Disability Resource Guide for Staff, Students and Prospective Students of Nursing and Midwifery Degree Programmes
Acknowledgements

This resource guide was developed by a working group composed of the:

- Nursing and Midwifery Practise Development Staff from the Health Service Providers associated, through the Nursing and Midwifery Undergraduate Courses, with University College Cork
- Nursing Lecturers from the School of Nursing and Midwifery in University College Cork
- The Disability Support Service in University College Cork.
- The HSE South Equality Officer.
- Fitness to Practise Committee, University College Cork
- This resource guide has been reviewed by the Office of Corporate and Legal Affairs, University College Cork.

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Glossary of Terms

Disability: For the purpose of this document the term includes any disability, condition or illness which may affect a student’s ability to achieve the core competencies required of Nurses or Midwives

Director of Nursing (DON): This is the most senior nursing position of the Health Service Provider. The DON is responsible for every element of nursing and nurse clinical education in their jurisdiction

Director of Midwifery (DOM): This is the most senior midwife position in the hospital. The DOM is responsible for every element of midwifery and midwife clinical education in their jurisdiction

Health Service Provider (HSP): This term refers to all areas where patients/clients can avail of healthcare including all hospitals and all community services.

Nurse/Midwifery Practise Development unit (NPDU/MPDU): This unit is responsible for facilitating the student’s clinical education in each HSP. It is also responsible for supporting and developing nursing or midwifery practice throughout the HSP areas.

Clinical Placement Coordinators and Clinical Development Coordinators (CPC / CDC): support and guide nursing students on clinical placement. They encourage the application of theoretical knowledge to nursing practice in the clinical area and ensure that students are assigned to patient care in an appropriate and effective manner. CPC’s and CDC’s act as a liaison between students, clinical areas and UCC.

The Nurse Practise Development Coordinator (NPDC): is responsible for facilitating and co-coordinating Nurse Practice Development within the clinical areas of the HSP. This includes ensuring the quality and effectiveness of the clinical learning environment (CLE)
**The Allocations Liaison Officers (ALO):** liaise with UCC in relation to clinical placement allocations. This involves establishing and co-ordinating the placement of undergraduate nursing students in clinical sites to ensure students will receive clinical instruction as stipulated by An Bord Altranais (ABA) February 2005. The ALO is responsible for initial orientation to the HSP, and administrative activity associated with yearly student intakes.

**The Link Lecturer (LL):** is based in the School of Nursing and Midwifery in UCC. Each clinical area in the HSPs has an associated Link Lecturer who liaises with the clinical staff and CPCs when the students are on their clinical placements.

**Disability Support Service (DSS):** is committed, as far as is reasonably possible, to empowering students with disabilities to achieve their academic and vocational goals in an inclusive learning environment.

**Association for Higher Education Access and Disability (AHEAD):** This is an independent, non-profit organization working to promote full access to participation in further and higher education for students with disabilities and to enhance their employment prospects on graduation.
Introduction

University College Cork (UCC) and its health service partners are equal opportunities institutions which are committed to providing assistance, where possible, to students with disabilities or learning difficulties which may affect their ability to achieve the core competency requirements of nursing and midwifery. Where a student has a disability all reasonable efforts will be made to facilitate the student by providing necessary supports to enable them to participate in the programme and be fit to practise in that area. Currently, 1000 students are registered with the Disability Support Services (DSS) in UCC and over 200 are pursuing professional degree programmes.

This document is intended to act as a resource for both staff and students to enable them to develop further awareness of disability issues. It may be used to assist with an understanding of reasonable accommodations that are relevant for students in clinical practice.

As they pursue their programme of choice, students with a similar condition/disability may have different requirements as they may be impacted in different ways. The guide herein aims to focus attention on the student as an individual rather than on the disability and to develop an understanding of the importance of appropriate communication, procedures and supports.

The examples of disability used in this resource are not definitive in any way and are to be used as guidelines only. This information may prove to be beneficial when working with a student in clinical practice.

Furthermore, this document draws attention to the UCC Fitness to Practise Policy and associated Health Declaration Form which was developed in 2013 and should be used in conjunction with UCC Fitness to Practise Policy and AHEAD National Guidelines for Working with Nursing and Midwifery Students.
Useful Links:

UCC Fitness to Practise:  

AHEAD National Guidelines for Working with Nursing and Midwifery Students with a Disability or Specific Learning Difficulty in Clinical Practice:  
http://www.ahead.ie/shopdetail?id=56&qstring=cGc9NA
What is Disability

It is estimated that 10% of the Irish population i.e. 400,000 people approximately have some form of disability (National Disability Authority 2010). There are a number of views relating to what a disability is - all are relevant. The legal definition of disability outlined in the Equal Status Acts 2000 is very broad and includes people who have physical, learning, sensory, mental health or medical conditions.

The Employment Equality Act (Government of Ireland 1998: 8) and the Equal Status Act (Government of Ireland 2000:5) provide the following comprehensive definition of a disability:

a) The total or partial absence of a person’s bodily or mental functions, including the absence of a part of a person’s body

b) The presence in the body of organisms causing, or likely to cause, chronic disease or illness

c) The malfunction, malformation or disfigurement of a part of a person’s body

d) A condition or malfunction which results in a person learning differently from a person without the condition or malfunction, or

e) A condition, illness or disease which is characterized by an impairment of an individual’s normal cognitive, emotional or behavioural functioning (AHEAD 2012), and shall be taken to include a disability which exists at present, or which previously existed but no longer exists, or which may exist in the future or which is imputed to a person.

The Association for Higher Education Access and Disability (AHEAD) defines disability as follows:

"A student is disabled if he/she requires a facility which is outside of the mainstream provision of the college in order to participate fully in higher education or employment and without which the student would be disadvantaged in comparison with their peers.”

For more information, please see www.ahead.ie

Examples of Disability

Disabilities are usually grouped into one of the five categories below. This is not an exhaustive list.

**Disability:** 'Disability results from the interaction between persons with impairments, conditions, or illnesses and the environmental and attitudinal barriers they face. Such impairments, conditions, or illnesses may be permanent, temporary, intermittent, or imputed, and those that are physical, sensory, psychosocial, neurological, medical or intellectual.' United Nations, [www.un.org/esa/socdev/enable/rights/ahc7pddisability.html](http://www.un.org/esa/socdev/enable/rights/ahc7pddisability.html)

**Sensory**
Visual or Hearing Difficulties.

**Physical**
Cerebral Palsy, Multiple Sclerosis, Spina Bifida

**Medical**
Any chronic illness such as Diabetes, Cystic Fibrosis, Crohn's Disease, Epilepsy and Skin Disorders.

**Mental Health/Behavioural Issues**
Any condition characterized by an impairment of an individual’s normal cognitive, emotional or behavioural functioning (AHEAD 2012).

**Specific Learning Difficulties:**
Dyslexia, Dyscalculia, Developmental Co-ordination Disorder, Attention Deficit Disorder, Attention Deficit Hyperactivity Disorder Autism Spectrum Disorders such as Asperger's Syndrome.

**A Social Perspective**
The Social Model of Disability maintains that people with disabilities are prevented from achieving their full potential by the attitudes and conventions of society. People with disabilities may have impairments but it is barriers in the environment such as stairs without ramps, other people’s attitudes and discriminatory practices which actually 'disable' people. The Social Model has fundamentally changed the way in which disability is regarded and has had a major impact on anti-discriminatory legislation.
Some important points to remember

Many people have multiple disabilities. Some disabilities are 'hidden' i.e. not visible to others. Many people do not identify themselves as having a disability e.g. the Deaf identify themselves as members of an Irish linguistic and cultural minority and not as individuals with a disability.
The Legal Perspective

Legal Framework:
The three main pieces of legislation relating to equality in Irish law are the Equal Status Act 2000, the Employment Equality Act 1998-2011 and the Disability Act 2005. This legislation prohibits discrimination on the grounds of disability. A broad range of disabilities are covered under the legislation including people with physical, mental, intellectual, learning, cognitive and a range of medical conditions.

The Employment Equality Acts (1998-2011) have been enacted to promote equality and prevent discrimination at work. The Acts prohibit discrimination across nine grounds, including disability. The Acts also contain a duty to provide reasonable accommodation to people with a disability. Discrimination is described as “the treatment of a person in a less favourable way than another person is, has been or would be treated in the same situation on any of the nine grounds”

The Equal Status Act (2000) was established to extend the reach of the equality legislation beyond employment to accommodation, education and access to goods and services placing an onus on service and education providers to make a reasonable effort to accommodate the needs of people with disabilities.

The Disability Act (2005) provides a legislative basis for improving access to a wide range of public services and facilities for people with disabilities and states that all public bodies must ensure that their services are both integrated and accessible. This accessibility requirement extends to information as well as buildings and it is now required that public bodies, including educational providers, make all relevant information accessible in a range of formats.
Health Standards as per UCC Fitness to Practise Policy

Good health does not necessarily mean the absence of any disability/specific learning difficulty or health condition. Many people with health conditions or disabilities or specific learning difficulties are able to practice with or without adjustments to support their practice and are legally supported in this by the Equality Acts.

To describe an individual as ‘Fit to Practise’ in the context of certain professions is to say that he or she possesses the attributes considered necessary in an individual to allow that individual to practice as an independent practitioner in the relevant profession. Circumstances may also be such that, as a result of a health related matter, it may not be considered possible to deliver safe and effective practice.

UCC developed a Fitness to Practise Policy in 2013. All students participating in professional degree programmes are required to adhere to all procedures therein. Further information on U.C.C. Fitness to Practise Policy may be found at http://www.ucc.ie/en/academicsecretariat/FitnessToPractise/

In keeping with the Fitness to Practise Policy, the University will require all entrants from 2013 to complete a Health Declaration Form (Appendix One) on first registration and annually thereafter if pursuing a professional degree programme outlined on the following page.

Students may also be identified to the Head of School under Fitness to Practise Policy procedures as having a health concern that may impair their fitness to practise.
Disclosure of Disability

Prior to Application for a Nursing or Midwifery Programme
Prospective students may contact the Disability Departmental Representative in the School of Nursing and Midwifery UCC to seek advice as to the course requirements and core competencies before making a formal application, if they have concerns that their difficulty or medical condition may impact on their ability to pursue the course. The skills associated with these competencies are summarized on page 14. Enquiries will be dealt with in confidence and with the utmost sensitivity.

On Registration with UCC for a Nursing or Midwifery Programme
Students who feel their disability, health condition or learning difficulties may affect their ability to deliver safe and effective nursing/midwifery care are required to disclose their disability or issue of concern on the Health Declaration Form. This is in compliance with the Fitness to Practise Policy.

Individual students who register with the Disability Support Service (DSS) may need to meet with both clinical and academic representatives to facilitate forward planning for both settings.

In the Clinical Setting
Gaining the knowledge and skills required in the clinical setting is a new and exciting aspect of the student journey. Adjusting to this phase of learning can be demanding for all students. Students with underlying disabilities or learning difficulties may experience challenges they had not anticipated as they become exposed to the needs of this setting.

A climate supportive of disclosure is an area of key importance in nurse/midwife education. The quality of the rapport that grows between a staff member and a student has the capacity to be an influencing factor in disclosure. Responses by staff to health disclosure need to be positive, individualized, non-judgemental and student centred, taking cognizance of the unique relationship between an individual and their disabilities.
disability. Displaying attentive listening and a willingness to understand how the impairment affects the student lends itself to open and honest communication on both the side of staff and the student. Additional supports by way of reasonable accommodation can only be introduced following disclosure.

**Students who incur an illness after registration must take the responsibility upon themselves to inform the university of any changes.**

Any staff member to whom a student newly discloses an illness or disability should direct the student to inform Disability Departmental Representative in the School of Nursing and Midwifery UCC, for further support and accommodation.

Once a student decides to disclose, he/she will be supported by systems and personnel that link with the academic and healthcare environment to ensure the student is provided with the maximum opportunity to progress within his/her chosen field. Specifically, the assessment of the needs of each individual student will be conducted in close collaboration with the student, the DSS and a member of staff from the clinical and the academic setting. To facilitate collaboration staff may:

- Liaise with Careers Advisor at the Disability Support Service who will assist with additional preparation and support.
- Meet the student in quiet environment as they will be feeling anxious about placement.
- Listen attentively to the student’s story about their condition/illness if they disclose their disability
- Ask student to explain the current impact of their illness/condition
- Take into consideration that the implications of a significant on-going illness vary depending on the condition.
- See [Contact Details](#) – Page 23.

*It is crucial that each student understands his/her professional responsibility to ensure that non-disclosure of a disability does not present a risk to themselves or others in the clinical setting.*
Core Competencies and Fitness to Practise

Core Competencies

AHEAD have succinctly summarized general skills and abilities associated with achieving the core competencies of a placement in the following-

**Learning skills**: e.g.: taking instruction; planning and organizing work; taking notes; managing time.

**Communication skills**: the ability to communicate or receive communication in its written, verbal, auditory and visual forms.

**Cognitive skills e.g.**: remembering; analyzing and processing information; solving problems; being able to pay attention to a number of things at the same time.

**Physical demands, e.g.**: movement; co-ordination; dexterity; fine motor skills.

(AHEAD 2012)

http://www.ahead.ie/shopdetail?id=56&qstring=cGc9NA

Competence

Competence is a complex and multidimensional phenomenon which is defined as “the ability of the Registered Nurse/Midwife to practice safely and effectively, fulfilling his/her professional responsibility within his/her scope of practice” (An Bord Altranais 2005:12). Each competency has a selection of indicators which help staff and students to assess whether or not the student is reaching the competency level required.

The development of competence for nursing and midwifery students occurs over the four/five years of their degree programme. Nursing and midwifery education programmes must comply with the requirements and standards specified by An Bord Altranais (2005) for nurse and midwife registration education programmes. An Bord Altranais (2005) prescribe five domains of competence as being necessary for registration as a nurse or midwife.
These are:

- Professional/Ethical Practice
- Holistic Approaches to Care and Integration of Knowledge
- Interpersonal Relationships
- Organisation and Management of Care
- Personal and Professional Development

The Clinical Learning Outcomes and Competency Assessment Booklets are the primary tools used by preceptors and staff to assess the development of the student’s competence. The assessment tool enables clinical and academic staff to work collaboratively to determine the development of student competence and the safety of student practices in the clinical setting.

Further information on Competencies and Health Standards can be found at http://www.ucc.ie/en/academiclearningandteaching/corecompetenciesandhealthmattersandconductandbehaviourstandards/
Role of the Disability Support Service

1. Needs Assessment & Registration:
Disability Advisors conduct a Needs Assessment when a student registers with the
DSS and varying post-entry supports are then organized depending on the outcome
of the Needs Assessment. Using the Holistic Approach, students may avail of a
range of educational, technological, personal, social and employment supports. The
service is focused on integration and inclusion of students in all facets of campus life
and students with disabilities are encouraged to get involved in leisure activities,
clubs and societies. Where clinical staff become aware of a student who may benefit
from the support of the DSS, they can seek advice from the Clinical Placement
Coordinator, Clinical Development Coordinator, Link Lecturer or Nurse Practice
Development Coordinator regarding how to refer the student for this support.

2. General Educational Supports
The general educational supports may include some of the following depending on
impact of disability:

- Lecture capturing support, such as Panopto or use of recording devices
- Alternative examination arrangements
- Additional subject-specific tuition

Whilst these accommodations may be available in University they may not be
appropriate in the Clinical setting.

3. Technological Support Programme
Assistive Technology (AT) is crucial to facilitating the empowerment of students with
disabilities to become independent learners. Students are trained to utilize assistive
technologies to the optimum to enhance their independence as learners and thereby
make a successful transition to clinical practice and ultimately employment. The
Assistive Technology Officer conducts a Needs Assessment on all students for
Assistive Technology depending on impact of disability.
Examples of Assistive Technology include:

<table>
<thead>
<tr>
<th></th>
<th>Software</th>
<th>Hardware</th>
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</thead>
<tbody>
<tr>
<td>Vision Impairment</td>
<td>Zoomtext</td>
<td>Zeta Scanner</td>
</tr>
<tr>
<td>Specific Learning Difficulties</td>
<td>Read and Write Gold Inspiration Co-Writer Windows Accessibility</td>
<td>Zeta Scanner</td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>Read and Write Gold Audio Note-Taker Windows 7 Accessibility</td>
<td>Comfort Contego Communication Master Conversor Loop System Sony ICD SX712</td>
</tr>
<tr>
<td>Physical</td>
<td>Read and Write Gold Audio Note-Taker Co-Writer Windows 7 Accessibility</td>
<td>Samson Go Mic Sony ICD SX712 iPod Touch iPad</td>
</tr>
</tbody>
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4. Personal Support Programme
In U.C.C., on the university campus, there is a range of personal and social supports provided for students to ensure their retention and success in the educational environment. These include:
- On-Campus Transport Service
- Personal Assistants (PA)
- Educational Assistants (EA)

5. Social/Emotional Support Programme:
The Disability Support Service provides support to students who incur social and emotional challenges integrating into the University environment. Disability Advisors provide one to one and group support to students aimed at enabling and
empowering the student to develop better executive functioning skills such as time management, organization, self-advocacy and self-determination skills.

The students’ Disability Advisors may liaise with the Nurse Practice Development Co-ordinator and advocate on behalf of the students regarding possible reasonable accommodations in clinical practice.

6. Preparation for Clinical Placement:
All students with disabilities who pursue professional degree programmes need to adequately prepare for the clinical environment as part of their journey through higher education. This is crucial as each student needs to prepare and develop their ability to independently manage their disability and become proficient in the use of Assistive Technology as appropriate.

The Careers Advisor at the Disability Support Service works with students on a one to one basis or in group settings to develop the necessary skills to make a successful transition to placement and employment. These sessions include:

- Managing disclosure
- Enhancing employment skills
- Confidence building
- Interview practice

The Careers Advisor is also available to advise staff who coordinate placements for professional degree programmes on reasonable accommodations where necessary.
1. I am interested in pursuing a degree in Nursing/Midwifery and have a significant on-going illness/disability. What additional information should I be aware of?

UCC has developed a Fitness to Practise Policy in 2012. Students with disabilities participating in professional degree programmes are required to adhere to all procedures therein. Further information on U.C.C. Fitness to Practise Policy may be found at: http://www.ucc.ie/en/academicsecretariat/FitnessToPractise/

All students are required to complete a Health Declaration Form as outlined on page 11. Students should familiarize themselves with necessary health standards and competencies that are required for professional practice.

2. What are my rights/responsibilities as a student with a disability/specific learning difficulty?

The primary responsibility for each student is to ensure that non-disclosure of a disability does not present a risk to themselves or others.

Students must comply with UCC Fitness to Practise Policy. Assistance will be provided to the student in relation to disclosure of disability.

Once a student discloses their disability/specific learning difficulty they must complete a Health Declaration Form so that relevant members of staff are aware of the student’s needs and any potential risk to patient safety. This information is maintained in a confidential manner and will only be disclosed to relevant staff on a need to know basis.

3. How do I register with the Disability Support Service?

In order to register with the Disability Support Service, you may attend a DSS Orientation Programme or make an appointment to meet with a Disability Advisor.
who can register you with the Service, conduct a Needs Assessment and assist you with making an application for funding for your supports.

4. How are Reasonable Accommodations Determined?

Reasonable accommodations will be provided following a clinical/academic needs assessment to ensure that the student is given appropriate support in clinical practice. Staff of the Disability Support Service and the appropriate Health Service Provider will be available to advise on reasonable accommodations depending on impact of disability.

5. What is meant by Reasonable Accommodations?

A Reasonable Accommodation is any action that helps to alleviate a substantial disadvantage due to an impairment or medical condition. People with disabilities encounter many different types of barriers in their everyday lives, for example, textual information. Reasonable accommodations are put in place to help reduce these barriers in order to provide equality of access and opportunity for all. In a work context, reasonable accommodations are put in place to enable a qualified person with a disability to fully undertake the job tasks they are hired to do, without which they would potentially be restricted due to an impairment or medical condition.

6. What are core competencies?

Nursing and midwifery students are required to develop the knowledge and skills to deliver safe and competent care. Competence is a complex and multidimensional phenomenon which is defined as “the ability of the Registered Nurse/Midwife to practice safely and effectively, fulfilling his/her professional responsibility within his/her scope of practice” (An Bord Altranais 2005:12). Each competency has a selection of indicators which help staff and students to assess whether or not the student is reaching the competency level required.

Please note that students should check the Fitness to Practise Policy for clarification on competency in Nursing and Midwifery degree programmes: http://www.ucc.ie/en/academicsecretariat/fitnesstopractise/
The development of competence for nursing and midwifery students occurs over the four stages of their degree programme. Nursing and midwifery education programmes must comply with the requirements and standards specified by An Bord Altranais (2005) for nurse and midwife registration education programmes. Students with a disability are required to attain the same competencies as their non-disabled peers. However, students with disabilities will be provided with reasonable accommodations in an academic and clinical setting to support them.

7. How is information transferred from DSS to Clinical Placement?

The Disability Support Service and the Nurse/ Midwife Practice Development Coordinator, Clinical Placement Co-ordinator/Clinical Development Coordinator or Link Lecturer will conduct a Clinical Needs Assessment to ensure that the student is given support in clinical practice. This information will be forwarded to the relevant Hospital so that supports are implemented and that the student receives an appropriate level of support to achieve their full potential.

This information is provided to a minimum number of staff and is treated in a confidential manner.
Contact Details

Student Health Centre
Telephone: (021) 4902311
Web: www.ucc.ie/en/studenthealth

Disability Support Service
Telephone: (021) 4902985
Email: dssinfo@ucc.ie
Web: www.ucc.ie/dss

School of Nursing and Midwifery
Telephone: (021) 4902159
Email: nursing.studies@ucc.ie
Web: http://www.ucc.ie/en/nursing
Appendices

Appendix One:

Health Declaration Form

I confirm I have read:

(a) Details of the core competencies, conduct and behaviour standards and health matters relating to Fitness to Practise for [insert named individual programme]
(b) the UCC Fitness to Practise Policy and Procedural Guidelines - http://www.ucc.ie/en/academicsecretariat/FitnessToPractise/

I understand that students commencing programmes subject to UCC’s Fitness to Practise Policy and Procedural Guidelines are required to confirm their good health and/or identify issues for discussion in this area. I also understand that failure to do so or failure to complete the declaration honestly may be sufficient grounds to cause concern as to my fitness to practise, should a matter/s subsequently come to the attention of UCC. Accordingly, I have indicated below whether I can confirm each requirement or alternatively have issues to bring to UCC’s attention.

In relation to my health:

“I have no health issue likely to impact on my ability to practice safely and effectively and/or impact on the health and safety of others.”

Yes □

Issue to Discuss □

If you have an issue to discuss, please provide details of the health issue here:

________________________________________________________

In relation to my conduct:

“I have not been convicted of a criminal offence (excluding road traffic convictions) either at home or overseas.”

Yes □
Issue to Discuss

If you have an issue to discuss, please provide details of the criminal offence, including approximate date, the offence and the authority and country which dealt with the offence here:

In relation to my future health and conduct:
“I agree to disclose to UCC any changes to the above declarations if and when such situations may arise during the course of my studies at UCC”

In relation to data protection:
“I understand, acknowledge and agree that:
UCC may need to discuss the above declaration with me and/or disclose personal data (including sensitive personal data relating to my health) which is provided by me or generated during the course of my studies at UCC, on a confidential basis, to members of a Fitness to Practise Committee in the event one is convened to consider my fitness to practise prior to the commencement and/or during the course of my studies at UCC.

This and any other declarations I make to UCC about my fitness to practise will be retained securely within my student file and may be referred to if any subsequent issues regarding my fitness to practise arise during the course of my studies at UCC.

UCC may disclose details of issues of concern regarding my fitness to practise (where required to do so by law or where there is a likelihood of a real risk to the public if that information was not disclosed) to third parties (including relevant professional and/or regulatory bodies) in connection with enquiries that may relate to my ultimate fitness to practise.

This is an example only. Students must access the correct form online, if required.
Appendix Two

Provision of Reasonable Accommodations

The ability of staff to provide accommodations will vary depending on the type of clinical placement and the level of activity on the ward or unit. Below are examples of some possible accommodations suggested to staff which may be helpful. Individual students are encouraged to use their own aids and self-knowledge where possible as these will be familiar to them:

First Meeting with Preceptor

- Choose a quiet venue to meet with the student.
- If possible avoid having to reschedule and minimise distractions.
- Ask student to explain the current impact of their illness/condition
- Ask the student what accommodations may be helpful on this placement.
- Discuss what accommodations are feasible and how they can be arranged
- Allow the student to become familiar with the work environment and provide clear instructions as to what is expected of him/her.
- If possible it may be helpful to provide a slightly longer induction process to enable the student to successfully negotiate his/her surroundings.
- Consider the feasibility of asking the student to concentrate on one or two sections of those wards as long as this does not reduce the quality of their clinical experience.
- Consider the possibility of a flexible work schedule. Flexibility is only possible within the boundaries of specific allocation periods, placement requirements and curriculum demands.

Communication/Vision/Hearing difficulty

- Ask the student what is the best way to communicate with them.
- Face the student when communicating with him/her.
- Be mindful of distractions and background noise and try to minimize these where possible.
- Speak clearly, maintain eye contact and do not cover or obstruct your mouth in any way.
• Speak at the same pace and volume as you would normally; speaking in a louder voice or excessively slowly may interfere with hearing aids or loop systems
• After speaking with a student with, for example, Asperger’s Syndrome, do not assume that the student has understood. Patient questioning and listening, a willingness to rephrase questions and added explanations may be necessary.
• Use literal language whenever possible. Be explicit about precisely what you mean.
• Use everyday language and avoid the use of abbreviations.
• Ensure that any information that students receive prior to or during placement is available in their preferred format e.g. appropriate presentation of written information for students with vision impairments.
• Remember that the student may misinterpret information particularly where there is possible ambiguity in terminology
• Be conscious that the student may tire easily and may require rest periods/breaks.
• In many instances a student with, for example, ADHD may also have an associated learning difficulty. If necessary please refer to the guidelines for specific learning difficulties.
• Discuss student’s needs for specialized technology in clinical environment.

Medical/Chronic Illness
• Remember that the implications of a significant on-going illness vary depending on the condition.
• Be conscious that the student may tire easily and may need to negotiate different break times
• Allow for the time and fatigue factors which may arise.
• Find out if medical condition is under control e.g. seizures are under control for epilepsy, blood sugars under control for diabetes. If not the student may need to consult with their doctor before resuming placement.
• If appropriate, ask student if they are on medication and if they experience side effects which might impinge on performance in clinical environment.
Dyslexia

- Allow the student to become familiar with the work environment and provide clear instructions as to what is expected of him/her.
- Some skills may require extra practice e.g. patient handover, patient documentation, drug calculations remembering medical terminology, allow extra time for reading/writing/calculating drugs.
- Be conscious that the student may tire easily and may need to negotiate different break times.
- Advise the preceptor that any change to responsibilities and/or the student’s routine must be explained in advance.
- Give clear instructions and use written information as this is especially helpful for people who have visual learning styles.
- Be mindful that students may have a problem with complicated sequences of instructions and may need them broken up into clear achievable goals.

Mental Health Difficulty

- Whilst a student may have a mental health difficulty, professional boundaries must be maintained and in the event of a setback the student may be advised to revisit their doctor or support services.
- Be mindful that students may have a problem with complicated sequences of instructions and may need them broken up into clear achievable goals.

The above are examples and not an exhaustive list. Students and staff can work together to devise a mutually agreeable plan.