

POLICY ON REASONABLE ACCOMMODATION OF LEARNERS WITH DISABILITIES

1. Policy Statement:

The SEIU Healthcare NW Training Partnership ("Training Partnership") admits Learners regardless of race, color, national origin, ethnic origin, gender, age, disability and sexual orientation to all the rights, privileges, programs, and activities generally accorded or made available to Learners by the Partnership. It does not discriminate on the basis of race, color, national origin, ethnic origin, gender, age, disability and sexual orientation in administration of its training and educational policies, admissions policies, scholarship and loan programs, and other Partnership administered programs.

Learners with disabilities have the right to request and receive reasonable accommodation so that Learners may have the opportunity to take full advantage of the Training Partnership's programs and activities.

2. Overview of Accommodation Process:

To request reasonable accommodation, a Learner with a disability should request accommodation by completing the "ADA Request Form" found at www.myseiubenefits.org or by calling the Member Resource Center. See Appendix A. Once the request is received, the accommodation process will start, during which the Learner will be asked to provide current documentation of his or her disability, the functional limitations resulting from the disability and recommendations for specific accommodations.

As part of the accommodation process, the Training Partnership will confer with the Learner to identify appropriate and reasonable accommodations that may be warranted under the particular circumstances.

The Training Partnership has the right to establish qualifications and other essential standards and requirements for its courses, programs, activities and services. All Learners are expected to meet these essential qualifications, standards, and requirements with or without reasonable accommodations.

3. Definitions:

A. When is a person regarded as having a disability?

For purposes of accommodation, a person is regarded as having a disability if he or she has a sensory, mental, or physical impairment that is medically cognizable or diagnosable or exists as a record or history or is perceived to exist.

B. What is Reasonable Accommodation?

Reasonable accommodation means modifying or adjusting practices, procedures, policies, educational services and delivery, or the training environment so that a Learner with a disability can enjoy equal educational opportunity, so long as (1) there is sufficient medical evidence establishing a relationship between the disability and the need addressed by the specific accommodation; and (2) it does not impose an undue hardship on the Training Partnership.

C. What is Undue hardship?

Undue hardship means, among other things, an excessively costly, extensive, substantial or disruptive modification or one that would fundamentally alter the nature or operations of the Training Partnership or its programs.

4. Accommodation Process:

A. How is the Accommodation Process started?

The Learner with a disability must initiate the process by requesting accommodation as referenced above. The initial request does not need to be in writing. Once the initial request is received by the Member Resource Center (MRC), the MRC then will mail the Learner an Accommodation Checklist and a copy of this policy in a manner or format that is accessible to the Student. See Appendix B. If the Learner requires assistance to complete the form, the Learner must email or call the MRC.

The Learner is responsible for submitting to the Training Partnership all of the information requested in the Accommodation Checklist, including a current report or evaluation prepared by a physician or other appropriate licensed professional that describes the Learner's disability, the functional limitations as a result of the disability and specific recommendations for accommodation. If the information submitted with the Accommodation Checklist is insufficient, Logistics will inform Learner that the information is incomplete and will identify the additional information needed.

Once the Accommodation Checklist is complete, Training Partnership will schedule an Accommodation Conference with the Learner as needed. The Conference may occur over the telephone or in any other manner or format that is accessible to the student.

B. Will the information provided during the Accommodation process be confidential?

Information provided by a Learner who requests accommodation will be treated as confidential to the extent possible and in accordance with applicable laws and regulations. The information will be kept in a secure manner, and not be accessible by or disclosed to any other employees at the Training Partnership, unless they are involved in an appeal of the proposed accommodation for the student, or otherwise have a legitimate need to know the information in order to carry out their duties on behalf of the Training Partnership.

C. What happens at the Accommodation Conference?

The purpose of the Accommodation Conference is to determine the reasonable accommodation to be provided by the Training Partnership. The Conference may take place in a single meeting or in a series of meetings.

No meeting is necessary if the Training Partnership decides that the accommodation requested by the Learner is reasonable and appropriate. In that case, the Training Partnership can send the Learner the "Confirmation of Accommodation" form, as described below in Step D.

The Conference should have the following outcomes:

- Existing documentation should be reviewed.
- The nature of the Learner's functional limitations, and how those limitations may impact his or her activities in the Training Partnership's programs, should be identified.
- The Learner and the Training Partnership should reach agreement regarding appropriate accommodation.

A specific accommodation requested by a Learner and recommended by a medical provider may not be "reasonable" given the Training Partnership's policies, procedures, and requirements. The Training Partnership may propose other accommodations that neither the Learner nor the medical provider recommended. In general, an accommodation is "reasonable" if it enables the Learner to have an equal opportunity to participate in the Training Partnership's programs, without placing an undue hardship on the Training Partnership.

D. What is the Confirmation of Accommodation?

When the Learner and the Training Partnership reach agreement regarding a proposed accommodation, the Learner will be asked to complete the "Confirmation of Accommodation" Form. *See Appendix C.* The Confirmation of Accommodation form will be kept on file by the Training Partnership, together with all related documents. The Learner will be given a copy of the Confirmation of Accommodation. It is his or her responsibility to notify Training Partnership at least 21 days in advance of participating in one of the Training Partnership's classes so that his or her accommodation may be put in place. The Training Partnership may have longer than 21 days to put the accommodation in place, if, in his or her discretion, additional time is necessary. The Training Partnership will promptly notify the Learner that additional time is needed, so that the Learner can arrange for a different class.

E. What happens if the Learner disagrees with the proposed accommodation?

If the Learner disagrees with a proposed accommodation, the Learner may request an additional Conference to review the proposed accommodation with the Training Partnership.

F. Timeline

The amount of time required to fully conduct the Accommodation process is highly variable. The Training Partnership recognizes, however, the importance of completing the accommodation process in a timely manner.



APPENDIX A - ADA REQUEST FORM

I request an accommodation from the SEIU Healthcare NW Training Partnership.

Learner
Name: _____

Address: _____

Daytime
Telephone
Number: _____

I agree to receive communication regarding my Accommodation request by email.
My email address is: _____

Please send this request to:

Attn: Logistics
215 Columbia St, Suite 300
Seattle, WA 98104

OR

adarequest@myseiubenefits.org

APPENDIX B - ACCOMMODATION CHECKLIST

Please mail or email with attachments to Logistics

Learner's Name: _____

Address: _____

Daytime
Telephone Number: _____

I agree to receive communication regarding my Accommodation request by email.

My email address is: _____

I request reasonable accommodation from the SEIU Healthcare NW Training Partnership. I understand it is my responsibility to provide the Training Partnership with complete documentation regarding my request. I have enclosed the following documentation:

1. Description of my functional limitations that affect my ability to participate in the Training Partnership's programs, written by my physician or other licensed medical provider, therapist, or other evaluator.
2. Specific recommendations for accommodations that address the identified functional limitations.
 - a. The recommendations are from my treating physician or other licensed medical provider, therapist, or other evaluator (required); and,
 - b. I have enclosed my own recommendations for accommodation (optional).

If requested by the Training Partnership, I will sign an authorization for release of information for my medical provider(s), therapist(s) or other evaluators so that they may be contacted by the Training Partnership to discuss the specific recommendations for accommodation.

Signature of Student

Date

APPENDIX C - CONFIRMATION OF ACCOMMODATION

Please mail or email with attachments to Logistics

On _____ (date), SEIU Healthcare NW Training Partnership and _____ (name of student), a Learner of the Training Partnership ("Student") conferred regarding the Learner's request for reasonable accommodation. Based upon the interactive accommodation process, both the Training Partnership and the Learner agree that the following accommodation is reasonable and should be provided by the Training Partnership when the Learner is participating in its classes:

(Describe accommodation)

The Learner agrees to notify Training Partnership at least 21 days in advance of any training partnership class in which the Learner would like to participate so that the agreed upon accommodation can be put in place. Training Partnership will timely notify the Learner if additional time is needed to put in place the agreed upon accommodation, so that the Learner can arrange to take a later class.

The Learner agrees to notify Training Partnership if his or her disability changes such that a different accommodation is necessary. At that time, the Learner will re-initiate the Accommodation process by submitting a new "ADA Request Form" or having the Member Resource Center submit a new "ADA Request Form" on his or her behalf.

If the Training Partnership believes that the Learner no longer requires the agreed upon accommodation, or a different accommodation may be more appropriate and reasonable, it agrees to notify the Student, and re-initiate the Accommodation process.

Student Date

Training Partnership Representative Date