



EASTERN KENTUCKY UNIVERSITY

Serving Kentuckians Since 1906

Office of Services for Individuals
with Disabilities

Teresa.belluscio@eku.edu

FAX (859) 622-6794

361 Student Services Building
521 Lancaster Avenue
CPO 66
Richmond, Kentucky 40475-3102
(859) 622-2933

Memorandum

TO: Faculty Senate Task Force on Priority Registration
Council of Academic Affairs
Faculty Senate
Provost Council

FROM: Teresa Belluscio, Director of the Office of Services for Individuals with Disabilities with Sandy Douglas, Disabilities Analyst

RE: Priority Registration for select Students with Disabilities

DATE: October 30, 2008

Approval of the proposed early registration policy is a much needed and a long overdue factor of accessibility that students with disabilities need for academic success. Allowing early registration for these select students with disabilities will become the centerpiece of which their academic success rests. These students are hard working and diligent but suffer immensely when poor schedules adversely affect attendance.

Kentucky regional Universities including WKU and NKU along with both UK and U of L have such policies in place for students with disabilities.

Class schedules which do not provide the needed access and do not help compensate for health challenges often result in the student dropping or withdrawing from the course, or failing the course. If difficulties are caught in time and discussed with a staff member with the OSID, courses may be dropped and mid-semester classes may then be added. This too adds its own set of problems for the student. These situations result in an increased number of phone calls, e-mails to and/or meetings with teachers, Disabilities Office staff, and Advisors and additional time is consumed for the Registrar's Office, Financial Aid, and OVR. In addition, the cost of education increases and graduation may be delayed.

In regard to deaf or hearing impaired students, a financial/staffing burden is placed on Deaf Student Services when deaf students cannot register for the same class and interpreting services are duplicated. To further define the benefit that early registration would have on our staff efficiency when providing interpreting for students that are deaf as stated by our Interpreter Coordinator Shirley Rivard;

We have 22 registered deaf and Hard of hearing students this semester 10 that use American Sign Language as their primary mode of communication. This translates into 102 credit hours per week. In addition to these hours we also provide for all student/teacher conferences, study groups, tutoring or any outside activity that is required for the class. Any class or activity over one hour requires two interpreters, which means in reality the majority of the T/R classes should have a team especially since we work back to back classes. We do not have enough interpreters to provide 2 per class which increases the risk of interpreter injuries (i.e. repetitive motion, carpal tunnel) or may cause mental fatigue on the interpreter and result in strained translations.

I currently have 4 full time interpreters, myself and 9 “part-time” interpreters. These 9 interpreters either have full time jobs or service the community and some travel as far as Pikeville to provide services. Securing them for classes depends on when I have schedules available. Typically what I have found is by the time my students register, the majority of part time interpreters have prior commitments and cannot assist with covering classes. The earlier the students can register, the quicker I can secure interpreters.

Examples of cases where early registration may be of great benefit to our students with the OSID:

A student with Cystic Fibrosis needs classes 2 or 3 days per week in order to rest, receive breathing treatments, and prevent hospitalizations.

A student with severe and frequent migraine headaches requires a morning class schedule due to a history of debilitating pain in the afternoon.

A student with a rare autoimmune bone disease requires a T/R schedule due to difficulty getting out of bed and walking to classes on a daily basis. Rest is needed on the days between classes.

A student with Crohn’s Disease, Irritable Bowel Syndrome, or Ulcerative Colitis may require a M/W/F class schedule due to the shorter class time and may require a non-consecutive class schedule for restroom use between classes.

A student with Fibromyalgia, Multiple Sclerosis, Muscular Dystrophy, back pain, or lifting or walking restrictions requires a non-consecutive class schedule, as it takes longer than 15 minutes to walk or drive from building to building.

A student with a visual impairment requires all web classes due to not driving and not living in Richmond. Time is consumed sending e-mails on behalf of the student as an override is needed and the teacher needs confirmation from the Disabilities Office concerning the student’s status.

A student with severe anxiety and social phobia requires auditorium classes for isolated seating; or in smaller capacity classes utilizes the support of a close friend who also registers for the same courses in order to protect therapeutic goal progress made and prevent regression of symptoms.

A student with an anxiety disorder did not require extended test time with a M/W/F class schedule due to the shorter testing time in comparison to T/R class time.

A student with attendance concerns as a direct result of cancer, medical appointments, and hospitalization may need to register for the class with the course teacher who is known to be flexible with attendance or not take roll at all.

CRITERIA for Early Registration

Determining eligibility is not unlike using professional judgment based on documentation in assessing for reasonable accommodation. Decisions for early registration will be considered on a case-by-case basis by either the Director or the Disabilities Analyst and take the following into account:

Considerations:

1. What is the severity of the diagnosis and its direct impact on accessing an appropriate course schedule?
2. What functional limitations are present as they relate to establishing a course schedule?
3. What measures has the student taken on their own account to work out a reasonable and do-able course schedule?
4. What are the fixed variables that the student has to deal with that are imposed by the impairment or disorder that are in direct conflict with a course schedule?
5. What type of class schedule would provide access while best supporting the student's abilities, allowing the least amount of adverse impact, and equalizing the opportunity for success?
6. Is Early Registration necessary to provide the accommodated schedule based on the courses needed for this particular semester?

Specific Diagnoses that the OSID may consider when implementing this policy include:

Orthopedic/Mobility

Arthrogyriposis
Ehlers-Danlos syndrome
Herniated disc
King syndrome
Malignant chondrosarcoma
Osteosarcoma
Patellar maltracking and degenerative arthritis
Perthes Disease
Sacral level myelomeningocele (Spina Bifida)
Scoliosis
Spondylo epiphyseal dysplasia

Vision

Cone/rod dystrophy
Diplopia
Exotropia
Fleck-like macular lesions on funduscopy and the typical dark, choroidal pattern on fluorescein angiography
Myopic astigmatism
High Myopia and Myopic degeneration
Leber's Optic Neuropathy
Medium amplitude rotator nystagmus
Non-arteritic anterior ischemic optic neuropathy
Ocular misalignment
Optic atrophy
Retinosa pigmentosa
Rieger syndrome

Other Health Impairment

Adrenal failure
Asthma
Charcot-Marie-Tooth disease (muscular dystrophy)
Chemical sensitivity
Chronic Intractable Migraine
Crohn's disease
Cystic fibrosis
Epilepsy
Fibromyalgia
Hard of hearing
Hypoglycemia
Hypoparathyroidism
Irritable bowel syndrome
Laryngeal tumor
Muscular Sclerosis
Seizures
Sickle cell anemia
Type 1 diabetes
Ulcerative colitis disease
Vocal cord paralysis

Psychological

Bi-Polar Disorder
General Anxiety Disorder
Post Traumatic Stress Disorder
Social phobia

In essence, early registration is so crucial for some of our students that would be considered a “reasonable accommodation” under the American with Disabilities Act of 1990, the new ADA Reauthorization Act of 2008, and section of the Rehabilitation Act of 1973. Why then do we need a policy? We need this policy so that it is developed as a procedure, in an executed manner that is formally recognized by the University and its departments, advisors, offices and offered under special circumstances to our students with disabilities.

