# Indian River State College
# Student Accessibility Services Handbook

| TITLE: | PROCEDURE: |
|---|---|
| Student Accessibility Services Handbook | AP-3. 161 |
| REFERENCES: | |

## TABLE OF CONTENTS

**INDIAN RIVER STATE COLLEGE**
**NON-DISCRIMINATION/NON-HARASSMENT POLICY STATEMENT**

Information regarding the Non-Discrimination/Non-Harassment Policy can be found in the IRSC Student Handbook/Planner or online at www.irsc.edu . Visit Employment then Equal Access/Opportunity.


**INDIAN RIVER STATE COLLEGE**
**EQUAL ACCESS/EQUAL OPPORTUNITY STATEMENT**


Indian River State College is an equal opportunity/equal access institution. It is the policy of the District Board of Trustees to provide equal opportunity for employment and educational opportunities to all (inc(ie27  [/BottoRdalC2nlCTh93e27  [/Bott6f1Jto/[-928al opk (m)ieico p

Disclosure of a student's disability is the personal preference of the student. A student may elect to share information regarding his/her disability.  If so, faculty and staff must remember to maintain confidentiality.  All confidential information should only be discussed with the student in private. Further, this information should only be discussed with other college faculty and staff for educational purposes on a need-to-know basis.  At no time -

financial assistance." Students with disabilities must be afforded an equal opportunity to participate in and benefit from all post-secondary education programs and activities.

A qualified person with a disability is defined by the Americans with Disabilities Act as,

"(1) A person who has a physical and mental impairment that substantially limits one or more major activities,
(2) A person who has a history or record of such an impairment or,
(3) a person who is perceived by others as having such an impairment"

## Student Accessibility Services, Student and Faculty Responsibilities

Any institution of higher learning, SAS, the student, and faculty must all share in the responsibilities associated with the successful promotion of equal educational access for students with disabilities.

Student Accessibility Services has the responsibility to:
- evaluate students based on their abilities and not their disabilities
- determine the appropriateness of disability documentation and to assist the student in understanding how to procure that documentation
- determine eligibility for accommodations on a case-by-case basis
- provide or arrange reasonable accommodations, academic adjustments, and/or auxiliary aids and services for students with disabilities in courses, programs, activities and facilities
- maintain appropriate confidentiality of records and communication
- collaborate with faculty, staff and students
- provide relevant and appropriate support to all parties as needed

Students have the responsibility to:

- Adhere to institutional policies and procedures
- Provide Student Accessibility Services with appropriate documentation of his or her disability
- Communicate privately with faculty to discuss needed accommodations and any other concerns prior to or during the first week of class
- Initiate requests for alternate format textbooks and publisher materials. The student should understand that these could take 3 to 4 weeks to prepare and will be requested by the student in a timely manner. The student will understand that if he or she does not request alternate format textbooks and publisher materials in advance of class start, the student cannot be guaranteed provision. All alternate formats require a receipt of purchase.
- Request assistance immediately when issues and/or concerns arise and exercise due diligence to make the accommodations process work.
- Engage in a fair, objective, and respectful dialogue concerning accommodation options and not transfer or abdicate the student's role to parents or agents/advocates.

At the post-secondary level, student responsibilities change as follows:

**Students have a responsibility to:**

- Self-identify or disclose the disability to the designated office for disability services if they want to receive accommodations. At Indian River State College, this office is called Student Accessibility Services.
- Obtain and Provide documentation such as psycho-educational test results, or physician's report. The documentation should verify the disability, describe the extent of the impairment, and provide information that supports the need for specific accommodations.
- Take specific action to request those accommodations for their disabilities.
- Act as independent adults; use appropriate self-advocacy strategies.
- Contact their instructors to activate accommodations for each class.
- Arrange for and obtain their own personal attendants, individual tutoring and specifically fitted or designed assistive technologies.

**Post-secondary institutions are not required to:**

- Provide specialized peand uti-adp6 (  Tw 1.)10 (-12.95 -1.22 Td 0078 Tjobt)12 (aa( )TjEMC122

| In high school, the school has responsibilities which include the following: | The post-secondary level institutional role changes as follows |
| --- | --- |
| Identify students with disabilities | |

Post-secondary institutions are not required to provide specialized personal equipment (i.e., wheelchair, crutches, etc.); substitute or waive any of the essential requirements of a course or program; conduct testing and assessment of learning, psychological, or medical disabilities; provide personal attendants; provide personal or private tutors (but tutoring services normally available to persons without disabilities must be accessible to persons with disabilities who are otherwise qualified for those services); prepare "Individual Education Plans" (IEPs); or provide transportation between home and college or around campus. For details, refer to the <u>U.S. Department of Education Transition of Students with Disabilities to Postsecondary Education: A Guide for High School Educators</u>

**Categories of**

- If audiogram is not signed by audiologist, then letter or high school form with signature and diagnosis from medical doctor or audiologist is needed.
- IEP with accommodations listed within the past 5 years.

**Visual Impairment** - Disorders in the structure and function of the eye as manifested by at least one of the following: visual acuity of 20/70 or less in the better eye after the best possible correction, a peripheral field so constricted that it affects one's ability to function in an educational setting, or a progressive loss of vision which may affect one's ability to function in an educational setting. Examples include, but are not limited to, cataracts, glaucoma, nystagmus, retinal detachment, retinitis pigmentosa, and strabismus.

- Signed letter from medical doctor on letter head with diagnosis and accommodations listed within the past 5 years. Can be signed electronically. IEP including accommodations updated within the past 5 years may replace list of accommodations from medical doctor or Ophthalmologist.

   **OR**

- Vision examination report within the past 5 years signed by Ophthalmologist.

**Orthopedic Impairment -** A disorder of the musculoskeletal, connective tissue disorders, and neuromuscular system.  Examples include but are not limited to cerebral palsy, absence of some body member, clubfoot, nerve damage to the hand and arm, cardiovascular aneurysm (CVA), head injury and spinal cord injury, arthritis and rheumatism, epilepsy, intracranial hemorrhage, embolism, thrombosis (stroke), poliomyelitis, multiple sclerosis, Parkinson's disease, congenital malformation of brain cellular tissue, and physical disorders pertaining to muscles and nerves, usually as a result of disease or birth defect, including but not limited to muscular dystrophy and congenital muscle disorders.

- Signed letter from medical doctor on letter head with diagnosis and accommodations listed within the past 5 years. Can be signed electronically. IEP with accommodations within the past 5 years may replace list of accommodations from medical doctor (diagnosis would be no matter the date).

**Speech/Language Impairment** - Disorders of language, articulation, fluency, or voice which interfere with communication, pre-academic or academic learning, vocational training, or social adjustment. Examples include, but are not limited to, cleft lip and/or palate with speech impairment, stammering, stuttering, laryngectomy, and aphasia.

- Speech / language evaluation within the past 5 years with diagnosis and accommodations listed, signed by speech / language pathologist.

   **OR**

- Speech / language evaluation no matter the date, signed by speech / language pathologist.
- IEP with accommodations listed within the past 5 years.

- Eligibility & Assignment Staffing form (E & A S F) signed by speech / language pathologist with diagnosis and / or exceptionality listed, no matter the date, if speech / language evaluation does not indicate diagnosis.
- Letter from school psychologist within the past 5 years on letterhead, indicating diagnosis / exceptionality student received ESE Services for in high school, if E & A S F is not available or not signed by school psychologist or no diagnosis / exceptionality is listed.

**Emotional or Behavioral Disability** - Any mental or psychological disorder including but not limited to organic brain syndrome, emotional or mental illness, or attention deficit disorders.

- Signed letter from medical doctor or psychologist on letterhead with diagnosis and accommodations listed within the past 5 years. Can be electronically signed. IEP

**Traumatic Brain Injury** - An injury to the brain, not of a degenerative or congenital nature but caused by an external force, that may produce a diminished or altered state of consciousness, which results in impairment of cognitive ability and/or physical functioning.

# Suggestions for Supporting Student with Disabilities

***You may not know and may not ask an individual's specific disability. The descriptions and interventions outlined below are informational resources, however the best approach to reach all learners is Universal Design.***

## General Information

- People with disabilities are people first. The disability is only one part of that person that makes them unique.
- Treat students with disabilities with respect and consideration.
- Ask a student with a disability if he/she needs help before providing assistance.
- Talk directly to the student with a disability, not through the student's personal care attendant, reader, scribe, interpreter, real-time captionist or note-taker.
- Refer to the student's disability only if it is relevant to the conversation. When referring to a student with a disability, emphasize the person first and then the disability. "The student who is blind" is better than "the blind student".
- Never mention the disability of a student in front of other students, draw undue attention to a student with a disability or share information about a student with disability.
- Avoid negative descriptions of a student's disability, such as "a student who uses a wheelchair" is more appropriate than "a student confined to a wheelchair".
- Do not segregate students with disabilities from the rest of the class, except when taking tests in the Assessment Center.
- Avoid stereotyping. Offer instruction and support based on student performance and not on assumptions of disability types.
- Making a statement on the class syllabus inviting students with disabilities to discuss accommodations needed and provide referral information regarding Student Accessibility Services.
- Use multiple modes of instruction to motivate and engage students. Make each instructional method accessible and provide the same means of participation to all students.
- Allow SdsiisA5.84 -1.22 T6 ( )]TJ0J/TT1dentli Make each ins M-73 0 . 6Psum fes(s)dc -0.002 Tu(o)]TJ (l)16f-5.8sabAllowTf4.39 0 rn( )Tj10 (not)1247 B-73

**Students with Specific Learning Disabilities**

"A Specific Learning Disability is a disorder in one or more of the central nervous system processes involved in perceiving, understanding and/or using concepts through spoken/written language or non- verbal means. This disorder manifests itself with a deficit in one or more of the following areas: attention, reasoning, processing, memory, communication, reading, writing, spelling, calculation, coordination, social competence, and emotional maturity." (Rehabilitation Services Administration, 1985).

- Offer directions/instructions both verbally and in writing. You may need to repeat directions or information to make sure the student has processed it. Have student repeat directions.
- Summarize major points, give background/contextual information, provide outlines, class notes, summaries and study guides.
- At the beginning of each term, encourage documented students to discuss modifications that will facilitate their learning.
- Provide a detailed course syllabus, assignment list, and reading list early so they are available, should they be requested before the class begins. These materials may need to be read onto audiotape or digitized, or the student may need additional preparation time.
- Begin lectures and/or discussion with written and oral overview of topics to be covered.
- Use multiple formats: Visual aids, three-dimensional models, charts or graphics, group projects, visual stimuli, audio and video content to accommodate different learning styles.
- Pause and ask questions during lecture to check for understanding.
- If possible, provide presentations or lecture materials on line. Make statements that emphasize important points, main ideas, and

as necessary. Do not to assume their challenges with speech extend to their ability to hear or comprehend.
- Modify assignments such as, one-to-one presentations or allow use of computer with voice synthesizer
- Allow more preparation or substitutions for oral class reports
-

The interpreter's job does not start and end in the classroom. The interpreter must become familiar with the course content that will be discussed—a task that may involve additional research on topic related words and phrases—and the signs needed to convey them.

A good ASL interpreter does not start interpreting immediately after a person begins communicating; rather they take time to cognitively process the content and message being delivered. Consequently, interpreters follow at a pace approximately one or two sentences behind the person who is actively communicating. This is true whether the communicator is deaf or hearing.

While a lack of student effort and poor performance may appear to be linked to student apathy, it may also be a byproduct of ineffective interpreting. Interpreters have a professional and ethical obligation to inform the instructor, the student and, when available, Student Accessibility Services when they believe effective communication is not occurring. Never assume poor performance is student apathy, nor an inability of the student to m learn.

Conversely, never assume that poor performance is an ineffective interpreter. It may be one or the other, both, or a host of other factors. As an instructor, it is your obligation to check in with the student to ascertain if their communication needs are being met.

Deaf college students often miss information in class lectures, and do not acquire as much information from lectures as their hearing peers, even when appropriate accommodations are provided.

**What can I do to make the class rewarding for the student and manageable for the interpreter?**

- *Share course materials and teaching aids:* If possible, meet with the interpreter prior to the first class to share the class syllabus, text book, handouts, PowerPoints, etc.

- Allow the student and the interpreter to choose the seat that provides the best visual vantage point.

***Sign Language Interpreters: In the Classroom***

- *Speak at natural or reasonable pace:* Too slow of a pace is as difficult to interpret as too fast of a pace.
- *Build in time for PowerPoints:* The visual learner cannot watch the interpreter and look at a PowerPoint at the same time. After introducing the PowerPoint, allow time for the student to obtain the information conveyed and then focus on the screen.
- *Refrain from talking during written class work:* For all of the same reasons described above.
- *Have all videos/films captioned:* Many new videos/films are already captioned. Nevertheless, always check to make sure: 1) they are indeed captioned; and 2) you know how to turn on captions should the media be "closed captioned."
- *Know how to orchestrate an interpreter and student friendly class discussion:* Always ask *all* students to raise their hands and be recognized before speaking. Wait until the interpreter has finished interpreting the entire chunk of information

**Reasons to Call EMS (Emergency Medical Services)**:

- o  The seizure has lasted more than five minutes.
- o  A second seizure starts shortly after the first one ends.
- o  The person has difficulty breathing and/or his/her color remains blue.
- o  Any sign of injury or other illness. For example, if the person fell at the beginning of the seizure and hit his/her head or sustained any other type of injury.

**For more information contact the IRSC Health and Wellness Center (772) 462-7825 or the Epilepsy Foundation of America www.epilepsy.com.**

Faculty members should follow the guidelines outlined in the IRSC Faculty Handbook and the Safety/Security manual when facing a crisis situation. The emergency should be reported to the IRSC Information Call Center and IRSC Security.

| Dr. Patricia Corey-Souza | Alan Montgomery |
|---|---|
| Director of Health and Wellness | Director of Safety and Security |
| psouze@irsc.edu | jmontgom@irsc.edu |
| 772-462-7826 | 772-462-7860 |

**CONSIDERATIONS IN THE EVACUATION OF STUDENTS WITH DISABILITIES**

## Accepting Substitutions Granted by State Postsecondary Institutions

In accordance with Rule 6A-10.041, FAC, at a minimum, all substitutions previously granted by a state post-secondary institution will be accepted. However, the College takes into consideration the following factors:

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# Understanding Universal Design (UD)

The goal of universal design (UD) is to create products and environments to maximize learning for all students, to the greatest extent possible, without the need for adaptation or specialized design.  The creators of the UD concept developed principles that may be applied to the evaluation of existing designs as well as used to guide new designs.

**The Principles of UD:**
- **Equitable Use.** The design is useful and marketable to people with diverse abilities.
- **Flexibility in Use.** The design accommodates a wide range of individual preferences and abilities.
- **Simple and Intuitive Use.** Use of the design is easy to understand, regardless of the user's experience, knowledge, language skills, or current concentration level.
- **Perceptible Information.** The design communicates necessary information effectively to the user, regardless of ambient conditions or the user's sensory abilities.
- **Tolerance for Error.** The design minimizes hazards and the adverse consequences of accidental or unintended actions.
- **Low Physical Error.** The design can be used efficiently and comfortably and with a minimum of fatigue.
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**Universal Design of Instruction (UDI) Tips**

When designing classroom instruction or a distance learning class, strive to create a learning environment that allows all students, i s

**Electronic Accessibility Considerations adapted from <u>accessibility@ncsu.edu</u>.**

**Video**: Creating accessible video involves both creating captions for your video and
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**Microsoft PowerPoint**

Microsoft PowerPoint is a popular way to make presentation for traditional face-to-face slide shows and it is also the basis for many other applications to create recorded narrated online presentations.When designing PowerPoint presentations here are some issues to keep in mind.

- When designing a presentation, use the built-in slide layouts instead of drawing custom text boxes on the slide.  This will make a consistent design for all of your slides and make it far easier for users of assistive technologies to navigate your presentation
- Be sure to add alternate text to the images.
- Older versions of the Macintosh version of Microsoft PowerPoint do not have as many accessibility features as newer versions or the Windows version, like the ability to add alternative text to images. Only the 2011 version of PowerPoint on Mac supports this functionality.
- If you want to create a Web based version of the presentation, do not use the "Save as Web Page" feature.  You will need to use another tool like LecShare Lite or the Virtual508  Accessible Wizard for Microsoft Office.
- One of the easiest ways to share an accessible PowerPoint presentation with others is to simply provide the user with the original  p0n002 Tw 0.27 0 Td(fe)Tj80 Td(a)Tow(h

**Using the**

In Microsoft Word, this means using things like the built-in styles for providing a semantic structure to your document, like using Heading 1 and Heading 2, instead of simply making certain text bigger and bolder to denote a heading.

In Microsoft Word, only the Windows version of Word supports creating accessible PDFs. PDFs created in the OS X version of Word will not be accessible. In this case you will need to either

- simply give the user the original <u>Microsoft Word document which has been authored according to best practices</u>
- use Adobe Acrobat to retrofit the necessary accessibility information

It is essential that you make a "tagged" PDF document to make it accessible. Within products like Microsoft Word, there is often an option for creating the PDF as a tagged document. Tags can also be added with Adobe Acrobat after the PDF is made, but it is easier be

*Careful decision making and counseling deciding whether modifications would give
the student opport56 0 Td(t)Tj-36.69 0 Td1 )Tj-3169 -1.14

# ADA Terminology

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**AUXILIARY AIDS AND SERVICES.** Under titles II and III of the ADA, includes a wide range of s

**ESSENTIAL JOB FUNCTIONS.** The fundamental job duties of the employment position that the individual with a disability holds or desires.BDC /TT0 1 Tf

**INTELLECTUAL DISABILITY (ID)** Significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the developmental period that adversely affects a student's educational performance.

**MARGINAL JOB FUNCTIONS.** Functions that are not considered essential to a job. Employers must consider removing marginal job functions as an accommodation under the ADA, but do not have to remove essential functions as an accommodation.

public transportation terminals, depots, or stations (not including facilities relating to air transportation); places of public display or collection (e.g., museums, libraries, galleries); places of recreation (e.g., parks, zoos, amusement parks); places of education (e.g., nursery schools, elementary, secondary, undergraduate, or postgraduate private schools); social service center establishments (e.g., day care centers, s   c

contractors, by recipients of federal financia

**U.S. DEPARTMENT OF JUSTICE.** Federal agency that is responsible for enforcing titles II and III of the ADA.

**VISUAL IMPAIRMENT (VI).** Visual impairment including blindness means an impairment in vision that, even with correction, adversely affects an individual's educational performance. The term includes both partial sight and blindness.

- Legally blind. An individual with visual acuity of 20/200 or less even with correction or has a field loss of 20 degrees or more.

- Low vision. A person who is still severely impaired after correction, but whom may increase functioning through the use of optical aide, non-optical aids, environmental modifications and/or techniques.

*Sources: (The American with Disabilities Act Glossary of Terms, http://askjan.org/; Special Education Terminology and Disability Categories, http://www.sagepub.com)*

<center>**Useful Resources**</center>

**Resources based in the Treasure Coast district can be found at
http://tcitc.weebly.com/. Topics include:**

| Educational options | Services for independent living |
|---|---|
| Services for people on the Autism Spectrum | Services for the Deaf and Hard or Hearing |
| Social Security Administration | Employment |
| Vocational Rehabilitation | Medical resources |

Support groups

**All about Learning Disabilities**

http://webs.rtc.edu/ii/DSDP%20Grant/Allaboutlearningdisabilities.html

**Learning Disabilities Association of America**

http://www.ldanatl.    G          ml  alHtL