Accommodations:
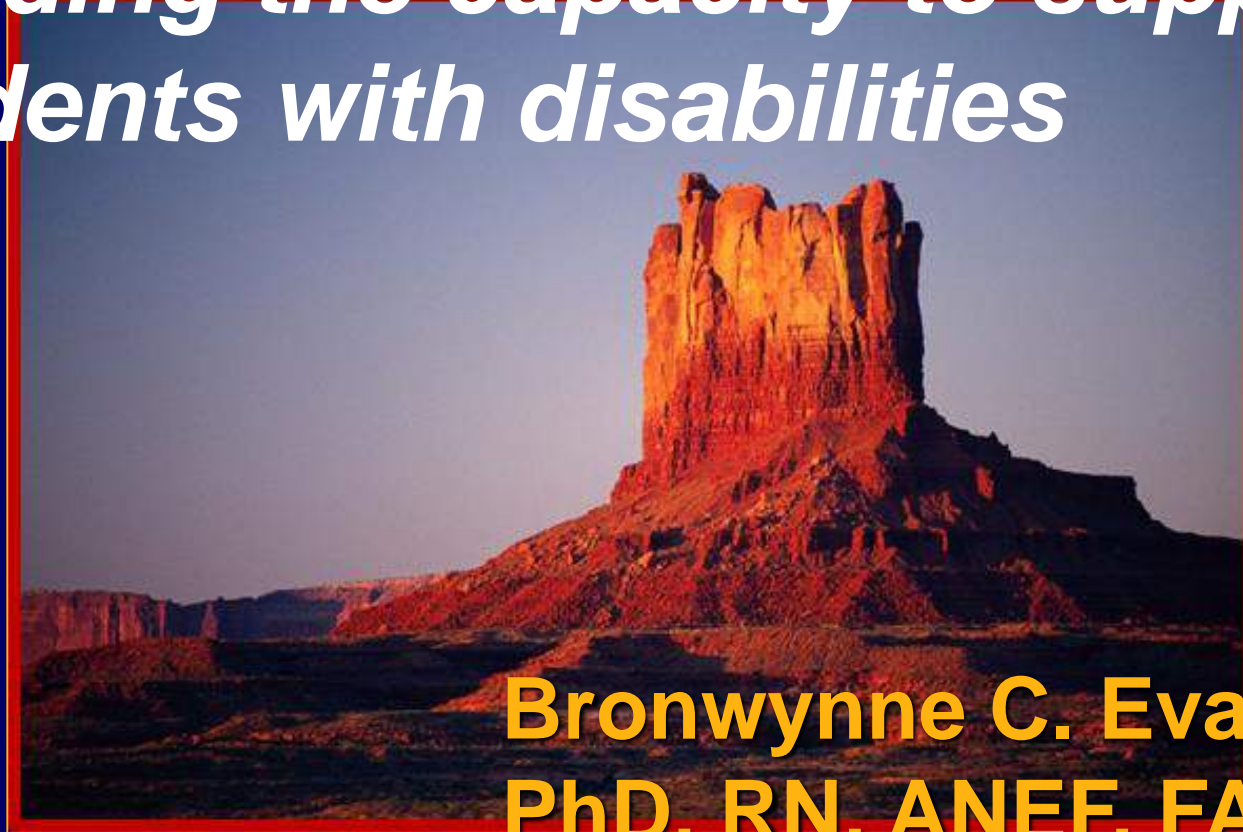## *Building the capacity to support students with disabilities*

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Acknowledgments

- The National Organization of Nurses with Disabilities:

    Beth Marks, PhD, RN; Karen McCulloh, RN; Robin Jones, OT; Martha Smith, MA

- The Office of Disability Employment Policy, U.S. Department of Labor

We will address…

- Requirements of ADA/ ADAAA
- Social vs. medical model: paradigm shift
- World of work vs. the world of education: essential functions vs. technical standards
- Role of disability service professionals
- Making accommodations
- Responsibilities of institutions, students, and faculty
- Transforming our profession

The need: looming shortages

- Shortage of 260,000 RNs by 2025
- RWJ/IOM "80% BSNs, double the number of doctorally prepared nurses"
- Average ages: RNs 50 and older; PhD professors 61; associate professors 58, assistant professors 51

Today's reality

Nursing students and practicing nurses with disabilities continue to face barriers

www.NOND.org

DAILY EVIDENCE

The issues and challenges

- Disability diagnoses often delayed until post-secondary education
- Conflict between social & medical model view of disability
- Lack of knowledge r/t self-identification and disability disclosure
- Lack of knowledge r/t accommodations, use of adaptive devices & technology
- Lack of role models or mentors

Medical model   vs.   Social model

- disability is negative; a deficiency/abnormality

- disability resides in the person

- remedy for disability-related problems is cure or normalization of the individual

- agent of remedy is the professional

- disability is neutral; a difference

- disabling qualities reside in environment (access & attitudinal barriers)

- remedy for disability-related problems is change in interactions b/t individual & society

- agent of remedy can be individual or advocate or anyone changing interactions b/t individual & society

ADA (1990) definition of disability

1. has a physical or mental impairment that **substantially limits one or more** major life activities;

2. has a **history or record of such an impairment**;

3. is **perceived by others** as having such an impairment.

Not all disabilities

are visible!

ADAAA (Amendments, 2008)

- Expanded definition of "qualified disability"

- Does not allow consideration of mitigating measures

- Need only substantially limit one major life activity

- Coverage for neurologically based impairments

DOL/ODEP, DOJ, DOE

- Increasingly attentive to issues of discrimination in education

- ADAAA has wide-reaching implications for education

  – increases the number of students who qualify as having a disability

  – intensifies reasonable accommodation efforts and overall sensitivity to disability issues

Essential Functions

Apply to employment, not education

BUT

Translated into education using Appendix A: Functional Abilities (Yocom,1996)

Widely used in nursing programs

Example: "Walk"

Technical Standards

Apply to _education_ – ALL students

- "Able to meet these requirements with or without a reasonable accommodation"
- Entry requirement, not skill learned in program/the "what", NOT the "how": "able to gather vitals" NOT "hear heart murmur through stethoscope"

Disability service professionals are our friends…

- Disability Services Office
- ADA Coordinator or anyone within the college or university who has authority related to compliance with state and federal discrimination laws (504, ADA, ADAAA)
- Faculty education & support
- Student education, support, advocacy

When a qualified student applies to your program….

- Legally unable to discourage concerning performance of job-related functions

- Legally required to leave questions about the presence, type, or severity to the DSO

- Legally required to admit without regard for job placement potential

When a student comes to you requesting accommodations…

- Refer to DSO immediately to disclose & document the disability
- Leave questions about presence, type, or severity to DSO
- Leave documentation & determination of disability to DSO
- Work with DSO & student to implement identified accommodations

What is an accommodation?

- Modification or adjustment to the way things are usually done

- Changes to the environment to enable someone with a disability to have equal access

- Use of assistive and/or accessible devices to enable someone to accomplish a task

What is a "reasonable" accommodation?

- Anything can be an accommodation

- Undue financial hardship to school?

- Fundamental alteration of program or service?

- Need process to evaluate & ability to defend decisions

Forms of reasonable accommodation

- Modified schedules
- Auxiliary aids and services
- Modified policies and procedures
- Materials in alternative formats
- Accessible information technology
- Captioned video (YouTube, DVD, etc.)
- Modified requirements for clinical procedures
- Assistive technology

What is NOT a "reasonable accommodation?

- Fundamentally altering a course requirement
- Tolerating abusive behavior
- Non-adherence to policies/procedures
- Personal services

Remember…..

- Civil rights issue: equality, not special treatment – treat everyone the same!

- Must allow access to public education for qualified students

- Not required to make accommodations that cause "undue hardship" or impugn curriculum BUT must then

  identify alternatives

Remember.….

- Each case can be addressed individually without setting precedent
- The student is the best resource for designing and implementing accommodations: ask them what they need
- Students are not patients
- Learning opportunities for faculty are varied and rich

Whose responsibility is it?

Educational institution

- appropriate accommodations to maximize success in classroom and other degree requirements

- auxiliary aids and services to ensure participation

Whose responsibility is it?

Students

- Identify need for accommodation
- Engage in interactive process to determine appropriate accommodation prior to activities (not after the fact)
- Provide documentation for faculty in a timely way

Whose responsibility is it?

Programs

- Make case-by-case determination
- Develop disability-friendly policies and evaluation processes
- Create technical standards
- Use educational criteria (not essential functions)

Ask ourselves….

- What is essential nursing knowledge?
- What is the core of nursing practice?
- Is there more than one way to teach something/complete an objective?
- Must *all* students perform *all* activities?
- How do we balance consumer safety with obligations to all students?

Ask ourselves…

- Do we have disability-friendly policies, evaluation processes, technical standards?

- Do we recognize that each disability experience is unique, even "similar" types of disabilities?

- Do we help clinical faculty negotiate accommodations identified by students & DSOs?

Ask ourselves…

Do we have a capacity-building core group?
ADA coordinator for college/university
Disability Services Professional
Student with a disability
Faculty with and without disabilities
Clinical faculty and staff at placement sites?

27   27

Transforming the Profession

- Improve overall care using the social model and a multicultural perspective
- Redefine clinical skills (adaptive technology could become standard practice, e.g., amplified stethoscopes)
- Educate stakeholders: people with disabilities can be, *and are*, nurses

Case Studies and Questions

White Paper on Inclusion of Students with Disabilities in Nursing Educational Programs for the California Committee on Employment of People with Disabilities

Drs. Beth Marks & Sarah Ailey

www.aacn.nche.edu/education-resources/Student-Disabilities-White-Paper.pdf

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