

Disability Accommodation Handbook



Mineral Area College
Park Hills, Missouri

Disability Accommodation Handbook

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Acknowledgements

- **The College Student With A Disability: A Faculty Handbook.**
By: The President's Committee on Employment of People with Disabilities.
- **Project Able Faculty Handbook.**
By: St. Louis Community College at Florissant Valley.
- **Access To Post-Secondary Education: A Faculty Handbook.**
By: Project Access Great Falls Vocational Technical Center.
- **Disabilities Support Services: Faculty and Staff Handbook**
By: East Central College Counseling Services

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This handbook is provided for an informational purpose to faculty and staff. Every effort is made to keep this handbook accurate and current. However, due to changing policies and procedures, some information is subject to change. Such changes would be incorporated into revised versions of this handbook. The college reserves the right to make changes in the information contained herein.

If you need to access this handbook in an alternative format, please contact the ACCESS Office at 573-518-2152.

INTRODUCTION

As years have passed since the enactment of the Americans with Disabilities Act, the enrollment of students with disabilities has continued to rise at the college level. It is important to keep in mind that students with disabilities bring many different talents and abilities with them to academia. Many students will go on to continue to cultivate their talents at a four year institution or in employment. Persons with disabilities are employed in a variety of positions such as radiology technicians, networking professionals, elementary education teachers, counselors, physicians, and many others. They have the same concerns, ambitions, fears, and desire to do well as those students without disabilities.

Faculty and staff can expect to see more and more students with disabilities enter college. This trend is due to increased awareness of reasonable accommodations at the college level, advances in technology, and a strong desire to live independently. Additionally, changes in class formats, such as internet and distance learning classes, have opened the door to some students with disabilities who may have difficulties with available transportation. Increasing numbers of people with disabilities see higher education as a means for expanding options for employment and independence.

As we attempt to eliminate barriers, we come to realize how critical the understanding and support of faculty and staff is to this process. This handbook has been prepared for this purpose. The handbook combines materials from many sources. It is designed to assist faculty and staff in working effectively with students who have disabilities. It contains facts about various disabilities as well as practical information about services and resources.

Each student with a disability will have a different level of functioning within the same disability category. Also, compensation skills will vary widely from one student to another. Consequently, the information presented in this handbook should be seen as a general guide to the instruction of students with disabilities. This handbook is designed as a reference book that the instructor can consult when working with a student with a particular disability. It is not meant as a substitute for interaction between instructors and students, but rather to facilitate it. The student with the disability is the “expert” regarding his/her needs and can usually suggest a solution.

The ACCESS Office welcomes comments and suggestions for changes or additions to this handbook. Many unique situations and problems develop in attempting to provide reasonable accommodations to persons with disabilities. The ACCESS Office is always available to both faculty and staff to advise, assist, or refer to appropriate resources. Faculty, staff, and students often come up with ideas for accommodations which greatly enhance a student’s ability to benefit from the educational environment. It is hoped that you will share your ideas with the ACCESS Office.

Resource Contact:
Lisa Leftridge, ACCESS Director
Disability Support Services
518-2152, (V/TTY)
lleftrid@MineralArea.edu

LEGAL IMPLICATIONS

The Rehabilitation Act of 1973 (Public Law 93-112), Section 504, provides that “no otherwise qualified handicapped individual in the United States shall, solely by reason of handicap, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program of activity receiving federal financial assistance.”

Implications For Postsecondary Education

Section 504 applies to postsecondary education programs and activities. It designates that:

1. Students with disabilities are afforded an equal opportunity to participate in and benefit from all postsecondary education programs and activities. That includes any course, course of study, or activity offered.
2. Rules which limit the participation of students with disabilities in the program or activity may not be imposed upon the students with disabilities. (For example, prohibiting tape recorders and calculators in classroom or guide dogs in campus buildings.)
3. Academic requirements must be modified, on a case-by-case basis, to afford qualified students with disabilities an equal educational opportunity.

ADA and Section 504

The Americans with Disabilities Act of 1990 is comprehensive civil rights legislation created to help integrate persons with disabilities into every segment of society. Public entities such as colleges and schools have been required to prohibit discrimination against individuals with disabilities since 1973 under Section 504 of the Rehabilitation Act. The ADA extends to the private sector, adds new requirements and allows a complainant to collect damages.

There is a key difference between the two laws; however: Under the 1973 Law, people must bring complaints to federal agencies to investigate. Under the 1990 law, people can sue institutions directly.

-Scott Jaschik “Backed by 1990 Law, People with Disabilities Press Demands on Colleges,” The Chronicle of Higher Education, 3 February 1993: A26.

Who is covered under the ADA?

Under the ADA, the definition of a disability is quite general: A person who has a physical or mental impairment that substantially limits one or more major life activities. Major life activities can include and are not limited to mobility, vision, hearing, learning, performing manual tasks, walking, seeing, speaking, breathing, thinking, sitting, standing, interacting with others, concentrating, lifting, working, and running.

Why is this important to Mineral Area College?

Mineral Area College (MAC) is primarily affected by Title I of the ADA which prohibits discrimination in employment practices for qualified applicants with a disability and Title II which requires equal access to services and programs offered by public entities.

Furthermore, the ADA requires MAC to “reasonably accommodate” individuals with disabilities when necessary. The challenge of reasonable accommodations is that there are no hard and fast rules – each situation needs to be evaluated individually.

Academic Adjustments/Accommodations

To assure that students are aware that they must request services before the college is legally obligated to provide them, please read the below statement to your class at the first meeting and/or put the statement on your syllabus.

If any student will need any academic accommodations for this class due to a documented disability, please see me after class.

If any students do request accommodations, they will need to meet with the ACCESS Director, Lisa Leftridge. She will meet with the student to document the disability and determine the appropriate academic accommodations. After the determination is made, the student will provide you with a **Faculty Notification of Necessary Student Accommodations** form (see appendix) from the ACCESS Office about the accommodations needed. Until the determination is made, you are not legally obligated to provide the requested services.

The college is not required to provide individuals with disabilities with personal or individually prescribed devices, such as wheelchairs, prescription eyeglasses, hearing aids, or to provide the services of a personal attendant to assist with eating, toileting, or dressing (Section 504-Subpart E, 104.44, d-2). The college is not required to provide any personal service, such as the above, for students with disabilities unless the same type of service is provided to others without disabilities.

The following reference materials are available in the ACCESS Office:

1. Section 504 Compliance Handbook
2. ADA Compliance Guide
3. Disability Compliance for Higher Education
4. ADA Technical Assistance Guidelines (Book and CD-ROM)

STUDENTS WITH DISABILITIES ENTERING COLLEGE

Self-Identification

Students enrolling at Mineral Area College who seek services and accommodations for a disability must self-identify to the ACCESS Director. Many students received special education services in high school or some have been diagnosed later as adults. Others may, as a result of referral for a suspected disability, speak to the ACCESS Director to find out whether they may have a disability. The ACCESS Director will speak with students and make appropriate referrals for testing and disability documentation purposes. An **Application for Services** (see appendix) will be completed by those students interested in services.

When prospective students request services, they receive an **ACCESS Services Student Responsibilities Form** (see appendix) explaining the steps necessary to qualify and benefit from ACCESS services.

Documentation Requirements

Documentation required by the ACCESS Office will vary according to the nature of the disability. Documentation of a Learning Disability requires appropriate individual intelligence testing and achievement testing administered by a qualified professional. Health Disabilities require a statement of diagnosis from a medical doctor. Neuropsychological testing and rehabilitation records usually document a Traumatic Brain Injury. Orthopedic Disabilities, which are either present at birth or the result of a later injury, are verified by a medical doctor's statement. Hearing Disabilities or Deafness can be verified by the results of an audiogram administered by an audiologist. The results of a visual acuity test documents Blindness or Low Vision.

General Documentation Guidelines

- A diagnostic statement identifying disability, date of the current diagnostic evaluation, and the date of the original diagnosis.
- A description of the diagnostic criteria and/or diagnostic tests used, along with specific test results.
- A description of the current functional impact of the disability in the educational environment.
- Treatments, medications, assistive devices/services currently prescribed or in use.
- A description of the expected progression or stability of the impact of the disability over time.
- Recommendations for effective academic accommodations to equalize the student's educational opportunities at the postsecondary level.
- The credentials, address, phone and fax number of the diagnosing professional(s).

Faculty Referrals

Since instructors often see signs or results of learning problems in the classroom, it may be appropriate to refer a student. Sometimes a student with a diagnosed disability does not know about the ACCESS Office or what services can be provided. The student may not have been previously diagnosed, especially in the case of a learning disability. For example, in the case of returning students, learning problems could have been persistent in their academic backgrounds,

but general knowledge of learning disabilities may have been lacking at that time. Faculty and staff play an important role in helping students get the most out of their learning potential by making appropriate referrals to the ACCESS Office. This referral should be made in private.

In the case of a student who self-identifies, it is suggested that faculty and staff let the student know that the ACCESS Office exists. This information should be shared in a private meeting. In the case of a suspected disability, faculty and staff are encouraged to meet with the student privately to make a referral to the ACCESS Office. Please notify the ACCESS Director regarding referrals made.

Students should contact the ACCESS Office at 573-518-2152 to arrange an appointment. Although students may choose not to follow through with such recommendations, faculty and staff will have provided the opportunity for accommodations by informing them about the ACCESS Office.

Confidentiality

When students identify themselves as having a disability, they will be asked to provide documentation of the disability and the need for services requested. The requested documentation may include the results of medical, psychological, or emotional diagnostic tests, or other professional evaluations and may prove to be very sensitive in nature. Collecting this information is important to our institution in attempting to understand the nature and extent of a disability. This information also verifies the need for accommodations.

Documentation obtained by the MAC ACCESS Office regarding an individual's disability is considered private, is maintained in separate, secure files, and is to be shared on a need-to-know basis only.

“Need-to-know” within this context is generally viewed as “needing to have knowledge in order to be prepared to take a specific action”. If the individual would not do anything differently as a result of knowing the information regarding the disability, it would be inappropriate to share such information.

*-Jarrow, J. (1997). "Confidentiality of Disability Documentation", Available On-line:
www.janejarrow.com/public_library.*

In many cases, a faculty member does not need to know the specific disability, only the necessary accommodations needed to fulfill the institution's responsibility for equal access under ADA/Section 504.

The student will be asked to sign a **Release of Information** form (see appendix), giving the ACCESS Office permission to release necessary information about the accommodations on the **Faculty Notification** form. This information will be provided to faculty/staff with the understanding that it will be used to plan class accommodations only. At the first class meeting, encourage students who may have accommodation needs to discuss them with you. Keep in mind that unless students are requesting accommodations, they are not required to identify themselves as having a disability. Be very careful not to discuss information about students' disabilities with other faculty, staff, and students. All information is to be considered private.

Often students with disabilities do not like to explain their disability because it may be difficult to understand. The ACCESS Director encourages students to talk with instructors; however, the ACCESS Director will provide faculty with information about the student and the disability at the student's written request.

TEMPORARY CONDITIONS

The MAC ACCESS Office recognizes that temporary conditions such as fractures, severe sprains, or recoveries from operations may have a serious impact on the student's ability to function in his or her usual manner. These conditions may create a need for temporary accommodations. Although students with temporary conditions are not covered under the Americans with Disabilities Act of 1990, limited services from the ACCESS Office are available to assist these students with their needs.

Instructors can refer students with temporary conditions to the office where the Director will work individually with the student to determine if an appropriate intervention or support service is needed. This could include test accommodations, resources for physical access, and other classroom and/or lab needs. Students are responsible for keeping their instructors informed of changes in their condition, which will affect their educational performance in courses.

The following will be needed for documenting temporary conditions:

1. A clear statement of diagnosis, including pertinent history.
2. Documentation must be current (at least within the last two months).
3. A description of present symptoms, fluctuating symptoms, expected duration of condition, and prognosis.

ACCESS DIRECTOR'S RESPONSIBILITIES

The responsibility of the ACCESS Director is to assist the college and instructors in maintaining compliance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 by providing services to students with disabilities. Responsibilities of the ACCESS Director lie in ensuring physical access to students with disabilities, promoting student self-advocacy, facilitating accommodations, increasing disability awareness, and providing educational disability resources for students, faculty, and staff.

When students decide to self disclose a disability to the ACCESS Director and ask for accommodations, the first step is to validate the existence of the disability by reviewing documentation. The ACCESS Director ensures that students have recent and relevant documentation that includes the diagnostic summary, how the specific disability affects academic performance, and recommended accommodations suggested by a qualified professional. If a student has a learning disability, the documentation must also include appropriate psycho-educational testing information. These private records are maintained in the students' files in the ACCESS Office. They are not provided to other faculty or staff members without written permission from the student.

After reviewing the documentation, the ACCESS Director determines which accommodations suggested by the evaluator can be implemented in the college environment. Many accommodations provided at the high school level under the Individuals with Disabilities Education Act (IDEA) regulations are no longer applicable in post-secondary institutions covered by Section 504/ADA guidelines and these differences in accommodations are discussed with students.

After the student has met with the ACCESS Director and determined accommodations for courses, an **Instructor Notification** form will be prepared for the student to give to the instructor. When special testing accommodations include a reader or scribe for a test, the ACCESS Director coordinates and provides these services. Tests are administered as outlined on the **Out of Class Testing** (see appendix) form by the instructor along with accommodations that were listed on the **Instructor Notification** form. The ACCESS Director is also responsible for facilitating special services requested (sign language interpreters with the Staff Interpreter or books on tape) and arranging environmental accommodations (chairs and tables, wheelchair accessible classrooms, accessible parking, and technological support) with the cooperation of General Services/IT staff.

The ACCESS Office provides other services, such as academic advising, personal advising, assistive technology training, and self-advocacy training. The Director also serves as an agency liaison with both the Division of Vocational Rehabilitation and Rehabilitation Services for the Blind. Special videos, informational handouts, and resource books regarding disabilities, responsibilities, and self-advocacy are also available for check-out from the ACCESS Office Library.

FACULTY RIGHTS AND RESPONSIBILITIES

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination against an “otherwise qualified individual with a disability”. In the academic setting, this statement means if this person didn’t have a disability, he or she would still qualify to be here. Instructors are not required or expected to lower teaching standards. Having earned the right to be in college, students with disabilities have also earned the right to succeed or fail on their own merits.

Students with disabilities seek auxiliary aids or supports as reasonable accommodations for their documented disability. This is a cooperative process between the instructors, ACCESS Office, and students with disabilities. The accommodations are an attempt to level the playing field for the student with a disability and not to give them an advantage over other students. As previously mentioned, it is important for instructors to make a general announcement at the beginning of each semester regarding willingness to discuss student needs in private. In addition, instructors should include a statement in the syllabus saying that students needing support services and accommodations due to a disability should contact the ACCESS Office.

The ACCESS Office strongly encourages student self-advocacy. Please remember this could be the first time that a student has ever personally contacted an instructor. In high school (under IDEA guidelines), counselors and parents facilitated all arrangements. So there will be a certain amount of adjustment for the student at the college level that will need to take place. Open attitudes and genuine understanding can positively impact a student’s experience and serve as reinforcement for positive future self-advocacy. Students who register with the ACCESS Office will most likely approach you with an **Instructor Notification Form** prior to the beginning of the semester or soon after classes begin. This is a perfect opportunity to discuss accommodations as indicated on the form. When the student initiates this conversation, please help to make sure that the conversation takes place in a confidential environment - not in the classroom or hallway.

Technically, students who have not registered with the ACCESS Office are not eligible to receive accommodations for a disability. Faculty should provide only the auxiliary aids or supports and/or reasonable accommodations as indicated on the **Instructor Notification Form**. These selected accommodations are based on the student’s specific documented disability. **Instructor Notifications** may be amended during the semester as needed. After meeting with the student, faculty may have additional suggestions for a particular class situation. These suggestions are both needed and appreciated. Please be sure to consult the ACCESS Director before implementing additional accommodations. Keep in mind that the college can only legally support those accommodations approved by the ACCESS Office.

Instructor Notification Form

After reviewing the **Instructor Notification Form**, some of the suggested accommodations may not apply or be practical in your classroom situation. Please be aware that the forms received by the faculty are general forms sent to all of a particular student’s instructors. Please don’t hesitate to call the ACCESS Director to discuss your concerns immediately. Keep your copy of the **Faculty Notification Form** for the semester and destroy it after the student is no longer in your class. The form is an acknowledgement of the student’s needs and a “good faith” agreement to provide the support services requested.

If students do not make use of requested accommodations, the instructor should contact the ACCESS Director or send an interoffice memo. It is important to document the refusal. We can not force students to take advantage of the accommodations; we can only offer them. Some students may choose not to disclose their disabilities to the ACCESS Office or their instructors at the start of a semester. These students may be trying to avoid the stigma of being labeled as “disabled”. Many students try to make it on their own during the first semester or two, before pursuing services.

Note: Students are only provided services from the time they seek assistance from the ACCESS Office. These services and accommodations are not retroactive. Instructors will not be expected to retest students or to change grades on assignments already turned in by the student. Students have the right to refuse accommodations entirely, which does occur from time to time. The institution is under no obligation to provide accommodations unless students self-identify and provide documentation of their disabilities.

Accommodation Examples

Volunteer Note-taker Accommodations

The ACCESS Office encourages students with disabilities who need note-taker services to seek out their own note-takers and make all necessary arrangements. However, if the student is uncomfortable with finding a note-taker in a particular class, the instructor should make arrangements. The request for a volunteer note-taker can be made in the class by the instructor without identifying the student needing the accommodation and then meeting with both the volunteer note-taker/student at the end of the class period. If there are difficulties in identifying a student who can serve as a volunteer note-taker, please contact the ACCESS Director.

Taping Lectures

Some students will need to tape record class lectures and discussions. If taping of lectures is an approved accommodation through the ACCESS Office, students with disabilities must be permitted to tape lectures if other students are allowed to take notes in the class. Taping of lectures is permitted under the U.S. Department of Health, Education, and Welfare regulations for Section 504 of the Rehabilitation Act of 1973.

Students who have visual disabilities or specific reading disabilities may need to also have their textbooks on tape. The faculty member is not responsible for arranging this support service. The ACCESS Director contacts an outside agency, which can provide many of the textbooks. The instructor or campus bookstore may be contacted to acquire textbook information for obtaining textbooks on tape.

Testing Accommodations

If the student with a disability needs special test accommodations of extended testing time or testing in a non-distractive environment, the student will test in the ACCESS Office or Assessment Center. The student has the responsibility of providing the instructor with an **Out of Class Testing Accommodation Form** as a reminder to forward the upcoming test to the ACCESS Office. The instructor can either hand deliver the test or drop the test off in the ACCESS Office mail box. The test should be in the ACCESS Office at least two days prior to the test. The completed test will be returned to the instructor via their mail box.

If the student with a disability requires special test accommodations such as a reader or writer, the ACCESS Director coordinates and administers exams in these situations. Test taking procedures are closely monitored to assure integrity. Students with disabilities are held to the same Code of Conduct at Mineral Area College as their peers. Students will not be allowed to solicit or receive opinions from the reader/writer/proctor.

Since the privacy of the student's disability information is a concern, the instructor may want to shred any information provided on a student's disability and accommodations. If there is some documentation which an instructor would prefer to be kept indefinitely in a student's file after the semester ends, it may be returned to the ACCESS Office. A student's file is kept for five years, before being destroyed.

GENERAL SUGGESTIONS

Many of us have gone through life with little contact with persons who have disabilities. The appearance of a student with a disability in a class may create some anxiety at first and raise questions on how the student will be able to benefit from class. Keep in mind that a student with a disability is still a student, who has the same concerns as other students. They also have the same rights and interest in learning. To help alleviate any concerns in interacting and teaching students who have disabilities, the following suggestions have been provided:

Basics

- Students with disabilities who have the same disability will not always have the same needs.
- If the disability isn't germane to the story of conversation, don't mention it.
- Remember that a student who has a disability isn't necessarily chronically sick or unhealthy.

Common Courtesies

- Don't feel obligated to act as a caregiver to students with disabilities. Offer assistance, but **wait** until your offer is accepted **before** you help. Listen to any instructions the student may give.
- Leaning on a student's wheelchair is similar to leaning or hanging on someone. It is considered annoying and rude. The chair is a part of one's personal body space.
- Share the same social courtesies with students with disabilities that you would share with someone else. If you shake hands with people you meet, offer your hand to everyone you meet, regardless of the disability. If the student is unable to shake your hand, he or she will tell you.
- When offering assistance to a student with a visual disability, allow the student to take your arm. This will enable you to guide, rather than propel or lead the student. Use specific directions, such as "left two yards" or "right ten steps", when directing a student with a visual impairment.
- When planning events which involve people with disabilities, consider their needs before choosing a location. Even if people with disabilities will not attend, select an accessible spot.

Conversation

- When talking to a student who has a physical disability, speak directly to that person, not through a companion. For students who communicate through sign language, speak to them, not to the interpreter.
- Relax. Don't be embarrassed if you use common expressions such as "See ya later".
- To get the attention of a student who has a hearing loss, tap them on the shoulder or wave. Look directly at the student and speak clearly, slowly and expressively to establish if they read lips. Stay in the light and keep food, hands and other objects away from your mouth. Shouting won't help. Written notes will. Use an interpreter if possible.

- When talking to a student in a wheelchair for more than a few minutes, place yourself at eye level with that student.
- When greeting a student with severe loss of vision, always identify yourself and others. For example say, “On my right is Mary Smith.” Remember to identify persons to whom you are speaking. Speak in a normal tone of voice and indicate when the conversation is over.

Adapted from PARAQUAD – Independence for people with Disabilities

**SPECIFIC DISABILITY
INFORMATION**

AIDS (ACQUIRED IMMUNE DEFICIENCY SYNDROME)

AIDS is actually a syndrome - a collection of symptoms. Many of the illnesses associated with the AIDS Syndrome are not caused by the virus, but they are brought on by infections or diseases caused by organisms that take advantage of the body's weakened immune system. Students who are HIV positive are considered to have a disability and have legal protection under federal law.

In most cases, institutions will be legally obligated to support the rights of the student with acquired immune deficiency syndrome.

As educators, we must recognize that:

- Most persons infected with AIDS do not know they are infected.
- Many persons infected with AIDS remain apparently well but are still infectious to others.
- The Human Immunodeficiency Virus (HIV) is very fragile and does not survive outside the human body for more than a few seconds. Therefore, it is not easily transmitted from one person to another.
- The virus is most commonly spread through sexual intercourse with someone who has the virus or intravenous injection with contaminated needles.
- Reducing exposure to body fluids known to transmit HIV is the best form of prevention. Bodily fluids known to transmit HIV are: blood, semen, cervical secretions, and possibly breast milk.
- People with HIV infection pose no risk of transmitting the virus to others through ordinary, casual interpersonal contact.

The individual with immunodeficiency may need to be absent from classes for their own protection when cases of acute or short-term communicable disease, such as measles or chicken pox, are occurring in the college population.

Precautions

- Hand washing is the primary method to stop the spread of all illnesses.
- If you are taking care of a student with a cut or bloody nose, wear latex gloves whether or not the person is known to be HIV positive.
- Always handle any blood or blood contaminated body fluids with latex gloves.

Laboratory Classes

Laboratory courses requiring exposure to blood, such as biology courses in which blood is obtained by a finger prick for typing and examination, should use disposable equipment, and no lancets or other blood-letting devices should be reused or shared. No students except those in health care professions in schools should be required to obtain or process the blood of others.

ASPERGER'S SYNDROME/AUTISM

Asperger's Syndrome is a neurobiological disorder that includes autistic-like behaviors and marked deficiencies in social and communication skills. Individuals with Asperger's Syndrome normally have average or above average intelligence. People with Asperger's Syndrome may have few facial expressions, monotone or droning voice, and find the rules of social interaction a mystery. Most people with Asperger's Syndrome have excellent rote memory and become intensely interested in one or two subjects (sometimes to the exclusion of other topics).

Since students are given the responsibility of advocating for themselves, they may or may not apply for services and support from the ACCESS Office. They will have to be able to make many decisions for themselves and talk with their professors. The following is some information to consider when working with students with Asperger's Syndrome:

Important points to keep in mind:

- Most students with an autism spectrum disorder need clear, systematic, organizational strategies for academic work as well as aspects of daily living. Calendars, checklists, and other visual strategies for organizing activities should be developed with the student.
- Many students with Asperger's/high functioning autism will do best in courses that draw on factual memory and/or visual perceptual skills. Courses that require abstract verbal reasoning, flexible problem solving, extensive writing, or social reasoning are often challenging. Courses in communication and psychology may improve social understanding and skills, even though they may be a challenge
- Course load is an important issue, especially during the first year when everything is new. For some students, a reduced course load can help keep the stress levels more manageable.
- Many students with autism need extra time for thinking about problems and for completing work. This means that they may need longer than most students for reading/assignments.
- Going over written guidelines, checklists, or providing other advance preparation to the student may be needed for using such things as a campus ID and charge card, campus map, e-mail, library hours/how to get help from a librarian, and discussing how lectures work.

Academic Accommodations that may be helpful for some students with Asperger's Syndrome/high functioning Autism are as follows:

- Many of these students need a little longer to process information and organize responses. This can mean that they will take a little longer in responding to questions in class. It also means that he or she should receive the accommodation of extra time on tests.
- A distraction-free environment may be important for ongoing studying and for taking tests due to difficulties in processing and screening sensory information.
- Sitting at or close to the front can make it easier to hear and understand a lecture.

- Students with difficulties in oral communication or in working as part of a group can find group work and giving talks in front of the class challenging requirements. When this is the case, the student should speak with the professor about his or her disability early in the semester. In some cases, accommodations may be appropriate. In others, the professor's understanding and support might suffice.

Source: College Tips for Students with High Functioning Autism/Asperger's Syndrome
Handout Supplied by Ann Palmer & Gladys Williams with Chapel Hill TEACCH Center

ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

ADHD is a disability that affects a person's ability to concentrate on a task for a long period of time. These individuals are easily distracted. This condition may also include hyperactivity. When hyperactivity is present, restlessness and excessive activity may also be present.

Common Characteristics Of ADHD

- Inability to focus
- Lack of ability to manage time
- Distractibility
- Inattentiveness
- Reduced ability to follow instructions and/or complete complex tasks
- Hyperactivity
- Inappropriate behaviors in social settings
- Impulsivity
- Fails to pay attention to details
- Difficulty listening when spoken to directly
- Excessive talking
- Often interrupts or intrudes on others

Possible Reasonable Accommodations Applicable To Someone With ADHD

- Extended time on tests
- Large print texts
- Note-taker/writer
- Use of audiotape recorder for retention
- Separate quiet testing facility
- Alternative formats (oral, essay –VS- multiple choice)
- Preferential seating near the front and away from windows or doors to limit distractions

Useful Tips For Interacting Or Assisting Successfully With Someone With ADHD

- Offer specialized skills tutoring (organization, time-management, social and behavioral skills, writing skills, reading skills, math skills)
- Often social skills demonstrated by someone with ADHD can be misconstrued as aloofness or rudeness. You need to be aware that the impaired social skills are a symptom of ADHD and not necessarily a representation of the person lacking interest or concern
- Try to create a distraction reduced environment for interactions
- Pay special attention to providing instructions that are clear and easy to follow

BLINDNESS

Only a small minority of persons are actually totally blind. The term “Blindness” should be reserved for complete loss of functional sight. The major challenge facing students who are blind in college is the mass of printed material they encounter in textbooks, class outlines, schedules, tests, films, videotapes, etc. By the time a student who is blind reaches college (unless newly blind), they have probably developed various methods for dealing with the volume of visual materials. It is extremely helpful for the instructor and student to meet before the semester starts to review the student’s methods. Instructors are often quite surprised with the degree of independence many students who are blind exhibit.

Interaction With A Student Who Is Blind

- If a student who is blind seems to need assistance, identify yourself and offer your services.
- If you are walking with the student, let him/her take your arm just above the elbow and walk in a relaxed manner. The student can usually follow the motion of your body.
- When giving directions, use descriptive words such as straight, forward, and left. Be specific in directions and avoid use of vague terms such as “over there.”
- When you are with a student who is blind and leave the area, be sure to let the student know you are leaving.
- Guide dogs are working animals. It can be hazardous for the student who is blind if the dog is distracted. Do not pet or touch the dog without permission.
- Feel free to use words like “see” or “look” when speaking with a student who is blind.
- Do not assume the student will recognize you by your voice even though you have met before. Identify yourself by name.
- It is helpful to speak directly to the student and to maintain eye contact.

Teaching A Student Who Is Blind

Notetaking: Students use one or more of the following methods of taking notes.

Braille: It should be noted that only a small percentage (10%) know Braille. Students who use Braille prefer to take their own notes using a slate and stylus or a portable Braille. Please be understanding of the slight noise made by this equipment.

Tape Record Lectures: Under the U.S. Department of Health, Education and Welfare regulations for Section 504 of the Rehabilitation Act of 1973, taping of class lectures must be permitted if that is the approved request of the student with a physical or learning disability. An instructor who is planning to publish his or her lectures may fear that the tape will somehow interfere with these plans. It is appropriate for the instructor to ask the student to sign an agreement not to release the recording or otherwise obstruct the copyright. This agreement can be obtained from the ACCESS Office. It is recommended that students need to sit close to the speaker to insure clear tapes.

Volunteer Notetaker: Some students who are blind will ask another student to take notes for them. There is special carbonless paper available from the ACCESS Office that will make an immediate copy. Some students will obtain photocopies from other students and these photocopies can be made in the ACCESS Office. A hand out on tips for volunteer notetakers is also available from the ACCESS Office.

Visual Lecture Intake: Remember, words like “this and that” or phrases like “the sum of this plus that equals this” or “the lungs are located here and the diaphragm here” are basically meaningless to a student who is blind. The instructor can just as easily say, “the sum of 4 plus 7 equals 11.” In the second example, the professor can “personalize” the locations of the lungs and diaphragm by asking class members to locate them by touch on their own bodies. Examples of this type will not always be possible. However, if the faculty member is sensitive not to use strictly visual examples, the student and probably the rest of the class will benefit.

- Students who are blind may miss all nonverbal cues unless they are explained.
- By spelling out new or technical vocabulary you will be helping the student as well as other students.
- Give verbal notice of room changes, special meetings or assignments. Students who are blind are likely to miss a notice written on a chalkboard or in a syllabus.
- Consider making copies of overhead materials presented for students who are blind. The student can go over the description with his/her reader prior to or immediately after the lecture.
- Another student in the classroom may be able to describe visual displays or a student’s personal reader could do this between classes.
- Visual aids need not be deleted. Use the chalkboard, graphs and slides as you would normally. Try to provide more oral descriptions and verbalize as you go.

Texts and Required Readings: Books on tape can be ordered through the college’s institutional membership or the student’s membership. Some students who are blind will already have a personal membership set up with Recording for the Blind & Dyslexic. These must be ordered well in advance to allow preparation for those books not already available on tape. If students do not have their own personal membership with RFB & D, students will need to contact the ACCESS Office to arrange for ordering these books, before the semester starts.

Readers/Writers: Paid or volunteer readers can assist a student who is blind with materials that are not on tape or in Braille. Readers and writers may be needed to assist students in completing in-class assignments. Students are responsible for obtaining their own personal readers and writers outside of class.

Tests: It is the student’s responsibility to discuss alternative test-taking methods with the instructor. The following methods have been utilized by instructors and students who are blind.

- Readers and writers can be provided for test taking. Advance notice to the ACCESS Office needs to be given to allow for scheduling.
- Instructors can give oral tests.

- Instructors can allow for take-home tests.
- Try to avoid giving the student who is blind “different” tests because it creates segregation and makes it difficult to compare test results

Mobility Guides: Some students use the assistance of trained guide dogs to increase their mobility. These dogs are trained to move at the direction of their owners and are well-disciplined to function in groups of people; their presence in the classroom should cause no disruption. Other students may use white canes. Special consideration may be needed for the students if a class is moved to a new location, if an exam is scheduled for a different classroom, or if the furnishings in the room are moved for a special program or project.

CARPAL TUNNEL SYNDROME

Carpel Tunnel Syndrome is a nerve disorder in the hand that causes pain and loss of feeling, especially in the thumb and first three fingers.

Symptoms

- Tingling or numbness in part of the hand
- Sharp pains that shoot from the wrist up the arm
- Burning sensations in the fingers
- Thumb weakness
- Frequent dropping of objects
- Inability to make a fist

Possible Difficulties At College

- May not be able to write at all or for only a very limited time, which may require student to either tape record lectures, use a writer for a test, or check with a student to be a volunteer notetaker
- May have a splint on affected arm(s)
- May have to have surgery to free the pinched nerve

Source: Complete Guide to Symptoms, Illness, & Surgery, H. Winter Griffith, M.D.

CEREBRAL PALSY

Cerebral Palsy is not a disease, but a condition, involving nerve and motor dysfunction, which is caused by damage to the brain. Although usually as a result of prematurity or oxygen deficiency during birth, Cerebral Palsy can also be caused by injury, drugs, or child abuse. Cerebral Palsy is neither progressive nor contagious. The term “cerebral” refers to the region of the brain that has been damaged and “palsy” refers to the shaking or uncontrolled movement.

Cerebral Palsy is characterized by an inability to fully control motor function. Depending on which part of the brain has been damaged and the degree of involvement of the central nervous system, one or more of the following may occur: spasms, involuntary movement; disturbance in gait or mobility; seizures; abnormal sensation and perception; impairment of sight, hearing, or speech; and mental retardation.

There are three main types of Cerebral Palsy: Spastic-stiff and difficult movement, Athetoid-involuntary and uncontrolled movement, and Ataxia-disturbed sense of balance and depth perception. Mixed cases can affect several motor centers and result in mixed symptoms.

Symptoms And Types Of Cerebral Palsy

In addition to major limb disturbances, Cerebral Palsy patients sometimes have hand tremors, making fine movements difficult. They have problems in speaking, chewing, swallowing, maintaining visual focus, or following a moving target. There may also be drooling, a cooler surface temperature over affected parts of the body, or the loss of bowel or bladder control.

Accommodations

Every individual with Cerebral Palsy presents a unique capacity and potential for coping. A lot may depend on the programs available and the personal support system the person has. Accommodations in the classroom will vary for each student, depending on the type of Cerebral Palsy and the areas affected. Accommodations may include, but are not limited to: in-class volunteer notetakers, tape recorded lectures, alternative testing measures, adaptive computer equipment, and extended time on tests.

DEVELOPMENTAL DISABILITIES

Developmental disabilities are a diverse group of physical, cognitive, psychological, sensory, and speech impairments that begin any time during development up to 22 years of age. In most cases, the cause of the disability is not known. In the recent past, the term “developmental disabilities” referred primarily to people who have mental retardation. More recent definitions are broader and may be applied to individuals with seizure disorders, learning disabilities, autism, traumatic brain injuries (acquired before the age of 22), Asperger’s syndrome, etc.

Since Mineral Area College, is an “open door” institution, students who are diagnosed as developmentally disabled can enroll in college classes, even if their intellectual functioning may not show ability to succeed in the post-secondary setting. If such students have graduated from high school or earned a GED, they are eligible to enroll in any MAC course they choose (assuming the completion of assessment testing and any other required prerequisites).

Like any other student with a disability, these individuals have the right to succeed or fail based upon their individual abilities. They also may have the right to certain academic accommodations to level the playing field, but not to provide them with unfair advantage.

As appropriate, faculty and staff may refer any student, including a student with a developmental disability, to other sources of training or appropriate agencies in the community. Various adult training programs in the surrounding areas may be a better match for a student’s interests, skills, and motivation level. Even though the staff may attempt to guide some students into appropriate training settings, it is the student’s right to pursue a higher level of education.

EPILEPSY

Epilepsy is a common neurological condition. It is sometimes called a seizure disorder. It takes the form of brief, temporary changes in the normal functioning of the brain's electrical system. These brief malfunctions mean that more than the usual amount of electrical energy passes between cells. This sudden overload may stay in just one small area of the brain, or it may swamp the whole system.

Of course, you cannot see what is happening inside a person's brain. However, you can see the unusual body movements, the effects on consciousness, and the changed behavior that the malfunctioning cells are producing. These changes are called epileptic seizures. Epileptic seizures may be convulsive or non-convulsive in nature, depending on where in the brain the malfunction takes place and on how much of the total brain area is involved.

- Convulsive seizures are the ones which most people generally think of when they hear the word "epilepsy". In this type of seizure, the person undergoes convulsions which usually last from two to five minutes with complete loss of consciousness and muscle spasms.
- Non-convulsive seizures may take the form of a blank stare lasting only a few seconds, an involuntary movement of arm or leg, or a period of automatic movement in which awareness of one's surroundings is blurred or completely absent.

What To Do During An Epileptic Seizure

- The first rule is to remain calm. There is nothing you can do to stop the seizure once it has begun. Do not try to restrain the individual. Prevent others from crowding around.
- If it is a convulsive seizure, lower the person to the ground or floor if possible and clear the area of furniture to avoid injury. Try not to interfere with movements in any way. Do not force anything in the person's mouth. Loosen ties and shirt collars, and place something soft under the head. When the person regains consciousness, reassure him/her and ask what additional assistance is needed.
- Note the time of the seizure starting. If a seizure lasts longer than 5 minutes, or if multiple seizures occur without the person regaining consciousness, treat it as a medical emergency by calling 911.
- For a non-convulsive seizure, no medical action is typically needed. Stay with the person and gently guide them away from obvious hazards. Speak calmly and reassuringly to them. Stay with the person until they are completely aware of their environment around them. Do not grab the person or try to restrain them in any way. Offer to provide additional assistance that the person may need.
- Non-convulsive seizures are often mistaken for: daydreaming, lack of attention, ignoring instructions, poor coordination, intoxication, or clumsiness.

Most seizures happen without warning, last only a short time, and stop without any special treatment. Injuries can occur, but most people do not come to any harm in a seizure and do not usually need to go to the hospital or see a doctor.

HEARING DISABILITIES

Students with hearing disabilities may be difficult to recognize in the classroom. Some students use hearing aids and have learned to read lips or use sign language for communication. The term “hearing disability” is used to describe a person with any type of hearing loss. “Deafness” refers to any individual with nonfunctional hearing. In most cases, English is not their first language. Therefore, language acquisition may be affected. Students may not perceive word endings and subtle differences in pronunciation. There may also be difficulties with grammar and spelling due to sign language having its own unique grammar. “Hard of hearing” is used to define a person who has a functional sense of hearing and whose English language skills will be developed through auditory means.

The major challenge facing an individual with a hearing disability is communication. A student with a hearing disability has varying degrees of communication. Not all people with hearing disabilities are good lip readers and only 30% of the spoken English language can be lip read. Some individuals with hearing disabilities choose to use sign language as a way to communicate with others. However, not all people with hearing disabilities know how to sign. Some choose to lip read while others use interpreters or a combination of both.

A hearing aid does not correct a hearing loss like glasses correct vision problems. Most people who are deaf have sensory neural hearing losses and clarity of speech is also affected. The hearing aid does not make speech more clear, it merely amplifies the sound.

The speech of some people with hearing disabilities will be easy to understand. Others can’t monitor the volume and tone of their speech and may be initially hard to understand, but understanding can improve over a period of time.

Hints For Working With Students With Hearing Disabilities

- Attract the attention of the student before speaking with a cue such as a tap on the shoulder or wave.
- Face the person while talking (try to avoid facing the chalkboard while speaking).
- Speak clearly and naturally without exaggerating lip movements or volume.
- Avoid standing in front of a light source like a window-the glare from behind makes it difficult to read lips.
- Do not chew gum, smoke, or otherwise obstruct your mouth with your hands or other objects which interfere with speech reading.
- Keep all information confidential.

Possible Classroom Accommodations

- Seat students where there is an unobstructed view of the professor.
- Try to repeat comments and questions asked by other students who are not in the range of vision of students who have hearing disabilities.

- Use visual media (especially overhead projectors) as they are effective tools.
- Provide a script or outline of slides, films, or videotaped materials. Captioned films for students who are deaf can be extremely helpful if they are available.
- Supply a list of technical terminology or specialized vocabulary to the interpreter as well as the student with the hearing disability.
- Assure that students who have hearing disabilities are informed of important information like class cancellations, class relocation, assignments, and tests by stating details in writing in a hand out and the chalkboard.
- Be prepared to reword sentences for a student, who does not understand what is being said.
- Be objective when evaluating written materials from students who have hearing disabilities. Advise students to seek tutoring assistance from the Learning Center or the EXCEL Office when they have grammar and syntax problems. Some may have difficulties expressing themselves fluently.
- Direct remarks to the student directly, not to the interpreter. The student should have the option of watching both the speaker and the interpreter.
- Assistance will be needed in arranging for a volunteer note-taker for the student. Students who are deaf can not watch the interpreter and take notes at the same time.

Tips To Remember If A Student Is Using An Interpreter

- Interpreters received specialized training and are paid professionals.
- An interpreter may be distracting at first. However, students will become accustomed to the interpreter's presence.
- At present, Mineral Area College has a full-time Staff Interpreter and also utilizes an outside interpreting agency for services at times. This is dependent on the number of students who require such services and the hours that they take during a semester. If there are any questions or concerns regarding an interpreter, they should be directed to the ACCESS Director.
- Interpreters will sign the comments and questions of class members as well as everything the instructor says. Interpreters will interpret in a manner that conveys the content intended by the speaker.
- Interpreters are not there to answer questions of the student with the hearing disability. If the student has questions, he or she should direct them to you. The interpreter can voice the student's questions if you do not understand.
- Direct your questions to the student with the hearing disability, not the interpreter. The interpreter is often signing a few words behind the speaker and needs more time to finish so that the student with the hearing disability can respond.
- Interpreters will not give opinions of a student's progress as this violates the student's rights.

- Interpreters will not proctor for exams.
- Provide breaks in lengthy classes (more than an hour and fifteen minutes), because the student with the hearing disability and the interpreter experience mental, physical, and visual fatigue. This enhances the student's chance of comprehending lectures.
- Provide the student and interpreter with outlines of the lecture or written materials prior to the class session. If the class contains technical vocabulary, the interpreter and student with the hearing disability must learn new signs or create signs for vocabulary that have no signs.
- If movies are shown, a dim light is needed to enable the student with a hearing disability to see the interpreter.
- The student and interpreter should be positioned so the student can see you and the interpreter simultaneously.
- When doing math problems, the interpreter has a difficult time interpreting phrases such as "multiply this and that". The interpreter has to turn around to see what "this and that" are on the board. This problem is solved if the instructor says "multiply 42 by 46".
- In math classes or classes where the instructor frequently uses the chalkboard, the interpreter will "shadow" the instructor. This means the interpreter will stand close to the section of the board that is being written on by the instructor. This allows the student to see both the signs and the writing.

Tips To Keep In Mind If A Student Is Not Using An Interpreter

- Classroom discussions are very difficult for a hearing impaired student to follow. Repetitions or summaries of the most relevant comments are helpful.
- Student questions may not be heard by the student. You can help by repeating the question.
- All instructions should be in written format. Verbal class assignments and due dates, examination dates, normal class schedule changes, etc. may be missed.
- Face the student when talking.
- In group discussions, it helps to have students sit in a horseshoe or circle.

Using The Missouri Relay Service

The Missouri Relay Service allows people who are deaf, hard of hearing, or have speech disabilities to communicate with virtually anyone through the telephone system. Using a Text Telephone/TT (also referred to as Telecommunication Device for Deaf/TDD or Teletype/TTY), the person types the message. A Communication Assistant with a computer reads the message and voices the message to the receiver who is using a regular voice telephone. The receiver then responds in voice which is heard by the Communication Agent and typed back to the person. Missouri Relay Service brochures can be obtained from the ACCESS Office.

To initiate a call, dial the appropriate number:

**Relay Missouri: 1-800-735-2466 (voice)
 1-800-735-2966 (TTY)**

Give the Communication Assistant the number you wish to call, the name of the person you wish to contact, and (if long distance) how you wish to pay for the call.

If you receive a relay call, the Communication Assistant will announce the call and offer to explain the service.

When using Relay, remember:

- Relay calls are confidential. No records of any conversation are maintained and Communication Assistants will not share information regarding the contents unless they are required to do so by state or federal law.
- DO NOT address the Communication Assistant. Address the person you are communicating with. Do not say “Tell her I said...” Just speak as if you are talking directly with the person.
- When you have finished a thought, say “GA” (Go Ahead) to the Communication Assistant to let him or her know that you are ready for the other individual to respond. This message will be typed to the TTY user who will respond. When you are ready to finish the conversation, say “GA to SK” and when you are ready to hang up say “SKSK”. But, remember normal telephone etiquette.
- The Communication Assistant will type every word you say.
- Speak at a moderate pace and keep your sentences as concise as possible. Do not ramble and repeat phrases over and over again.
- You may ask for a Communication Assistant whose gender is the same as yours or as the person with whom you will be talking. Sometimes this makes the conversation seem more natural.
- Relay Missouri has a “Voice Carry Over” (VCO) option that allows a person who is deaf or hard of hearing to use his/her own voice.
- While this system may seem a little awkward at first, please DO NOT put off placing or returning a call just because you must use the relay service. It is very important for people who have such disabilities to maintain communication with the world and to be as independent as possible.

LEARNING DISABILITIES

A learning disability (LD) is a hidden disability. Unlike the person who uses sign language for communication or the person who walks with crutches, the student with a learning disability shows no visible characteristics of a disability. Because it is a hidden disability, the student may have been accused of “faking it” or “being lazy.”

Thomas Edison, Albert Einstein, Leonardo da Vinci, Nelson Rockefeller, Bruce Jenner, and Agatha Christi all have or had learning disabilities. Today as many as 20% of the population may have mild or severe learning disabilities.

Learning disabilities are so individualized that any generalization about specific signs or symptoms is of limited value. Each student will be better able to describe how he/she functions in relation to his/her learning disability. Keeping this in mind, a brief description of problems a student with a learning disability may have to deal with follows. No student exhibits all, and each student has varying degrees within, these categories.

Dyslexia: Reads slowly and painfully. Experiences decoding errors, especially with order of letters. Difficulties in handwriting, spelling, and may have math computational problems.

Dyscalculia: Displays difficulty recognizing patterns when adding, subtracting, multiplying, or dividing. Will have problems using steps in math operations and difficulties in sequencing information or events. Difficulties in understanding fractions and putting language to math processes.

Dysgraphia: May have illegible handwriting in printing and/or cursive as well as inconsistencies in writing (print and cursive, lower case and capital letters). Has difficulty with thinking and writing at the same time.

Dysphasia: Difficulties gaining meaning from spoken language. Exhibits poor reading comprehension. Can be often frustrated by feeling as if words are on tip of tongue, but can't quite get it to come out.

Figure-ground perception: Difficulties in picking out an object from a background of competing objects.

Visual discrimination: Unable to discern the difference in objects.

Spatial perception: Difficulties seeing things in the right order.

Auditory figure-ground perception: Problems in hearing one sound against a background of noises.

Auditory sequencing: Difficulties in hearing sounds in the correct order. Dysfunction in one's sense of balance.

Apraxia: Dysfunction in motor planning or knowing where you are in space.

Tactile reflex: Sense of touch is disturbed, which causes problems with sense of touch (holding a pencil, turning pages).

If you suspect that a student in your course has a learning disability and he or she would like to locate a testing source, please have the student contact the ACCESS Office for a list of possible diagnostic centers. The college does not provide this diagnostic testing, but does have a referral list for the student to review. Many state and federal programs, as well as the college itself, require that the student document his/her learning disability to receive such services.

Some Facts About Students With Learning Disabilities

- Students with Learning Disabilities are not retarded or otherwise lacking in intelligence. They are average to above average in intelligence.
- The student's needs center around information processing.
- The student's capacity for learning is intact; only the means by which information is processed is different.
- Sometimes a student may have a poor self-concept from previous failures and frustrations.
- Most of these students exhibit a high level of inconsistency in the way they perform. For example, Nelson Rockefeller learned to speak fluently in several languages, but he had to have his speeches written out in large letters and spaced in such a way that he could decipher them when giving speeches on TV.
- One of the most common, but least understood, characteristic of people with learning disabilities is the inability to receive accepted rules and customs of society. A common stereotype which may be heard concerning learning-disabled individuals is that they are immature. This stereotype is incorrect and has more to do with their learning disability and how they process social interactions.

Teaching A Student With Disabilities In Learning

Toward increasing awareness about what you as a college professor can and should do to assist students with learning disabilities, perhaps the first priority should be to develop a few ideas about what you are not expected to do.

First, you are not expected to lower your own standards of teaching excellence. Students with learning disabilities are not in your class for a free ride, nor the gift of a good grade. Having earned the right to be in college, they have also earned the right to succeed or fail.

Second, you are not asked to be an educational therapist, part of whose job is to remediate or diagnose or prescribe. Your responsibility is to teach the content and assist in providing appropriate accommodations at the postsecondary level.

But there are some things you can and should do, strategies with which you can personally be comfortable. You may already have employed many of them in working with students who are blind, deaf, or have physical disabilities. These adjustments circumvent the student's learning problems and teach them how to use their strengths.

You may have understandable doubts about the following list of alternative ways of teaching, learning, and testing methods. The fact remains that the student's capacity to learn is

intact. It is only the means by which the information is given and then processed that is different.

Notetaking: Students may use one or more of the following methods of obtaining class notes.

Take own notes.

Tape record lecture: Under the U.S. Department of Health, Education, and Welfare regulations for Section 504 of the Rehabilitation Act of 1973, taping of class lectures must be permitted if that is an approved request of a student with a physical or learning disability. An instructor who is planning to publish his or her lectures may fear that the tapes will somehow interfere with these plans. It is appropriate for the instructor to ask the student to sign an agreement not to release the recording or otherwise obstruct the copyright. Students need to sit close to the speaker to insure clear tapes. If needed, an agreement can be obtained from the ACCESS Office.

Volunteer note-taker: Some students will ask another student to provide a copy of his or her notes to “fill in” gaps of information. There is special carbonless notetaking paper (NCR) that will make an immediate copy, which is available through the ACCESS Office. Other students will obtain photocopies of another student’s notes.

Instructors’ notes: Some instructors provide the student with a copy of their notes or outlines.

Note: Students with learning disabilities should be encouraged to copy notes or outline the taped lectures to develop these skills.

Texts and required readings: It is often helpful for students with learning disabilities to use both the visual and auditory channels when reading the text or other readings. Texts on tape can be ordered through the college’s RFB & D institutional membership. These must be ordered well in advance to allow preparation. If students provide the text book information to the ACCESS Office well in advance of the beginning of the semester, the office will be able to order the texts on tape from RFB & D. In some cases, texts can be obtained in electronic format from the publisher after the student purchases the text.

Readers/Writers: Paid or volunteer readers can assist the student with in-class materials that are not on tape. Readers/writers may be needed to assist in library research or in completing in-class assignments. Students are responsible for their own personal reader or writer outside of class.

Test: It is the student’s responsibility to discuss alternative test-taking methods with the instructor. The following methods have been utilized by instructors and students with learning disabilities.

- Readers/writers can be provided for test taking. Advance notice needs to be given to allow time for scheduling.
- Some students find that enlarging tests helps their processing ability.
- The student with a learning disability may merely need extended time.
- Oral exams, hands-on demonstration, or open-book tests might be the answer. For the

- aphasic person for whom an oral report might be a total impossibility, perhaps an exhibit of some sort could be substituted.

Some General Suggestions For Instructors

- The following list of suggestions may help a student with learning disabilities succeed in your class. You are probably already using many of these techniques and if not, you may find that other students will benefit as much as a student with a learning disability.
- Provide students with a detailed course syllabus and make it available before class starts, if possible.
- Announce reading assignments well in advance for students who are using taped materials.
- If necessary, allow students with learning disabilities to demonstrate mastery of course material using alternative methods (e.g. extended time limits for testing, oral exams, taped exams, individually proctored exams in a separate room).
- Start each lecture with an outline of material to be covered that period. At the end of class, briefly summarize key points.
- Present new or technical vocabulary on the blackboard or use a student handout. Use terms in context to convey greater meaning.
- Provide study questions for exams that demonstrate the format as well as the content of the test. Explain what constitutes a good answer.
- Reinforce lectures or discussions by putting major topics or outlines of the material on the board.
- Encourage the student to ask questions during or after class to insure that materials are understood.
- Frequently verbalize what is being written on the board.
- Offer as many sense modalities as possible: visual, auditory, tactile kinesthetic.

LOW VISION

Between 70 and 80 percent of all persons who are “legally blind” in the United States have some usable vision. Some persons may be totally without sight, while others in this category may have significant eyesight. A legally blind person is one whose vision, while wearing corrective lenses, does not exceed 20/200 in the better eye, or one whose visual field is less than an angle of 20 degrees. In other words, this person, while wearing glasses, can see less at 20 feet than a person with normal vision can see at 200 feet. Vision that is limited to a narrow angle sometimes is called “tunnel vision.”

There are two basic difficulties that students with partial sight are confronted with that the blind student is not. First, the student with partial sight is sometimes viewed by instructors and classmates as “faking it.” Because most students who have partial sight do not use canes for mobility and most are able to get around much like everyone else, people have difficulty in believing that the student needs to use adaptive methods when using printed materials.

Potential difficulties can be alleviated if the student and professor discuss the student’s needs either before or early in the semester. Some guidance follows below in working with students who have visual disabilities.

Teaching A Student With Partial Sight

Notetaking: Each student will have his/her own preferred method for notetaking.

- Some students can take notes for themselves by printing large with a felt tip marker.
- Some students will rely on a volunteer note taker in the class. There is a special carbonless paper that will make an immediate copy and is available from the ACCESS Office. A student can then use personal magnification equipment to read the notes.
- Some students will tape the lectures and go home and take notes from the tapes. Students will need to sit close to the speaker to insure clear tapes.
- Students should sit as close to the front of class as possible to make maximum use of visual and auditory cues. Lighting is very important. The student should discuss this with the instructor.
- The following list might aid those having difficulty:
- When using the chalkboard, overhead projector or any other visual medium, use precise and full descriptions of all materials presented. A helpful addition would be to provide copies of the overhead material presented in class.
- By spelling out new or technical vocabulary you will be helping the student with partial sight as well as your other students.
- Allow the student to sit in front of the classroom.

Test

It is the student's responsibility to discuss alternative test-taking methods with the instructor. Testing needs will vary with the degree of visual impairment. The following might be done:

- Provide large print tests.
- Give the test orally to the student.
- Allow additional time.
- Tape the test questions and either write or tape the answers.

Tests And Required Readings

Some students who have partial sight may have no problem reading printed matter. Some will have problems with poor quality print or small type font in textbooks. Handouts and short reading requirements can be taped or enlarged. Books on tape also can be ordered. These must be ordered well in advance to allow preparation and can be ordered through the ACCESS Office. In addition, some students with partial sight may need readers/writers for tests or in-class assignments.

Readers/Writers

Paid or volunteer readers can assist students who have partial sight with materials. Readers/writers may be needed to assist students in completing assignments. A reader/writer may be needed to assist in library research.

Special Equipment

Some students have individually prescribed low vision aids such as monoculars, personal CCTV devices, and magnifying glasses. Magnifying glasses of different magnifications are also available for check out at the ACCESS Office.

MOBILITY DISABILITIES

Mobility disabilities refer to a broad range of disabilities which include orthopedic, neuromuscular, cardiovascular and pulmonary disorders. Students with these disabilities often must rely upon assistive devices such as wheelchairs, crutches, canes, and artificial limbs to obtain mobility. Some students may have hidden disabilities which include pulmonary disease, respiratory disorders, epilepsy, and other limiting conditions. Although the cause of the disability may vary, students with mobility disabilities may face the following difficulties:

- Inability to gain access to an inaccessible classroom.
- Inability to use an inaccessible computer station.
- Decreased eye-hand coordination.
- Decreased notetaking and test-writing ability due to weakness or paralysis.
- Impaired verbal communication.
- Decreased physical stamina and endurance.

Interaction With A Student With A Mobility Disability

- Speak directly to the student as you would any other student. If a student is in a wheelchair, conversations at different eye levels are difficult. If a conversation continues for more than a few minutes and if it is possible to do so, sit down, kneel, or squat and share eye level.
- A wheelchair is part of the person's body space. Do not automatically hang or lean on the chair, because it is similar to hanging or leaning on the person. It is fine if you are friends, but inappropriate otherwise.
- Words like "walking" or "running" are appropriate. Sensitivity to these words is not necessary. People who use wheelchairs use the same words.
- When it appears that a student needs assistance, ask if you can help. Most students will ask for assistance if they need it. Accept a "no thank you" graciously.
- Accept the fact that a disability exists. Not acknowledging this fact is not acknowledging the person.
- Students are not "confined" to wheelchairs. They often transfer to automobiles and to furniture. Some who use wheelchairs can walk with the aid of canes, braces, crutches or walkers. If a student does not use a wheelchair all the time, it does not mean an individual is "faking" a disability. It may be a means to conserve energy or move about more quickly.
- If a student's speech is difficult to understand, do not hesitate to ask him/her to repeat. It is always best to clarify what is said, in order for you to answer the student appropriately.
- Because a student sitting in a wheelchair is about as tall as most children, and because a pat on the head is often used to express affection toward children, many people are inclined to reach out and pat the person in a wheelchair on the head. Such a gesture is very demeaning and patronizing.

Teaching A Student With Mobility Disability

Access is one of the major concerns of the student who uses a wheelchair or has difficulties with mobility. The student must learn routes to and from classes and across campus that do not present barriers. A barrier may be a stair, a curb, a narrow walkway, a heavy door, an elevator door that has no delay mechanism or one that is too fast, a vehicle blocking a ramp, etc.

It is difficult to make generalizations about the classroom needs of students with mobility disabilities, because some students may be able to stand for short periods of time while others will not be able to stand at all. Some will have full use of their hands and arms while others will have minimal or no use of them. There are, however, some general considerations that will apply to most, if not all, students with mobility disabilities.

Students are encouraged to talk to their instructors during the first week of classes to describe their functional difficulties and needs, and develop a course of action acceptable to both parties.

Inaccessible Classes

If a classroom or faculty office is inaccessible, it will be necessary to find an accessible location or alternate class section that is held in an accessible location. If a student has not yet talked with the ACCESS Office, it is recommended that the instructor contact the office and work with all parties in obtaining an accessible location for the student.

Some students prefer to stay in their wheelchairs instead of transferring to a student desk. Table-type desks are high enough for wheelchairs and can be moved into classrooms. Contact the ACCESS Director if this has not been done in a classroom. Arrangements will be made with General Services staff to obtain a table for the classroom.

Lateness And Absence

If breaks between classes are short (10 minutes or less), the student who has a mobility impairment may frequently be a few minutes late. Usually the student must wait for an elevator, take a circuitous (but accessible) route, wait for assistance in opening doors (unless electric doors are available) and maneuver along crowded paths and corridors.

If a student with a mobility disability is frequently late, it is, of course, appropriate to discuss the situation with the student and seek solutions. Most students will be aware of time restrictions and will schedule their classes accordingly. However, it is not always possible to leave enough time between classes.

Early classes, attendant schedules, van service difficulties, parking, and weather may cause a student to be late or absent. In addition, physical problems may require prolonged absences for medical treatment. Students and instructors may want to plan for these occasions, so students do not miss important class material.

Field Work, Field Trips

If a class involves field work or field trips, the student in a wheelchair will have to make arrangements with the instructor because they often rely on attendants or adapted vans for

transportation. Always review the accessibility of the field trip site and discuss possible arrangements in advance with the student.

If the college is providing transportation for students on the field trip, a van or bus with a lift may have to be rented for the student to participate with other students. Some students will choose to use their own van due to special equipment concerns and personal attendant services.

Internships, Student Teaching

These may require advance preparation to insure that the site is barrier-free and that accessible transportation is available.

Labs

Lab tables may need to be modified to accommodate wheelchairs. Students and instructors should cooperatively develop methods to enable a student who cannot do the “hands on” work to learn the use of equipment theory and methodology involved. The student can give all instructions to an aide and learn everything except the physical manipulation of lab equipment.

Tests

If needed, students should discuss alternative test-taking methods with the instructor. Some alternative procedures that have been used in the past by students with mobility disabilities are:

- A writer can be provided for test-taking if the student is unable to write. Advance notice needs to be given to the ACCESS Director in order to allow for scheduling.
- Instructors can give oral tests.
- Students could tape record answers or type answers.
- Students may write slowly and need extended time for tests.
- Students requiring test-writing assistance or extended time should not be asked to take tests in the hallways or other distracting areas.

Note-taking

Each student will have his/her own preferred method for notetaking. Some students take notes for themselves, some students tape lectures, some students will photocopy a classmate’s notes and some students will rely on an in-class volunteer notetaker. Notetaking paper can be obtained from the ACCESS Office for volunteer notetakers. The notetaker keeps the original and the student obtains the copy made while taking notes.

MULTIPLE SCLEROSIS

Multiple Sclerosis is the most common nervous system disease among young adults in the United States, affecting as many as 500,000 persons. Multiple Sclerosis is usually diagnosed between the ages of 17-45, with a peak occurrence around 30. Multiple Sclerosis is more common in females than males.

Each person with Multiple Sclerosis will have a unique set of symptoms, depending on where the Multiple Sclerosis affects the central nervous system. Since Multiple Sclerosis affects the central nervous system, both the sensory and motor (muscle) functions of the body may be impaired. The symptoms may vary unpredictably and last for differing amounts of time. Initially symptoms usually will come and go (termed a “relapsing” course).

The variability and unpredictability of Multiple Sclerosis stems from the very nature of the disorder. The brain and the spinal cord, where Multiple Sclerosis occurs, sends out and receives signals from all parts of the body. Therefore, symptoms of Multiple Sclerosis can be experienced anywhere in the body depending upon the specific site or sites in the brain or spinal cord which are affected.

The symptoms of Multiple Sclerosis occur and disappear in varying and unpredictable episodes. One of the most common initial manifestations of Multiple Sclerosis is optic neuritis, a fleeting disorder of the optic nerve which causes double vision and blurred vision. Other symptoms include: weakness, spasticity, ataxia, tremors, and an inability to normally control bladder function.

One of the characteristics of persons with Multiple Sclerosis in general is that they are intolerant of heat and generally feel weaker in hot weather or in warm environments. Fatigue is another common symptom. Persons with Multiple Sclerosis may have good strength to begin a task but fatigue rapidly.

The classical pattern of Multiple Sclerosis is one of overall exacerbations and remissions. Symptoms become worse, then better, then worse again in a continuing cycle. Multiple Sclerosis is an unstable and unpredictable disease as each person is affected so differently.

Accommodations in the classroom will vary for each student depending on the symptoms the student experiences. Some students may need accommodations during both exacerbation and remission periods. Accommodations may include but are not limited to: volunteer note-taker, permission to tape record lectures, alternative testing measures, and extended time for tests.

PSYCHIATRIC DISABILITIES

In the past few years, community colleges have been seeing more students who have chronic psychiatric issues. While many of these students are stable and show no symptoms, other students may show more obvious signs of psychiatric issues. Some may experience medication side effects or develop problems at college because they have ceased taking their medication. Other students may be experiencing the onset of a psychiatric disability for the first time and may not have gone for any treatment.

Major Depressive Disorders, Bipolar Disorder, Anxiety Disorders, Schizophrenia, and Personality Disorders impact a person's thought processes, making it hard to cope with the ordinary demands of life. Although these are not the only groups of psychiatric disorders present, they are some of the more common diagnoses at the current time.

While we do not expect faculty and staff to be able to diagnose psychiatric disabilities, the following list might be helpful in identifying if a student is having mental or emotional problems, so that they can be referred to either a Counselor in Student Services or the ACCESS Office for help.

Identifying The Student With Mental/Emotional Problems

- Demands Attention - This student requires undue amounts of attention; becomes upset when attention demands are not immediately met.
- Impatient - This student tends to start a task without waiting for instructions, has difficulty waiting for others or taking turns (pushes others in line, takes material out of turn, etc.)
- Disorganized Approach - This student has a confused, disorganized approach to tasks (loses materials, does not follow a logical sequence, has an unusually messy desk).
- Distractibility - This student has difficulty focusing attention, easily distracted.
- Frustration - Complains that activities don't make any sense or that everything is too difficult to accomplish.

Anxiety

- Excessive Worries - Repeatedly expresses exaggerated concern over a real or unfounded fear ("Where is my teacher; Why is he/she not here?")
- Agitation and Irritability - Appears irritable; easily upset; (fidgety, pacing, restless, can't get started or maintain concentration).
- Muscular Tension - General increase in body tension with reduced flexibility of movement (rigid, over controlled movement of arms and head, excessively firm grasp on materials).
- Nervous Movements - Presence of repetitive physical movements (finger or foot tapping, eye twitching, nervous muscular movements, fighting, rocking, biting fingernails.)
- Inattention - Poor Concentration, easily distracted, needs reminding to stay on task.

- Depression/Withdrawal/Monotone voice - speaks in flat monotone voice with limited emotional expression.
- Pessimism or Hopelessness - Verbalized negative feelings and self-criticism (“Things will always be bad.” “I can’t do it.” “I’m dumb.” “Nobody likes me.”)
- Facial Expression - Looks sad; doesn’t smile; has a bland expression or cries excessively with little provocation.

Energy Level

- Low energy level
- Resists Activity
- Sits inactively, unless prompted
- Prefers to be alone
- Detached
- Doesn’t smile when greeted

Socialization

- Lack of Sensitivity - Disregard for the needs and feelings of others (hurts other people’s feelings, makes fun of others)
- Social Awareness - Does not understand his/her impact on others (walks between people, has poor manners, dominates conversation, grabs materials out of turn, etc.)
- Attention Seeking - Disruptive behavior such as interrupting, noise making, burping or inappropriate coughing
- Offensive Behaviors - Inappropriate touching and clinging on to others, use of foul language, picking nose, etc.
- Response to Affect - Does not recognize or respond to facial or vocal cues such as frowning, scowling, smiling, surprise, voice tone, humor, etc.

Self-Concept

- Self-Criticism - Expresses negative feelings and expectations (“I can’t do it”, “I’m not good”, etc.) expects failure, avoids attempting new tasks.
- Body Awareness - Disregards personal appearances (sloppy dress, body odor, poor grooming, slouched posture)
- Submissiveness - Easily swayed, nonassertive, timid, speaks in a soft voice, and constantly asks for permission.
- Self - Image - Unrealistically high or low estimations of skills (has difficulty viewing him/herself realistically or has strong identification with others rather than self) or imitates others excessively
- Insecurity - Shows a lack of self-confidence by being overly dependent on others or by showing off as a “know-it-all”

Aggression

- Verbal Abuse - Expresses feelings of anger toward others; makes hostile comments (“I hate you,” “Kiss off”, “You’re a Witch”, Makes a hit list to “get” later)
- Physical Abuse - Displays anger to things (kicks chair/desk, slams doors, throws materials, pounds wall) or toward others (pokes, kicks, pushes, threatens)
- Noncompliance - Refuses to follow rules; resists compliance with authority, turns away or states “I won’t”
- Personal Abuse - Directs anger toward self (I’m stupid”, “It’s my fault”, “I hate myself”)
- Agitation - Increased tension of body, angry, glaring looks, aggravating movements.

Reality Distortion

- Thought Fragmentation - Impulsive changes in thought, content shifts
- Preservation - Continued repetition of movements or verbalizations, actions are prolonged or intense
- Functional Deterioration - Obvious decline or falling off in academic performance, appearance and/or personal interactions
- Reality Contact - Appears distant or aloof from others and uninvolved with surroundings, may lose train of thought in conversations, may talk to self, may report hearing imaginary voices or seeing scary things (hallucinations)
- Suspiciousness - Mistrust and is quick to blame others; expects trickery (“Why are you making me do this?”)

Educational Implications

Instructors who have a student with a psychiatric disability could benefit from an understanding of the following:

- A knowledge that high, but realistic, expectations should be maintained to encourage full realization of social and vocational potential.
- Awareness that a student with a psychiatric disorder may frequently be treated with therapeutic medications that affect performance and speed.
- An understanding that student behaviors which vary from the norm may be an indication that the student is experiencing a recurrence of symptoms and is in need of intervention.
- A realization that students can assume full responsibility for their thoughts, feelings, and actions but are helped when an instructor displays empathy.

Accommodations

General techniques:

- Encourage students at the beginning of each term to discuss with you any modifications

that will facilitate their learning, any medications they are taking and side effects they may have, and any symptoms of stress to be noticed.

- Allow additional time for exams when levels of medication interfere with speed.
- Be aware of changes in behavior that could be symptomatic of recurrence of problems and refer the student for follow-up.
- Encourage students to use relaxation and other stress reducing techniques, especially during exams.

While students who have diagnosed psychiatric disorders are considered to be disabled, and protected under federal law as such, this does not mean that disruptive behavior is to be tolerated. Even if a student has a psychiatric disability, his/her behavior must still conform to the MAC Code of Student Conduct. We have the right to expect appropriate conduct and respectful treatment from all students. It is our job to set limits and to be firm and to educate students as to how they must act in an academic setting. If students cannot attend college without causing disruption, they need to leave the premises.

RHEMATOID ARTHRITIS

Rheumatoid Arthritis is a total body (systemic) disease characterized chiefly by inflammation of the synovial joints. In particular, the shoulder, elbow, wrist, hip, knee, ankle, and the small joints of the hands and feet are affected by rheumatoid arthritis. Since these joints are designed both to allow motion and to bear weight, motion restrictions and weight bearing problems can be early consequences of the disability.

Muscle weakness and reduction in muscle size appears in many people soon after the onset of arthritis. Loss of joint movement and pain with movement are also impairments. Sometimes inflammation can be treated and after several weeks it will clear up with no residual difficulties. However, there are times when the inflammation cannot be treated and there will be a permanent loss of joint motion. The permanent loss of joint motion leads to permanent deformities that change the mechanics of the joint so that it cannot function well.

The interference in motion induced by pain, the loss of proper mechanical joint motion due to deformities, and the loss of strength all may markedly limit the person's activities. The particular activity affected depends upon which joints are involved.

What is very important to remember is that each person with rheumatoid arthritis is affected differently; and each person's own condition varies from one day to the next.

Students with rheumatoid arthritis may need in-class volunteer note-takers, to tape record lectures, and alternative testing measures - not the standard written format. If a student can write, they may need extended time on tests.

SPEECH DISABILITIES

Speech disabilities can range from problems with articulation or voice strength to inability to speak. They include stuttering (repetition, blocks, or prolongations accompanied by occasional distorted movement and facial expressions), chronic hoarseness (dysphonia), difficulty in evoking an appropriate word or term (nominal aphasia), and esophageal speech (resulting from laryngectomy).

Teaching A Student With Speech Disabilities

As with other disabilities, the extent to which a student with a speech disability will require an accommodation will vary from student to student. The following are some general guidelines to use for situations involving these students.

- Impaired speech may be slower than unimpaired speech. Students need to have an equal chance to voice their reactions or questions even if it means allotting extra time. Sometimes the student may need extra encouragement to participate in class.
- It is also important to overcome the urge to interrupt or try to complete the student's train of thought. An instructor trying to anticipate the question being asked may embarrass the student if the completion of the sentence was not the question or the point being made.
- In situations where the words or phrases the person is using are not understood, panic only gets in the way of concentrating on what the person is trying to relay. Do not be hesitant to ask for repetition of words or phrases; students with speech impairments would rather repeat a message in order to communicate than have someone pretend to understand what they are saying. Summarizing the message is often a helpful way of checking with the student as to whether you got the message.
- With increased exposure to persons with speech disabilities, ability to understand their speech will improve.
- Do communicate an attitude of acceptance and encouragement to reduce the discomfort and increase the confidence of the student; do not communicate an attitude of sympathy or embarrassment.
- Oral presentations may be of concern to the student and the instructor. Some students may prefer to have another person voice their presentations; others prefer to do it for themselves. Instructors should feel free to openly discuss concerns with the student.

SUBSTANCE ABUSE

Substance Abuse is a disease and a major health problem. Substance abuse not only affects the abuser but others in the home, the office, the classroom, and on the highway. Substance abusers in recovery are covered under the Americans with Disabilities Act. Current abusers are not. Below is some information on the two types of substance abuse—alcoholism and drug users.

Alcoholism

Alcoholism is one of the most prevalent disabilities in the United States. Alcoholism occurs in all ethnic, socioeconomic, and age groups. It is also seen in all occupations but occurs in men three times more often than women. However, during recent years there is a higher incidence of alcoholism among women and youth.

Alcoholism can be a person's only disability or it can occur with one or more other physical or emotional/mental disabilities. It is a slowly progressive disease. However, the majority of alcoholics can show improvement or completely recover with abstinence and appropriate treatment over a sufficient period of time.

Treatment for alcoholism is an extended, ongoing process. The alcoholic must gain stability in all areas of functioning. Thus a continuum of services is essential at the various stages of recovery. It is also essential that each person receive an individual combination of services appropriate for him/her.

Drug Abuse

A drug is a substance that may modify one or more functions of a person. A dependence-producing drug is one that can produce a state of psychological and/or physical dependence.

As with alcoholism, drug abuse is a disease. By defining it as a disease, it classifies the abuser as a patient thus giving him/her access to treatment through health and social service agencies.

Recovering drug abusers require an extensive support system with lots of follow-up provided. Recovering abusers need extra support during stressful periods that previously would have caused the person to turn to drugs.

For most recovering substance abusers there is the opportunity to overcome the disability and move on with one's life. Their level of motivation, the available opportunities, and the nature and extent of support he/she receives will determine the outcome.

TOURETTE'S SYNDROME

Tourette's syndrome is a neurological disorder characterized by tics - involuntary, rapid, sudden movements that occur repeatedly in the same way. Tics are experienced as irresistible and, as the urge to sneeze, must eventually be performed. Typically, tics increase as a result of tension or stress and decrease with relaxation or concentration on an absorbing task.

Many students with Tourette's syndrome may also have some kind of learning problem. If the student does have a learning disability too, please refer to the section on Learning Disabilities.

Characteristics of Tourette's Syndrome

- Neurological disorder
- Usually begins between ages 2 and 16
- Involuntarily blinking of eyes
- Head jerking
- Flailing of arms
- Throat clearing
- Peculiar noises (grunting, barking, snorting)
- Vocalization of obscene words
- Various "tics"
- Ritualistic behaviors
- The tics may come and go
- Symptoms of Tourette's syndrome may change over time

Helpful Teaching Techniques

- The student may need to use a tape recorder, laptop computer, or desktop computer for reading and writing problems.
- Untimed exams may be necessary (in private room if vocal tics are a problem). Allowing the student to test in a private room will allow them to focus all their energy on the test instead of on suppression tactics. Permission for the student to leave the classroom when tics become overwhelming may help.
- The less stress the student with Tourette's syndrome feels, the less frequent the symptoms will be in general.
- If a behavior is just poor behavior and not a result of the Tourette's syndrome, it should not be tolerated.
- The student should be encouraged to control what he/she can whenever possible, and to try to substitute what is socially acceptable for what is not.
- The student's movements and noises can be annoying or even somewhat disruptive to the class. Remember, they are occurring involuntarily - so do not react with anger or annoyance.
- If a student's tics are particularly disruptive, consider avoiding requiring him/her to speak in front of the class for awhile. Perhaps the student could tape record oral presentations to avoid the stress of being in the front of the class.

TRAUMATIC BRAIN INJURY

Brain Injury Results In Three Major Types Of Impairments

1. Physical problems;
2. Cognitive (thinking and comprehending) impairments; and
3. Behavior disorders.

There is a great variability in the effects of head injury on different individuals but most injuries result in some degree of impairment in the following functions: memory, cognitive/perceptual communication, speed of thinking, communication, spatial reasoning, conceptualization, executive functions (goal setting, planning, etc.), psychosocial behaviors, and motor, sensory and physical abilities. In the learning situation, there will be many similarities to students with learning disabilities in that students with TBI may have problems with attention, memory, impulse control, organization, skill integration, generalization, abstract reasoning, and social judgment.

Some of the common psychological consequences of head injury include denial, apathy, emotional lability, impulsivity and disinhibition, frustration, intolerance, lack of insight, inflexibility, verbosity, confabulation, lack of initiative and follow-through, slow and inefficient thinking, poor judgment/poor reasoning, and social imperceptions.

While these psychological problems are a result of the brain injury and part of the person's disability, the college is under no legal obligation to tolerate any disruptive behavior which is a violation of the MAC Student Conduct Code. All students with disabilities are expected to follow this code and cannot be permitted to disrupt a classroom situation or any campus situation to the detriment of other students.

Teaching A Student With Traumatic Brain Injury

Most of the teaching techniques that help students with learning disabilities will also benefit those with TBI, so please feel free to refer to that section.

Other Helpful Points In Dealing With Someone Who Has Had A Brain Injury

- Avoid over stimulation. These students may fatigue quickly or become agitated and confused.
- Be consistent. A consistent approach can help improve memory, reduce confusion, foster language skills, and promote emotional control.
- Stay calm. Observing others' calmness can help to reduce a student's confusion and agitation.
- Give step-by-step directions. This approach lessens fatigue and confusion, improves memory and gives the student a sense of success in completing a task.
- Do not talk down to the person. Talk with students at a level appropriate to their age and level of understanding.

- Avoid arguments and stressful situations. Remember that students are particularly sensitive to stress after a brain injury.
- Allow response time. These students usually take longer to respond to a question or join in a conversation.
- Remember to praise. When we tell students how proud we are of their progress, this promotes further improvement.
- Try to incorporate frequent repetition of information to be learned and emphasize the use of memory cues such as calendars, daily logs, etc.

Appendix

**MINERAL AREA COLLEGE
ACCESS Office
Room 103**

**Faculty Notification of Necessary
Student Accommodations**

DATE: September 26, 2005

TO: John Smith

FROM: Lisa Leftridge, Director, ACCESS Office, AS103, EXT. 2152

Name: Jane Smith

SS #: 000-00-0000

The above student with a documented disability is enrolled in General Psychology.

Based on this student's documented disability, the following is a list of accommodations that are appropriate. It is the student's responsibility to talk with you about the following information:

-Out of Class Testing with Extended Time & Reader

Notes to Instructor:

If the student has the accommodation of out-of-class testing, it is the student's responsibility to complete the out-of-class testing form and bring it to the faculty member. This should be done at least 2 days prior to the test. The student should also remind you to bring this form along with the test to the ACCESS Office prior to the scheduled test time (preferably at least 1 day in advance). After completion of the test, it will be returned to the faculty member's mail box.

The student has signed a release of information form allowing instructors and ACCESS Office to communicate regarding accommodations and academic progress. This information is confidential and should not be shared with any person other than the student. In order to prevent breach of privacy, please dispose of this notification after the student has completed your course.

Please call, e-mail, or stop by the office, if you have any questions or concerns. Thank you for your assistance in providing appropriate accommodations to students at Mineral Area College.

The Disability Accommodation Handbook is available as a resource on the ACCESS Office web page and in print from the ACCESS Office. If you need this document in alternate format, please contact the ACCESS Office.

**Application for MAC ACCESS Office
Disability Support Services**

Name: _____ Home Phone: _____

S.S. No.: _____ Work Phone: _____

Address: _____ E-Mail: _____

Age: _____ Birth Date: _____

High School Attended: _____ Year Graduated: _____

Have you attended M.A.C. in the past? If so, When? _____

Have you attended another college or university? If so, Where? _____

Who referred you? _____

When will services need to begin?
__ Fall __ Spring __ Summer ____ Year

How are you paying for college?
__ Self/Parents _____ Veterans Benefits
__ Vocational Rehabilitation _____ Work Study
__ Rehabilitation Services for the Blind _____ Social Security
__ Pell Grant _____ Other: _____

Accommodations are based on supported documentation of the following:
__ Acquired Brain Injury __ Deaf __ Hard of Hearing
__ ADD/ADHD __ Deaf/Blind __ Learning Disabilities
__ Blind __ Developmental __ Orthopedic Impairment
__ Partial Sight Disability __ Psychiatric Disability
__ Other _____

List any accommodations used in the past: _____

Student Signature: _____ Date: _____

Information regarding disability is kept private.
Only information necessary to assure the effective implementation of assigned
accommodations will be shared with faculty.

Form available in alternate format upon request.

ACCESS Office Use Only

ACT/ASSET/COMPASS Placement results		
English _____	Writing _____	Developmental Courses Required:
Reading _____	Reading _____	_____
Math _____	Study Skills _____	_____
Comp _____	Math _____	_____

Mineral Area College
ACCESS Services for Students with Disabilities

STUDENT RESPONSIBILITIES

The ACCESS Office at Mineral Area College provides services for students who have documented disabilities. **In order to receive these services a student must:**

- **Make an appointment with the ACCESS Director** by contacting the ACCESS Office located on the 1st floor of the Arts & Sciences Building, Room 103 at (573) 518-2152 (T/TDD) on the Park Hills main campus.
- **Submit documentation of disability to ACCESS Services.**
- **Meet with the ACCESS Office Director to complete and discuss an Acceptance of Accommodation Form as well as an Instructor Notification Form each semester** for which services are requested—services are not automatically provided each semester. *Final approval of services cannot be made until the student has enrolled for classes.*
- **Deliver Instructor Notification Form to instructor(s) on or before the first week of the semester and request a private meeting with your instructor to discuss accommodations, as appropriate.** It is the student's responsibility to discuss the accommodations requested in the Instructor Notification Form (volunteer note-takers, interpreters, etc.) with instructors. *Please see the ACCESS Director for assistance on how to request accommodations.* In addition, it is strongly recommended that you watch the video "Transitions to Postsecondary Learning," which will help you to be successful in the college setting. This video and other information on specific disabilities and disability issues are available for check-out through the ACCESS Office.
- **Assist in arranging appropriate accommodations** as discussed with the ACCESS Director and as noted on the Instructor Notification/Acceptance of Accommodation Forms.
- **Maintain contact with the ACCESS Office.** Be sure to inform the ACCESS Director immediately of any changes in schedules, new accommodation needs, academic difficulties, concerns, etc. **Changes in services can be made at any time after you are approved for ACCESS services. If you drop a course, please inform the ACCESS Director immediately.**

MAC ACCESS Contact:

Lisa Leftridge ACCESS Director

Telephone/TDD: 573-518-2152

Fax: 573-518-2354

Contact Information:

ACCESS Office
Mineral Area College
P.O. Box 1000
Park Hills, MO 63601

Accessible Parking Permits

Accessible parking permits are available to those students with both permanent/temporary disabilities that require the use of closer parking to access the buildings on campus. To acquire a permit, you will need to provide documentation of your disability from **one of the following sources** to the ACCESS Director and complete a **vehicle registration card**:

1. Letter from physician stating the disability, limitations, and need for accessible parking.
2. State disability license/paperwork and/or placard number.

Please remember to bring information regarding vehicle make/color/year and license number with you. If this form is needed in an alternate format, please contact the ACCESS Office.

Mineral Area College
ACCESS Services for Students with Disabilities

DISABILITY DOCUMENTATION REQUIREMENTS

Students enrolling at Mineral Area College who are seeking services for a disability must submit appropriate documentation and meet with the ACCESS Director in order to receive services. Typically, the documentation must be dated within the last *five* years. The documentation required will vary according to the type of disability and must be discussed with the Director. The ACCESS Office reserves the right to request additional documentation prior to determining eligibility for services.

Documentation should include:

1. **A diagnostic statement** identifying the disability, date of the current diagnostic evaluation, and the date of the original diagnosis.
2. **A description of the diagnostic criteria** and/or diagnostic test(s) used, along with specific test results.
3. **A description of the current functional impact of the disability** in the educational environment.
4. **Treatments, medications, assistive devices/services** currently prescribed or in use.
5. **A description of the expected progression or stability of the impact of the disability** over time.
6. **Recommendations for effective academic accommodations** to equalize the student's educational opportunities at the postsecondary level.
7. **The credentials, address, phone and fax number** of the diagnosing professional(s).

Examples of Acceptable Documentation:

Learning Disability

Complete *adult* intelligence and achievement test results administered by a qualified psychological examiner

Health Impairment

Statement of diagnosis from a medical doctor

Head Injury

Psychological testing, neuropsychological testing, or rehabilitation reports, which usually document a head injury

Attention Deficit Disorder, Psychiatric Disabilities, and Alcohol/Chemical Dependency

Documentation by a medical doctor or a psychiatrist

Hard of Hearing/Deafness

Documented by audiogram administered by an audiologist

Low Vision/Blindness

The result of visual acuity tests documenting visual impairment or blindness

Criteria for Documenting Temporary Disabilities

1. A clear statement of the ICD diagnosis, including pertinent history.
2. Current documentation
3. A description of present symptoms, fluctuating conditions/symptoms, the expected duration of the condition, and the prognosis.

Although students with temporary disabilities are not covered under the Americans with Disabilities Act of 1990, ACCESS services may be available to assist these students with their needs on a temporary basis.

The ACCESS Office will assist the student in knowing what type of documentation is needed to be eligible for services, but the student will ultimately be responsible for obtaining the documentation to support the service request and any cost involved. Students need to also remain in contact with their instructors to keep them informed of their situations.

MAC ACCESS Office Release of Information

Name: John Smith

Date of Birth: 00/00/0000

Social Security Number: 000-00-0000

Phone Number: 000-000-0000

I authorize the ACCESS Office of Mineral Area College to:

- Print Instructor Notification memos, which have been approved by the ACCESS Office.
- Print and send Student Evaluation forms to my instructors requesting feedback on my performance.

Discuss my accommodation needs and academic progress as they relate to college programs with the following:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Faculty and Staff | <input type="checkbox"/> Veteran's Administration (VA) |
| Exceptions: | <input type="checkbox"/> Division of Family Services |
| <input type="checkbox"/> Vocational Rehabilitation | <input type="checkbox"/> Rolla Regional Center |
| <input type="checkbox"/> Rehabilitation Services for the Blind | <input type="checkbox"/> L.I.F.E.–Independent Living |
| <input type="checkbox"/> Family Members | <input type="checkbox"/> Workforce Development |
| Specify: | <input type="checkbox"/> MAC Counselor |
| <input checked="" type="checkbox"/> EXCEL Staff | <input type="checkbox"/> Other: _____ |

I understand that all the information provided on this form will be kept private. Only information necessary to assure the effective implementation of assigned accommodations will be shared with faculty during my enrollment at Mineral Area College.

Student Signature

Date

If this form is needed in an alternate format, please notify the ACCESS Office.

MAC ACCESS Office
Disability Support Services
Arts and Sciences Bldg., Room 103

Out-of-Class Testing Accommodation Request

It is the student's responsibility to obtain this form from the ACCESS Office two business days prior to the test and provide it to the instructor. Tests will not be administered without this form completed and attached to the test. Thank-you for your cooperation.

SECTION 1 - TO BE COMPLETED BY STUDENT

Today's Date: _____

Student Name: _____

Instructor Name: _____

Course: _____

Test Date: _____

Time to Start Test: _____

Check Only Approved Accommodations:

- Reader (please provide extra copy of test)
- Writer
- Extended Time (double time-unless exception approved by Access Office)
- Enlarged Test
- Interpreter
- Other Accommodation: _____

Student Signature

SECTION 2 – TO BE COMPLETED BY INSTRUCTOR

How much time are students allowed for the test in class? _____

Please provide any specific directions and items to be used during the test (i.e., open book; notes; calculator; formula card; etc.): _____

How can you be reached during the scheduled test? _____

Instructor Note:

Instructors should deliver the test at least one day in advance of the test day and the test will be returned to their locked mail box. The ACCESS Office may need to make adjustments to the test date and time due to the need for a proctor to monitor test taking of the student. If you have any questions and/or concerns, please contact the ACCESS Office at ext. 2152 or through e-mail at LLEFTRID@MineralArea.edu.

Instructor Signature

ACCESS Office Use Only

Time Started Test: _____

Time Completed: _____

Proctor: _____

Check/Initial Mail Drop Off:

Comments: _____

If form is needed in an alternate format, please contact the ACCESS Office.

Mineral Area College Policy of Nondiscrimination

Mineral Area College is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, gender, disability, age, religion, creed, or marital or parental status, in admissions to the College, access to academic programs and services, treatment in programs and services, access to, screening, and employment of personnel into programs, services, and activities. For more information call the Title VI, Title IX, Section 504 and ADA coordinator, Lisa Clauser at (573) 518-2129, or U.S. Department of Education, Office of Civil Rights. If you have special needs as addressed by the Americans with Disabilities Act and need this information in an alternative format, notify Lisa Leftridge, ACCESS Director at 573-518-2152, or Mineral Area College, PO Box 1000, 5270 Flat River Road, Park Hills, Missouri 63601. Reasonable efforts will be made to accommodate your special needs.

Any person may also contact the Assistant Secretary for Civil Rights, U.S. Department of Education, regarding the institution's compliance with regulations implementing Title VI, Title IX, Section 504, or the Americans with Disabilities Act.