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Owner: Faculty Organization
Policy Area: College of Nursing CNG
References:
Applicability: MVHS

Disability Services for Reasonable Accommodations, CNG-100.5

PURPOSE

The purpose of this policy/procedure is to define the process for students who qualify for disability services requiring reasonable accommodations as defined under Section 504 of the Rehabilitation Act of 1973 and Title III of the Americans with Disabilities Act. Accommodations for students at St. Elizabeth College of Nursing (SECON) are determined on an individualized basis in a collaborative process between each student and the Disability Services Coordinator (DSC). St. Elizabeth College of Nursing is not required to modify essential academic requirements, or make modifications that would fundamentally alter the nature of the program. The goal of providing reasonable accommodations is to give the student equal access to learning.

The role of the Disability Services Coordinator (DSC) is to meet with all students requesting accommodations to ensure these students are aware of and receive the services necessary to enhance their success in the program. In accordance with the Americans with Disabilities Act, all accepted students must be otherwise qualified for program acceptance and must fulfill program requirements.

All students admitted to the program are required to review and sign acknowledgment of the Essential Skills for Nursing document indicating the ability to perform those skills necessary to meet the clinical objectives prior to graduating from the nursing program. The DSC will discuss the Essential Skills individually with students who request academic accommodations and/or auxiliary aids to determine if the modifications requested can be provided in the clinical setting while safely providing patient care and maintaining the safety of the student. Accommodations that would affect safety would fundamentally alter the nature of the nursing program.

SCOPE

Administration, Faculty, Students

REFERENCES

ADA Compliance Guide. (Oct. 2015). *Section 504 of the Rehabilitation Act of 1973 and Title III of the Americans with Disabilities Act of 1990.*

New York State Council Disability Service Council (NYSDSC), Conference June 2017

St. Elizabeth College of Nursing. (2015). *Disability Services for Reasonable Accommodations. p. 12.*

Thompson Information Services. (2014). *ADA Compliance Guide. Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act of 1990.*

DEFINITIONS / ABBREVIATIONS

SECON (St. Elizabeth College of Nursing)

DSC (Disability Services Coordinator)

Reasonable accommodations: accommodations made for a student who submits appropriate documentation of a disability to provide equal access to opportunity under section 504 of the Rehabilitation Act of 1973 and Title III of the Americans with Disabilities Act of 1990.

PROCEDURE / DIRECTIVE

1. Students inquiring about accommodations for a disability will be given the St. Elizabeth College of Nursing- Disability Services for Reasonable Accommodations booklet for complete information related to the documentation requirements.

2. Students requiring reasonable accommodations while at SECON will submit the required documentation to the DSC. The DSC will meet with the student to review the documentation and to determine the appropriate accommodations for the student. Decisions are made utilizing the documentation as well as the student's perspective on how his or her disability affects learning and the accommodations that have enhanced the student's learning in the past. Students with medical disabilities will submit documentation from their health-care provider indicating their diagnosis and treatment plans. Accommodations will be determined by the nature of the disability and discussion with the student.

3. Accommodations may include but are not limited to:

- Extended time for testing
- Proctored exams in a separate location with reduced distraction from class
- Reader for Exams
- Recording of lectures
- Note-taking via instructor notes, notes from a peer, or the use of Smart-Pens or other adaptive technology

4. Any student who believes that he/she requires reasonable accommodations but does not have documentation will meet with the DSC for information about appropriate testing and the documentation required to receive accommodations.

5. If testing is completed during the semester, students will be provided accommodations from the date the DSC receives the evaluation and meets with the student. Students will not be allowed to retake exams, competencies, or resubmit assignments that were completed prior to submitting documentation and requesting accommodations.

6. The DSC will complete the Notification of Faculty by Disability Coordinator of Reasonable Accommodations form indicating the specific accommodations required and make copies of the form for the student to submit to the course coordinator of each of their courses at SECON.

7. If a student notifies the course coordinator of the need for reasonable accommodations without a form from the DSC the course coordinator shall refer the student to the office of the DSC to ensure completion of the appropriate process.

8. The student is responsible to give the completed form indicating the appropriate accommodation(s) for the student to the course coordinator. It is the student's responsibility to:

- determine to whom he/she wishes to disclose the disability.
- inform his/her faculty of the disability by providing a copy of the completed form to the course coordinator or faculty member.
- meet with the course coordinator to discuss the form that outlines the reasonable accommodation.
- notify the course coordinator of EACH course in the program at the beginning of the semester of the need for special accommodations.

9. The course coordinator then informs the DSC that they have received the form and are ensuring that the accommodations are made for the student. The course coordinator will sign the Notification of Faculty Form in the

designated area and return the form to the DSC. If the DSC does not receive the signed form from the course coordinator, the DSC will contact the student to ensure that the notification process is complete.

10. If a student who has requested and received accommodation(s) decides not to utilize the accommodations, the student will meet with the DSC to discuss the student's desire to defer the accommodation(s). The student will sign the Deferred Accommodation(s) Form indicating this. The student may decide at a later date to utilize the accommodations by notifying the DSC and submitting the Notification of Faculty by Disability Coordinator of Reasonable Accommodations form to the course coordinator. Students will not be allowed to retake exams, competencies, or resubmit assignments.

11. Except for circumstances of educational need to know or an emergency situation, the DSC WILL NOT initiate a discussion about the student's disability or accommodations with any faculty or staff person: The STUDENT is responsible for doing so.

12. Documentation submitted by the student as well as a copy of the Notification of Faculty Form or the Deferred Accommodations Form will be secured in a locked location in the office of the DSC.

13. The DSC will continue to assist the student as an advocate and advisor for as long as the student is enrolled at SECON. The student must exercise due diligence in utilizing the accommodations.

14. Prior to the DSC denying any requested accommodation(s), the DSC will confer with the Dean of Student and Faculty Development for Seniors/Title IX Coordinator to review the disability and accommodation(s) requested prior to making a final decision. The DSC will notify the student of any accommodation denial and rationale.

15. The Grievance and Appeals Related to Discrimination process can be initiated by any student who feels that they are not receiving the required accommodations. See the Grievance and Appeals Related to Discrimination Policy.

CONTENT EXPERT(S) / RESEARCHER(S) / CONTRIBUTOR(S):

St. Elizabeth College of Nursing
Notification of Faculty by Disability Coordinator
Reasonable Accommodations Needed by Students

Student: _____ Date: _____

At the request of the above student, I am confirming that s/he has a legally documented disability, and is entitled by law to reasonable accommodations, as defined under Section 504 of the Rehabilitation Act of 1973 (amended). The following accommodations were determined to be appropriate and reasonable as indicated in documents submitted by a licensed psychologist, physician, or evaluator. After a discussion with the student, appropriate amendments must be made relative to content, setting, and demands of the course.

Testing: ___ Extra time for tests: ___ time and a half ___ double time
 ___ Proctored exams in a separate location *with reduced distraction* from class.
 ___ Reader for exams (Recorded or electronic program may be used.)
 ___ Handwritten or computer response (not Scantron sheets) for objective tests.

Reading: ___ Alternatively formatted texts. (Each text requires 2-6 weeks for procurement.)

Writing: ___ Additional time to complete in-class writing assignments.
 ___ Evaluation of in-class writing assignments and exams should exclude spelling.

Note-taking: ___ Permission to use: ___ an electronic recorder ___ note-taker* in class

(*Please provide instructor notes or assist student in identifying a volunteer from class who could provide copies of his/her notes for the semester, Student may also use an adaptive device such as a Smart Pen or computer program that

will record and convert lecture to notes.)

Other: _____

Please sign and date below to verify that this student has disclosed his/her disability and appropriate accommodations to you. If you would like a copy of this form, write "cc" and PRINT your last name next to your signature.

Please call Beverly Plante at (315) 801-3034 if you have any questions or concerns. Thank you for your cooperation in our efforts to provide academic support services for our students *who require accommodations*.

I _____ understand that I must provide a copy of this form to my current course coordinator(s)
(Print Name)

and to all future course coordinators as I progress through the program. If I feel that this information should be shared with additional faculty, I understand that I must self-disclose the above information.

Signature (Student): _____ Date: _____

Signature: _____ Date: _____

(Disability Service Coordinator)

Signature (Faculty): _____ Date: _____

COPY

Reasonable Accommodations Notification of Faculty Form REV 7/7/2017 (Admin.drive Disability Information Folder)

St. Elizabeth College of Nursing

Utica, New York

Deferred Accommodations Form

I, _____ have decided to defer using the accommodations previously requested. I understand that I can decide to utilize my accommodations at any time during the semester after speaking with the Disability Services Coordinator and providing the Notification of Faculty Form to my course coordinators. I understand that I will not be allowed to retake exams, competencies, or resubmit assignments that were due during the time that I deferred my accommodations.

Reason for deferral:

Signature: _____ Date: _____

Student

Signature: _____ Date: _____

Disability Services Coordinator

COPY

Deferred Accommodations Form. (Admin/Disability Information)

This Document Replaces:

NSG-CNG-100.5

Attachments:

No Attachments

Approval Signatures

Step Description	Approver	Date
Owner	Faculty Organization	10/12/2017