



School of Health Sciences

Code of Practice for the Support of Disabled and Dyslexic Students

September 2006
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1 Introduction

On the 1st September 2002, Part 1V of the Disability and Discrimination Act 1995 (DDA), referred to as the Special Educational Needs and Disability Act 2001 (SENDA), came into operation. As a result Higher Education Institutions (HEIs) and their related services now have a legal duty to avoid discriminating against disabled students. The legislation requires HEIs to ensure that admissions procedures, learning and teaching practices and related services, are accessible to disabled students. This is achieved by making reasonable adjustments to meet the disabled students' different needs. These adjustments should be anticipatory in nature and not simply reactive to an individual student's requirements.

In 2003, a further amendment to the DDA placed the same legal requirements on practice placement providers, which became effective from October 2004. Consequently, all aspects of Health Sciences professional education needs to be offered in a way that does not treat disabled students less favourably, without justification, for a reason that relates to a disability.

In 2010 the above legislations were all replaced by the Equality Act (2010) which offers protection against discrimination to identified groups in society.

The University of Liverpool welcomes disabled students and takes positive steps to encourage a supportive and accessible environment. The University's Student Support Services includes the *Disability Support Team (DST)*. This team is responsible for the coordination of disability support throughout the university¹. A feature of this coordination is regular liaison with the identified *Disability and Dyslexia Contact* within each Directorate. The School of Health Sciences is viewed as a department and has a named person as the *School Diversity and Equality Tutor (SDET)* to act as the point of contact with the DST. The School comprises five directorates, each of which offers undergraduate education leading to graduation in a specific healthcare profession. In addition, the School offers a number of taught post-graduate programmes and continuing professional development modules to registered practitioners. Each profession has its own competency standards and fitness to practise requirements. As these requirements are an added consideration when supporting disabled students each Directorate has a named *Directorate Disability and Dyslexia Contact (DDC)* to support the SDDC².

This Code of Practice has been produced to ensure that disabled students are supported equitably and fairly throughout the School of Health Sciences and that the advice and recommendations made by the university's DST are embedded into practice within the School.

The language used within this Code of Practice borrows from the Social Model of Disability. While we would always respect a student as being a 'student' first, the Social Model tells us that it is simplistic to attribute problems/issues relating to the

¹ A University Guide for Support and Services for Disabled Student is available at: <http://www.liv.ac.uk/studentsupport/disability/index.htm>

² Appendix 1 details the roles of the SDDC and the DDDC.

individual when the reality is that many problems/issues disappear when institutions and society become accessible. We therefore refer to 'disabled students' in this particular document with recognition that it is society that often disables the individual.

The Code has been designed by the School of Health Sciences Disability, Diversity and Equality Working Group in collaboration with disabled students and in consultation with the university's Disability Support Team. The Code provides information and guidelines for the support for disabled students on the following aspects:

- Implicit assumptions that underpin the operation of the Code.
- Admissions Support Processes.
 - ◆ Application Stage
 - ◆ Pre-entry Stage
- Issues related to Assessment Procedures.
- Issues related to Practice Placement Experience.
- Supporting students with Mental Health problems.

2 Implicit assumptions that underpin the operation of the Code

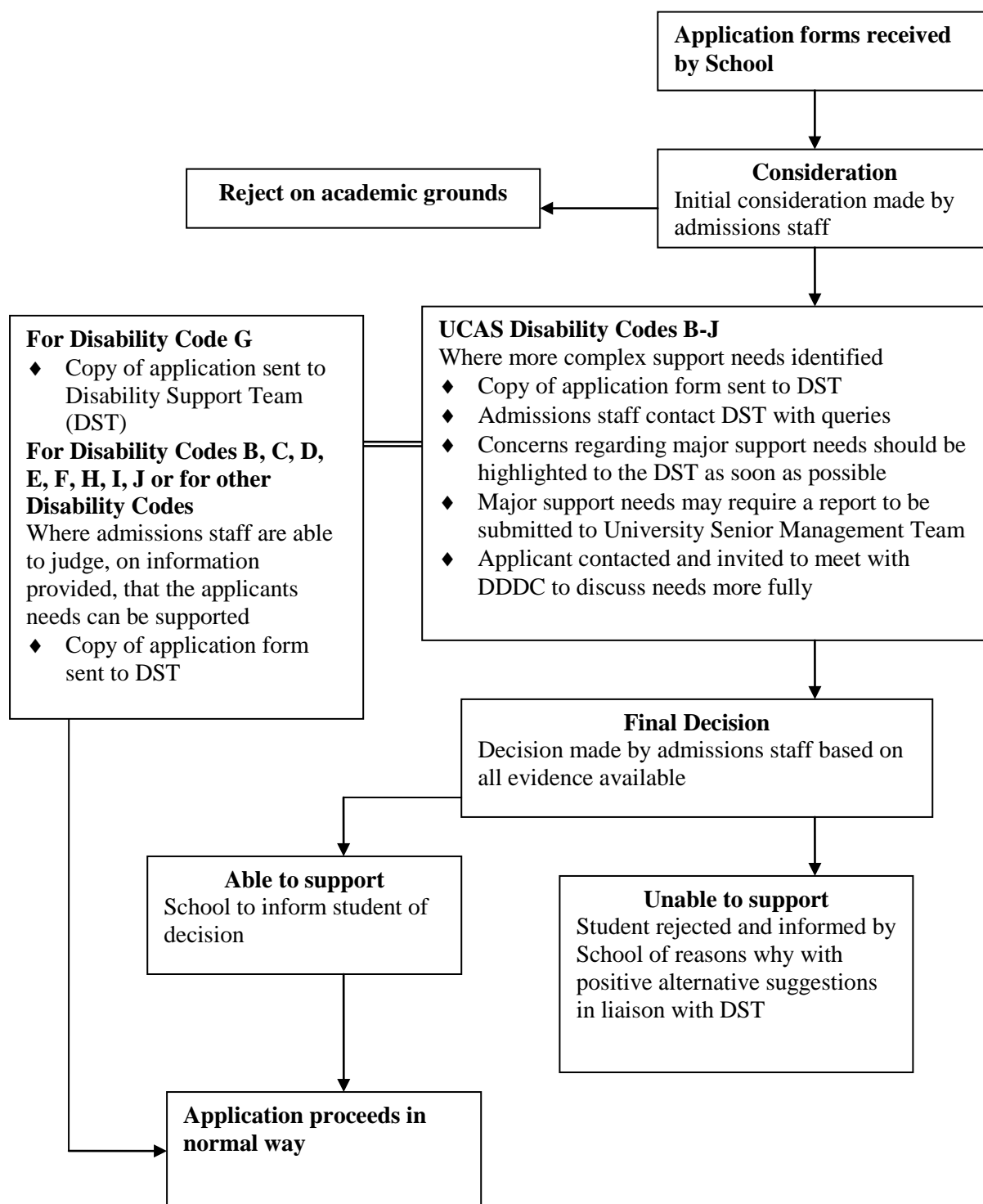
There are several underpinning principles that relate to the effective operation of the Code.

- I The student will take responsibility for the management of her/his needs, in collaboration with other stakeholders.
- II Any information gathered about a student to inform decisions about her/his needs should remain confidential and no aspect should be disclosed to a third party without the written permission of the student. Where there is a need to involve a third party, for example, dealing with university staff outside the Directorate or staff in practice placement areas, a clear mechanism for communication will be discussed and agreed with the student at the beginning of her/his programme of study.
- III As part of the support process, for students whose support needs are complex and changing, an individualised support template - Student Support Document (SSD) - will be produced. This will be reviewed and amended as and when necessary. The content covers recommendations for many areas of the university. It will be produced, with the student's permission, by the DST in conjunction with the student and the School/Directorate Disability and Dyslexia Contact.
- IV The prime purpose of the template is to document and communicate to the university the specific support needs of the student and how these may be met. It will be a person-centred, all encompassing document which will be appropriate (with reviews) for the whole of the student's University life. It should be seen as the mechanism to highlight the support that needs to be put in place for each student experiencing a disability and or specific learning difficulty e.g. dyslexia.

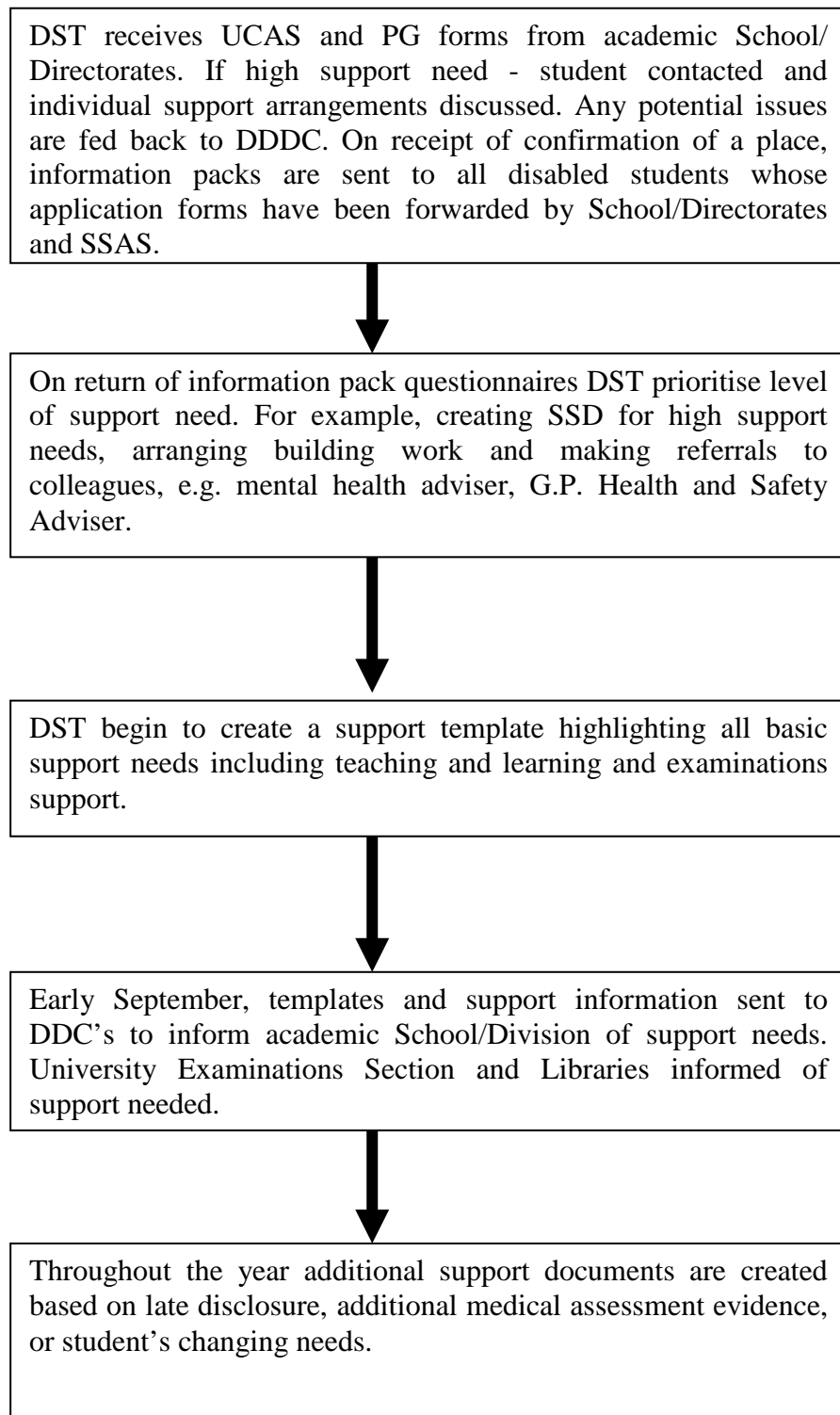
- V The undergraduate programmes of the School are generally recognised as very demanding both physically and emotionally. The programmes are governed by the statutory regulatory bodies, either the Nursing and Midwifery Council (NMC) or the Health Professions Council (HPC). The purpose of these organisations is to protect the public and this purpose must therefore take precedence over all other considerations when making decisions about individual students. This means that there may be instances when it is necessary to make decisions about a person based on an impairment or health issue that may have an impact on their ‘fitness to practise’ (see section on Admissions Support Processes). This is unaffected by the Equality Act (2010). The School therefore has a legal duty to take reasonable steps to ensure that any student is fit to undertake its programmes, can progress on the programme and, on successful completion of the programme, can meet the full set of threshold standards (Standards of Proficiency) for their profession, at the point of their first registration.
- VI All prospective students are expected to have researched the profession through literature and observation visits to gain a greater understanding of the scope of the profession. Before entry to a programme, disabled students are encouraged to disclose any impairment (including dyslexia) as part of the application process. In its marketing literature and on its web site the School will seek to make explicit the range of activities the students will be expected to engage in during the programme. This will enable a disabled student to make an informed decision about making an application.
- VII All programmes are governed by approval and monitoring processes. Some of these processes are externally imposed, for example, by the statutory regulatory bodies and/ or by Professional Bodies and some are imposed internally by the University Quality Assurance processes. One important aspect of approval and on-going monitoring is that the programmes must demonstrate a commitment to promoting diversity, inclusion and equality of opportunity for all. When accepted onto a programme, the School will seek to ensure that disabled students are not disadvantaged by any of its learning and teaching activities e.g. curriculum structure, content, modes of delivery or modes of assessment.
- VIII Student evaluation is considered to be an essential component part of the on-going development of the student learning environment and experience. The School will seek to ensure that the views of the disabled community are always included as part of this process.

3 Admissions Support Process

A Application stage



B Pre-entry stage



4 Issues related to assessment procedures

The DDC will be responsible for ensuring that the **Directorate Examinations Officer** is made aware of any students with issues of disability and/or dyslexia at the beginning of their enrolment onto the programme. Reasonable adjustments³ will be made to the assessment tasks, guided by the SSD/support information.

For disabled students the arrangements will always be determined on a case by case basis; for students experiencing specific learning difficulties e.g. dyslexia, some common practices will be adopted, but will always be recommended by the DST. These may include:

1. For Written Examinations Organised By The University students will be dealt with in accordance with the 'Guidelines on alternative examination arrangements for disabled students and those with other support needs'. This document can be accessed at: www.liv.ac.uk/sas/administration/altexamarrangements.pdf
2. For Assessments Organised By The Directorate students' needs will be managed through consultation between the student, Head of Directorate, DDC and Directorate Examinations Officer as follows:
 - (I) Assignments with cut off date (including clinical portfolios) - as the assignment task and date is published in advance, no additional time or word length will be granted. A sticker scheme will be offered to students for them to decide if they wish to bring to the attention of the marker that they experience dyslexia. (These students must hold evidence with DST to support this claim). Stickers may be attached to the cover sheet of all assignment work. It should be acknowledged that in a small cohort of students this may compromise their anonymity. At the beginning of each academic year a batch of stickers will be issued to the student, countersigned by the DDC, which identifies for the marker that the student experiences dyslexia. In addition, all staff will be advised to follow the 'Guidelines for marking of work of students with dyslexia' (found on School Intranet www.liv.ac.uk/healthsciences/).
 - (II) All other assessment tasks – consideration will be made to making reasonable adjustment to other assessment tasks, for example, practical assessment, clinical assessments, objective structured clinical examinations, objective structures video analysis, poster and oral presentations, by timing and organisation. Each student will be considered on an individual basis. It should be noted, however, that for any assessment, where practice skills need to be demonstrated in 'real time' as part of the assessment objectives, additional time will not be granted.

³ Reasonable adjustment should be interpreted as changes to the time or organisation or format of the assessment that will allow the student to demonstrate their achievement of the assessment objectives, without gaining an unfair advantage over able bodied students or compromising the academic standards.

5 Issues related to practice placements

Based on the document 'Best Practice Guide: disabled social work students and placements' produced by the University of Hull⁴, there are clear steps that a Directorate must undertake prior to a student commencing a placement experience:

1. ***Encouraging disclosure*** - this is a key aspect and should be undertaken by the DDC. In consultation with the student, as early as possible in the programme, it should be established whether the student wants to, and is willing to make a disclosure of disability to the placement sites. If permission is obtained, the method of the disclosure and communication network with the relevant personnel at the placement site will be discussed and agreed.
2. If the student gives permission for the disclosure of disability information, the DDC needs to ***conduct a review of the student's needs prior to commencing any placements***. This will provisionally identify and agree what reasonable adjustments might be appropriate. This information should then be communicated to the Practice Placement Co-ordinator for the Directorate, as early as possible after commencement of the programme to inform the allocation of placement process.
3. A ***pre-placement appraisal, normally involving a visit*** must be arranged for those students with complex support needs. In this aspect the DDC and student will work with the Practice Placement Co-ordinator for the Directorate. This visit should involve all relevant persons at the placement site who will be involved in the management of the student placement experience. If there is a named Disability Officer for the placement site this person should also be included in the discussions. As part of any pre-visit it may be necessary for a risk assessment to be undertaken. The outcome of the pre-placement visit should be a signed written document, a placement learning agreement, detailing what reasonable adjustments will be made for the duration of the placement, the key contact details of the persons involved and how the placement learning experience will be managed and monitored.

To support the Practice Educators with the management of the placement learning experience of a disabled student a '*Guidelines for Practice educators*' is available⁵.

6 Supporting students with Mental Health problems

To support students with Mental Health problems the School will operate to the University policies and guidance. These can be accessed through the web site:

<http://www.liv.ac.uk/counserv/mhealth2.htm>

⁴ Wray J., Fell B., Stanley N., Manthorpe J. and Coyne, E. (2005) '*Best Practice Guide: disabled social work students and placement*', University of Hull.

⁵ For details see Annexe 1.

7 Strategies to raising disability awareness

The School is mindful of its responsibility towards raising disability awareness. It will seek to achieve this by:

- (i) Building disability awareness into the curricula of its programmes.
- (ii) Involving service users in the planning and delivery of its curricula.
- (iii) Publishing guidance for staff and students on diversity, inclusion and equality of opportunity issues.
- (iv) Including disability awareness in the induction procedures for all staff and by ensuring on-going annual updating through the School Forum.
- (v) Including disability awareness in the induction procedures for all students and by ensuring on-going annual updating through individual programme arrangements.
- (vi) Including disability awareness in the induction procedures for all practice educators and by ensuring on-going annual updating through individual programme arrangements.
- (vii) Distributing the Code of Practice and any relevant Guidance documents to all placement sites via individual placement administration procedures.
- (viii) Publishing the Code of Practice and Guidance documents on the staff intranet and the Student School of Health Sciences module in VITAL.

8 Evaluation of the Code

The School will evaluate the effectiveness of the operation of the Code through the following mechanisms:

- (i) Issue an exit questionnaire to all disabled students who have received support during their programme.
- (ii) Run annual Focus Group meetings for all staff who have been involved in the support of a disabled student.

9 Glossary of Terms

Competence

Each profession has its own set of professional standards. Competence is the ongoing ability to meet the standards for professional knowledge, understanding and skills, so that a person can practise safely and effectively.

Disability (as defined by the Equality Act 2010)

A disabled person is someone who has a physical or mental impairment, which has an effect on his or her ability to carry out normal day-to-day activities. That effect must be:

- substantial (that is, more than minor or trivial) and
- long term (that is, has lasted or is likely to last for at least 12 months or for the rest of the life of the person affected.) and
- adverse

Disclosure

The term used within the disability literature and the Act to refer to the process by which the disabled person lets others know about his/her impairment.

Dyslexia

A Specific Learning Difficulty (SLD) defined under the Act as a disability. The student experiencing dyslexia may present with difficulties in reading, writing, spelling, mathematics, concentration, organisation, sequencing and short term memory. Each student is an individual whose experience of dyslexia will be unique to himself/herself. Dyslexia can be described as mild, moderate or severe depending on each individual experience.

Fitness to Practise

Fitness to practise is the ability to practise a profession in a way which meets stated minimum standards for that profession. If someone is fit to practise, this means that they have the health and character, as well as the necessary skills and knowledge to practise their profession safely and effectively. It also means that they are trusted to act legally.

Practice Educator

The designated person(s) responsible for supporting and assessing the student whilst completing the clinical component of the degree programme. For the purpose of this document, this term will encompass all other terms e.g. clinical tutor, mentor.

Reasonable Adjustment

The Act does not define what “reasonable adjustment” means. It requires that responsible bodies take the necessary steps to ensure that a disabled student is not placed at a substantial disadvantage. It recognises that “reasonable adjustment” will vary depending upon all the circumstances of each individual case e.g.

- type of services involved
- nature of the institution, its size and resources
- the effect of the impairment on the individual student

Role of the School Diversity and Equality Tutor (SDET)

The School of Health Sciences has a named person appointed to the position of School Disability and Dyslexia Contact. This role covers the following areas:

- (i) To support the work of the University Disability Support Team (DST) with regard to disabled students within the School of Health Sciences.
- (ii) To keep abreast of national legislations and university policies regarding higher education disabled students.
- (iii) To provide a point of enquiry for staff and students with regard to the support available to disabled students.
- (iv) To inform new members of the School Admissions Unit of the screening process for disabled students.
- (v) To ensure that the Admissions Unit information regarding the admission and support of disabled students is current, accurate and transparent.
- (vi) To ensure that the DST are made aware of all offers made to disabled applicants.
- (vii) To hold a current list of Health Sciences disabled students who have contact with the DST.
- (viii) To be available for support and consultation in drafting individual Student Support Documents (SSD) and other support documents, especially with regard to practice/clinical placements.
- (ix) To maintain contact with and map progress of those students with complex needs (e.g. wheelchair user, hearing impaired).
- (x) To ensure that Personal Emergency Egress Plans are in place, where necessary.
- (xi) To act as student advocate, as necessary.
- (xii) To work collaboratively with the DST in developing support strategies in line with the specific needs of Health Sciences students
- (xiii) To liaise with the programme Practice Placement Coordinators regarding placement needs of disabled students.

Role of the Directorate Disability and Dyslexia Contact (DDC)

Each Directorate in the School has a named person appointed to the position of Directorate Disability and Dyslexia Contact. This role covers the following areas:

- (i) To support the work of the School Diversity and Equality Tutor with regard to disabled students within their Directorate.
- (ii) To attend meetings to discuss and review the needs of the disabled student and help to generate the SSD identifying their support needs.
- (iii) To receive the individual SSD and ensure that Directorate staff are aware of any requirements, or changes to requirements, that the student may need.
- (iv) To participate in on-going review of the School processes for the support of disabled students.