Determining Accommodations for Lab and Clinical Component of Allied Health Programs

Stefanie C. Silvers, Ed.S., Accessibility Services Coordinator – Health Education Center
Dr. Eric H. Carver, Provost – Health Education Center
Students with Disabilities in Allied Health Programs

Registered Students with Disabilities/HEC

<table>
<thead>
<tr>
<th>Year</th>
<th>Registered Students</th>
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</thead>
<tbody>
<tr>
<td>2011</td>
<td>117</td>
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<tr>
<td>2012</td>
<td>235</td>
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<td>2013</td>
<td>271</td>
</tr>
<tr>
<td>2014</td>
<td>316</td>
</tr>
<tr>
<td>2015</td>
<td>285</td>
</tr>
<tr>
<td>2016</td>
<td>279</td>
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Unduplicated Student Count
Increase case law in the interactive process to determine “reasonable accommodations” in addition institutions have to verify that they have gone through a “proper deliberative process” to deny or offer an alternative accommodation, modification, or substitution that provides equal benefit.

- **University of Florida, No. 04-15-2415 (April 2016) OCR Order.** Student in medical school requested specific testing accommodations which were approved and given. Then requested additional accommodations some provided and some not, however not a clear process given to the student in writing or followed by the medical school. One of the voluntarily agreements by the University of Florida is that prior to the Complainant enrollment in the medical school the Disability office will go through an interactive process for each accommodation requested for each disability for both courses and clinical and to follow the Disability office process. In addition, UF will provide OCR documentation of each request and the process followed to make the determination.

https://www2.ed.gov/about/offices/list/ocr/docs/investigations/more/04152415-a.pdf

Determination of “essential requirements” of a program must be based on licensure requirements and/or on a deliberate process that includes trained and knowledgeable professionals.

These experienced professionals go through a current, “rational”, factual assessment to determine the request or an alternative that will meet the same standard balancing equivalent access for the qualified individual however not “lowering standards”.

The institution **must** have a “dialogue” with the student requesting the modification/adjustment.

The responsibility is placed on the institution to meet the adjustments requested by a student as soon as the student follows the institutions process in place (clock starts ticking), offer alternative, or deny but based on rational decision process.

What is missing – how do you document that process and factors that were considered in that process, working document.
“Qualified” so must be able to meet the academic and technical standards of the program for admissions and to participate

Student has invested a lot of time, emotional energy, and money.

Higher percentage to pass test/exams – 80% for nursing/PTA 78%

Limited opportunity to demonstrate application of understanding

Asking more of the learner – application/analysis/synthesis/evaluation of information in “hands-on” situations and multiple choice questions (Technical Standards)

Cohorted and structured

Set number of courses per semester

Time frame of course (8, 10, 12, or 16 weeks)

Number of hours outside the classroom

Preparing for “End of Program” final and Boards
Format of Instruction

- Classroom - Didactic
- On-line
- Lab – “hands-on” - Technical Standards/Course Competency
- Clinic – “observation and hands-on” - Technical Standards/Course Competency
Interactive Process

This process is needed to document “dialogue” with students, considered factors, and assessment indicators.

Request for Lab and Clinical Modifications

Case Scenario #1

Case Scenario #2
Requests for Clinical Modifications
Importance of Senior Leadership Support

- Share the benefit of open dialogue and communication with faculty/administration
- Work to establish “ownership” of the process and program with collaboration
- Have many advocates and “champions” to lobby for resources and attention to the cause
- Consistently have opportunities to discuss challenges and create an environment of service
- Establish consistency and evaluate as needed
Committee-based process or collaborate with academic departments in determining accommodations/modifications with lab/clinic. Allows buy-in and experienced/knowledgeable in the education field. Many are on the licensure boards.

Concerns – breach of confidentiality, liability of the institution, how many on campus professionals are aware of disability status, “need to know”, the length of time, and clarified role of health professional.

Important that determination of disability is with Accessibility Services, specific diagnosis very careful what is shared, and not specifics (file), why a form filled out with student and AS office, requests prior to the semester and specific time frame clearly stated, need to look at institution (size, philosophy, etc.) department input is critical so need to be part of the process. Roles of professionals clearly defined (Laird-Metke, 2016).
Coalition. (2012). *Medical Student Disability Services*. University of California, San Francisco


Questions?