



## POSITION STATEMENT

### Conditions and/ or Diagnoses Identified by School Psychologists

There currently exists significant confusion surrounding the ability of school psychologists to both use what is viewed or described as “clinical” or “medical” terminology in assessments and evaluation reports and to determine the presence of a diagnosable mental health condition. Educational teams often need an identified condition or diagnosis to determine if a student is eligible for educational support services under the Individuals with Disabilities Education Act (IDEA) and/ or Section 504 of the Rehabilitation Act. It is the position of the Indiana Association of School Psychologists (IASP) that educational evaluation teams are able to use conditions and/ or diagnoses provided by school psychologists as a sufficient basis for determining the presence of a disability as required through IDEA and Section 504. Further, it is the position of IASP that there is no law, statute, or best practice guidance that prohibits school psychologists or educational teams from using diagnoses or related terminology in psychoeducational evaluation reports, individualized education plans (IEP), Section 504 plans, etc., including those determined and provided by school psychologists. This would include terms such as ADHD, depressive and/or anxiety conditions, dyslexia, dyscalculia, and/ or dysgraphia.

The Patient Protection and Affordable Care Act (PPACA) includes school psychologists as a “mental health service professional” as well as a “qualified health professional” for providing child and adolescent mental and behavioral health care. (United States House of Representatives, 2010) Further, the Every Student Succeeds Act (ESSA) includes school psychologists under the description of “School-based mental health provider” and notes that these professionals are “involved in providing assessment, *diagnosis*, counseling, educational, therapeutic, and other services.” (United States Congress, 2015) In keeping with these federal definitions, many subsequent documents from both the federal and state levels have sought to further clarify the appropriateness of school psychologists’ ability to both use and provide diagnoses as a component of comprehensive educational evaluations. (United States Department of Education, 2015) (National Association of School Psychologists, 2021) (Indiana Association of School Psychologists, 2021) (NH Association of School Psychologists & NH Association of Special Education Administrators, 2020).

It is the position of IASP that school psychologists are fully qualified school-based mental health providers capable of determining, providing, and using diagnostic terminology as well as determining the presence of conditions and related diagnoses. It is further the position of IASP that practitioners and school-based evaluation teams should not shy away from these practices as doing so may result in less informative and/ or diagnostically accurate determinations that may assist with educational treatment planning, provide less comprehensive information to parents and educational staff, and may even result in the failure of schools to provide necessary support services to some students. School psychologists are reminded and encouraged to continue to follow diagnostic best practices and ensure that any and all diagnostic conclusions are based on consistency of evidence across multiple procedures and sources and symptoms occur across multiple settings or environments. Even among school psychologists, there are differences in training, areas of expertise, experience levels, etc. School psychologists are additionally reminded and encouraged to provide diagnostic services that are within the scope of their own range of expertise and should not provide diagnoses in areas that are outside of their training, experience, and professional acumen.

## References:

Indiana Association of School Psychologists. *Dyslexia Position Statement*. Retrieved from <https://iaosp.wildapricot.org/resources/Documents/Dyslexia%20Statement.pdf>

National Association of School Psychologists. *ESSA: Overview for School Psychologists*. Retrieved from [https://www.nasponline.org/Documents/Research%20and%20Policy/ESSA%20Overview%20for%20School%20Psychologists\\_FINAL.pdf](https://www.nasponline.org/Documents/Research%20and%20Policy/ESSA%20Overview%20for%20School%20Psychologists_FINAL.pdf)

National Association of School Psychologists. *Position Statement: Students with Attention Deficit Hyperactivity Disorder*. Retrieved from [https://www.nasponline.org/assets/Documents/Research%20and%20Policy/Position%20Statements/Students\\_With\\_ADHD.pdf](https://www.nasponline.org/assets/Documents/Research%20and%20Policy/Position%20Statements/Students_With_ADHD.pdf)

NH Association of School Psychologists & NH Association of Special Education Administrators. (2020, October 15). *Position Statement: The Appropriateness of Educational Teams Using Condition and/ or Diagnoses Identified by School Psychologists*. Retrieved from <https://www.nhaspweb.org/resources/Documents/NHASP%20Documents/Primary%20Association%20Documents/Position%20Statements/Diagnosis-Joint%20Final.pdf>

United States Congress. (2015, December 10). *Public Law 114-95: Every Student Succeeds Act (full text)*. Retrieved from <https://www.congress.gov/114/plaws/publ95/PLAW-114publ95.pdf>

United States Department of Education. (2015, October 23). *Dear Colleague Letter: October 23, 2015*. Retrieved from <https://sites.ed.gov/idea/files/idea/policy/speced/guid/idea/memosdcltrs/guidance-on-dyslexia-10-2015.pdf>

United States House of Representatives. (2010, May). *Compilation of Patient Protection and Affordable Care Act*. Retrieved from <http://housedocs.house.gov/energycommerce/ppacacon.pdf>