families Thousands of JOBS adults and their

families received high quality adult education and literacy services offered through collaborating local ABLE and CDHS programs which facilitated their moving toward economic and social self-sufficiency.

Between 1998 and 2003, Jeffrey had responsibility to provide leadership and oversight to two of the four ABLE regions in the state, Northwest and Northeast Ohio. Starting in 2003 to the present, he assumed sole responsibility for the Northeast Ohio ABLE programs, as well as the State Team Facilitator for the LD/TANF State Interagency Task Force (renamed as the Ohio Initiative for Persons with Learning Disabilities) and the One-Stop System contact person for the State ABLE Office. His other areas of expertise are the Ohio ABLEInk Data Management System and Workplace Education. He also served on the Governor's Workforce Policy Board's State Youth Council through December, 2006.

Previous to working at the Ohio Department of Education, Jeffrey was the Vice President of Employment and Training of the Columbus Urban League. Before this, he worked with Representative Ray Miller at the Employment and Education Commission of Franklin County, coordinating a private sector youth-employment program. His first employment in Columbus was with St. Stephen's Community House, where he was the Director of Youth Services and a Licensed Social Worker. He relocated to Columbus from Hartford, Connecticut where he worked for a Ralph Nader consumer advocacy group.

Jeffrey is originally from Cleveland, Ohio and now lives in Powell, Ohio in Delaware County. He is married with two children and owns two cats.

### **Mike Kinney**

Mike Kinney is the College Resources Coordinator for the state of Ohio Rehabilitation Services Commission. In this position he provides resources for rehabilitation counselors who work with persons with disabilities who need to receive postsecondary education to reach their vocational goals. Previously he worked in the Office for Disability Services at Ohio State University where he interpreted learning disability documentation and testing and wrote diagnostic reports for students who had been tested for learning disabilities. He has also worked as a rehabilitation teacher for blind adults. He has a bachelor's degree from James Madison University (VA) and a master's degree from the University of Illinois.

### **Doug Bailey**

Doug has been the Community Employment Manager for the Ohio Department of Mental Health for the past six years. In this role, Doug provides technical assistance on community employment and recovery issues for Mental Health Boards and Providers throughout Ohio. He recently worked as the Project Director for a five-year Social Security Research Grant (JIF), is currently the Project Director for Ohio's Medicaid Infrastructure Grant, and is a member of the ODMH management team for the SAMHSA Supported Employment Grant and the Johnson & Johnson - Dartmouth Supported Employment Collaboration Grant. Before coming to ODMH, he was the Vocational Director for two non-profit agencies in NE Ohio, and also served as the Assistant Area Manager for Rehabilitation Services Commission in NE Ohio. Prior to his work in vocational rehabilitation, Doug held positions in Human Resources with two Fortune 500 companies. Doug has a Masters Degree from the Cleveland State University Graduate School of Business, with concentrations in Human Resources, Management and Public Administration. Doug is a member of the Ohio Rehabilitation Association, the National Rehabilitation Association, the National Association of Workforce Development Professionals, and he is a Certified Workforce Development Professional.

## **Shanna M. Bagner**

Shanna M. Bagner has been employed with the Ohio Department of Job and Family Services (ODJFS) for six years. Prior to her accepting the position with ODJFS, Ms. Bagner was employed with Franklin County Children Services for eight years. Currently, Ms. Bagner serves as the EEO Manager for the Bureau of Civil Rights. Her responsibilities include planning and managing EEO and Civil Right compliance programs that ensue the enforcement of the Americans with Disability Act of 1990, the Civil Rights Act of 1964, the Age Discrimination Enforcement in Employment Act of 1967, the Workforce Investment Act of 1998 , the Multiethnic Placement Act of 1990 and other EEO related Gubernatorial Executive Orders and ODJFS policies and directives. A 1992 graduate of The Ohio State University, Ms. Bagner received her Bachelor of Science degree. She earned her master degree from the Ohio University, Athens, Ohio, in Human and Consumer Science. Also, Ms. Bagner is a licensed social worker for the State of Ohio.

## **Sue McKittrick**

Sue attended Ohio State University and St. Mary's of the Springs. She worked for the Columbus Public Schools, Franklin County Prosecutor's Office Victim-Witness Program, City Attorney's Intake and Night Prosecutor's Program, Probation Officer Domestic Relations and Juvenile Court System, and the Franklin County Child Support Enforcement Agency. She joined OBES as UC Employer Relations Coordinator in April, 1994. She was named One-Stop Assistant Project Manager in September, 1995. She staffed the Governor's Workforce Policy Board and was named One-Stop Manger in October 2002.

## **Ohio Initiative for Persons with Learning Disabilities Training**

### **Workshop Overview**

#### **Intended Audience**

County-based teams consisting of a Temporary Assistance to Needy Families (TANF) supervisor or coordinator from County Department of Job and Family Services, Adult Basic and Literacy Education (ABLE) director or coordinator, local Ohio Rehabilitation Services Commission vocational rehabilitation counselor and a local One-Stop employment center administrator and other relevant staff.

#### **Training Objectives**

- Survey individual participant's knowledge and awareness of learning disabilities.
- Understand the frustrations that persons with learning disabilities experience and relate these frustrations to what is observed through common everyday activities in One-stop offices.
- Become familiar with the definition of learning disabilities.
- Learn about the laws and legal implications applying to persons with learning disabilities
- Become aware of how local teams can effectively gather necessary disabilities documentation.
- Be able to discuss the rationale and methods for screening customers for learning disabilities and become familiar with appropriate LD screening instruments.
- Be able to discuss appropriate ways to administer and discuss the results of learning disabilities screening tools with customers.
- Develop a plan to document a local team's policies and procedures related to serving persons with learning disabilities.

## **AGENDA**

### **Ohio Initiative for Persons with Learning Disabilities Local One-Stop System Awareness Training**

**8:30 AM to 4:00 PM**

- 8:30 AM to 9:00 AM:**      **Registration and LD Quiz**
- 9:00 AM to 10:15 AM:**      **Sue McKitrick and Jeff Fantine**  
\* **Welcome and Introductions**  
\* **Overview**  
\* **Awareness Activity**
- William Finn**  
\* **TANF –Identifying Barriers & Systems Collaboration**
- Jeff Fantine**  
\* **What are Learning Disabilities**
- 10:15 AM to 10:25 AM:**      **BREAK**
- 10:25 AM to 11:30 AM:**      **Jeff**  
\* **“F.A.T. City” Video**  
\* **Review LD Definitions and Review LD Quiz**
- 11:30 AM to 1:00 PM:**      **Lunch on Your Own**
- 1:00 PM to 1:15 PM:**      **Awareness Activity**
- 1:15 PM to 2:15 PM:**      **Shanna and RSC Staff**  
\* **Legal Aspects of LD**
- 2:15 PM to 2:25 PM:**      **BREAK**
- 2:25 PM to 3:30 PM**      **RSC Staff**  
\* **The Screening Process**  
\* **Common LD Screening Tools**  
\* **Screening Process Interaction with Customers**  
\* **Review of Available Strategies and Resources**
- 3:30 PM to 3:45 PM**      **Sue & Staff**  
\* **Discussion of Local One-Stop System Plan Template**
- 3:45 PM to 4:00 PM:**      **All**  
\* **Closing Remarks**  
\* **Completion of Evaluations**

# Ohio's Initiative for Persons with LD Training: An Interagency Collaboration

# People with Learning Disabilities . . .

1. True False have average intelligence.
2. True False just learn differently. With more teaching, the learning disabilities will disappear.
3. True False show slow, but consistent performance.
4. True False are often associated with minimal brain dysfunction.
5. True False often have sensory processing problems.
6. True False can have a family history of LD.
7. True False are more often a male than a female.
8. True False will generally resolve their LD, and, in fact, the LD will usually disappear in adolescence.
9. True False comprise 30% of the general population.
10. True False comprise 50% or more of the adult education and literacy program population.
11. True False have more emotional disturbances than non-LD.
12. True False grow up to be hyperactive adults.
13. True False can be identified using a screening tool.
14. True False have cognitive disorders of the central nervous system.
15. True False can also have ADHD (Attention Deficit Hyperactivity Disorder)
16. True False should not be told they have a learning disability.
17. True False need very expensive accommodations in the workplace.
18. True False are entitled to protection under federal law.

– LD/TANF training

# Can You Name These Famous People with Learning Disabilities?

Match the person to their story:

Albert Einstein  
Walt Disney  
Agatha Christie  
Woodrow Wilson

Winston Churchill  
George W. Bush  
Hans Christian Anderson  
Greg Luganis

Tom Cruise  
Thomas Edison  
Nelson Rockefeller  
Bruce Jenner

F. W. Woolworth  
Cher  
George Patton

\_\_\_\_\_ As a boy of nine, he did not know the letters of the alphabet. He was thought to be dull and backward. He entered Davidson College, but he had to withdraw because of illness. Later he went to Princeton, but his grades were mediocre.

\_\_\_\_\_ This famous entertainer has achieved success in two fields of entertaining. Unfortunately, because of a math learning disability, this person cannot remember telephone numbers or balance a checkbook.

\_\_\_\_\_ His head was large at birth. His mother did not agree with those who felt that the child was abnormal. He was sent to school, but the teacher thought him to be mentally ill. The mother withdrew the child from school and taught him herself. As it turned out, he might have done well in vocational education.

\_\_\_\_\_ As a child, he was labeled slow. He clerked in a village grocery store. He suggested putting slow-moving merchandise on a counter and selling it at a reduced rate. It turned out to be an excellent idea.

\_\_\_\_\_ He has extreme difficulty in reading; some people used to say he was clumsy. He has been high up in his field for many years. Because of his background, he might be labeled both learning disabled and disadvantaged.

\_\_\_\_\_ When he was twelve years old, he could not read, and he remained deficient in reading all his life. However, he could memorize entire lectures, which was how he got through school. That never stopped him from marching ahead.

\_\_\_\_\_ This was another child who was slow in school work. About the only thing this apparently right-brained person had going for him was his vivid imagination, which used to bother his teachers, especially when he doodled.

\_\_\_\_\_ This statesman could be called academically disadvantaged. He failed grade 8, did terribly in math, and generally hated school. Still, he was upset by people who were inebriated by the exuberance of their own verbosity.

\_\_\_\_\_ As a young boy, he had great difficulty reading; in fact, throughout his life, he was unable to read well. Despite this, he was extremely successful in politics.

\_\_\_\_\_ This boy had difficulty in reading and writing, but for years, people have cherished his wonderful stories, all of which had to be dictated to a scribe.

\_\_\_\_\_ This person could not talk until the age of four. He did not learn to read until he was nine. His teachers considered him mentally slow, unsociable and a dreamer. He failed the entrance examinations to college but finally passed them after an additional year of preparation. He lost three teaching positions and then became a patent clerk.

\_\_\_\_\_ Despite being a success in his chosen field, this entertainer can only learn lines by listening to a tape. He is formally diagnosed as dyslexic.

\_\_\_\_\_ This individual is well spoken enough to appear as an expert on TV, following his very successful athletic career. His reading program was severe enough that it almost cost him the chance at any athletic scholarships.

\_\_\_\_\_ This person had a learning disability called dysgraphia, which prevented any understood or legible written work. As a result, all material created had to be dictated to a typist/transcriptionist.

\_\_\_\_\_ This person neglected to report for duty in the National Guard, was Governor of Texas, and President of the U.S. for 2 terms.

# Can You Name These Famous People with Learning Disabilities?

Match the person to their story:

Albert Einstein  
Walt Disney  
Agatha Christie  
Woodrow Wilson

Winston Churchill  
George W. Bush  
Hans Christian Anderson  
Greg Luganis

Tom Cruise  
Thomas Edison  
Nelson Rockefeller  
Bruce Jenner

F. W. Woolworth  
Cher  
George Patton

**WW** As a boy of nine, he did not know the letters of the alphabet. He was thought to be dull and backward. He entered Davidson College, but he had to withdraw because of illness. Later he went to Princeton, but his grades were mediocre.

**CHER** This famous entertainer has achieved success in two fields of entertaining. Unfortunately, because of a math learning disability, this person cannot remember telephone numbers or balance a checkbook.

**TE** His head was large at birth. His mother did not agree with those who felt that the child was abnormal. He was sent to school, but the teacher thought him to be mentally ill. The mother withdrew the child from school and taught him herself. As it turned out, he might have done well in vocational education.

**FWW** As a child, he was labeled slow. He clerked in a village grocery store. He suggested putting slow-moving merchandise on a counter and selling it at a reduced rate. It turned out to be an excellent idea.

**GL** He has extreme difficulty in reading; some people used to say he was clumsy. He has been high up in his field for many years. Because of his background, he might be labeled both learning disabled and disadvantaged.

**GP** When he was twelve years old, he could not read, and he remained deficient in reading all his life. However, he could memorize entire lectures, which was how he got through school. That never stopped him from marching ahead.

**WD** This was another child who was slow in school work. About the only thing this apparently right-brained person had going for him was his vivid imagination, which used to bother his teachers, especially when he doodled.

**WC** This statesman could be called academically disadvantaged. He failed grade 8, did terribly in math, and generally hated school. Still, he was upset by people who were inebriated by the exuberance of their own verbosity.

**NR** As a young boy, he had great difficulty reading; in fact, throughout his life, he was unable to read well. Despite this, he was extremely successful in politics.

**HCA** This boy had difficulty in reading and writing, but for years, people have cherished his wonderful stories, all of which had to be dictated to a scribe.

**AE** This person could not talk until the age of four. He did not learn to read until he was nine. His teachers considered him mentally slow, unsociable and a dreamer. He failed the entrance examinations to college but finally passed them after an additional year of preparation. He lost three teaching positions and then became a patent clerk.

**TC** Despite being a success in his chosen field, this entertainer can only learn lines by listening to a tape. He is formally diagnosed as dyslexic.

**BJ** This individual is well spoken enough to appear as an expert on TV, following his very successful athletic career. His reading program was severe enough that it almost cost him the chance at any athletic scholarships.

**AC** This person had a learning disability called dysgraphia, which prevented any understood or legible written work. As a result, all material created had to be dictated to a typist/transcriptionist.

**GB** This person neglected to report for duty in the National Guard, was Governor of Texas, and President of the U.S. for 2 terms.

# Characteristics and Definitions of LD

# Characteristics of LD

Describe the characteristics and behaviors you see in individuals who struggle with basic life skills, such as following instructions, keeping appointments, completing applications, etc.:

# Reading Difficulties

The most prominent characteristic associated with learning disabilities is difficulty in learning to read.

Characteristics of Reading Difficulty	Examples
Does not read for pleasure	<ul style="list-style-type: none"> <li>• Engages in leisure activities other than reading magazines or books, claiming to prefer pursuits that are more active</li> <li>• Does not read stories to his or her children</li> </ul>
Does not use reading to gather information	<ul style="list-style-type: none"> <li>• Cannot easily use materials like newspapers and classified ads to obtain information</li> </ul>
Has problems identifying individual sounds in spoken words	<ul style="list-style-type: none"> <li>• Does not attempt to sound out words in reading or does so incorrectly</li> </ul>
Often needs many repetitions to learn to recognize a new or unused word	<ul style="list-style-type: none"> <li>• May encounter a newly learned word in a text and not recognize it when it appears later in that text</li> </ul>
Relies heavily on context to read new or unused words	<ul style="list-style-type: none"> <li>• When attempting to decode a word, says a word that may make sense but may not be related phonologically (coat–jacket)</li> </ul>
Oral reading contains many errors, repetitions, and pauses	<ul style="list-style-type: none"> <li>• Reads slowly and laboriously, if attempts to read at all</li> <li>• May refuse to read orally</li> </ul>
Efforts in reading are so focused on word recognition that they detract from reading comprehension	<ul style="list-style-type: none"> <li>• Loses the meaning of text but understands the same material when it is read aloud</li> </ul>
Has problems with comprehension that go beyond word recognition; may have limited language skills that affect comprehension	<ul style="list-style-type: none"> <li>• Does not understand the text when it is read to him/her</li> </ul>
Has limited use of reading strategies; in an inactive reader, not previewing text, monitoring comprehension, or summarizing what is read	<ul style="list-style-type: none"> <li>• When prompted to do so, does not describe strategies used to assist with decoding and comprehension of text</li> </ul>
Practices reading rarely, which may compound reading difficulties; lacks complex language and word recognition	<ul style="list-style-type: none"> <li>• Recognizes and uses fewer words, expressions, and sentence structures than peers</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Writing Difficulties

Many individuals with learning disabilities have difficulties with written expression and often in conjunction with reading. “Dysgraphia” is a term sometimes used to refer to writing problems.

Characteristics of Writing Difficulty	Examples
Has difficulty communicating through writing	<ul style="list-style-type: none"> <li>• Rarely writes letters or notes</li> <li>• Needs help completing forms such as job applications</li> </ul>
Written output is severely limited	<ul style="list-style-type: none"> <li>• Struggles to produce a written product</li> <li>• Produces short sentences and text with limited vocabulary</li> </ul>
Writing is disorganized	<ul style="list-style-type: none"> <li>• Omits critical parts or puts information in the wrong place</li> <li>• Writing lacks transition words</li> </ul>
Lacks a clear purpose for writing	<ul style="list-style-type: none"> <li>• Does not communicate a clear message</li> <li>• Expresses thoughts that do not contribute to the main idea</li> </ul>
Does not use the appropriate text structures	<ul style="list-style-type: none"> <li>• Uses sentences that contain errors in syntax or word choice</li> <li>• Fails to clearly indicate the referent of a pronoun</li> </ul>
Shows persistent problems in spelling	<ul style="list-style-type: none"> <li>• Spells phonetically</li> <li>• Leaves out letters</li> <li>• Refrains from writing words that are difficult to spell</li> </ul>
Has difficulties with mechanics of written expression	<ul style="list-style-type: none"> <li>• Omits or misuses sentence markers, such as capitals and end punctuation, making it difficult for the reader to understand the text</li> </ul>
Handwriting is sloppy and difficult to read	<ul style="list-style-type: none"> <li>• Has awkward writing grip or position</li> <li>• Letters, words, and lines are misaligned or not spaced appropriately</li> </ul>
Demonstrates difficulties in revising	<ul style="list-style-type: none"> <li>• Is reluctant to proofread or does not catch errors</li> <li>• Focuses primarily on the mechanics of writing, not on style and content</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Listening Difficulties

Individuals with learning disabilities may also have problems with the processing of oral language.

Characteristics of Listening Difficulty	Examples
Has problems perceiving slight distinctions in words	<ul style="list-style-type: none"> <li>• Misunderstands a message with a word mistaken for a similar word (grass-glass)</li> </ul>
Has a limited vocabulary	<ul style="list-style-type: none"> <li>• Recognizes and uses fewer words than peers when engaged in conversation or when gathering information by listening</li> </ul>
Finds abstract words or concepts difficult to understand	<ul style="list-style-type: none"> <li>• Requests repetitions or more concrete explanations of ideas</li> <li>• Frequently asks for examples</li> </ul>
Has difficulty with nonliteral or figurative language, such as metaphors, idioms, and sarcasm	<ul style="list-style-type: none"> <li>• Does not understand jokes or comic strips</li> </ul>
Confuses the message in complex sentences	<ul style="list-style-type: none"> <li>• May eat lunch first if given the direction, “Eat lunch after you take this to the mailroom”</li> </ul>
Has difficulty with verbal memory	<ul style="list-style-type: none"> <li>• Does not remember directions, phone numbers, jokes, stories, etc.</li> </ul>
Has difficulty processing large amounts of spoken language	<ul style="list-style-type: none"> <li>• Gets lost listening in group presentations, complaining that people talk too fast</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Speaking Difficulties

Individuals with learning disabilities may also have problems producing oral language.

Characteristics of Speaking Difficulty	Examples
Mispronounces words	<ul style="list-style-type: none"> <li>• Adds, substitutes or rearranges sounds in words, as in Pacific for specific</li> </ul>
Uses the wrong word, usually with similar sounds	<ul style="list-style-type: none"> <li>• Uses a similar-sounding word, like generic instead of genetic</li> </ul>
Confuses the morphology, or structure of words	<ul style="list-style-type: none"> <li>• Uses the wrong form of a word, such as calling the Declaration of Independence the Declaring of Independence</li> </ul>
Has a limited vocabulary	<ul style="list-style-type: none"> <li>• Uses the same words over and over in giving information and explaining ideas</li> <li>• Has difficulty conveying ideas</li> </ul>
Makes grammatical errors	<ul style="list-style-type: none"> <li>• Omits or uses grammatical markers incorrectly, such as tense, number, possession, and negation</li> </ul>
Speaks with a limited repertoire of phrase and sentence structure	<ul style="list-style-type: none"> <li>• Uses mostly simple sentence construction</li> <li>• Overuses “and” to connect thoughts</li> </ul>
Has difficulty organizing what to say	<ul style="list-style-type: none"> <li>• Has problems giving directions or explaining a recipe; talks around the topic but doesn’t get to the point</li> </ul>
Has trouble maintaining a topic	<ul style="list-style-type: none"> <li>• Interjects irrelevant information into a story</li> <li>• Starts out discussing one thing then goes off in another direction without making the connection</li> </ul>
Has difficulty with word retrieval	<ul style="list-style-type: none"> <li>• Cannot call forth a known word—uses um, you know</li> <li>• May substitute a word relating in meaning</li> <li>• May use empty words—thing or stuff</li> <li>• May describe rather than name</li> </ul>
Has trouble with the pragmatic or social use of language	<ul style="list-style-type: none"> <li>• Does not follow rules of conversation</li> <li>• Does not switch styles of speaking when addressing different people</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Mathematics Difficulties

In some instances, individuals with learning disabilities have normal or above-normal math skills. For others, it is the area of primary difficulty. “Dyscalculia” is the term used to refer to math problems.

Characteristics of Math Difficulty	Examples
Does not remember and/or retrieve math facts	<ul style="list-style-type: none"> <li>• Uses a calculator or counts on fingers for answers to simple problems</li> </ul>
Does not use visual imagery effectively	<ul style="list-style-type: none"> <li>• Cannot do math in his or her head and writes down even simple problems</li> <li>• Has difficulty making change</li> </ul>
Has visual-spatial deficits	<ul style="list-style-type: none"> <li>• Confuses math symbols</li> <li>• Misreads numbers</li> <li>• Doesn't interpret graphs or tables accurately</li> <li>• Has trouble maintaining a checkbook</li> </ul>
Becomes confused with math operations, especially multi-step processes	<ul style="list-style-type: none"> <li>• Leaves out steps in math problem-solving or does them in the wrong order</li> <li>• Cannot do long division except with a calculator</li> <li>• Has trouble budgeting</li> </ul>
Has difficulties in language processing that affect the ability to do math problem-solving	<ul style="list-style-type: none"> <li>• Does not translate real-life problems into the appropriate mathematical processes; avoids employment situations that involve this set of skills</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Thinking Difficulties

Although adults with learning disabilities do not have global difficulties in thinking, they may have specific problems in cognitive processing.

Characteristics of Thinking Difficulty	Examples
Has problems with abstract reasoning	<ul style="list-style-type: none"> <li>• Asks to see ideas on paper</li> <li>• Prefers hands-on ways of learning new ideas</li> </ul>
Shows marked rigidity in thinking	<ul style="list-style-type: none"> <li>• Resists new ideas or ways of doing things and may have difficulty adjusting to changes on the job</li> </ul>
Thinking is random, as opposed to orderly, either in logic or chronology	<ul style="list-style-type: none"> <li>• May have good ideas which seem disjointed, unrelated, or out of sequence</li> </ul>
Has difficulty synthesizing ideas	<ul style="list-style-type: none"> <li>• Pays too much attention to detail and misses the big picture or idea when encountering specific situations at home or at work</li> </ul>
Makes impulsive decisions and judgments	<ul style="list-style-type: none"> <li>• “Shoots from the hip” when arriving at conclusions or decisions; does not use a structured approach to weigh options</li> </ul>
Has difficulty generating strategies to acquire/use information and solve problems	<ul style="list-style-type: none"> <li>• Approaches situations without a game plan, acting without a guiding set of principles</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# Other Difficulties

An individual with learning disabilities may have problems in addition to those previously listed.

Characteristics of Other Difficulty	Examples
Has problems with attention, which may be accompanied by hyperactivity, distractibility, or passivity	<ul style="list-style-type: none"> <li>• Does not focus on a task for an appropriate length of time</li> <li>• Cannot seem to get things done</li> <li>• Does better with short tasks</li> </ul>
Displays poor organizational skills	<ul style="list-style-type: none"> <li>• Does not know where to begin tasks or how to proceed</li> <li>• Does not work with time limits, failing to meet deadlines</li> <li>• Workspace and personal space are messy</li> </ul>
Has eye-hand coordination problems	<ul style="list-style-type: none"> <li>• Omits or substitutes elements when copying information from one place to another, such as invoices or schedules</li> </ul>
Demonstrates poor fine motor control, usually accompanied by poor handwriting	<ul style="list-style-type: none"> <li>• Avoids jobs requiring manipulation of small items</li> <li>• Becomes frustrated when putting together toys for children</li> </ul>
Lacks social perception	<ul style="list-style-type: none"> <li>• Stands too close to people when conversing</li> <li>• Does not perceive situations accurately; may laugh when something serious is happening or slap an unreceptive boss on the back in an attempt to be friendly</li> </ul>
Has problems establishing social relationships; problems may be related to spoken language disorders	<ul style="list-style-type: none"> <li>• Does not seem to know how to act and what to say to people in specific social situations and may withdraw from socializing</li> </ul>
Lacks “executive functions,” including self-motivation, self-reliance, self-advocacy, and goal-setting	<ul style="list-style-type: none"> <li>• Demonstrates over-reliance on others for assistance or fails to ask for help when appropriate</li> <li>• Blames external factors on lack of success</li> <li>• Does not set personal goals and work deliberately to achieve them</li> <li>• Expresses helplessness</li> </ul>

Source: *Bridges to Practice – Guidebook 1: Preparing to Serve Adults with Learning Disabilities*

# LD Characteristics

These may occur to varying degrees. When the characteristic impedes a major life activity, screening, diagnosis, and intervention may be necessary.

- Performs similar tasks differently from day to day
- May read well but not write well, or write well but not read well
- May be able to learn information presented in one way, but not another
- Letters and numbers are often written backwards or upside-down
- May get lost easily, either driving and/or in large buildings
- May often misread or miscopy (trouble with forms)
- May have difficulty writing ideas on paper
- May have trouble dialing phone numbers and reading addresses
- May confuse right and left, up and down
- May have difficulty following directions, especially multiple directions
- Avoids group discussions that require detailed answers
- Does not volunteer information that requires telling in sequence
- Blurts out brief comments but avoids longer statement
- Avoids activities that require full attention
- Cannot keep thoughts focused longer than brief periods of time
- Must be called back frequently to finish tasks
- Drifts silently away from task before finishing
- Needs supervision to stay organized
- Continually loses important details or essential facts
- Starts to make “careless” mistakes in math and spelling
- Must have help to tell or describe
- Cannot remember assignments over a period of time
- Keeps forgetting names of familiar people and things
- Cannot keep personal life or affairs organized without help
- Continually loses personal things
- Cannot stay on school or work schedule without supervision
- Cannot remember familiar routines from day to day
- Continually erases and changes what was first written
- Is continually surprised or startled as things seem to change
- Word patterns, spelling patterns, math problems seem to change as person reads or writes
- Does not get the full meaning of what others say
- Interrupts speaker with “Huh?” “What?” “What do you mean?”
- Must hear oral information again, often several times
- Does not keep on listening. Attention drifts or darts away before speaker finishes
- Later insists: “You didn’t tell me” or “I didn’t hear you say it”
- Long pauses while person searches memory for information
- Long time lags before person responds
- Much whispering to self as person tries to remember
- Does not stay on schedule set by teachers or job supervisors
- Does not finish any task without supervision
- Leaves several unfinished projects scattered around
- Thinks work is finished when more is yet to be done
- Wants to quit and do something else
- Cannot carry on small talk in social situations
- Cannot ignore what happens nearby (odors, movement, sounds, any change in environment)
- Cannot leave it alone. Into everything that goes on
- Cannot ignore own body sensations. Must scratch every itch, constantly tugs at clothing, touches everything in reach, sniffs every odor, reacts to every sensation
- Lives impulsively without thinking ahead of consequences
- Speech jumps around without following an organized sequence
- Loses words while talking; stumbles over words

## **F.A.T. City: Frustration, Anxiety Tension Observation Deck**

**In this video, Dr. Richard Lavoie leads a group of parents, educators, psychologists and children through a series of exercises that cause frustration, anxiety and tension...feelings all too familiar to children with learning disabilities. By dramatizing the classroom experience so Vividly, Lavoie lets us see the classroom through the eyes of a struggling child. As you watch the video, respond to the following questions:**

- 1. What are some of the causes of frustration, anxiety and tension that Dr. Richard Lavoie identifies in the video?**
- 2. How have you observed some of these same frustrations, anxieties and tensions exhibited in the adult population you serve?**
- 3. What are some adjustments you could make to your delivery of services that might improve outcomes for persons experiencing similar frustrations, anxieties and tensions?**

# Defining LD

What comes to mind with the term “LD”? Learning differences? Learning disabilities? Dyslexia? Is there a difference between the terms? Which should be used with individuals?

**Write your definition of LD here:**

**Learning Differences** is a broad term used to describe the various manners in which an individual processes information. It relates to a wide variety of differences that can occur across a continuum of learning and development. Difficulties during birth, accidents, or environmental issues can impact learning differences.

**Learning Disabilities** must be clinically diagnosed by a medical professional. As currently defined,

*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 handicapping conditions (for example, sensory impairment, mental retardation, and 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.*

*National Joint Committee on Learning Disabilities, 1994*

### **Other relevant definitions:**

#### **Rehabilitation Services Administration:**

*A specific learning disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding, and/or using concepts through verbal (spoken and written) language or nonverbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence, and emotional maturity.*

#### **Source: "Disability Evaluation Under Social Security" - SSA Publication No. 64-039:**

Disability is the inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment(s) which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months.

ODJFS County Medical Services (CMS) Unit states : A physical or mental impairment must be established by medical evidence consisting of: signs, symptoms and laboratory findings. An applicant's statement of symptoms is not sufficient the medical evidence listed must be provided.

The **Americans with Disabilities Act of 1990 (ADA)** defines an individual with a disability as a person who:

- *has a physical or mental impairment that substantially limits one or more "major life activities";*
- *has a record of such impairment; or*
- *is regarded as having such impairment.*

The federal **National Reporting System** defines a learning disabled adult as:

*Learners with IQ's in the low-average range and above (70+ to any level) who have deficits (related to neurological impairments) in capacity in defined areas related to learning, including dyslexia (reading disability), dysgraphia (writing disability), dyscalculia (math disability), and who have a history of previous educational efforts.*

The definition utilized in the **Individuals with Disabilities Education Act** and by the **Ohio Department of Education Exceptional Children Office** is:

*The term "specific learning disability" means those children who have a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in imperfect ability to listen, think, speak, read, write, spell or do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include a learning problem which is primarily the result of visual, hearing, or motor handicaps, of mental retardation, of emotional disturbance, or of environmental, cultural, or economic disadvantage.*

**International Dyslexia Association:**

*Dyslexia is a specific learning disability that is neurological in origin. It is characterized by difficulties with accurate and/or fluent word recognition and by poor spelling and decoding abilities. These difficulties typically result from a deficit in the phonological component of language that is often unexpected in relation to other cognitive abilities and the provision of effective classroom instruction. Secondary consequences may include problems in reading comprehension and reduced reading experience that can impede growth of vocabulary and background knowledge.*

**ADHD** by Larry B. Silver M.D.

Many Parents and educational professionals confuse ADHD and LD. Is ADHD a form of LD? No. Each is distinctive neurologically-based disorder. Each is recognized and diagnosed differently. Each is treated in a different way. The treatment for ADHD will not correct an LD. The treatment for LD will not help ADHD. Of importance is that about 30 to 40% of individuals with LD will also have ADHD. Thus, if you find one problem it is important to look for the other.

**Attention Deficit Hyperactivity Disorder** is a neurologically-based disorder caused by a deficiency of a specific neurotransmitter (norepinephrine and/or its precursors, dopa and dopamine) in a specific set of brain circuits. Depending on which areas of these circuits are involved, the individual might be hyperactive, distractive, or impulsive. Hyperactivity might involve up and down, fidgety, squirmy, wiggly behavior or might show only as fidgety hand movements. The distractibility might be to sound inputs, visual inputs, and/or to internal thoughts. Impulsivity might involve speaking before thinking, thus interrupting or calling out or might involve acting before thinking.

## Other Special Needs Areas

### Aging

Generally, aging can affect learning. For example, vision, hearing, and memory loss; decreased agility; less muscle tone; and increased use of medication are common factors among an aging population. However, the more serious conditions related to aging that may affect learning more significantly are physical or mental disorders such as Alzheimer's or arthritis.

### Attention Deficit/Hyperactivity Disorder (AD/HD)

Attention-Deficit/Hyperactivity Disorder (AD/HD) is a neurobehavioral disorder that affects an estimated 4 - 12% of the school age population. The Diagnostic and Statistical Manual of Mental Disorders-IV (DSM-IV), published by the American Psychiatric Association, describes three subtypes of AD/HD:

**Inattentive:** can't seem to get focused or stay focused on a task or activity

**Hyperactive - impulsive:** very active and often acts without thinking

**Combined:** inattentive, impulsive, and too active

Some sources have reported that ADHD affects to varying degrees upwards of 30-40% of the general population. This can interfere with an individual's ability to focus for extended periods of time, or to break from focus in order to move forward. For some individuals with ADHD, it is often difficult to filter key information from the distraction of sensory overload. Others may be described as having a "racing-mind," which suggests information is processed so fast that key information for understanding is missed. ADHD may adversely impact social interactions, personal relationships, time management, organization, anxiety levels, patience, and much more.

### Autism

"**Autism**" means a developmental disability significantly affecting verbal and nonverbal communication and social interaction, generally evident before age three, that adversely affects educational performance. Other characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environmental change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a child's education performance is adversely affected primarily because the child has a serious emotional disturbance.

The terms "more advanced autism", "high functioning autism", Asperger's Syndrome and "pervasive developmental disorder" (PDD) refer to individuals within the autism spectrum who do not experience severe intellectual impairments. Although more advanced individuals with autism may score below average on standardized intelligence tests, they often learn at or above normal rates in certain areas. Areas of ability will differ across individuals. For example, an individual may learn academic content easily but have difficulty performing activities of daily living. Or a student who is very good at memorizing may not be able to answer essay-type questions.

from—MAAP Services, Inc.  
<http://maapservices.org/index.html>

**Head Injury**

Head Injury is a temporary or long-term interruption in brain functioning caused by trauma such as stroke, concussion, or accident.

**Developmental Disability**

Developmental Disability is a severe, chronic disability attributable to mental or physical impairment(s), other than an impairment caused solely by mental illness, such as Down's syndrome, epilepsy, cerebral palsy, autism, spina bifida, etc.

**Mental Illness**

Mental Illness refers to a mental impairment, which may include emotional disorders, psychiatric illness, or behavioral problems. Many ABLÉ students may experience depression or other emotional difficulties as a result of their history with their learning challenges.

**Mental Retardation**

Mental Retardation is a cognitive impairment that interferes with major life activities and may affect an individual's capacity for independent living and self-sufficiency. Mental retardation may be mild to severe. It is important for ABLÉ staff to know that many individuals with mental retardation have the ability to learn, set academic goals, make progress toward achieving those goals, and, thus, have the right to be served in ABLÉ programs.

**Physical Disability**

A physical disability refers to a physical, functional limitation that interferes with a person's ability to walk, see, move, lift, or hear. Physical disabilities include blindness, deafness and the inability to use one's limbs.

**Temporary Special Learning Needs**

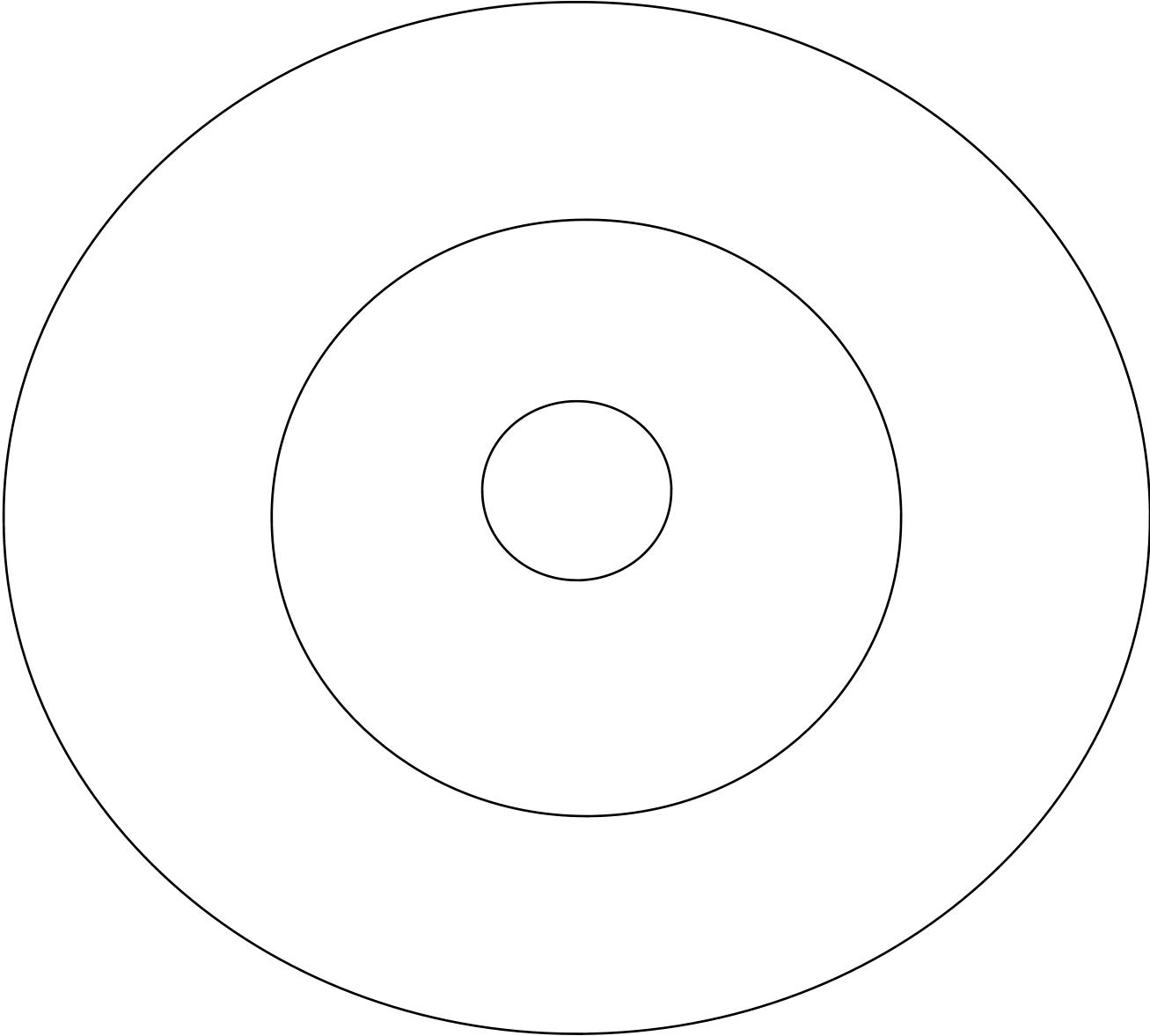
Temporary disabilities, which may entitle a person to accommodations, include injuries such as broken bones as well as non-permanent conditions such as pregnancy or the effects of certain medications or treatments.

# Major Components of a Learning Disabilities Definition

## Learning disabilities:

1. is a general term that refers to a heterogeneous group of disorders.
2. are manifested by significant difficulties in listening, speaking, reading, writing, or math.
3. are part of the person's make-up (they will not go away).
4. are presumed to be a dysfunction of the central nervous system.
5. may be discovered across the life span.
6. may result in problems with behavior, social perceptions and social interactions (but they are NOT the disability).
7. are not the results of other disabilities such as loss of sight, or hearing, or lack of intelligence or lack of schooling.

# Another Look at LD



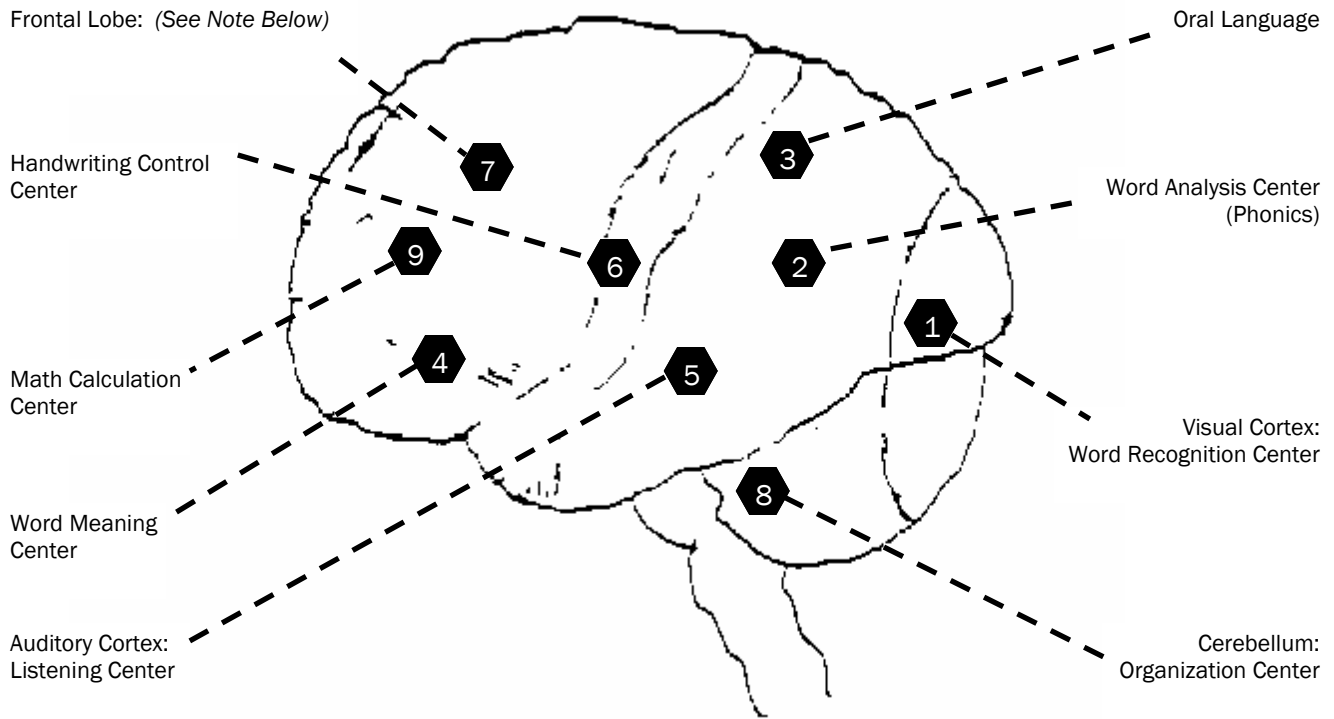
## **Associative Tasks**

- Tasks that require little conscious thought
- More than one associative task can be performed at one time

## **Cognitive Tasks**

- Tasks that require conscious thought and concentration
- Cognitive tasks must be performed alone

# Brain Processing



*Regions of left brain where most academic learning occurs*

**Note:** The frontal lobe is the center of significant metacognitive processing, including:

- Long-term memory of learned information
- Planning
- Organization
- Carrying out tasks
- Critical thinking
- Time management
- Reflection on behavior and learning
- Transfer of learned information

# Learning Disabilities Checklists

## *Individuals with learning differences may experience difficulty:*

- Staying on task
- Keeping their place on the page
- Reversing letters or sequencing
- Understanding what is read
- Recalling what is read
- Learning and remembering basic sight words
- Time sequencing (order things occur)
- Math calculations
- Problem-solving
- Organizational skills
- Forming letters when writing
- Communicating in a written form

## *Individuals With Hearing Problems*

### *Symptoms:*

- Talking loudly
- Asking you to repeat
- Frequently not “remembering” what you said
- Misunderstanding you
- Turning one ear toward you when you talk
- Not hearing you (if not looking at you)

### *If you note a potential hearing problem:*

- Encourage the individual to have a hearing screening
- Speak loudly, but don't yell; enunciate clearly
- Sit on the individual's “good side”
- Make sure the individual is aware when you start to speak
- Ask the individual to repeat things back to you

## *Individuals With Vision Problems*

### *Symptoms:*

- Squinting
- Holding the book too close or far away
- Bending low over the table
- Headache
- Eye fatigue
- Inability to read small print

### *If you note a potential vision problem:*

- Encourage the individual to have a vision screening
- Enlarge print if needed
- Work in a well lit area
- Encourage the individual to position printed materials where it can best be seen

# Building the Case

## Laws and Legal Issues Related to Adults with Learning Disabilities

A learning disability that substantially limits a major life activity is a disability protected by federal and state laws, just as is a physical or sensory disability. Accordingly, the legal rights of qualified adults with learning disabilities become an important consideration for them and for the programs and practitioners serving them. However, in most cases, in order for adults with learning disabilities to assert their rights, they must provide legal documentation of their learning disabilities. This documentation should include a diagnosis by a qualified professional, a description of the disabilities' impact on the individual's functioning, and recommendations for specific accommodations. Adults often also need to learn how to become advocates for their rights. The information provided in this section is an overview of the legal issues surrounding the topic of disabilities. It is intended to provide an awareness of legal terminology and a basis for continuing further investigation and study.

The Americans with Disabilities Act of 1990 (PL 101-336) defines an individual with a disability as a person who:

- has a physical or mental impairment that substantially limits one or more "major life activities";
- has a record of such an impairment; or
- is regarded as having such an impairment.

Specific learning disabilities are examples of mental impairments. Major life activities include functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, **learning**, and working. Thus, an individual who has a learning disability may be entitled to certain rights and responsibilities. Legal protections exist for individuals with disabilities to ensure equal opportunity. Because rights and responsibilities are mandated, equal opportunity is guaranteed and not just expected.

### Laws Protecting Adults with Learning Disabilities

Much of the progress made in assuring civil rights protections for adults with learning disabilities has been achieved by guarantees provided for in federal law. The legal rights concerning learning disabilities are found in 3 important laws: Individuals with Disabilities Education Act (IDEA) of 1997 (PL 105-17, formerly PL 94-142), the Americans with Disabilities Act of 1990, as well as in Section 504 of the Rehabilitation Act of 1973 (PL 93-112).

## Individuals with Disabilities Education Act (IDEA) of 1997 (PL 105-17)

IDEA is an education law that applies to young people with disabilities from birth to 21 years of age (defined as up to the 22nd birthday) who require special education and related services. The IDEA of 1997 has recently been reauthorized and is now referred to as the IDEA of 2004. The Individuals with Disabilities Education Improvement Act of 2004 (IDEA) aligns IDEA closely to the No Child Left Behind Act (NCLB), helping to ensure equity, accountability and excellence in education for children with disabilities. While regulations implementing the IDEA 2004 are being prepared, the regulations implementing the 1997 law remain in effect, to the extent that they are consistent with the IDEA 2004 statute. The IDEA Amendments of 1997 (IDEA '97) represent a major milestone in the education of children with disabilities -- the first major revision to the Act in more than 23 years (since the enactment of P.L. 94-142, the Education of all Handicapped Children Act of 1975).

### **BASIC RIGHTS RETAINED.**

IDEA '97 retains (and strengthens) the basic rights and protections under IDEA -- including:

- the right to a free appropriate public education (FAPE) for all children with disabilities, including children suspended or expelled from school; and
- the procedural safeguards rights for these children and their parents.

### **EMPHASIS ON IMPROVING RESULTS.**

IDEA '97 provides a new and heightened emphasis on improving educational results for children with disabilities, including provisions which ensure that these children

- have meaningful access to the general curriculum through improvements to the IEP, and
- are included in general education reform efforts related to accountability and high expectations, and that focus on improved teaching and learning.

*from [http://www.cec.sped.org/law\\_res/doc/law/briefs/brief01.php](http://www.cec.sped.org/law_res/doc/law/briefs/brief01.php)*

The IDEA requires more than accommodation and non-discrimination. It requires that special education and related services be provided "at public expense, under public supervision and direction, and without charge," in accordance with "the standards of the State educational agency," and "in conformity with the individualized education program required under" the IDEA. Federal funding defrays part of these expenses, which makes the IDEA unique among civil rights legislation.

By 1995-96 over 5 million students were being served under IDEA. More than half of these students had a Specific Learning Disability.

*from Latham, P. and Latham, P. 2000. Learning Disabilities and the Law. JKL Communications.*

The Individuals with Disabilities Education Act Amendments of 1997, enacted on a strong bipartisan basis, significantly improved the educational opportunities for children with disabilities. The IDEA 97 focuses on teaching and learning, and established high expectations for disabled children to achieve real educational results. The focus of IDEA changed from one that merely provided disabled children access to an education to one that improves results for all children in our education system. The IDEA 97 strengthens the role of parents in educational planning and decision making on behalf of their children. It focuses the student educational planning process on promoting meaningful access to the general curriculum. The new law also reduces the burden of unnecessary paperwork for teachers and school administrators. All of this was accomplished without compromising the Clinton/Gore Administration's fundamental principle of protecting the basic rights of children with disabilities to a free appropriate public education.

## Individuals with Disabilities Education Act (IDEA) of 1997 (PL 105-17)

[http://www.cec.sped.org/law\\_res/doc/law/addl\\_material/index.php](http://www.cec.sped.org/law_res/doc/law/addl_material/index.php)

The statute includes specific requirements about eligibility for services, components of the Individualized Education Plan (IEP), IEP team members, review of the child's IEP, prior written notice, members of the eligibility and IEP teams, and comprehensive procedural requirements related to disputes and complaints. Under IDEA, the term "free appropriate public education (FAPE)" means that the child will receive clear educational benefit. The IDEA child may receive remediation where the child is taught how to speak, read, write, spell, and do arithmetic. The IDEA child has the right to FAPE, even if expelled from school (the Section 504 child does not have this protection). Older children must have transition plans to help them secure more education or enter the world of work.

The sections pertaining to school-age students also apply to young adults under the age of 22 who have not obtained a regular high school diploma. All education programs that receive federal funds, which includes all public schools, must adhere to the provisions of the law. NOTE: Parochial schools are not bound to this law.

*from Wright, P. and Wright, P. 1999. Wrightslaw: Special Education Law. Harbor House Law Press.*

For more information on to IDEA of 2004, visit the following websites:

<http://www.ed.gov/policy/speced/guid/idea/idea2004.html>

<http://thomas.loc.gov/cgi-bin/query/z?c108:h.1350.enr>:

## What does the IDEA mean for programs?

Persons who have not achieved a high school diploma and who are under the age of 22 are protected under IDEA, meaning they are entitled to services related to identification and accommodation of learning disabilities at the expense of the public school district within which they reside.

Over the past four decades, special education research has provided practical answers to questions about how best to educate infants, toddlers, children, youth, and adults with disabilities. These accomplishments have translated into benefits for all our citizens.

### IDEA Accomplishments:

- Over 1 million children, many of whom would have been placed in separate schools and institutions 25 years ago, are being educated in neighborhood schools, saving an average of \$10,000 per child per year.
- Nine percent more children with disabilities graduated from high school between 1984 and 1992.
- Youth served under IDEA are employed twice as often as their predecessors, older American with similar disabilities who were not served under the law.
- Nearly half of all adults with disabilities have successfully completed course-work in colleges and universities.
- Although less than 1% of the annual expenditures to educate children with disabilities is spent on research and development to improve practice, these dollars have had exponential results. They support programs that allow children with disabilities to become independent learners and self-supporting adults.
- New knowledge has resulted in technologies that have enriched all our lives. For example, the Kurtzweil Machine, originally developed for taking written text and translating it into Braille and speech was the forerunner of the fax machine. Captioning, an aid for the deaf, has become a boon for older Americans with poor hearing and for those who are learning to read and speak English.

**For more information on to IDEA, visit the following website:**

<http://www.ed.gov/offices/OSERS/Policy/IDEA/index>

## **Rehabilitation Act of 1973 (PL 93-112), Section 504**

Section 504 of the Rehabilitation Act states that “No individual with a disability in the United States shall, solely by reason of his or her disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance or any program or activity conducted by an Executive agency.” A “program or activity” is defined as including all of the operations of a local educational agency, system of vocational education, or other school system. Section 504 applies to entities that receive federal funds.

Under this law, individuals with disabilities are defined as persons with a physical or mental impairment, which substantially limits one or more major life activities. People who have a history of, or who are regarded as having a physical or mental impairment that substantially limits one or more major life activities, are also covered. Major life activities include caring for one's self, walking, seeing, hearing, speaking, breathing, working, performing manual tasks, and learning.

For purposes of employment, qualified individuals with disabilities are persons who, with reasonable accommodation, can perform the essential functions of the job for which they have applied or have been hired to perform. (Complaints alleging employment discrimination on the basis of disability against a single individual will be referred to the U. S. Equal Employment Opportunity Commission for processing.) Reasonable accommodation means an employer is required to take reasonable steps to accommodate a person's disability unless it would cause the employer undue hardship.

### **What does The Rehabilitation Act of 1973 - Section 504 mean for programs?**

Persons are protected under Section 504 of the Rehabilitation Act, meaning they cannot be excluded from participation in program services or discriminated against solely by reason of a disability.

Under the provisions of Section 504, programs may not:

- limit the number of students with disabilities;
- make eligibility determinations based on whether or not a student is disabled;
- use tests or criteria that inadequately measure the academic qualifications of disabled students because special provisions were not made for them;
- exclude a qualified student with a disability from federally-funded educational services;
- counsel a student with a disability toward a more restrictive course of study or career based solely on their disability;
- measure student achievement using modes that adversely discriminate against a student with a disability;
- establish rules and policies that may adversely affect participation of students with disabilities.

### **Section 504 v. IDEA:**

If a person has a disability that adversely affects educational performance, then that person is covered under IDEA (provided they are under the age of 22 and do not yet have a high school diploma). If the person has a disability, that does not adversely affect educational performance, the person is usually covered under Section 504, but is not covered under IDEA. Under Section 504, a handicapped person in a wheelchair will not be discriminated against and will receive access to and through the school system. However, under Section 504 there are not guarantees that the person will receive an education from which he or she benefits. The person simply has access to the same education that all persons receive.

Now assume the person in the wheelchair also has a neurological disability which adversely affects the person's ability to learn. Under IDEA, the person with a disability that "adversely affects his educational performance" is entitled to an education that is individually designed to meet the person's special needs and from which the person receives educational benefit.

Therefore, a person protected under Section 504 of the Rehabilitation Act is entitled only access to participation, whereas the person protected under IDEA is entitled to specialized services as well as access to participation (*from Wright, P and Wright P.1999. Wrightslaw: Special Education Law. Harbor House Law Press*).

For more information on Section 504 of the Rehabilitation Act, visit the following websites:

<http://www.os.dhhs.gov/ocr/504.html>

<http://www.spot.pcc.edu/osd/504.htm>

<http://www.504idea.org/504resources.html>

## Americans with Disabilities Act (ADA) (PL 101-336)

The Americans with Disabilities Act (ADA, PL 101-336) is a civil rights law that was signed by President George Bush in July of 1990. It is a comprehensive piece of legislation that promotes the rights of people with disabilities. It is similar to, yet more extensive than, Section 504 of the Rehabilitation Act of 1973, which prevents discrimination against persons with disabilities by organizations that receive federal funds.

This rule prohibits discrimination on the basis of disability by public entities. Subtitle A protects qualified individuals with disabilities from discrimination on the basis of disability in the services, programs, or activities of all State and local governments. It extends the prohibition of discrimination in federally assisted programs established by section 504 of the Rehabilitation Act of 1973 to all activities of State and local governments, including those that do not receive Federal financial assistance, and incorporates specific prohibitions of discrimination on the basis of disability from titles I, III, and V of the Americans with Disabilities Act.

This rule, therefore, adopts the general prohibitions of discrimination established under section 504, as well as the requirements for making programs accessible to individuals with disabilities and for providing equally effective communications. It also sets forth standards for what constitutes discrimination on the basis of mental or physical disability, provides a definition of disability and a qualified individual with a disability, and establishes a complaint mechanism for resolving allegations of discrimination.

ADA requires that “No qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity or be subjected to discrimination by any such entity.”

The ADA is divided into five sections (known as “titles”):

- Title I - prohibits employment discrimination.
- Title II - deals with discrimination in public settings. Title II mandates that a public entity, including its educational programs, shall make reasonable modifications to policies, practices, or procedures when modifications are necessary to avoid discrimination on the basis of a disability; and also requires the provision of accessible facilities and auxiliary aids and services by public programs.
- Title III generally applies to private schools or other places of education, but does not apply to religiously controlled educational entities.
- Title III - protects the rights of persons with disabilities in privately operated settings, such as private schools or other places of education, but does not apply to religiously controlled educational entities.
- Title IV - requires telephone companies to install telecommunications relay services for persons with speech and hearing impairments.
- Title V - includes a number of miscellaneous provisions.

Under the ADA, when providing services, programs must offer accommodations that will assist adults with learning disabilities to have an equal opportunity to participate in the program (equal access). Adults with disabilities have the right to not be discriminated against when participating in programs. Adults with disabilities also have a right to choose whether to disclose their disability status. If adults expect disability-related accommodations, they have the responsibility to make their disabilities known, to provide appropriate documentation, and to request specific accommodations.

Programs must provide “reasonable accommodations” to qualified persons with disabilities. Reasonable accommodations (sometimes called auxiliary aids and services) are accommodations that make the program accessible to the individual with a disability. Such accommodations must be afforded to a qualified individual with a disability unless the service provider can demonstrate that the accommodation would impose undue hardship on the programs, or constitute a substantial alteration in the nature of the program.

For more information on The Americans with Disabilities Act of 1990, visit the following websites:

<http://www.ada.gov>

<http://www.usdoj.gov/crt/ada/adahom1.htm>

<http://www.usdoj.gov/crt/ada/pubs/ada.txt>

<http://www.dol.gov/esa/regs/statutes/ofccp/ada.htm>

<http://www.eeoc.gov/facts/fs-ada.html>

<http://www.ada-ohio.org/>

[http://www.walnutpark.info/~special/special\\_education\\_laws/page1.htm](http://www.walnutpark.info/~special/special_education_laws/page1.htm)

For a complete Guide to Disability Rights Law, visit: <http://www.usdoj.gov/crt/ada/cguide.htm>

## Massachusetts Complaint Filed Through Health & Human Services' Office of Civil Rights

In January 2001, the HHS Office of Civil Rights ruled in favor of two TANF (Temporary Assistance to Needy Families) clients who were sanctioned from benefits due to non-compliance of their self-sufficiency plans and who filed complaints alleging discrimination based on having a learning disability. One of the complainants had a diagnosed learning disability, which was disclosed at intake, and the other did not disclose a learning disability. Both were low-literate adults, who were found to need basic educational services, but who were not accommodated for learning disabilities during implementation of their self-sufficiency plans.

The Office of Civil Rights found that the complainants civil rights were violated based on discrimination by:

- Failing to provide an opportunity to participate in or benefit from a program that is equal to the opportunity provided to those without disabilities.
- Providing services that are not as effective in affording equal level of achievement as those without disabilities.
- Limiting the rights, privileges, advantages, and opportunities enjoyed by non-disabled beneficiaries.
- Utilizing methods of administration that had the effect of subjecting complainants to discrimination on the basis of a disability.
- Failing to make reasonable modifications in policies, practices, and procedures that were necessary to avoid disability-based discrimination.

This case is particularly relevant programs because the Office of Civil Rights made several applicable statements in their ruling:

- "The program took no documented steps to determine if a learning disability existed, or based on having a learning disability, attempted to determine what type of accommodations might be needed to make the program more successful."
- "There were no documented regular assessment periods to determine if other programming options should be tried in order to stimulate better success."
- "Documented steps should have been taken related to learning disabilities based solely on the fact of complainants' low basic skills and disclosed life histories."
- "There were no written policies, procedures, or practices designed to determine how the agency would serve clients with learning disabilities."
- "Nothing in our investigation leads to the conclusion that making reasonable modifications to the program to facilitate equal access for those who are disabled would result in undue hardship or a fundamental alteration of the program."

## OWC/PRC GUIDANCE LETTER NO. 50

TO: Directors, County Departments of Job and Family Services  
Directors, County Public Children Services Agencies  
Directors, Child Support Enforcement Agencies

FROM: Tom Hayes, Director

DATE: January 14, 2003

SUBJECT: **ADDRESSING EMPLOYMENT BARRIERS**

The purpose of this guidance letter and the related attachment is to provide information that counties may find helpful when developing strategies to assist customers who have barriers to employment. This guidance letter also transmits information about Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act (ADA) of 1990 and the effect of these Acts on TANF programs.

### **Statutory Requirement**

Ohio Revised Code Section 5107.41 requires the county department of job and family services, as soon as possible after a family submits an application for cash assistance, to schedule and conduct an appraisal of each member of the assistance group who is an adult or minor head of household. As a result of this appraisal, a plan is developed for the family to achieve self-sufficiency through employment.

Pursuant to Ohio Revised Code Section 5107.70, a county department of job and family services, at times it determines, may conduct assessments to determine whether any member of the assistance group is in need of assistance or services. This section of the revised code requires that, at the first assessment, the county must explore whether any member of the assistance group is the victim of domestic violence, including child abuse. This section also says that a county may explore whether any member of the assistance group has a substance abuse problem and whether there are any other circumstances that may limit an assistance group member's employability.

## OWC/PRC GUIDANCE LETTER NO. 50 (continued)

### Americans with Disabilities Act (ADA)

On January 19, 2001, the Department of Health and Human Services (HHS) issued policy guidance entitled “Prohibition Against Discrimination on the Basis of Disability in the Administration of TANF”. This guidance makes it clear that TANF agencies cannot discriminate against individuals with disabilities in the ways in which they screen, determine eligibility, or deliver services.

ADA requires public agencies to evaluate whether their policies and procedures are consistent with the Act. This includes evaluating whether application procedures, screening, assessment, job search, and work assignments discriminate against those with disabilities. Agencies are required to make reasonable modifications to avoid discrimination, unless such modifications would fundamentally alter the nature of the program or service.

Two concepts are central to complying with ADA. These are 1) *individualized treatment* and 2) *effective and meaningful opportunity*. Individualized treatment means that individuals with disabilities are treated on a case-by-case basis. Services are provided based on facts and objective evidence, not on generalizations and stereotypes. Effective and meaningful opportunity means that individuals with disabilities are afforded the opportunity to benefit from TANF programs. The TANF agency must offer programs to individuals with disabilities that are as effective as the programs that are offered to those who do not have disabilities.

Guidance provided by the Department of Health and Human Services requires that appraisals and assessments include a determination of each person’s ability to meet program requirements. The guidance recommends that workers screen for the potential presence of a disability. If there is an indication that someone has a disability that effects their ability to complete or benefit from a program assignment, the agency must provide the individual an opportunity for a more comprehensive assessment. This assessment is needed to better determine the nature and extent of the disability and the accommodations that may be needed.

### **If there is suspicion of a disability, programs are obligated to determine if there is one.**

Requiring an individual to do job search before application and before assessing for suspected disabilities is inconsistent with the ADA. Inadequate assistance with application or other program procedures for those with known disabilities is also inconsistent with the legislation.

Executive Order 13078 calls on programs that work with public assistance recipients to incorporate reasonable accommodations into education, job training and employment

## OWC/PRC GUIDANCE LETTER NO. 50 (continued)

settings. For example, an individual with a learning disability may need specialized instruction in reading and writing. Agencies may work with employers to develop job accommodations. Job accommodations may include such things as job coaching, flexible scheduling, restructuring job and work hours, providing written instructions, providing specialized supervision, getting appropriate educational services, making transportation accommodations, and modifying the work environment.

Research studies in Washington State indicate that a very high percentage of TANF customers have a learning disability. Other national research studies indicate that many barriers that adults face are a direct result of having learning disabilities. A lawsuit in Massachusetts involving services to those with learning disabilities resulted in a finding against the Massachusetts Department of Transitional Assistance (DTA). The Office for Civil Rights concluded that DTA discriminated against individuals with learning disabilities because 1) there were no appropriate employment services for customers with learning disabilities and 2) the department failed to make reasonable accommodations in its policies and practices.

The Department of Health and Human Services suggests that states take a proactive approach regarding services to those who have disabilities. The attachment discusses ways to identify the presence of various disabilities and provides strategies for working with those who have barriers to employment.

If you have any questions, please contact your Work Activity Policy Coordinator at [WACTA@ODJFS.state.oh.us](mailto:WACTA@ODJFS.state.oh.us) or Shanna Bagner, Bureau of Civil Rights at (614) 644-2703.

TH:bn

Attachment

cc: Deputy Directors  
Joel Potts  
China Widener  
Jane Frye  
Joel Rabb  
Fayette Moore  
Pam Parkes

**Summary of Policy Guidance**  
**Prohibition Against Discrimination on the Basis of Disability in the Administration of TANF**  
**(Temporary Assistance for Needy Families)**  
**Department of Health and Human Services Office for Civil Rights**

The United States Department of Health and Human Services (HHS) is issuing policy guidance on the prohibition of discrimination on the basis of disability in Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act of 1990 in the administration of TANF programs.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) created Temporary Assistance for Needy Families (TANF), and repealed the Aid to Families with Dependent Children Program (AFDC), the Job Opportunities and Basic Skills Training program (JOBS) and the Emergency Assistance program (EA). Both the Americans with Disabilities Act of 1990 (ADA) and the Rehabilitation Act of 1973 apply to TANF programs. See 42 U.S.C. § 608(c) (Federal TANF statute reiterating ADA/Section 504 application to TANF programs). Title II of the ADA provides that no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs or activities of a public entity, or be subjected to discrimination by any such entity. 42 U.S.C. § 12131. Section 504 of the Rehabilitation Act of 1973 prohibits the same discrimination by entities that receive Federal financial assistance. 29 U.S.C. § 794.

On August 27, 1999, the HHS Office for Civil Rights (OCR) issued two-part guidance on civil rights laws and welfare reform.<sup>(1)</sup> These materials explain how Federal civil rights laws apply to certain aspects of welfare reform. The purpose of the present guidance is to respond to a myriad of additional questions that have been raised by State agencies, counties, service providers, and persons with disabilities regarding the obligations to adopt methods for administering welfare programs to ensure equal opportunity for persons with disabilities in all aspects of a TANF program, including applications, assessments, work program activities, sanctions, and time limits. The guidance also is necessary because the Department has indicated that States may be subject to penalties if audits show that they "over-sanction," i.e., impose sanctions on individuals when sanctions are inappropriate.<sup>(2)</sup>

This policy guidance clarifies the obligations Title II of the ADA and Section 504 impose on State and local government entities, and on recipients of Federal financial assistance from HHS involved in TANF activities, in fulfilling their responsibilities pursuant to Title II of the ADA and Section 504 of the Rehabilitation Act.<sup>(3)</sup> Specifically, this guidance identifies essential requirements of an ADA-504 compliant TANF program that the Office for Civil Rights will apply in its compliance reviews and/or investigations of complaints of discrimination on the basis of disability in TANF programs. These requirements are not new; rather, they reiterate ADA Title II and Section 504 principles that OCR has been enforcing for many years.

The guidance also sets out "promising practices" - policies, procedures and other recommended steps that recipients and covered entities can take to ensure meaningful access to TANF programs by people with disabilities. These "promising practice" provisions are not mandatory requirements; they are one way for a TANF agency (as noted in footnote 3, this guidance uses the term "TANF agency" to refer to all covered entities under Section 504 and State and local governmental entities under Title II of the ADA) to meet obligations to ensure equal access through the provision of appropriate services, modify policies, practices and procedures to provide such access, unless doing so would result in a fundamental alteration to the program, and to adopt non-discriminatory methods of administration. Descriptions of possible approaches that comply with Section 504 and the ADA in this guidance should not be construed to preclude States from devising alternative approaches to meet these legal requirements.

OCR has provided substantial technical assistance for more than 20 years to recipients and covered entities seeking to ensure that people with disabilities can meaningfully access social service programs. This guidance applies that experience to the relatively new challenges presented in the complex context of administering TANF programs, and is consistent with OCR's commitment to seeking voluntary compliance by recipients and covered entities and its commitment to providing technical assistance. OCR will continue to be available to provide such assistance.

To visit entire text of this Policy Guidance, visit: <http://www.hhs.gov/ocr/prohibition.html>

# Rights and Responsibilities

## What are the rights and responsibilities of the Programs?

Programs that provide services that enroll adults with documented disabilities are **responsible** for ensuring that these services are accessible, and for providing reasonable accommodations. Programs that provide services have the **right** to identify and establish the abilities, skills, and competencies fundamental to its programs and to evaluate each person's performance on this basis.

Examples of accommodations that programs may provide for adults with learning disabilities, depending on the particular disability and need for accommodation, include, but are not limited to:

- extended time for completing tests;
- books on tape;
- reduced visual or auditory distractions, such as a private room for tests;
- auxiliary aids and assistive technology, such as calculators, highlighters, and computers;
- large-print materials;
- alternative format for instructions, such as audiotaped instructions in addition to printed instructions for taking a test; and
- note takers.

## What are the rights and responsibilities of persons with disabilities?

- have the **right** to participate in programs without discrimination;
- have the **right** to reasonable accommodations;
- have the **responsibility** to identify themselves as having a disability and request specific accommodations in a timely fashion; and
- have the **responsibility** to provide documentation concerning their disabilities and the need for accommodations.

# What is Reasonable?

**Reasonable accommodations that programs must provide to persons with disabilities on a case by case basis include, but are not limited to, the following:**

- Making existing physical facilities readily accessible to and usable by individuals with disabilities;
- Restructuring a task;
- Acquiring or modifying equipment;
- Modifying examinations, materials, and policies; and
- Providing qualified readers/interpreters and other similar modifications.

**Examples of accommodations that programs may provide for persons with learning disabilities on a case by case basis include, but are not limited to:**

- Extended time for completing assignments, taking tests, and other required activities;
- Books on tape;
- Reduced visual or auditory distractions;
- Auxiliary aids and assistive technology, such as calculators, highlighters, computers;
- Large print materials;
- Memory aids or cue cards;
- Sound-suppression earphones or earplugs for auditory distractions;
- Alternative format for instructions; and
- Note-takers

— Compiled from Bridges to Practice training; Ohio Department of Education Program Quality Enhancement Grants—LD II training; Americans with Disabilities Act

## **“Undue Hardship”**

There are limitations on the obligation to make reasonable accommodation. The individual with a disability requiring the accommodation must be otherwise qualified, and the disability must be known to the employer/agency. The employer/agency is not required to make an accommodation if it would impose an “undue hardship” on the operation of the business/agency. “Undue hardship” is defined as an ‘action requiring significant difficulty or expense,’ when considering a number of factors such as the size, resources and nature of the agency. When the facility making the accommodation is part of a larger entity, the structure and resources of the overall entity would be considered, as would the financial and administrative relationship of the facility to the larger entity.

- U.S Equal Employment Opportunity Commission,  
U.S. Dept of Justice, Civil Rights Division

# GED Accommodations

The Chief Examiner may permit use of the following adaptations and devices without prior approval from the GED Administrator, GED Testing Service:

- Use of large print
- Use of a paper or non-paper glide (non-ruled) to facilitate reading
- Use of colored overlays to facilitate reading
- Seating near natural light
- Use of graph paper for math
- Drinking of soda or water
- Taking individual test sections on different days (up to 6 weeks)
- Use of a manipulative for concentration and nerve steadying
- Use of ear plugs
- Use of a seat cushion
- Use of magnifying strips
- Temporary adhesive notes (e.g. Post-It ® Notes) with spatial directions (top, bottom, left, right)

## Prior approval required from the GED Testing Office

- Extended time (specify time needed—1.5x, 2x)
- Large print with extended time (specify time)
- Audiocassette
- Private room
- Braille
- Talking calculator
- Printed test instructions
- Off-site testing
- Supervised frequent breaks (specify time on and off test)
- Scribe

Note: This is not a complete list of available accommodations. Please call the GED Testing Office for more information.

## Screening and Diagnosis

# Screening for Learning Disabilities

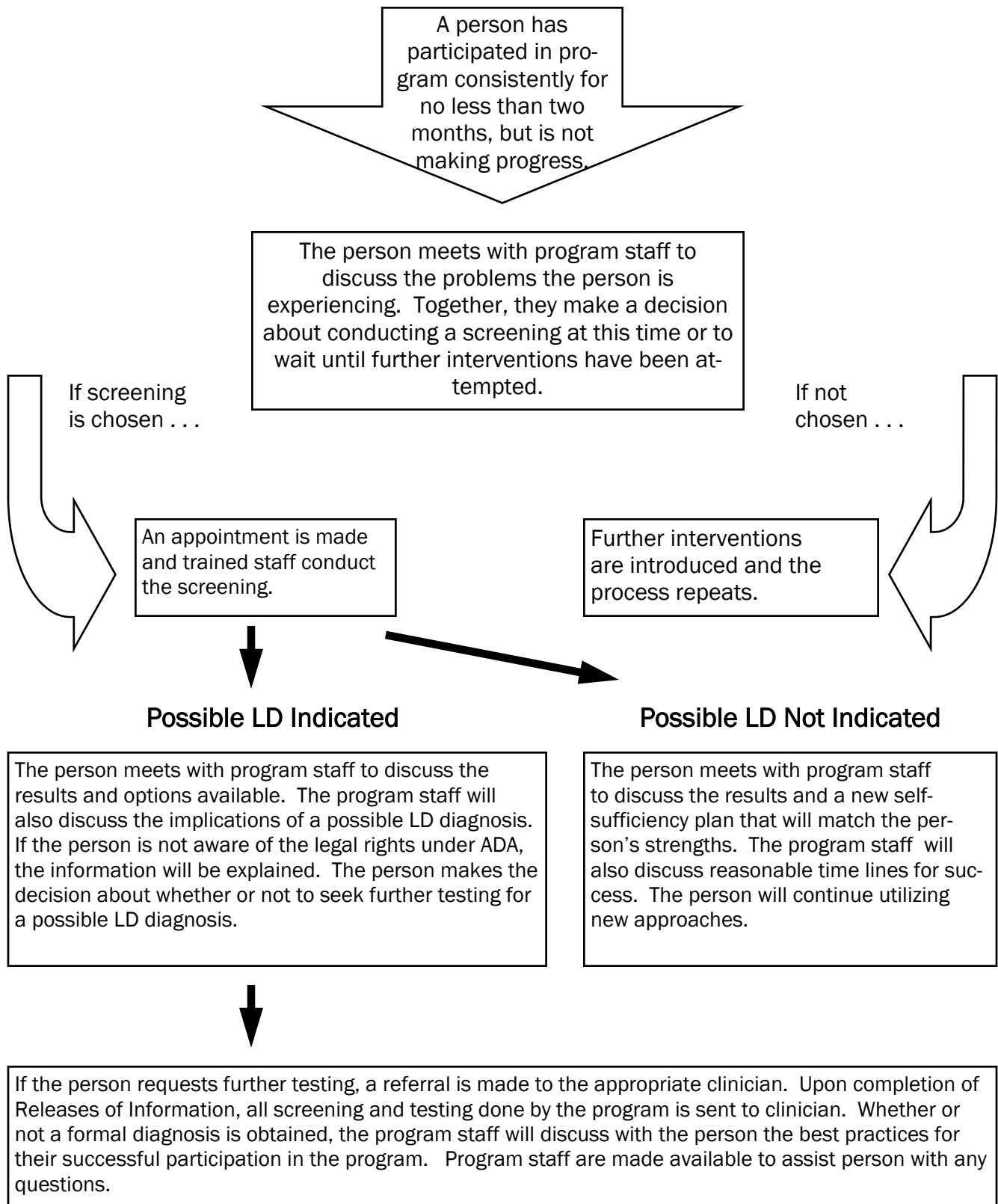
## A Program Decision

Programs have a choice whether to screen all or only selected individuals for learning disabilities. If choosing to screen all students, the program should include this assessment in its Orientation or Intake processes. If choosing to only screen selected individuals, a program policy must be developed with selection criteria and guidelines to ensure fairness to all individuals.

## Points to Consider When Screening

- Does this person have difficulty in learning new material and exhibit some of the characteristics commonly thought to be those of a person with LD?
- Have several interventions been attempted and despite excellent support, the person does not make progress or succeed at their self-sufficiency plan at a rate considered normal for most individuals?
- Has the program in which the person is participating determined a screening device appropriate for the program and for the clients participating within the program? Can the staff of the program be trained in a relatively short period of time?
- Can the screening device be administered to an individual in a short amount of time? What type of information is the screening instrument designed to provide?
- If the screening device indicates the individual has many characteristics of a learning disability, how are the results translated into written form?
- How will the person who administers the screening device be trained to discuss the results with the individual and explain the pros and cons of a legal diagnosis of a learning disability?
- If the results indicate the likelihood of a learning disability, how will a referral to another testing program be made if the individual wishes to pursue further testing?
- How will the program maintain a list of agencies to which the individual can be referred for additional assistance and legal guidance?
- How will the screening results be kept confidential? Remembering, the program must not assume that the person has a learning disability, based on the results of the screening.
- How will the staff be encouraged to utilize techniques that are structured as though the client has a legal diagnosis so that the client's time is not wasted should a diagnosis be made in the future?
- How will all staff be trained in the use of best practices for individuals with inclinations toward and diagnosed learning disabilities?

# A Sample Program Plan for Referring a Person for Screening



## Delivering Screening Results

List points that you feel are important to remember about delivering screening results to individuals:

# A Diagnosis for Learning Disabilities

## A Professional Collaboration

Diagnostic testing for learning disabilities must be performed by a trained medical professional or clinician. When developing a plan for serving individuals with special needs, the program should seek out and maintain collaborations with trained professionals to assist the person with their learning needs. *(For more information on professionals in your area, please visit the Psychologist Network link on the Central/Southeast ABLE Resource Center website—[www.able-ohiou.org](http://www.able-ohiou.org))*

## Points to Consider When Referring for Diagnosis

- A person has difficulty in learning new material and exhibits some of the characteristics commonly thought to be those of a person with LD.
- Several interventions have been attempted, but the person does not succeed at a rate considered normal for most people.
- The local program has typically screened the person for learning difficulties or has evidence of academic discrepancies from standardized testing.
- Psychological testing is done to establish the person's intellectual capacity. The testing includes tests of verbal ability and performance measures. The tests should include enough items to measure intellectual capacity in a number of ways. The IQ is used in a formula to estimate the level of achievement which could be expected of the person. This is based on the number of years of schooling which have been experienced by the learner. The expectancy level is compared to the achievement level by testing the person and gaining information through performance on multiple tests of reading, writing, mathematics, and, sometimes, other academic areas.
- Tests of ability to reproduce figures, and tests that measure the person's ability to determine relationships among shapes or familiar items are sometimes used. The number of assessment tools used, and the information produced for use in diagnosis, will be dependent on the person doing the testing.
- There is not a strict model that can be followed. The clinician must use the results of one testing instrument to decide which test to use next. The testing ends when the administrator feels enough information has been gathered to make an accurate diagnosis. Just as medical doctors have to utilize a series of tests and then use their best judgment in making a diagnosis, so it is with learning disabilities. No one test can be used to make the decision. Other factors in the person's life must also be considered, and all the evidence that can be reasonably gathered must be utilized.
- If the tests indicate a two-year or more discrepancy between the person's intellectual ability and the person's performance on tests and learning tasks, the person may be diagnosed as learning disabled.
- Once a diagnosis of a learning disability is made by a clinician recognized by the designated authorities, the person with a learning disability is eligible for accommodations under the Americans with Disabilities Act.

# Requested Elements of Basic Psychological or Neuropsychological Evaluation and Report

## I. Psychological Test Results

- A. Interpretation of Results from the following tests (administered or interpreted from previous testing)
  - 1. Intelligence: Weschler Adult Intelligence Scale (WAIS-R or WAIS III); Weschler Intelligence Scale for Children (WISC-III); or Stanford-Binet IV
  - 2. Achievement: Full Woodcock-Johnson Psychoeducational Battery-Revised (Test of Achievement) or Weschler Individual Achievement Test (WIAT)
- B. Observations of Evaluator (processing time, distractibility, motivation, etc.)
- C. In the case of ADHD, diagnostic evidence such as developmental history that defines symptom onset, specific computerized tests of attention such as the TOVA, Gordon Diagnostic Battery or the CPT.
- D. Results from Additional Evaluations Performed (i.e., Bender Gestalt, ADHD diagnostic criteria, etc. as needed to verify auditory processing deficits, etc.)

## II. Need for Disability Accommodations based on described relevant of personal, academic, family or medical history (particularly in case of psychological impairments causing disabling anxiety, or needed accommodations due to the effects of prescribed medications)

## III. Description of the Types and Patterns of Disabilities, and the Amount and Significance of Discrepancy between:

- A. IQ potential and achievement test proficiency
- B. Verbal IQ and Performance IQ scores
- C. Disparity between individual subtests and mean score or among subtest groups

## IV. Recommendations for Testing Accommodations

- A. Specifically for the GED
- B. In general for other testing situations (i.e., for continuing education or workplace certification)

## V. Recommendations for Instructional Accommodations in Continuing Education/Training Situations

- A. Best methods of instruction (based on the student's learning strengths)
- B. Instructional methods to be avoided (based on the student's learning difficulties)

## VI. Recommendations for Job Accommodations (If employed or in vocational training)

- A. Types of tasks at which the individual is likely to be successful (based on the student's learning strengths)
- B. Types of job accommodations recommended (based on the student's learning difficulties)

## VII. Completed Accommodation Form(s)

- A. For GED accommodations (The evaluator and the individual must sign and complete the appropriate form.
  - 1. GED Form L-15: *Accommodation Request for Learning Disabilities and/or Attention Deficit/Hyperactivity Disorder*
  - 2. GED Form SA-001: *Request for Special Accommodations in GED Test Administration for Candidates with Physical Disabilities*
- B. *Application for Service* from Recording for the Blind and Dyslexic (if student has a reading disorder and could benefit from using study materials on audiocassette)

**For additional guidance with this process, the certifying professional may call the C/SE ABLE Resource Center at 1-800-753-1519.**

# SAMPLE Release Forms

- **Special Needs Screening Consent or Waiver Form:**  
Students will either consent to be screened for learning disabilities or they can waive the screening. If you screen all students you do NOT need to get written consent to screen students for LD, but you should get a signature if they waive the screening.
- **Special Needs Waiver of Referral Information**  
After completing a screening for learning disabilities, you will need to discuss those results with the student. In some cases, further testing is recommended. You can offer referral information to the student, but they can refuse that referral information.
- **Special Needs Release of Information**  
This form should be used to provide requested information to another agency or individual. When referring a student for diagnosis, most medical professionals or clinicians will request program information regarding the student in question.

*As with all files, personal and educational information must be kept confidential.*

# **SAMPLE**

## **SPECIAL NEEDS SCREENING CONSENT or WAIVER FORM**

**Please complete the appropriate section(s) below:**

I, (print name)

\_\_\_\_\_

- agree **or**  decline to be administered the (print name of instrument)  
\_\_\_\_\_ to determine the probability of a learning disability
- agree **or**  decline to be administered the (print name of instrument)  
\_\_\_\_\_ to determine the probability of ADD or ADHD
- agree **or**  decline to be administered a vision and/or hearing screening to provide information about visual and/or auditory functions and processing

If I agree to screening (s), it (they) will take place on or about (date)\_\_\_\_\_ at (program name)

\_\_\_\_\_.

Results of the screening will be reviewed by one or more staff members of the above named program and will be utilized for the purpose of providing the best and most appropriate services. Results of the screening (s) will be maintained in a secure location at the above named program and will not be released to a third party without the consent of the individual/parent or guardian.

\_\_\_\_\_  
**Signature of Individual/Parent or Guardian\***

**Date**

\_\_\_\_\_  
**Signature of Program Representative**

**Date**

**\*Individuals under the age of 18 must have this consent form signed by the person's parent or guardian.**

# **SAMPLE SPECIAL NEEDS WAIVER of REFERRAL INFORMATION**

I, (print name) \_\_\_\_\_, decline information about sources for  hearing screening,  vision screening, and/or  learning diagnosis offered by (name of program) \_\_\_\_\_ on (date) \_\_\_\_\_.

---

**Signature of Individual or Guardian\***

**Date**

---

**Signature of Program Representative**

**Date**

**\*Individuals under the age of 18 must have this consent form signed by the person's parent or guardian.**

# **SAMPLE SPECIAL NEEDS RELEASE of INFORMATION FORM**

I, (print name) \_\_\_\_\_, authorize (program name

\_\_\_\_\_ to release the following confidential information:

Screening results from:

**name of screening instrument(s)**

**given on**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Test results from:

**name assessment instrument**

**given on**

\_\_\_\_\_

\_\_\_\_\_

**Other (specify)**

**given on**

\_\_\_\_\_

\_\_\_\_\_

**To:**

**Name of Individual/ Agency**

**Address of Individual/Agency**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**The release of information is valid from the date of signature through June 30, 2005 unless otherwise revoked in writing by the individual/parent or guardian.**

\_\_\_\_\_  
**Signature of Individual/Parent or Guardian\***

**Date**

**\*Individuals under the age of 18 must have this consent form signed by the person's parent or guardian.**

# Choosing Screening Instruments

There are many things to consider when choosing one or more screening instruments for your program. The ranking or prioritizing of the areas listed below will depend on your program need and guidelines. Your individual program may determine additional criteria.

## Ease of administration

- How long is the screening?
- Can it be administered to all individuals or will a set criteria be established?
- Is there special materials needed to administer?

## Audience

- Who is the screening instrument designed for?
- Does the screening instrument require any set education level?

## Staff Training

- How much training is required to administer the screening instrument?
- How will staff turnover effect our program usage?
- How many staff members should be trained to administer the instrument?

## Cost

- What set-up costs are there?
- What consumable costs are there?

## Results

- What does this screening instrument tell our program about the individual?
- How are the results interpreted?
- How are the results to be shared?

## Validity

- How accurate are the results?

## LD Screenings Comparison Grid

	Time to Administer	Audience	Staff Training	Cost	Usefulness of Results	Validity
<p><b>Washington 13</b>  <a href="http://www.able-ohio.org">www.able-ohio.org</a> - click on 'learning disabilities'</p>	<p>Quick - under 10 minutes</p>	<p>Normed on TANF population, but needs to be more specific on the norming study</p>	<p>Minimal</p>	<p>Free</p>	<p>Good for initial interview - getting to know new client</p>	<p>Normed on TANF population, but needs to be more specific on the norming study - all females - only one evaluator - hard to generalize to minorities or urban youth</p>
<p><b>ALDS</b> (Adults with Learning Disabilities Screening Battery)                       Kaw Valley Resources                      785-331-3659</p>	<p>Longer - 1 hour+                      Can be broken up and given in sections                      Scoring is difficult</p>	<p>Developed and normed on adults                      Must be read by the student - 6<sup>th</sup> grade reading level</p>	<p>Significant training required</p>	<p>Free/Can copy                      Must purchase carbonless paper</p>	<p>More in depth                      BUT all based on self-assessment</p>	<p>Self-assessment can skew results</p>
<p><b>Cooper Screening of Information Processing</b> (CSIP)  <a href="http://www.learningdifferences.com">www.learningdifferences.com</a></p>	<p>45 minutes for short version and 1.5 hours for long version</p>	<p>Developed by Dr. Cooper for adults</p>	<p>Easy to learn - only requires practice, but the questions are self-reported</p>	<p>Free - can download from his website</p>	<p>Comprehensive screening, but does require a separate excel spreadsheet for scoring. Additional set of documents needed to develop accommodations</p>	<p>Developed and normed on adults, but no norming data is presented</p>

<p><b>Destination Literacy</b> LDA of Canada 323 Chapel St. Suite 200 Ottawa, Ontario, K1N 7Z2</p>	<p>1 hour+ Can be used in pieces</p>	<p>Designed for adults</p>	<p>Easy to learn - comes with guidelines</p>	<p>Approx \$80.00 for materials</p>	<p>Comprehensive screening Subject area assessments</p>	<p>Limited sample study on local Canadian population - may be hard to generalize to urban minorities</p>
<p><b>STALD</b> Screening Test for Adults w/ Learning Disabilities) eric.ed.gov Item #: ED287988</p>	<p>1 hour</p>	<p>Adults, but no norming data is presented</p>	<p>Easy to administer</p>	<p>Free</p>	<p>Reading-only inventory - not as comprehensive</p>	<p>Developed for children - revised for adults</p>
<p><b>PowerPath</b> www.powerpath.com</p>	<p>In new version Core screenings are 20 minutes. Additional items may be added as needed</p>	<p>Reading level of 8<sup>th</sup> grade or below - can be administered to adults, juveniles and lower level adult readers</p>	<p>Extensive - up to 12 days, but core trainings are now conducted by coaches. Offers a basic certification path way</p>	<p>Expensive - Materials and training costs vary significantly - up to \$3000</p>	<p>Very extensive screening - similar to diagnostic testing</p>	<p>High validity. Used in TANF, One-Stops, CORRECTABLE, Corrections, Voc Rehab. Extensive multi state data is available</p>

# Web Resources

## **International Dyslexia Association (IDA)**

[www.interdys.org](http://www.interdys.org)

The International Dyslexia Association (IDA) is a non-profit, scientific, and educational organization dedicated to the study and treatment of the learning disability, dyslexia. IDA is the oldest such organization in the U.S. that serves individuals with dyslexia, their families, and professionals in the field. The website has special areas for adults, children, educators, college students, parents and teens. Information on assistive technology, legislation related to dyslexia.

## **LD Online: Learning Disabilities Resources**

[www.LDonline.org](http://www.LDonline.org)

A very comprehensive site with basic facts on learning disabilities for parents, and educators. Also includes KidZone, LD Store, information specific to adults, Q & A with D. Larry B. Silver, and many bulletin boards on topics such as Teaching Students with LD, Teaching Reading, Teaching Math, Adults with LD, Adults with ADHD, etc.

## **National Center for Learning Disabilities (NCLD)**

[www.nclid.org](http://www.nclid.org)

The website of the NCLD has information on learning disabilities, including facts sheets and research news. It also includes sections on Living with LD for adults, and teens, as well as legal issues related to LD. This site also includes a large section on LD Advocacy.

## **Learning Disabilities Association of America (LDA)**

[www.lदानatl.org](http://www.lदानatl.org)

The Learning Disabilities Association of America (LDA) is a non-profit grassroots organization whose members are individuals with learning disabilities, their families, and the professionals who work with them. LDA strives to advance the education and general welfare of children and adults with learning disabilities. The website contain facts sheets, information on legislation related to LD, a bookstore and a nice collection of resources related to LD.

## **ProLiteracy Worldwide**

[www.proliteracy.org](http://www.proliteracy.org)

ProLiteracy Worldwide is represented in 45 developing countries as well as in the U.S. and serves more than 350,000 adult new learners around the world each year. Its purpose is to sponsor educational programs and services to empower adults and their families by assisting them to acquire the literacy practices and skills they need to function more effectively in their daily lives and participate in the transformation of their societies. The merger of the world's two largest adult volunteer literacy organizations is complete and Laubach Literacy International and Literacy Volunteers of America, Inc. have become ProLiteracy Worldwide. New Readers Press, Verizon Literacy University, News for You, National Book Scholarship Fund and Women in Literacy are ProLiteracy programs with links from this site.

## **National Center for the Study of Adult Learning and Literacy**

[gseweb.harvard.edu/~ncsall/](http://gseweb.harvard.edu/~ncsall/)

The National Center for the Study of Adult Learning and Literacy (NCSALL) both informs and learns from practice. Its rigorous, high quality research increases knowledge and gives those teaching, managing, and setting policy in adult literacy education a sound basis for making decisions. This sites hosts a free Interactive Website for Adult Education Practitioners with a mini-course in teaching reading. You can find downloadable issues of **Focus on Basics**: A quarterly journal for practitioners in the field of adult learning and literacy.

## **U.S. Dept of Education – Office of Vocational And Adult Education**

[www.ed.gov/about/offices/list/ovae/index.html](http://www.ed.gov/about/offices/list/ovae/index.html)

The OVAE website has information, research, and resources to help prepare young people and adults for postsecondary education, successful careers, and productive lives.

### **Federal Resource Center for Special Education**

[www.dssc.org/frc/](http://www.dssc.org/frc/)

The Federal Resource Center for Special Education (FRC) is a five-year contract between the Academy for Educational Development (AED), its partner, the National Association of State Directors of Special Education (NASDSE), and the U.S. Department of Education, Office of Special Education Programs. You can find information on conferences, related legislation and regional resource centers for special education.

### **National Institute for Literacy Special**

#### **Collection on Learning Disabilities** [slincs.coe.utk.edu/special\\_collections/learning\\_disabilities](http://slincs.coe.utk.edu/special_collections/learning_disabilities)

This collection of resources provides a single point of access to information on LD issues important to: adults with learning disabilities, their families, literacy practitioners, employers, human resource and other professionals who work with adults. Also – access to LINCS sponsored online discussion lists on EFF, ESL, Family Literacy, Professional Development, Technology, Poverty, Workplace, etc. Includes over 100 LINCS-reviewed Resources for Learning Disabilities Managers/Administrators.

### **Outreach and Technical Assistance Network (OTAN)**

[www.scoe.otan.dni.us/](http://www.scoe.otan.dni.us/)

OTAN Offers over 20,000 documents to the adult education community. List serves, want ads and, Q&A.

### **LD Pride Online**

[www.ldpride.net](http://www.ldpride.net)

The Vancouver Island Invisible Disability Association's (VIDA) primary mission is to promote the social, emotional and general well-being of adults with non-visible disabilities including learning disabilities mental illness, Attention Deficit (Hyperactivity) Disorder and other neurological disabilities. "Live Chat Support Group" is a time for you to give and receive online support about your LD/ADD or Deaf-LD.

### **Schwab Foundation for Learning**

[www.schwablearning.org](http://www.schwablearning.org)

Schwab Learning provides free information, resources, publications and support to parents of children who struggle with learning and to kids themselves through two websites and Outreach and Community Services. SchwabLearning.org, is a parent's guide to helping kids with learning difficulties in the areas of identifying, managing, connecting with others via the web about LD. Many valuable free publications to download. Also has online store for books and videos.

### **All Kinds of Minds**

[www.allkindsofminds.org](http://www.allkindsofminds.org)

The All Kinds of Minds' mission is to help students who struggle with learning measurably improve their success in school and life by providing programs that integrate educational, scientific and clinical expertise. Library of articles and book excerpts on learning differences.

### **ERIC Clearinghouse of Adult, Career and Vocational Education**

[www.ericacve.org](http://www.ericacve.org)

Comprehensive Information Services in Adult and Continuing Education, Career Education, Vocational and Technical Education, and Employment and Training

### **Learning disAbilities Resources**

[www.learningdifferences.com](http://www.learningdifferences.com)

Dr. Richard Cooper's website. This site includes the Cooper Screening of Information Processing (CSIP) free for downloading. You can find a newsletter, training catalog and mnemonic clues.

### **Wilson Language Training**

[www.wilsonlanguage.com](http://www.wilsonlanguage.com)

Information on the Wilson Reading Method, a multisensory reading program. Also includes materials and training catalog and resources on dyslexia.

### **Alliance for Technology Access (ATA)**

[www.ataccess.org](http://www.ataccess.org)

The Alliance for Technology Access is a national network of assistive technology resource centers, individual and organizational associates, technology vendors and developers dedicated to providing information and support services to children and adults with disabilities, and increasing their use of standard, assistive, and information technologies.

### **Closing the Gap**

[www.closingthegap.com](http://www.closingthegap.com)

Computers are tools that can provide solutions to many problems facing people with disabilities today. Closing The Gap, Inc. is a company that focuses on computer technology for people with special needs. Through their newspaper, annual conference, and new on-line service "Solutions", Closing The Gap provides practical up-to-date information on assistive technology products, procedures, and best practices. Can request bulk copies of their newspaper free for your classroom.

### **Job Accommodations Network (JAN)**

[janweb.icdi.wvu.edu/](http://janweb.icdi.wvu.edu/)

JAN is a free consulting service that provides information about job accommodations, the ADA, and the employability of people with disabilities. Good resources on accommodations in the workplace.

### **Tools for Life**

<http://www.gatfl.org/default.htm>

Online equipment exchange service for use by Disability Service Providers at postsecondary institutions. Equipment loan library and online equipment exchange services for used or donated equipment. Locating funding for assistive technology through the Dollars and Sense Funding guide. You will find assistance with understanding and dealing with learning disabilities and the ReBoot computer recycling program, which distributes rebuilt computers to persons with disabilities.

### **Florida's Bridges to Practice Website**

[www.floridatechnet.org/bridges/resources.html](http://www.floridatechnet.org/bridges/resources.html)

Resources for Adults with Learning Disabilities: assistive technology, ADD, educational resources, ESOL and learning disabilities, general information, inspirational, organizations, publications, research and training centers, resource centers, specific learning disabilities, web connections.

### **Teaching LD**

[www.teachingld.org/](http://www.teachingld.org/)

TeachingLD is a service of the Division for Learning Disabilities (DLD) of the Council for Exceptional Children. DLD is the largest international professional organization focused on learning disabilities. The purpose of TeachingLD is to provide trustworthy and up-to-date resources about teaching students with learning disabilities. The articles included in Teaching How-to's are drawn from *TEACHING Exceptional Children* (TEC), a publication of The Council for Exceptional Children (CEC).

### **Recording for the Blind & Dyslexic**

[www.rfbd.org/sl](http://www.rfbd.org/sl)

This website offers an online catalog, RFB&D's new digitally-recorded books, member stories. Need to upgrade your playback equipment? See photos of their complete line of four-track tape players

**National Association for Adults with  
Special Learning Needs (NAASLN)**

**[www.naasln.org](http://www.naasln.org)**

NAASLN advocates for adults with special learning needs in national policy, legislation, and funding; provides professional development and technical assistance; disseminates relevant information and research; increases awareness of the holistic nature and best practices for serving adults with special learning needs; promotes best practices for effective services.

**American Association of People with Disabilities**

**[www.aapd.com](http://www.aapd.com)**

AAPD is the largest national nonprofit cross-disability member organization in the United States, dedicated to ensuring economic self-sufficiency and political empowerment for the more than 56 million Americans with disabilities. AAPD works in coalition with other disability organizations for the full implementation and enforcement of disability nondiscrimination laws, particularly the Americans with Disabilities Act (ADA) of 1990 and the Rehabilitation Act of 1973. Calendar, news, and newsletter.

**US Department of Education Publications**

**[www.ed.gov/pubs](http://www.ed.gov/pubs)**

ED publications are available throughout the website as abstracts. Searchable database.

*— Compiled by Sharon Reynolds, C/SE Resource Center*

# Where Do We Go From Here

## Serving Adults with Learning Disabilities: A Program Survey

Key to systemic change within programs is teamwork and collaboration. Administrators are encouraged to pull together key staff members to develop a plan for serving adults with learning disabilities. Below are some initial talking points to consider as your program expands and develops its services.

1. Has your program discussed LD as a program issue?
2. What accommodations or services are set up in your program for adults with LD? Who directs these services?
3. Do you have any training related to LD for staff/volunteers? If so, please describe.
4. Do you have any community resources/linkages in place to accommodate adults with LD?
5. What, if any, screening instrument(s) is your program using? How is this going?
6. How are individuals involved in planning their self-sufficiency plans?
7. Is your program aware of the legal rights and responsibilities of adults with LD?
8. Is there anything special that your program is already doing related to LD that you would like to share?
9. In the best of all worlds, how would your program be serving adults with LD?

# LD Acronyms

When collaborating with school districts and medical professionals/clinicians, it is important to understand the acronyms commonly associated with LD.

ABA	Applied Behavior Analysis
ADA	Americans with Disabilities Act
ADR	Alternative Dispute Resolution
ADD; AD/HD; ADHD	Attention-Deficit/Hyperactivity Disorder
AHEAD	Association on Higher Education and Disabilities
AP	Advanced Placement
AP; APD	Auditory Processing Disorder
ARD	Admission, Review, and Dismissal (Committee)
AS	Asperger's Syndrome
ASL	American Sign Language
AT	Assistive Technology
BIP; BMP	Behavior Intervention Plan; Behavior Management Plan
CAP; CAPD	Central Auditory Processing Disorder
CAST	Center for Applied Special Technology
CBA	Curriculum-Based Assessment
CCLD	Coordinated Campaign for Learning Disabilities
CFR	Code of Federal Regulations
CHADD	Children and Adults with Attention-Deficit/Hyperactivity Disorder
COPAA	The Council of Parent Attorneys and Advocates
DCD	Developmental Coordination Disorder
DD	Developmentally Disabled; Developmentally Delayed
DOH	Department of Health
DSM-IV; DSM-IV-TR	Diagnostic & Statistical Manual of Mental Disorders – 4th edition; Diagnostic & Statistical Manual of Mental Disorders – 4th ed, text revision
DSS	Disability Support Services
EBD	Emotional and Behavioral Disorders
ED	Emotionally Disturbed
EDGAR	Education Department General Administrative Regulations
EH	Emotionally Handicapped
ELL	English Language Learner
ERIC	Educational Resources Information Center
ESL	English as Second Language
ESOL	English for Speakers of Other Languages
ESY	Extended School Year Services
FAPE	Free Appropriate Public Education
FERPA	Family Educational Rights and Privacy Act
FMRI	Functional Magnetic Resonance Imaging
GATE	Gifted and Talented Education
GE	General Education
GED	General Education Diploma
GPA	Grade Point Average
GT/LD	Gifted and Talented with Learning Disabilities
HI	Hearing Impaired; Health Impaired
HOH	Hard of Hearing
IDA	International Dyslexia Association

IDEA	Individuals with Disabilities Education Act
IEE	Independent Educational Evaluation
IEP	Individualized Education Program
ITP	Individual Transition Plan
IQ	Intelligence Quotient
LEA	Local Education Agency
LBLP;LiPS; LMB;LM-B	Lindamood-Bell Language Program
LD	Learning Disability
LDA	Learning Disability Association
LRE	Least Restrictive Environment
MBD	Minimal Brain Dysfunction
MDT	Multidisciplinary Team
MH	Multiply Handicapped
MR	Mental Retardation
MRI	Magnetic Resonance Imaging
NCLD	National Center for Learning Disabilities
NIH	National Institutes of Health
NILD	National Institute for Learning Disabilities
NIMH	National Institutes of Mental Health
NLD;NVLD	Non-verbal Learning Disability
OCD	Obsessive-Compulsive Disorder
OCR	Office for Civil Rights
ODD	Oppositional Defiant Disorder
OG; O-G	Orton Gillingham
OHI	Other Health Impaired
OMRDD	Office of Mentally Retardation and Developmental Disabilities
OSEP	Office of Special Education Programs
OSERS	Office of Special Education and Rehabilitative Services
OT	Occupational Therapist; Occupational Therapy
P & A	Protection and Advocacy
PDD; PDD-NOS	Pervasive Developmental Disorder; Pervasive Developmental Disorder
Not	Otherwise Specified
PT	Physical Therapist; Physical Therapy
PTSD	Post Traumatic Stress Disorder
RFBD	Recording for the Blind & Dyslexic
RSP	Resource Specialist Program
SED	State Education Department; Severely Emotionally Disturbed
SI	Sensory Integration
SLD	Specific Learning Disability
SLP; S/LT	Speech and Language Program
SMT	Simultaneous Multisensory Teaching
SP/Lang, SP/LG	Speech and Language
SPED	Special Education
SSI	Supplemental Security Income (related to Social Security)
V/V	Verbalization/Visualization
WISC; WISCIII	Wechsler Intelligence Scale for Children
WJ; WJ-III, WJIII; WJ-4; WJ4	Woodcock-Johnson Psychoeducational Battery

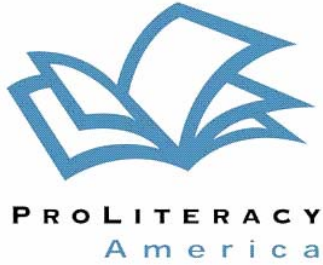
– Compiled from [www.schwablearning.org](http://www.schwablearning.org)

***BRIDGES TO PRACTICE***

**PROGRAM QUALITY INDICATORS  
FOR AGENCIES PROVIDING TEMPORARY ASSISTANCE  
FOR NEEDY FAMILIES (TANF)**

**Donna D. Sherman**  
September 30, 2003

**Learning Disabilities Training and Dissemination Project  
A Partnership of ProLiteracy America  
and the  
National Institute for Literacy**



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## **Background**

The *Program Quality Indicators for TANF Agencies* were developed to accompany the *Bridges to Practice* guidebooks and training. *Bridges to Practice: A Research-based Guide for Literacy Practitioners Serving Adults with Learning Disabilities* was produced in 1999 as part of a National Institute for Literacy project. In this series of five guidebooks, *Bridges to Practice* describes what is needed to create systemic reform in the adult education system's approach to learning disabilities. The guidebooks take programs from the preparation and planning stages through client assessment and instruction to professional development. In order to fully understand *Bridges to Practice*, TANF staff are encouraged to participate in a companion professional development program incorporating the *Program Quality Indicators for TANF Agencies*.

## Development of the *Program Quality Indicators for TANF Agencies*

The basic points in the *Indicators* are taken directly from the Indicators of High-Quality Services section included in each *Bridges* guidebook. The *Indicators* are organized into tables to correspond with the first two guidebooks, which are most relevant to TANF agencies. Each table is divided into three topic areas: staff, agency, and clients. Although there is some overlap between the areas, in general the staff activities are those activities that are primarily carried out by individual TANF agency staff. The agency area addresses the policies and procedures that shape the work of the agency, and the client area addresses the clients' participation in the program.

An additional source for this project is *Policy Guidance on the Prohibition Against Discrimination on the Basis of Disability in the Administration of TANF* from the U. S. Department of Health and Human Services, Office for Civil Rights, [www.hhs.gov/ocr/tanf/ocrguidance.html](http://www.hhs.gov/ocr/tanf/ocrguidance.html).

After the *Indicators* were drafted, they were reviewed by several persons who are actively involved in TANF agencies and knowledgeable about *Bridges to Practice*. As much as possible, their input was incorporated into the final document. Our deep appreciation goes to those persons who spent time reviewing the drafts. Their perceptive suggestions for modifications were very helpful to us. In particular we would like to thank Beth Blanchard, planner/education specialist for the Workforce Development Council of Seattle-King County, Washington, for her assistance throughout the development of these *Indicators*, and for the development of many of the materials that served as resources for these *Indicators*.

### Using the *Indicators*

It is important to keep in mind that the *Indicators* are intended to accompany training in the *Bridges to Practice* systems and principles, which were specifically developed for use by people working with adults with **learning** disabilities. We understand that TANF agencies also serve adults with other disabilities, that these disabilities are often interrelated, and that the laws that relate to people with disabilities cover a broad range of disabilities. Many of the general principles in the *Indicators* relate to serving all adults with disabilities, but the focus of the *Indicators* is learning disabilities.

It is our hope that the *Indicators* will be useful to *all* TANF agency staff, even though they were designed primarily as a *Bridges to Practice* tool. The *Indicators* incorporate the language of the *Bridges to Practice* guidebooks and follow the sequence of topics addressed in the guidebooks. The *Bridges to Practice* materials are inclusive and research-based, but neither they nor these *Indicators* could possibly include all of the thinking on learning disabilities that exists in the adult education and vocational rehabilitation fields.

The legal issues related to serving adults with disabilities are very complex and may vary from area to area, e.g., a worksite versus an adult education program. All TANF agencies need to be aware of these issues. When clients with diagnosed learning disabilities disclose this, staff should be able to discuss with them their rights and responsibilities as

well as the accommodations to which the clients are legally entitled. For clients with the characteristics of learning disabilities but no formal diagnosis, the discussion generally centers on their learning strengths and difficulties. However, the opportunity for screening and assessment should be explored. We have grouped these two categories of clients together in some places in the *Indicators*, but agency staff should be aware of the differences.

Because each of the tables in the *Indicators* corresponds to one of the *Bridges* books, there is some redundancy between them—just as there is among the *Bridges* book topics. Each table is intended to stand alone with the corresponding *Bridges* book so that it can be used as a tool for agencies as they begin to address systemic change and how they can increase the quality of their services to clients with learning disabilities.

It is important to remember that *Bridges to Practice* is a tool to help create **systemic** change in services for people with learning disabilities. As with any systemic change, this change will require time and must involve the whole delivery system if it is to be successful. Each time we look at the system, we will see new ways to improve it. *Bridges to Practice* is intended to be a catalyst for this change, helping practitioners, agencies, and policymakers improve their system for providing services to adults with learning disabilities.

## **Action Plan**

As agencies use *Bridges to Practice* for systemic change work, they will develop action plans with specific steps to be taken, areas of responsibility, and follow-up to check the progress. It is not possible to include that level of detail in the *Indicators*, and each agency needs to shape a plan that meets its specific areas of need. However, in the context of ongoing training and systemic change, the *Indicators* can be used as a general tool to measure progress. An agency using the *Indicators* in this way could circulate the document among its staff annually and compare the Action Needed sections in order to study progress from one year to the next.

The level of detail that should be addressed in an agency's action plan is different from the general standards in the *Indicators*. Each agency needs to determine what factors are most important for its clientele and then include these in its action plan. One of our reviewers pointed out that certain points in the indicators may be the responsibility of a rehabilitative services agency or another service partner. Those are operational decisions that need to be addressed in the action plan and may vary from one state to another.

## **Companion Publications for Volunteer Literacy Programs and Adult Education Programs**

The *Program Quality Indicators for TANF Agencies* are designed specifically for agencies that serve adults through TANF programs and do not provide direct educational services. Companion publications: *Program Quality Indicators for Volunteer Literacy Programs* and *Program Quality Indicators for Adult Education Programs* are also available from ProLiteracy America.

**BRIDGES TO PRACTICE**  
**PROGRAM QUALITY INDICATORS FOR TANF AGENCIES**

**TABLE 1: Preparing to Serve Adults with Learning Disabilities**

INDICATOR	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	ACTION NEEDED
<b>Our staff:</b>					
<ul style="list-style-type: none"> <li>Understand learning disabilities and their impact on the lives of the clients and in particular on their efforts to look for, get, and keep a job.</li> <li>Are trained to recognize the characteristics of learning disabilities</li> </ul>					
<ul style="list-style-type: none"> <li>Understand the law and the legal requirements regarding adults with learning disabilities in TANF and agencies providing services to TANF clients.</li> <li>Are familiar with the guidance regarding TANF and disabilities from the HHS Office for Civil Rights.</li> </ul>					
<b>Our agency:</b>					
<ul style="list-style-type: none"> <li>Utilizes a written definition of learning disabilities that is based on current knowledge in the field of vocational rehabilitation and other appropriate disciplines (e.g., as applicable, federal special education definitions).</li> <li>Follows written policies and procedures for working with adults with learning disabilities.</li> <li>Utilizes approved statewide policies, procedures, and screening and assessment materials.</li> <li>Participates in an interagency project steering committee that regularly evaluates its goals for better services to clients with learning disabilities and progress toward those goals.</li> <li>Evaluates policies and procedures annually to maintain and improve services for adults with learning disabilities.</li> <li>Provides staff with ongoing professional development opportunities and resources focused on improving services for adults with learning disabilities.</li> <li>Maintains community links to strengthen and expand services for adults with learning disabilities.</li> <li>Informs clients about learning disabilities as detailed below.</li> </ul>					

INDICATOR	STRONG LY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	ACTION NEEDED
<b>Our clients:</b>					
• Understand that people learn in different ways and that some people have specific learning disabilities.					
• Understand that they can voluntarily disclose a diagnosed learning disability and participate in a screening and assessment process for learning disabilities.					
• Are informed of the legal right to obtain reasonable accommodations for diagnosed learning disabilities.					
• Understand their legal rights with regard to learning disabilities and the services they may need.					
• Understand their responsibilities regarding disability disclosure and documentation.					

**TABLE 2: The Assessment Process**

INDICATOR	STRONG LY AGREE	AGREE	DIS-AGREE	STRONGLY DISAGREE	ACTION NEEDED
<b>Our staff:</b>					
• Provide a voluntary learning disabilities screening performed by qualified personnel to determine whether clients need a more comprehensive assessment.					
• Offer application/intake assistance, specifying examples, alternatives, and/or further instructions.					
• Make reasonable modifications when the modifications are necessary to avoid discrimination on the basis of learning disabilities.					
• Arrange for a comprehensive assessment if the need for one is indicated by the screening.					
• Inform clients they can voluntarily disclose diagnosed learning disabilities and request reasonable accommodations.					
• Make recommendations for modifications or accommodations in training or job opportunities based on the assessment.					
• Keep information confidential unless client gives permission to share.					

INDICATOR	STRONGLY AGREE	AGREE	DIS-AGREE	STRONGLY DISAGREE	ACTION NEEDED
<b>Our agency:</b>					
• Features posters, signage, or notices alerting people with disabilities to ways they can obtain further assistance.					
• Uses research-based learning disabilities screening tools that are appropriate for TANF clients.					
• Has a process for further assessment after initial intake where indicated, using persons who are trained in making focused assessments of adults with disabilities.					
• Has access to diagnostic testing for clients when use is indicated through screening and discussion with the client.					
• Has a referral process that makes appropriate resources available to clients.					
• Refers clients to job training and education programs that are suited to their needs and assists with enrollment in these.					
• Has appropriate training and meaningful employment opportunities available for clients with learning disabilities.					
• Has a system for monitoring how individuals with learning disabilities function in training programs or employment.					
• Ensures that potential obstacles to sustaining employment for people with learning disabilities are being addressed.					
• Ensures that employers and other agencies that receive client referrals are aware of the legal rights and responsibilities of clients with learning disabilities and of the employer/agency responsibility to provide accommodations in accordance with those.					
<b>Our clients:</b>					
• Understand that participation in the screening and assessment process is voluntary.					
• Understand that they can discuss their past learning experiences as a part of the screening and assessment process.					
• Receive a clear explanation of the intake screening/assessment results.					
• Are informed of their legal rights regarding diagnosed learning disabilities.					
• Know how to obtain information about learning disabilities screening and diagnosis.					
• Are referred to other resources for additional screening or diagnosis when referral is requested or indicated.					
• Can describe their diagnosed learning disability and ask for accommodations.					
• Participate in developing a plan for action that is appropriate to their strengths and weaknesses, goal-oriented, and based on learning disability documentation.					

## Ohio Initiative for Persons with Learning Disabilities: Written Plan for One-Stop Teams

**This template is for one-stop teams to develop a written plan that describes delivery of services to those customers with suspected or diagnosed learning disabilities. Please use the resources provided at the Ohio Initiative for Persons with Learning Disabilities training, or on our website ([www.able-ohiou.org](http://www.able-ohiou.org), click on Ohio Initiative for Persons with Learning Disabilities) to develop your written plan.**

Plan Component	Explanation	Response
<p>1. List your One-Stop team members.</p>	<p>Be sure to include name, agency, and contact information for each team member. To be true to this collaborative effort, it is important to include at least one local representative from your TANF and ABLÉ programs as well as from the Rehabilitation Services Commission; however, as your learning disabilities plan develops, it is recommended that additional community partnerships be included.</p>	
<p>2. Indicate the role of each one-stop partner.</p>	<p>Clearly state how each agency in this collaborative will be used to serve customers with suspected or diagnosed learning disabilities.</p>	
<p>3. List the formal learning disabilities screening instrument(s) that your county will use in identifying customers with suspected learning disabilities.</p>	<p>An LD screening instrument <b>does not</b> diagnose a learning disability, but merely gives a strong predictor that a person might have a learning disability. It is recommended that each county utilize an LD screening instrument(s) to identify customers who may need to be referred to a psychologist for diagnostic evaluation. A county may choose more than one LD screening instrument in their LD identification process, i.e., you may choose a short screener for most customers at intake and then a lengthier, comprehensive screener at another point in the service delivery process.</p>	<p> <input type="checkbox"/> Washington 13  <input type="checkbox"/> PowerPath  <input type="checkbox"/> ALDS (Adult Learning Disability Screening)  <input type="checkbox"/> Cooper Screening  <input type="checkbox"/> Destination Literacy  <input type="checkbox"/> STALD (Screening Test for Adults with LD)  <input type="checkbox"/> School IEP                 </p>

<p>4. List your step-by-step process for identifying customers with suspected or diagnosed learning disabilities, specific services you will provide to those with learning disabilities, and how you will ensure client confidentiality and share information among One-stop partners.</p>	<p>Be sure to describe: 1) how you will select those who will be screened for learning disabilities, and hearing and vision screenings; 2) who will be referred to a psychologist for diagnostic evaluation; 3) who will review the results of the evaluation with the customer; 4) what specific services and/or accommodations will be provided to those with learning disabilities and how will they be provided; 5) how will the diagnostic evaluations of those customers with learning disabilities be implemented when providing services; and 6) how you will ensure client confidentiality and share information among One-stop partners.</p>	
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<p>5. List who will provide psychological diagnostic evaluations.</p>	<p>Finding affordable diagnostic evaluations in your county is an issue in providing comprehensive services to those customers with suspected learning disabilities. The cost may range anywhere from \$300 - \$1,200. Possible sources for assistance with this include: Rehabilitation Services Commission; local psychologists who might provide low-cost, sliding fee-scale, or a pre-determined number of free evaluations; offices for disability services at local community colleges and/or universities; educational psychologists through local school districts; etc. It is recommended that each one-stop have at least one established agreement for diagnostic services. For a list of psychologists who will consider providing low-cost evaluations, go to <a href="http://www.able-ohiou.org">www.able-ohiou.org</a> and click on 'Psychologist Network.' One-stops may consider pursuing local and/or state grant opportunities for funds to provide these evaluations.</p>	
<p>6. Describe your criteria for referring customers to the Rehabilitation Services Commission (RSC).</p>	<p>Be aware that the RSC does not provide diagnostic evaluations as a sole service. Diagnostic evaluations are obtained after existing information is reviewed and there is a need for further information to document eligibility and/or to support career choice.</p> <p>The criteria for eligibility includes:  A physical or mental impairment which constitutes or results in a substantial impediment to employment; The individual can benefit in terms of an employment outcome;  The person requires vocational rehabilitation services to prepare for, secure, retain, or regain employment. Persons with the most significant disabilities are given priority for services.</p>	
<p>7. List your sources for vision and hearing evaluations.</p>	<p>Research suggests that many "hard to serve" customers have vision and hearing function problems that may be corrected with glasses or hearing devices. It is recommended that each one-stop have at least one referral source for customers who have suspected vision and/or hearing difficulties.</p>	

<p>8. Explain how your services to those customers with learning disabilities are compliant with the law.</p>	<p>At the OIPLD training, you were provided with specific information regarding the law and or legal requirements that protect customers with suspected and/or diagnosed learning disabilities. Specifically we referred to: 1) Americans with Disabilities Act; 2) Individuals with Disabilities Education Act; 3) Section 504 of the Rehabilitation Act; and 4) Federal Office of Civil Rights Disability Guidance. Please explain here how your services to those customers with suspected and/or diagnosed learning disabilities are compliant with existing law. Refer to the information in the binder provided at the OIPLD training. For further guidance, you may also want to contact your local ABL program ADA coordinator and/or CDJFS civil rights coordinator.</p>	<p>Evidence:</p> <p>___ Equal Access</p> <p>___ Reasonable Accommodations</p> <p>___ ADA Compliant</p> <p>___ Don't Discriminate against those with LD</p> <p>___ Know Local/State Grievance Policy</p>
<p>9. Describe how you will track the effectiveness of the services you provide to customers with learning disabilities.</p>	<p>In order to secure more funding at the state and federal level, data is needed to support efforts for customers with suspected or diagnosed learning disabilities. Specifically we need to know: 1) how many customers are screened with an LD screening instrument (adding questions to your intake process that relate to learning disabilities <b>is not</b> the same as administering a formal LD screening instrument); 2) how many customers that are screened for LD show results that the customer potentially has a learning disability; 3) how many customers receive a referral for a diagnostic evaluation; 4) how many customers receive the diagnostic evaluation; 5) how did the knowledge of whether a customer had learning disabilities enhance the services that were provided to that customer. Please describe how your one-stop will track and report this data.</p>	
<p>10. Explain how your One-stop will sustain the efforts to customers with suspected or diagnosed learning disabilities.</p>	<p>The issue of learning disabilities is a difficult one to address. We don't have all the answers. Knowledge about the affects of LD is rapidly evolving. Ongoing training is needed to learn more. Staff turnover affects service delivery. How will your county address these issues to sustain efforts to better serve customers with suspected or diagnosed learning disabilities?</p>	<p>___ Meet Regularly as a Team</p> <p>___ Revise Plan at least annually</p> <p>___ Provide Training related to LD</p> <p>___ Offer interagency cross-training</p>