Access
for students with disabilities

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ACCESS FOR STUDENTS WITH DISABILITIES

It is the policy of Alpena Community College (ACC) to comply with Section 504 of the Rehabilitation Act of 1973, as amended, and with the Americans with Disabilities Act of 1990 (ADA). These acts provide for equal opportunity for students with disabilities in educational activities, programs, and facilities. ACC is committed to affording equal opportunity to persons with disabilities by providing access to its programs, activities, and services.

THE LAW AND ITS IMPLICATIONS

According to Section 504 of the Rehabilitation Act of 1973, “No otherwise qualified individual with a disability in the United States . . . shall, solely by reason of his/her disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance . . .” Since Alpena Community College receives federal financial assistance, the Rehabilitation Act applies.

The Americans with Disabilities Act applies to ACC by prohibiting discrimination in the areas of employment, public services, public accommodations, and telecommunications relay services.

Both the Rehabilitation Act and the ADA require that ACC make reasonable accommodations to allow otherwise qualified individuals to participate in a program or activity.

These laws do not mean that academic standards should or will be lowered. Nothing in the Rehabilitation Act or the ADA abridges the freedom of an institution to establish academic requirements and standards. Before ACC is required to make an accommodation, the individual must make her or his disabilities known. She/he must also establish that they are otherwise qualified by meeting the academic and technical standards required for admission or participation in the program or activity.

Determining a reasonable disability accommodation in the postsecondary learning environment requires individual analysis. The key is accommodating the disability, not altering course content.

DEFINITIONS

An otherwise qualified person with a disability is:
An individual who, with the aid of a reasonable accommodation, can fulfill the academic and technical standards for admission and participation in ACC’s educational courses or programs.

A reasonable accommodation is:
Any change in an educational environment that effectively and appropriately enables an individual with a documented disability to have equal educational opportunities.

An accommodation is NOT reasonable if it:
- Poses a direct threat to the health or safety of others, or
- requires a substantial change to an essential element of course curriculum or a substantial alteration in the manner in which services are offered or provided for non-disabled students, or
- poses an undue financial or administrative burden.
INDIVIDUAL AND INSTITUTIONAL RIGHTS AND RESPONSIBILITIES

RIGHTS:
Each student with an identified disability has the right to receive from ACC:
• Equal access to courses, programs, services, activities, and facilities offered through ACC.
• Equal opportunity to work, learn, and receive reasonable, effective, and appropriate disability accommodations, academic adjustments, and/or auxiliary aids and services.
• Appropriate confidentiality of all information regarding their disability and to choose to whom information about their disability will be disclosed, except as required by law.
• Information, reasonably available in accessible formats.

ACC has the right to:
• Identify and establish essential functions, abilities, skills, knowledge, standards, and criteria for courses, programs, and activities and evaluate students based on their performance.
• Request and receive current documentation from an appropriate licensed professional source that supports requests for disability accommodation services, academic adjustments, and/or auxiliary aids and services.
• Deny requests for disability accommodation services, academic adjustments, and/or auxiliary aids or services if the documentation demonstrates that the request is not warranted, the documentation presented fails to identify a specific disability, or the student fails to provide appropriate documentation in a timely manner.
• Select among equally effective and appropriate disability accommodation services, adjustments, and/or auxiliary aids and services in consultation with students with documented disabilities and in collaboration with faculty and staff who have contact with them.
• Refuse to make available a disability accommodation service, adjustment, and/or auxiliary aid or service that is inappropriate, ineffective or unreasonable, including any that:
  o Pose a direct threat to the health and safety of others,
  o impose a substantial change to an essential element of course curriculum, or
  o pose undue financial or administrative burden on ACC’s programs, activities, faculty, or staff.

RESPONSIBILITIES:
Each student with a disability has the responsibility to:
• Meet qualifications and maintain essential institutional standards for courses, programs, services, and activities, (e.g. completing assigned work in courses taken).
• Self-identify in a timely manner as an individual with a disability when an accommodation is needed and seek information, counsel, and assistance as necessary from appropriate sources designated by ACC, preferably prior to the start of classes.
• Provide documentation from an appropriate licensed professional source describing the nature of the disability and how the disability limits the student’s participation in courses, programs, services, activities, and facilities.
• Follow published procedures for obtaining effective and appropriate disability accommodation services, academic adjustments, and/or auxiliary aids and services.
ACC has the responsibility to:

- Provide information regarding policies and procedures to students with disabilities and assure that this information is provided in accessible formats upon request.
- Ensure that courses, programs, services, jobs, activities, and facilities, when viewed in their entirety, are available and usable in integrated and appropriate settings.
- Evaluate students on their abilities and potential, not their disabilities.
- Provide or arrange for effective, appropriate, and reasonable disability accommodations, academic adjustments, and/or auxiliary aids and services for students with documented disabilities in courses, programs, services, jobs, and activities.
- Maintain appropriate confidentiality of records and communication concerning students with disabilities except where disclosure is required by the law or authorized by the student.

PROCEDURES

The Instructional Office (VLH 109) is the designated office at ACC to coordinate disability services for all students with identified and documented disabilities. Disability services eligibility decisions and service plans are made on an individual basis.

Disability documentation is required before disability accommodation services can be provided. Students applying for disability accommodation services are urged to make the request early in the registration process. Adequate time is necessary to arrange for specific services.

1. Student contacts the Dean of Students (VLH 109) to complete the disability services intake process.
2. Student provides documentation of disability from an appropriate licensed professional to the Dean of Students. (Guidelines for acceptable documentation can be found in the “Specific Disabilities” section of this publication). All disability documentation will be maintained by the Dean of Students or the assigned counselor.
3. The student makes an appointment to meet with the Dean of Students.
4. A decision regarding reasonable disability accommodation services is made by the Dean of Students and the student based on the documentation. Arrangements will be made to contact instructors regarding disability accommodation services, if appropriate. Students are encouraged to contact their instructors personally to discuss course expectations early in the semester.

GRIEVANCE PROCEDURE

Any student denied disability services may appeal the decision by following the Student Complaint Procedure as written in the Alpena Community College Student Handbook.
Disability Services

Advanced Preparation: priority registration; room/building proximity; syllabus prior to start of class; list of required printed materials.
Adaptive Equipment: tape recorder; laptop computer in class; spell and/or grammar checkers; FM device; video-recorder.
Environmental Adaptations: reserved seating; work space/classroom modification; room/building proximity; note-taker; arranged peer partnerships – classrooms/labs; scribe; reader; real time reporter; instructional adaptations.
Modified Materials: taped textbooks; audiotapes of lectures; videotapes of lectures; copies of visual materials in an alternative format.
Testing Adaptations: extended time; alternative testing format/environment.

Disability Documentation

The Americans with Disabilities Act defines a disability as any of the following: 1) “a physical or mental impairment that substantially limits one or more of the major life activities of the individual,” 2) “a record of such impairment,” or 3) “being regarded as having such impairment.”

Recent and comprehensive documentation about the current functional impact of the disability in an adult learning environment is needed to determine whether reasonable accommodations can be designed and which specific accommodations can be provided. ACC does not provide testing to establish eligibility for disability services. It is the responsibility of the person requesting disability accommodation services to provide documentation. All documentation will be evaluated on an individual basis and students may be required to submit additional documentation. All reports must be written on the evaluating professional’s letterhead, be typed or otherwise legible, dated, and signed by the professional providing the assessment. The diagnostician must be impartial. Specific questions regarding documentation should be discussed with the Dean of Students.
ATTENTION DEFICIT/HYPERACTIVITY DISORDER (ADD/ADHD)

Definition: a neurobiological condition that is manifested in a persistent pattern of inattention, impulsivity, or hyperactivity. It arises during childhood and is attributed neither to gross sensory, language or motor impairment, nor to mental retardation or severe emotional disturbance.

Considerations: ADD/ADHD is documented through a comprehensive evaluation that establishes a diagnosis, rules out other causes, and determines the presence or absence of other conditions. This evaluation will often include intelligence testing plus the assessment of academic, social and emotional functioning, and developmental abilities. Measures of attention span and impulsivity will also be used. A medical exam by a physician is important. Students with ADD/ADHD may have accompanying learning disabilities or other disabilities such as anxiety or depression that can impact their college learning experience.

Disability accommodation services could include:
- Advanced preparation
- Adaptive equipment
- Environmental adaptations
- Modified materials
- Testing adaptations

Documentation Guidelines:
The report should provide information supporting a diagnosis consistent with the current Diagnostic and Statistical Manual of Mental Disorders in documenting ADD/ADHD in adults. Individuals qualified to render a diagnosis for this disorder are practitioners who have been trained in the assessment of ADD/ADHD and are experienced in assessing the needs of adult learners.

Recommended practitioners may include: neurologists, psychiatrists, licensed clinical or educational psychologists, family physicians, or a combination of such professionals. Information regarding the onset, longevity, severity, and current functional impact of symptoms should be included, as well as the specifics describing how the disability has interfered with educational achievement. Individualized assessments of current cognitive processing and educational achievement are recommended. The evaluator must attach copies or summaries of the specific tests, measures, or clinical data used to establish each criterion. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
BLIND/PARTIALLY SIGHTED STUDENTS
Definition: disorders in the function of the eye as manifested by at least one of the following: 1) visual acuity of 20-200—the legally blind person can see at 20 feet what the average-sighted person can see at 200; 2) low vision—limited or diminished vision that cannot be corrected with standard lenses; and 3) partial sight—the field of vision is impaired because of illness, a degenerative syndrome, or trauma.

Considerations: some students may use aids such as guide dogs or white canes. These dogs are professionally trained for the work that they do and are well disciplined in group settings—they are at work and should not be petted. White canes are another mobility aid and are distinctive in their white coloring to be noted as such for the seeing population.

Disability accommodation services could include:
- Advanced preparation
- Adaptive equipment
- Environmental adaptations
- Modified materials
- Testing adaptations

Documentation Guidelines
Ophthalmologists are the primary professionals diagnosing and providing medical treatment for persons with blindness or low vision disabilities. Optometrists also provide information regarding the measurement of visual acuity, as well as visual tracking and fusion difficulties, such as eye movement disorders, lazy eye, and related vision disorders.

Documentation should contain a clear statement of vision-related disability with supporting numerical description. The age of acceptable documentation is dependent upon the disabling condition, the current status of the condition, and the request for disability accommodation services. Information about present symptoms that meet the criteria for diagnosis and a summary of assessment procedures and/or evaluation instruments used to make the diagnosis (including standardized scores) should contain information relating to the status of the student’s vision (static or changing) and its impact on the academic setting. The use of corrective lenses and on-going visual therapy should be addressed, if appropriate. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
DEAF/HARD OF HEARING STUDENTS

Definition: hearing loss attributed to two causes: 1) sensorineural (nerve deafness which involves impairment of the auditory nerve and affects the inner ear); or 2) conductive loss (a dysfunction of part of the ear mechanism affecting the outer and middle ear). Some students may have both types of hearing loss.

Considerations: the age of the student at the time of the loss will impact the student’s ability to communicate as a hearing person. The student may be prelingually deaf (hearing loss before oral language acquisition) or adventitiously deaf (normal hearing during language acquisition). Those born deaf or who become deaf as a very young child might have more limited speech development.

Students who have residual hearing, may rely on lip reading and use hearing aids or assistive listening devices. Hearing aids amplify all sounds and can make small noises such as air conditioners, and traffic noise distracting. Lip reading students usually comprehend only about 30-40% of what is said and have difficulty understanding instructors who cover their lips, face the chalkboard, move around, or wear a mustache. Class discussions can also be problematic.

Students may require the use of sign or oral language interpreters to access the information being presented in class. Sign language interpreters use highly developed language and finger spelling skills for communication, while employing various types of sign language (e.g. American Sign Language or Signed English). Oral interpreters silently form words on their lips for speech-reading.

Disability accommodation services could include:
- Advanced preparation
- Adaptive equipment
- Environmental adaptations
- Modified materials
- Testing adaptations

Documentation Guidelines
An audiogram is required. The age of acceptable documentation is dependent upon the disabling condition, the current status of the student, and the student’s request for disability accommodation services. A summary of the assessment procedures and evaluation instruments used to make the diagnosis and a narrative summary of evaluation results should be included if appropriate. If relevant, a statement regarding the use of hearing aids or other devices should be included. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
**HEAD INJURY**

**Definition:** head injuries are often not visible and are very complex. They result from either external or internal trauma. They can result in seizures, loss of balance or coordination, difficulty with speech, limited concentration, memory loss, loss of organizational and reasoning skills, loss of ability to quickly process information, loss of language functions, and/or changes in behavior.

**Consideration:** a behavioral assessment of head injured individuals is helpful to identify functional limitations resulting from cognitive impairment. The head injured individual’s past knowledge, skills, work history, family situation, and treatment since trauma impact performance in the academic environment.

Disability accommodation services could include:

- Adaptive equipment
- Modified materials
- Testing adaptations

**Documentation Guidelines**

The report must verify the condition and describe its current functional impact. The documentation should provide information regarding the onset, longevity, severity, and current impact of symptoms, as well as specifically how the disabling condition has interfered with educational achievement.

Individualized assessments of current cognitive processing and educational achievement are necessary. Recommended professional evaluators for head injury or traumatic brain injury may include: neurologists, licensed clinical and school psychologists, neuropsychologists, and psychiatrists. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
LEARNING DISABILITIES

Definition: a group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders may occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities, but do not by themselves constitute a learning disability.

Although learning disabilities may occur concomitantly with other disabling conditions (e.g. sensory impairment, mental retardation, or serious emotional disturbance), or with extrinsic influences (such as cultural differences, insufficient, or inappropriate instruction), they are not the result of those conditions or influences.

Considerations: learning disabilities are not the same as borderline intellectual functioning or emotional disorders. Students with learning disabilities usually have average or above-average intelligence. Learning disabilities must be documented through a series of intellectual, cognitive, and achievement skills testing. The testing needs to document that there is a discrepancy between the student's achievement skills and intellectual capacity.

Disability accommodation services could include:
- Adaptive equipment
- Environmental adaptations
- Modified materials
- Testing adaptations

Documentation Guidelines
Professionals conducting assessments, diagnosing learning disabilities, and making recommendations for disability accommodation services relevant to the student’s learning environment must have additional training and experience in the assessment of learning disabilities. Recommended professionals may include clinical or educational psychologists, school psychologists, neuropsychologists, learning disabilities specialists, and medical doctors. Documentation must address the student’s current level of functioning and need for disability accommodation services. The diagnosis and recommendations should be based on a comprehensive assessment battery which includes a rationale for ongoing services and accommodations at the postsecondary level. The report should include a diagnostic interview, assessment of aptitude, academic achievement, information processing, and a diagnosis. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
**MOBILITY IMPAIRMENTS**

**Definition:** impairments range in severity from limitations on stamina to paralysis impacting physical mobility and movement. This includes, but is not limited to, quadriplegia, paraplegia, amputation, arthritis, back disorders, cerebral palsy, and muscular dystrophy.

**Considerations:** physical disability is separate from matters of cognition.

Disability accommodation services could include:

- Advanced preparation
- Adaptive equipment
- Environmental adaptations
- Testing adaptations

**Documentation Guidelines**

Documentation for physical disabilities must be provided by a physician or medical specialist with experience and expertise in the area for which accommodations are being requested. Documentation should be current. The age of documentation is dependent upon the disabling condition, the current status of the student, and the student’s request for accommodations. The report should include a summary of assessment procedures used to make the diagnosis and contain a clear statement of the medical diagnosis of the physical disability or systemic illness, as well as a description of present symptoms. The documentation should include a statement of the functional limitations and the degree to which those limitations impact the individual in the learning context for which accommodations are being requested. Medical information relating to the student’s needs, including the impact of medication on the student’s ability to meet the demands of the post-secondary environment, should be included in the report. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
PSYCHIATRIC/PSYCHOLOGICAL DISABILITIES

Definition: a chronic behavioral or psychological condition in an individual that causes clinically significant distress or impairment and is not an expected response to a particular event. Examples include, but are not necessarily limited to, depression, bi-polar disorder, anxiety disorders, and schizophrenia.

Consideration: trauma is not the sole cause of psychological disabilities; genetics may play a role. Psychiatric/psychological disabilities affect people of any age, gender, income group, and intellectual level. Disruptive behavior is not an attribute of most people with psychiatric/psychological disabilities.

Disability accommodation services could include:
- Adaptive equipment
- Environmental adaptations
- Testing adaptations

Documentation Guidelines
Individuals qualified to render clinical diagnoses for this area are practitioners who have been trained in the assessment of mental illness, including, but not limited to: licensed psychologists, psychiatrists, certified social workers, and licensed professional counselors. The report should provide a diagnosis/diagnoses including the current Diagnostic and Statistical Manual of Mental Disorders code. It should also include the date of diagnosis and the date of the last contact with the individual.

The report should address the measures which were used to assess the educational impact of the psychological condition and include information relevant to the student’s academic needs, a description of symptoms which meet the criteria for the diagnosis/diagnoses, the approximate date(s) of onset, and the prognosis for therapeutic interventions. The report should address whether the individual currently poses a threat to herself/himself or to others. The report should describe what major life activity/activities is/are impacted by the disorder and the significance of this impact on academic activities such as exam-taking, note-taking, processing speed, and ability to concentrate. Further assessment by an appropriate professional may be required if co-existing learning disabilities or other disabling conditions are present, or if documentation does not support the need for the requested disability accommodation services. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.
**SYSTEMIC DISABILITIES**
Definition: disabilities stemming from conditions affecting one or more of the body’s systems – respiratory, immunological, neurological, or circulatory. Examples include: cancer, chemical dependency, diabetes, seizure disorder, HIV, Lyme disease, lupus, multiple chemical sensitivity, severe asthma and allergies, and kidney disease.

Consideration: the physical condition of those with systemic disabilities is unstable, at any time their health conditions may change.

Disability accommodation services could include:
- Advanced preparation
- Environmental adaptations
- Testing adaptations

Documentation Guidelines
Documentation for physical disabilities must be provided by a physician or medical specialist with experience and expertise in the area for which disability accommodation services are being requested. Documentation should be current. The age of documentation is dependent upon the disabling condition, the current status of the student, and the student’s request for accommodations. The report should include a summary of assessment procedures used to make the diagnosis and contain a clear statement of the medical diagnosis of the physical disability or systemic illness, as well as a description of present symptoms. The documentation should include a statement of the functional limitations and the degree to which those limitations impact the individual in the learning context for which disability accommodation services are being requested. Medical information relating to the student’s needs, including the impact of medication on the student’s ability to meet the demands of the post-secondary environment, should be included in the report. All reports must be on letterhead, typed or otherwise legible, dated, and signed by the professional proving the assessment.