504 ACCOMMODATIONS GUIDE

Table of Contents

What is a Section 504 Plan?.....2
How to Write a 504 Plan.....5
Accommodations by Disability.....7
ADHD/ADD.....8
AIDS.....9
Allergies.....10
Anxiety.....12
Arthritis.....13
Asthma.....15
Bipolar Disorder.....17
Cancer.....19
Cerebral Palsy.....21
Cystic Fibrosis.....22
Diabetes.....24
Drugs & Alcohol.....26
Dyslexia.....28
Emotional Disturbance.....30
Encopresis/Enuresis.....31
Epilepsy.....32
Hearing Impairment.....34
Hemophilia.....35
Learning Disability.....36
Leukemia.....37
Nut Allergies.....39
Obesity.....41
Orthopedic Impairment.....42
Skin Disorders.....43
Special Healthcare Needs.....44
Tourette's Syndrome.....45
Trauma.....47
Traumatic Brain Injury (TBI).....49
Tuberculosis.....51
Visual Impairment.....53

What is a Section 504 Plan?

Similar to an IEP, a Section 504 plan lists the accommodations an eligible student would receive. It is individualized and based on the specific needs of the student's disability. Eligible students only receive services through general education programs or general education–funded programs.

Who Qualifies for a Section 504 Plan?

A student must be determined to: (1) have a physical or mental impairment that substantially limits one or more major life activities [learning is considered a major life activity]; or (2) have a record of such an impairment; or (3) be regarded as having such an impairment."

An important consideration in determining eligibility is clarifying the specific problem students might have that would qualify them for a 504 plan. Examples of substantial life functions that, if impaired, would trigger an individual's eligibility include breathing, walking, talking, seeing, hearing, learning, and taking care of oneself.

What Does a Section 504 Plan Contain?

Section 504 plans are often fairly short, typically only a page and a half long, though it clearly depends on the needs of the student. Some students with medical issues may have Section 504 Plans that are considerably longer. The main components of a Section 504 plan delineate the specific aids, services, and accommodations a student is expected to receive and the parties responsible. Some plans include more information, such as a description of the nature of the concern; evaluation information (identifying the student's specific disability); the basis for determining the disability; how the disability affects a major life activity; and a list of those who attended the meeting to develop and approve the plan.

Important for Plan Development

A discussion of services needed.

The discussion should focus on what services the student will need, based on the disability, and who within the school will have primary responsibility for implementing the services. Often the Section 504 plan includes accommodations needed to ensure the student's disability is not interfering with learning. Those accommodations are the responsibility of the

general education teacher, although other school personnel may also have responsibility. Example, the school counselor could have some responsibility for working with a student who has depression.

Here are additional important points related to Section 504:

- Section 504 is an anti-discrimination law. School districts receive no federal funds to implement this law.
- The responsibility not to discriminate against individuals with disabilities applies to all school personnel.
- In addition to students with disabilities, parents and employees also cannot be discriminated against.
- General education programs and staff have the primary responsibility for the implementation of Section 504. Staff from special education may be consulted, but they do not have responsibility for implementation of the accommodations for the student.
- Section 504 Plans provide accommodations, not modifications.
- The accommodations required by Section 504 apply to the entire school and extend to parents and visitors to events.

Accommodations v. Modifications

Accommodations change how a student learns the material. An accommodation allows a student to complete the same assignment or test as other students, but with a change in the timing, formatting, setting, scheduling, response, presentation, or a combination of these. The accommodation does not alter in any significant way what the test or assignment measures. For example, accommodations for presentation affect the way directions and content are delivered to students, helping students with different learning needs and abilities to engage in the content (e.g., a student with a anxiety make take a test in a different location). Accommodations for response offer different ways for students to respond to assessment questions. Accommodations for setting typically affect where work or specific tasks are completed; a change of setting may be particularly helpful to students who are easily distracted. Accommodations for timing and scheduling of assignments and assessments can be helpful for students who may need more processing time or frequent breaks.

Modifications change what a student is taught or expected to learn. Notably, they are adjustments to an assignment or a test that changes the standard of what the assignment or test is supposed to measure. The curriculum can be modified to retain specific standards that the student must meet to progress in the curriculum, while allowing for less depth of understanding of the concept.

How to Write a 504 Plan

Section 504 requires a multidisciplinary team approach to making a determination about eligibility for a 504 Plan. The team is comprised of individuals familiar with the student and knowledgeable about possible accommodations.

First: The Initial Referral

This may be generated by an educator, parent, or others familiar with the student (e.g., physician or counselor). The referral should be sent to the identified 504-point person for the school or school district. If the referral is not from the parent, the school district should ensure the parent knows their child has been referred to the 504 Team.

Second: Assessment

The team should gather information on the student from a variety of sources (e.g., teachers, parents, doctor's notes, attendance records, state testing, and academic records). If additional information and assessments that are not in the student's file are needed to make an eligibility determination, parental consent is required.

Third: Notice

The school or district's 504 coordinator should send out a notification to the parents and the team about the meeting that will be held to determine the student's eligibility for services.

Fourth: Parental Rights

At the meeting, it is vital to ensure that the parents are provided information on their rights in the 504 process.

Fifth: Eligibility Determination

The team determines if the student is eligible for services under Section 504. The team must state if the student has a disability that is substantially limiting a major life activity.

Sixth: Write the Plan

Using the list of accommodations provided in this document, identify accommodations that will meet the student's individual needs. The accommodations listed are designed to provide the student with equal access to a free and appropriate education (FAPE) and extracurricular activities that the student is otherwise qualified to participate. The accommodations listed in this document are not a check off but are provided, along with relevant web pages, o give ideas of some possible ones that can be made for the student's disability. DO NOT JUST check all of the above. The determination about each student's needs is done on an individual basis.

Seventh: Disseminate

The information regarding accommodations should be provided to all the appropriate school personnel.

Eighth: Monitor and Revise

Monitor the student. If revisions are needed, a 504 meeting should be held to review and determine how to meet the student's needs.

ACCOMMODATIONS BY DISABILITY

ADHD/ADD

Example: A student has been diagnosed with severe ADHD and has just begun taking the proper medication. The student has a short attention span and cannot perform to the same degree as other students in their grade.

Resources:

- https://www.nimh.nih.gov/health/topics/attention-deficit-hyperactivity-disorder-adhd/index.shtml
- https://www.cdc.gov/ncbddd/adhd/index.html
- https://www.psychiatry.org/patients-families/adhd/what-is-adhd

Accommodations:

- Have clear expectations, give short concise directions, and establish a routine that stays the same
- Allow the student to take 15-20 min brain breaks
- Establish a nonverbal cue between teacher and student for behavior monitoring
- Provide supervision during transitions, disruptions and field trips
- Engage in the student's passions and provide a hook when teaching a lesson
- Positively reinforce appropriate behavior
- Allow the student to run errands or to stand at times while working
- Sit the student away from distractions
- Establish a school and home behavior management plan
- Provide peer assistance in note taking and ask student questions to encourage participation and discussion
- Allow extra time for students to complete work assignments
- Pair written instructions with oral instructions
- Have a place where the student can calm down
- Use picture cue cards to remind the student of what they should be doing.
- Provide training to all staff who will be working with the student
- Have the student use an organizer to keep track of assignments
- Adjust the expected time it will take to complete an assignment to accommodate the student's attention span.
- Provide a time for the student to release their energy and move around and socialize
- Have student write down directions or write them on the board
- Provide student with "fidget items" during instructional periods
- Go over classroom rules and display the rules in the room

AIDS

Example: A student born with AIDS can show developmental delays and growth failure. There is a chance the student has experienced damage to the central nervous system which causes changes in muscle tone and sensory impairment. HIV, the virus that causes AIDS, can damage the student's immune system so they can't fight infections. Additionally, the student could come from an unstable home life and experience poor nutrition and environmental deprivation. The student may have lost a relative or parent to HIV, so they may lack caregivers, access to resources, and the ability to stand up for their rights. The child could have also been infected through sexual assault.

Resources:

- http://www.naspcenter.org/adol_HIV.html
- https://www2.ed.gov/about/offices/list/ocr/docs/hq53e9.html
- https://www.cdc.gov/hiv/default.html

Accommodations:

- Apply universal precautions in the classroom
- Make arrangements for missed school days
- Provide a safe environment for student
- Provide proper nutrition during meals at school
- Verbalize all information that is written on the board and repeat directions as needed
- Consideration of time for students to complete given assignments
- Provide the student with the opportunity for oral testing
- Utilize large print when necessary
- Provide special seating arrangements, if needed
- Allow the student to see the school nurse when needed
- Encourage appropriate hand washing
- Clean the classroom regularly
- Teach proper sneezing and coughing techniques (sneezing into elbow, etc.)
- Provide students with hand-outs of information that they may not be able to memorize
- Only provide opportunities to read or speak in front of the class if they feel comfortable
- Keep the student well informed about upcoming events
- Model appropriate behavior that emphasizes problem-solving and informed decision-making
- Discourage discrimination and prejudice in the classroom in general and about HIV/AIDS
- Open conversations of "private" parts for boys and girls
- Allow for opportunities to get homework done while in school
- Make items in the classroom easily accessible
- Use air cleaners and purifiers in the classroom
- Provide an aide/assistant for student

ALLERGIES

Example: Allergies occur when the immune system reacts to an allergen. The allergen can affect the student through inhaling, eating, touching, or injecting. Depending on the student, when a reaction occurs, there are many different reactions that can happen. A student may sneeze, cough, have itchy eyes, a runny nose, rash, hives, lowered blood pressure, or, in extreme cases, death.

Resources:

- https://www.foodallergy.org
- https://www.aafa.org
- https://acaai.org/allergies

Accommodations:

- Provide training opportunities for all school staff which teaches the proper dispensing of medications
- Routinely visit doctors and keep up to date on necessary immunizations
- Ban allergens such as peanuts from places in the school where student visits most like the classroom
- Avoid the outdoors (if pollen or plant allergy) in all classes (i.e. recess, gym)
- Have all staff in school be aware of the student's health care and/or emergency plans
- Educate other students and parents on how to avoid allergens and what to do in emergencies
- Empower the student to speak up about their allergens and create awareness
- Check all labels of food, cleaning products and other materials that are used in the classroom to avoid exposure and educate all parents, students, and staff how to read food labels
- Make sure Epipens are available and accessible
- Use an air purifier in the classroom
- Check all baked goods and classroom treats to ensure that they are free from known allergens.
- Use protective covers on keyboards and computers and clean after each use
- Have specific areas in the classroom and school building that are free zones
- Ask parents to provide all the information necessary about the child's allergies and medications
- Have transportation prepped and ready for allergies emergencies in the district and procedures in case of those emergencies
- Regularly clean areas affected by allergen (wash lunch tables, desks, vacuum carpets)
- If your classroom has or is provided with food, have specific shelves or bins assigned for certain foods to avoid cross contamination
- Use disposable plastic silverware in your classroom
- All students, staff and families in the building should wash their hands or use hand sanitizer before and after entering the school to avoid the transfer of allergens
- Communicate frequently with the nurse and the student with allergies to help understand what is going on

- Have a confidential list of the allergens present in the classroom or a teacher accessible location
- Provide students with a mini hand sanitizer in their desks to use at any time

ANXIETY

Example: A student was diagnosed with severe anxiety. Anxiety is the excessive feelings of nervousness, fear, apprehension, and worry. Anxiety attacks can come randomly and become very intense, which can limit the student's ability to participate in academic learning time.

Resources:

- https://adaa.org
- https://www.anxiety.org
- https://anxietynetwork.com

Accommodations:

- Incorporate deep breathing exercises into the daily classroom routine
- Set up a breathing or calm down corner for students to go to when they get feelings of anxiousness
- Use aromatherapy in the classroom for all students
- Have a cue card for students to hold up when feelings start to get out of control
- Incorporate yoga in the middle of the day to refocus the mind
- If triggers are known, assist the student with recognizing and utilizing coping skills
- Communicate with the student's parents about what is going on and when you notice the student is being triggered
- Have fidget toys in the classroom for students to utilize during the day
- Have a weighted blanket in the calm down corner for students to feel secure and safe
- Reassure the student that school is for learning and they are safe in your classroom
- Coordinate times of the day for the student to visit the guidance counselor or school social worker to talk about their feelings
- Provide a broad library of books that the student can read to soothe their mind
- Allow the student to have extra time and warnings before transitions
- Do not require the student to read aloud or work at the board in front of the class
- Informing the student and their family when there will be a substitute in the classroom
- Provide specific directions for reassurance and clarity
- Schedule times for the student to be able to get up and walk around or have a specific task for the student to complete
- Place the student next to a peer or teacher that they feel comfortable with
- Give the student information in advance
- Plan specific one on one meetings with the student to go over all concerns about material and assignments to provide reassurance
- Make sure the placement of the student's desk is in a spot that is not distractible for other students if the they need to get up and move around
- If comfortable, let the student run errands for the teacher and the class so they feel important and build their self-efficacy

ARTHRITIS

Example: A third grade student suffers from severe juvenile arthritis that results in frequent joint swelling and stiffness.

Resources:

- http://www.juvenilearthritis.org/
- https://www.arthritis.org/about-arthritis/types/juvenile-arthritis/
- https://www.niams.nih.gov/health-topics/juvenile-arthritis

Accommodations:

- Provide the student with alternative seating and/or padded seating in the classroom and other school settings.
- Allow other students to volunteer or assign students to help assist the student with their materials.
- Allow the student to have extra time to transition between classes and activities.
- Create a plan to help the student keep up with their schoolwork in the case of extended absences.
- Plan for physical therapy and movement times throughout the school day.
- Be aware of how pain and stiffness could affect the student's ability to focus and function in the classroom.
- Plan for an alternative P.E. plan for the student or adaptations that make the P.E. class more inclusive
- Determine how and what information is appropriate to share with the class about the student's condition.
- Ensure that all school personnel responsible for the student are aware of emergency and medical information.
- Allow for time throughout the school day to travel to the nurse for medication distribution.
- Create open lines of communication with the student and their parents at the beginning of the school year.
- Ensure that you are familiar with the student's rights and wishes.
- Provide the student with seating that is relatively close to an exit in the case of a medical emergency.
- Educators should make sure to take parents' wishes into consideration and should communicate these wishes to the rest of the staff.
- Ensure that despite the student's disability that they are included in all classroom activities.
- Provide the student with time to rest during the school day.
- Allow the student to answer test questions orally instead of writing down the answers.
- Provide assistive writing materials when writing is necessary.
- Sit the student close to a heat source in the classroom.
- Adjust the attendance policy for the student.
- Provide the student with two sets of textbooks, one for home and one for school, to avoid transportation.
- During lunch, provide modified eating utensils.

- Provide the student with instruction about how and when to take their medicine as well as how to self-monitor for side effects.
- In a multi-floor building, provide the student with elevator access.
- Provide the student and family information on peer support groups as necessary

ASTHMA

Example: A student has been diagnosed as having mild or severe asthma. Asthma is a respiratory condition marked by spasms in the bronchi of the lungs, causing difficulty in breathing. Because the student has difficulty breathing, their participation physical activities outside and inside the classroom should be limited. Depending on the level of severity of the student's asthma, the school staff should determine if the student can participate in activities involving physical activity.

Resources:

- https://www.aafa.org/managing-asthma-in-school/
- https://ajph.aphapublications.org/doi/full/10.2105/AJPH.94.7.1102
- https://getasthmahelp.org/schools-main.aspx

Accommodations:

- Develop a "missed class work plan" for absences, arrange for one-to-one help for new concepts that were missed, and provide adequate time for makeup work to be handed in.
- Adapt attendance policies and length of school days if needed for the student and their medical needs
- Teacher communicates with the school nurse/parent regarding trips/outings for medication administration arrangement
- Meet with the school nurse to learn about the signs of an asthma crisis and the student's emergency/health care plan. Additionally, learn how to dispense the child's medications and monitor for side effects
- Allow the student to meet with the school nurse to review triggers, schedule of inhalers, crisis plan, how to recognize the symptoms of a crisis
- Ensure that every appropriate staff member knows the health care plan for the student
- Provide inhalant therapy assistance to the student if needed
- Remove any allergens from the classroom that might cause trouble with breathing
- Adapt activity level to make sure that the student is able to participate in games during recess and physical education
- Ensure that field trips that might cause trouble breathing are not mandatory and supplement this requirement with virtual tours, videos, movies
- Adapt curriculum so that student can learn to the best of their ability without causing breathing problems throughout it
- Provide student with rest periods during physical activity or any rigorous activity that would get the heart beating faster to ensure that the student is not having trouble breathing
- Have peers available to carry materials that might be too heavy leading to troubles in breathing; such as the students backpack, lunch tray, books, or other materials
- Have locker or cubby in an appropriate area that the student does not need to walk far to get to each class
- Place the student in easily controlled areas and environments for maximum engagement and involvement
- Allow the student to have unlimited access to water and use of the restroom (due to medication use)

- Allow the student to say indoors during cold weather and/or poor air quality days
- Allow the student to carry their asthma medication during school
- Allow the student to have preferential seating in the classroom (not sitting near chalkboard/near open windows)
- Ensure that the student has immediate access to medications at all times
- Have allergen free tables at lunch available for the student

BIPOLAR DISORDER

Example: A student is diagnosed with having one of the four types of bipolar disorders. Bipolar disorder is a mental condition marked by alternating periods of elation and depression depending on a student's mood. The severity of the student's condition and behavior did not qualify the student for IDEA, but their behavior within the classroom significantly impairs their learning, so as a result, a 504 plan was created for the student.

Websites:

- http://ibpf.org/article/accommodations-students-bipolar-disorder-and-related-disabilities
- https://storage.googleapis.com/wzukusers/user-21181785/documents/5772994ca8d01CHpm0U0/Educator.pdf
- https://www.jbrf.org/page-for-families/educational-issues-facing-children-with-bipolar-disorder/symptoms-and-accomodations/

Accommodations:

- Create open communication with the student's parents to keep up on daily behaviors and important information
- Use the student's parents to enforce and continue school instruction at home; such as using the same techniques and practices to calm the student down
- Arrange the physical classroom that clearly defines boundaries, designating where different types of activities will take place to ensure the safety of all students
- Provide the student with personal space when working with other students in a group
- Plan transitions and ensure that they are predictable for the student
- Provide the student with a daily schedule so they can refer to it throughout their day
- Prepare student prior to any change in their routine to the best of your ability
- Provide graphic organizers or other visual organizers that will help the student make their work more structured
- Break down assignments into manageable parts for student to ensure that they do not get overwhelmed
- Monitor the student's success rate and clarity of understanding when completing work before giving them more.
- Provide student with extra time on tests, quizzes, class work, or homework if needed
- Consider allowing home instruction when a student's symptoms prevent them from is attending school
- Allow the student to use headphones to block out the noise in the classroom if external stimulation/noise is making it difficult for the student to pay attention in class
- Give student positive praise and redirection whenever their symptoms are decreased within the classroom setting
- Allow for modification in the arrival time of the student and schedule the core classes around when the student is most alert during the day

- Ensure that you and other staff who have direct contact with the student receive appropriate training regarding working with students with bipolar disorder
- Have strategies and a plan in place should the student's symptoms increase
- Implement a crisis intervention plan for extreme behaviors that are unable to be managed within the classroom setting
- Report any harmful or suicidal thoughts or comments to the student's parent, counselor, or psychologist immediately
- Discuss the student's medications (if any) with the school nurse and parents
- Permit the student to have bathroom breaks, as needed, if on medication
- Offer and assign a private place that is a safe-haven for the student where they can calm down when they are experiencing extreme periods of anxiety and sadness. Have a person, preferably someone in which the student feels comfortable with, to talk to while in that room or space
- Help the student to recognize internal states and teach stress reduction techniques (self-talk, breathing, walking, closing the eyes, etc.).
- Use explicit instructions when giving directions. Instead of saying, "Put the papers over there," say, "Put the papers in the white basket on my desk"
- Encourage social interactions among other students (i.e. small group work)
- Have alternative assignments/activities prepared. Allow the student to make a choice if the first assignment/activity is causing them distress. Gradually introduce the student to the regular components of the original assignment/activity.

CANCER

Example: One of the main areas of concern for students with cancer is the amount of time he or she spends outside of the traditional classroom. Adapting to these situations is difficult but is extremely important in providing educational opportunities to children with cancer. For example, teachers may consider videotaping lessons so these students may be able to watch and keep up with school material while they are hospitalized and/or recovering at home. It is also of the utmost importance to listen to your student with cancer about his/her needs, abilities pertaining to physical and mental strength, and willingness to participate in the classroom again after treatment.

Resources:

- https://edmedkids.arizona.edu/content/classroom-problems-and-solutions-cancer
- https://www.cancer.org/treatment/children-and-cancer/when-your-child-has-cancer/after-treatment/returning-to-school.html
- http://www.survivorshipguidelines.org/pdf/EducationalIssues.pdf

Accommodations:

- Adjust schedule to include rest breaks
- Adjust activity level and expectations in classes based on physical limitations; don't require activities that are too physically taxing
- Train for proper dispensing of medications; monitor and/or distribute medications; monitor for side effects
- Provide appropriate assistive technology
- Arrange for home tutoring following treatment
- Provide awareness training to appropriate staff and students
- Collaborate with the student's parents and the school nurse to develop a health care emergency plan to deal with a student getting sick at school
- Sit the student near the front of the classroom
- Provide extra time to complete tests and assignments
- Provide a duplicate set of textbooks for the student to keep at home
- Provide extra time for the student to transition between classes
- Minimize the amount of written assignments
- Have adequate school-home-hospital communication about the importance of regular attendance when possible
- Homebound services should be approached with caution but could be very beneficial in certain situations
- Facilitate regular school attendance when possible by addressing the student's fear of peer ostracism
- Closely monitor the student with cancer's adjustment as they return to school, as peers may react negatively
- Allow the student with cancer to build up their energy before expecting them to return for full days of school

- Accommodate for any special needs such as wheelchairs, walkers, help with certain physical activities, or needs for other special devices
- Understand that every child has their own coping style
- Allow the student with cancer to carry a water bottle, to have a long-term bathroom pass, to have access to the elevator, and/or to carry snacks if needed throughout the school day
- Parents and teachers should be aware of potential educational problems that may be related to cancer treatment
- The student with cancer should undergo a specialized evaluation by a pediatric psychologist (called neuropsychological testing) to measure IQ and school-based skills, along with more detailed information
- Parents and teachers should remain watchful and report anything that may be cause for concern
- Modify test requirements, such as giving an oral rather than written exam
- Assign a classroom aide, if needed
- Ensure that the student with cancer is getting extra help in math, spelling, reading, organizational skills, and/or any other area in which they may need it

CEREBRAL PALSY

Example: A student with cerebral palsy has difficulty with muscle control and muscle reflexes. The student uses a wheelchair for mobility purposes. Cognitive skills are intact but the student has trouble writing and typing. Oral functions can also be impaired.

Resources:

- https://www.cdc.gov/ncbddd/cp/facts.html
- https://kidshealth.org/en/parents/cerebral-palsy.html
- https://www.cerebralpalsy.org/about-cerebral-palsy
- https://www.birthinjuryguide.org/cerebral-palsy/

Accommodations:

- Provide preferential seating near the front of the classroom
- Provide the student with a variety of writing tools if needed
- Provide the student with angled writing surface or desk if necessary
- Allow the student to use assistive technology if needed
- Provide the student with extra time to work on tasks/assignments
- Give the student extra time for transitions
- Provide notes for the student
- Ensure that the classroom and school is ADA compliant
- Allow the student to be excused from class for services such as physical or occupational therapy
- Allow the student to have a longer lunch period and provide adaptive utensils in the lunchroom if needed
- Ensure that the student has assistance with carrying books and their lunch tray if needed
- Allow the student to have the opportunity to leave classroom for breaks
- Collaborate with the school nurse as they monitor and/or administer needed medications
- Educate the student's peers about cerebral palsy with the student's and their parents' permission
- Provide a non-slide mat under the student's chair and a cushion for seating if needed
- Provide an extra set of textbooks for the student to keep at home
- Allow for alternative test taking methods (i.e. oral, computer based...)
- Allow the student to complete alternate assignments (i.e. verbal presentation, display…)
- Provide step by step instructions
- Allow the student to use tape on their desk to stabilize their papers
- Attach pencils to the desk with a piece of string (easy access for student)

CYSTIC FIBROSIS

Example: The student has difficulty breathing regularly, frequently coughs, and becomes short of breath. They easily become dehydrated and have to use the bathroom frequently. They have irregular, but frequent absences due to illness and complications. Finally, they often have a weakened immune system and are susceptible to illness.

Resources:

- https://www.cff.org/Life-With-CF/Daily-Life/CF-and-School/
- http://cfri.org/wp-content/uploads/2018/03/CF_in_the_Classroom_12.1.15.pdf
- https://www.mayoclinic.org/diseases-conditions/cystic-fibrosis/symptoms-causes/syc-20353700

Accommodations:

- Prevent students from sharing personal items in the classroom/school environment.
- Establish health and safety rules within the classroom/school environment. For example, covering coughs and sneezes, washing hands, etc.
- Allow frequent use of the restrooms for coughing privacy and/or frequent bowel movements
- Provide tissues to cough into and a trash can to dispose of them near the student's desk.
- Communicate a plan for frequent absences for doctor appointments to ensure the student is able to catch up. For instance, access to video recordings of missed classes
- Implement times throughout the day for drinking water to prevent dehydration
- Ensure the school emergency medical plans are up to date and effective in the case of an emergency
- Provide time during the day for the student to take medication or perform airway clearance therapy
- Adjust or waive the attendance policy to accommodate the student's schedule.
- Create and implement open communication between administrators, parents, teachers, and school nurses (and any other nurses/doctors that play a critical role in the child's health and safety at school)
- Foster a caring and welcoming environment between peers in the classroom and school environment
- Allow extra and extended time for taking tests and completing assignments.
- Provide the option for preferential seating
- Allow the student to have a regular shortened school-day
- Provide alternative means of attendance such as a video call
- Work with the school nurse learn how to appropriately provide and dispose of medications if necessary
- Extend the school year to help the student catch up with missed work from absences
- Adapt or limit physical activities
- Have alternative food and drink available to lessen the financial and time burden on the family
- Have students, staff, and parents wash their hands immediately upon entering the classroom
- Strongly encourage students to stay home when sick. If a student falls ill during the day immediately send them to the nurse

- Provide hand sanitizer both on the student's desk and at various stations around the classroom
- Educate the student's peers about respectful practices and conduct
- Regularly change filters in ventilation systems

DIABETES

Example: A third grade student with type 1 diabetes requires accommodations throughout the school day. Type 1 diabetes impairs the body's ability to use food. Insulin is required to help the body convert food into energy. The student's parents send snacks to school and they are able to access them during scheduled breaks. Their teacher allows them to use the restroom and take water breaks whenever needed. Since the student is timid, their parents and teacher will coordinate times to check their blood sugar in a private area, like the nurse's office.

Resources:

- http://www.diabetes.org
- https://medlineplus.gov/diabetes.html
- https://www.mayoclinic.org/diseases-conditions/diabetes/symptoms-causes/syc-20371444

Accommodations:

- Give the student breaks to check blood glucose levels
- Allow the student to have unrestricted bathroom breaks
- Collaborate with the school nurse to learn about the proper dispensing of medications; monitoring and/or distribution of medications; monitoring for side effects; communicating systematically and frequently with parents
- Collaborate with the student's parents and the school nurse to develop a health care plan for management of the student's diabetes in the school setting and in emergencies
- Accommodate food access and have meal schedules
- The school nurse will work with the student and his/her parents/guardians to coordinate a meal and snack schedule.
- Ensure that the student can eat lunch at the same time each day and have enough time to finish their lunch
- A snack and quick-acting source of glucose must always be immediately available to the student
- All teachers who work with the student must have a copy of the emergency action plan and be able to recognize and assist with the treatment of low blood glucose levels
- Student will have immediate access to water by keeping a water bottle in their possession or at their desk and allowing the student to use the water fountain anytime
- Blood glucose monitoring will be done at the times instructed from the student's health care provider, whenever the student feels his/her blood glucose level may be high or low, or when symptoms of high or low blood glucose levels are observed
- Student will be provided with privacy for blood glucose monitoring and insulin administration if the student desires
- If the student is affected by high or low blood glucose levels at the time of regular testing, the student will be permitted to take the test at another time without penalty

- Adapt attendance policy for when the student is absent due to medical reasons. No penalty to the student. Medical documentation should be provided
- Student will be given instruction to help him/her make up any classroom instruction that was missed do to medical care
- Student will not be penalized for missing class work if he/she needs to use the restroom, get a drink, eat, or check blood-glucose levels. May have extra time to finish the activity
- Student will have full participation in all sports, extracurricular activities, and field trips, with the necessary diabetes care assistance and/or supervision provided
- Alternate arrangements for classroom time missed for medical appointments, or removal because of periods of high or low blood glucose, illness related to diabetes
- School nurse will provide training to appropriate staff who work with the students on how to properly monitor blood glucose levels, symptoms, and how to treat hypoglycemia
- Have open communication with parents and inform them on any diabetes care that happens at school
- Student is allowed to self-manage their diabetes if they are capable of doing so
- Teacher will inform classroom substitutes of the student's health condition and basic emergency needs and/or how to access assistance for student
- Student's diabetes supplies will be accessible to the student and stored in a specific location in the classroom

DRUGS & ALCOHOL

Example: A student has been involved in the recreational use of drugs and alcohol for many years. The student lives in a home where drugs and alcohol are present. The abuse of drugs and alcohol has affected the student by decreasing their interest in school subjects, causing them to have a negative attitude, a drop-in grade, many absences, truancy, and discipline problems. The student is currently not using any substances and is currently enrolled in a treatment facility. If the student is not actively using drugs or alcohol, he or she may qualify for accommodations or services under Section 504.

Resources:

- https://www.aacap.org/aacap/families_and_youth/facts_for_families/fff-guide/Teens-Alcohol-And-Other-Drugs-003.aspx
- https://www.drugabuse.gov/publications/principles-adolescent-substance-use-disorder-treatment-research-based-guide/introduction
- https://www.hhs.gov/ash/oah/adolescent-development/substance-use/index.html

Accommodations:

- Arrange to have copies of classroom notes or lesson plans sent to treatment facility
- Allow for dismissal from school to be sent to facility for treatment
- Establish communication between school and treatment facility
- Assist in creating a strong relationship between the guidance counselor and the student.
- Allow the student to see the guidance counselor when needed throughout the day. Have a plan set in motion so that they student may leave the classroom without causing a disruption
- Offer family resources for training in order to help the child
- Establish peer support for the student
- Be flexible with work completion for the student if they are in treatment facility
- Grade assignments as they are completed rather than work that is assigned
- Maintain frequent contact with family if possible
- Parents, school nurses, and teachers should be aware of when and where student is required to receive medication while at school. The Student should be able to leave the classroom to receive medications without asking permission in front of peers
- Have the school nurse appropriately educate peers/teacher/others around the student about the medications they are taking, why they are taking them, and symptoms to look for.
- Provide resources to the student, school, and community as needed
- Be aware of increased risk taking behaviors and report them to the parents and the student's care team
- Establish a monitoring system with the student, either daily or weekly, on the completion of their assignments.
- If the student seems to be getting overwhelmed with school work, have a pre-planned space where the student can take a break
- Provide preferred classroom seating so that if the student needs to take a break, see the guidance counselor, or leave to take their medication they are not disrupting the entire classroom.

- If available, have a second set of textbooks sent to treatment facility so that they student may work on assignments if needed
- For recess and contact sports have pre-planned alternative options for the student to utilize if needed
- Offer the student tutoring or other support systems to help with academic learning if they are not understanding a concept

DYSLEXIA

Example: Dyslexia is a language-based learning disability. A student with dyslexia often performs poorly in all academic subject areas because he or she experiences significant difficulty with reading accurately and fluently. A student with dyslexia will struggle with word recognition, decoding skills, spelling, writing, and comprehension. In addition, individuals with dyslexia often exhibit difficulties with mathematics. Dyslexia is a lifelong condition; therefore, students will require proper supports in reading, writing, spelling, and math in order to be successful in and out of school.

Resources:

- https://dyslexiaida.org/wp-content/uploads/2015/01/DITC-Handbook.pdf
- https://dyslexiaresource.org/
- https://www.dyslexicadvantage.org/

Accommodations:

- Utilize preferential seating (ex: seat the student close to the teacher or away from distractions)
- Repeat oral directions and check for student understanding (ex: have the student repeat the directions in his or her own words)
- Simplify written directions and underline or highlight the significant parts
- Incorporate pictures into directions, daily schedules, and vocabulary words as a visual aid
- Break down assignments into smaller, more manageable tasks
- Extend the allotted time for the student to complete assignments and assessments
- Pre-teach new vocabulary and important concepts before a lesson
- Provide worksheets and reading materials with large print, increased spacing, and fewer items per page
- Highlight essential information in books
- Block out extraneous stimuli from worksheets or reading materials
- Adjust the reading levels of books, worksheets, and other materials
- Prepare a reading guide that the student can reference while reading
- Provide colored strips or bookmarks, with or without reading windows, for students to use when reading or following along in texts
- Provide the student with a copy of lesson notes or an outline to complete
- Provide blank or partially completed graphic organizers for lesson content (ex: chart, web, Venn diagram, etc.)
- Provide a peer note taker or scribe for written assignments
- Write key points or words on a chalkboard/whiteboard/SMART board
- Teach mnemonic devices to support learning and memorization
- Use an audio recording device to record directions, stories, and specific lessons
- Allow the use of instructional aids, including number lines, alphabet strips, spell check, electronic dictionaries, calculators, and multiplication tables
- Utilize small-group teaching or one-on-one instruction with the student
- Provide appropriate low- and high-tech assistive technology, such as audio books, electronic readers, audio recorders, text-to-speech software, and speech-to-text programs

- Display multiple work samples that the student can refer to as a model
- Provide additional practice activities
- Allow alternate response methods on assignments and assessments (ex: oral responses, voice recordings, hand signals, typed responses, etc.)

EMOTIONAL DISTURBANCE

Example: A student with an Emotional Disturbance could have a range of different conditions that may need accommodations in the classroom. A student with an Emotional Disturbance may have an anxiety disorder, mood disorder, or conduct disorder which could cause many different symptoms. This student may have difficulty paying attention, creating and maintaining relationships, an inability to learn, depression, etc. The symptoms of an Emotional Disturbance may limit and affect the student's academic learning.

Resources:

- pacercenter.org
- www.thrivectr.org/emotional-disturbance/
- Parentcenterhub.org

Accommodations:

- Set goals with the student and their treatment team to help them improve their social skills
- Use visuals during instruction
- Set clear rules and expectations in and out of the classroom and stay consistent with them
- Create a calming, quiet, cool down area and incorporate relaxation times throughout the day
- Teach the student self-monitoring and self-control techniques as necessary
- Create an environment that is welcoming to the student
- Keep in mind that no two people with ED are the same
- Provide the student with an appropriate mentor if the treatment team determines it would be beneficial
- Allow the student to have additional time to complete assignments/tasks
- Remove/limit environmental triggers (smells, sounds, lights, etc.)
- Collaborate with the student's treatment team to create a reinforcement schedule/chart
- Give the student adequate positive feedback
- Incorporate movement breaks throughout long periods of sitting time
- Provide the student with different mediums or learning techniques (visuals, auditory, hands-on)
- Create and use social stories to assist in teaching social interaction skills
- Provide a daily and weekly schedule to reduce anxiety
- Prepare the student ahead of time for transitions (set a timer)
- Create a home/school communication book

ENCOPRESIS/ENURESIS

Example: A student was diagnosed with Encopresis/Enuresis, which is the repeated passing of feces or urine in places other than the toilet. This can interrupt the student's instructional time. It can also affect the student's self-esteem.

Resources:

- https://www.healthychildren.org
- https://www.mentalhelp.net/articles/enuresis-assessment-and-treatment/
- https://www.webmd.com/mental-health/enuresis

Accommodations:

- Form a routine schedule of bathroom visits with the student and allow them to have unlimited bathroom breaks without needing to ask
- Allow the student to carry a water bottle, to increase fluids and prevent dehydration
- Allow the student to use the nurse's bathroom to feel more comfortable
- Create a code word with the student, so if it needs to be discussed they aren't embarrassed
- Encourage the student's parents to allow the student to keep extra clothes in the nurse's office
- Check in with the student to make sure they aren't feeling sad, guilty, ashamed
- If student is in a classroom far away from the nurse's office create a "Top Secret" box that they put their clothes in to change in the bathroom before going to the nurse's office
- Collaborate with the student's team to develop a way to time how frequent their bathroom breaks are
- Make sure all teachers and school staff who interact with the student on a consistent basis are informed of the code word and check in protocol
- Introduce good eating habits in the classroom so the student isn't targeted
- Place the student in a desk close to the door so they can easily leave without causing disruptions
- Work with the student and their team to create a way for them to cover up their bottom half, so other students do not notice if they've had an accident
- Keep an open line of communication with the student's parents and inform them of the student's progress or regression
- Provide the student with a special timer that indicates when they should use the bathroom
- Use positive reinforcement, encourage the student "to do better next time" if they have an accident instead of yelling at or punishing the student
- Have small rewards for that student (when they use the restroom, they get a piece of candy, stickers, etc.)
- Look out for signs that the child may need to go to the toilet – holding postures, playing with pants etc.

EPILEPSY

Example: The student has irregular, but severe seizures that can be triggered by unexpected, intense stimuli. They regularly take medication for this, but are prone to irregular extended absences.

Resources:

- https://www.epilepsy.com
- https://www.cdc.gov/epilepsy/index.html
- https://www.mayoclinic.org/diseases-conditions/epilepsy/symptoms-causes/syc-20350093

Accommodations:

- Provide auditory and/or visual warnings to the student before displaying potentially sensitive visuals
- Edit sensitive sections out of visuals before displaying them in class
- Document what happened prior to a seizure to determine triggers for that specific student
- Document when seizures take place and the characteristics of the seizure
- Work with the parents of the student and other professionals to create a list of potential triggers to avoid
- Should an assembly take place, talk with other professionals to determine a plan of action to keep the student safe and comfortable.
- Provide alternative recess, lunch, and assembly locations should the student and/or parents/families request one
- Allow the student to leave class a few minutes early/or late to avoid high noise levels and traffic in busy hallways.
- Allow the student to wear a device that monitors seizures, their durations, and alert parents
- Plan for irregular absences and provide make-up work opportunities
- Understand and familiarize yourself with warning signs that a seizure may occur
- Understand and familiarize yourself with potential side effects of medication that the student may be prescribed
- Allow student to wear any hats, glasses, or other items that can dim lights and sensory input
- Limit computer time and/or make use of various filters that make screens less harmful to one's eyes
- Work with the student's treatment team to teach the student to self-monitor how they are feeling throughout the day. Provide a sheet that can be used to communicate with the teacher any occurrences throughout the day
- Train peers in appropriate conduct for when a student has a seizure
- Have materials such as a pillow or a yoga mat ready to help protect the student during potential seizures
- Provide alternative means of attendance such as online class or a video call if the student has an extended absence
- Collaborate with the school nurse and the student's treatment team to learn the proper administration and disposal of medication

- Provide a safe location for the student to go if they are feeling overwhelmed or sick
- Avoid using objects such as standing whiteboards that could fall over and make loud noises
- Have an alternative location to move the class to in the event of a seizure to allow the student time and space to recover
- Educate peers, staff, and parents on epilepsy to reduce social stigmas around such and to help prevent bullying or misunderstandings

HEARING IMPAIRMENT

Example: One of your students has a hearing impairment and you will be pushing them out into the general education classroom. The student has a personal interpreter that will help them to communicate in class. As a special education teacher, you suggest that the teacher provide the student with preferred seating among other accommodations.

Resources:

- https://www.hearingloss.org/
- https://successforkidswithhearingloss.com/
- https://kidshealth.org/en/teens/hearing-impairment.html

Accommodations:

- Collaborate with the student's treatment team to advocate for a Sign Language Interpreter
- Provide the student with Communication Access Real-time Translation (CART)
- Provide the student with C-Print - Transcription Services
- Provide the student with Assistive Listening Devices (ALD)
- Allow the student to take notes as needed
- Provide captioning for any videos used during class time
- Provide the student with the opportunity for preferred seating
- Help the student and their family in finding peer/support groups
- Allow the student to have extended time on tests and assignments
- Utilize modified textbooks or audio-video materials when appropriate
- Develop behavior management support with the student's team if needed
- Adjust class schedules if needed
- Utilize verbal testing
- Advocate for the student to participate in Occupational Therapy
- Allow repetition when reading tests
- Provide the student with review or study sheets
- Face the class while speaking
- Obtain student's attention prior to speaking
- Reduce auditory distractions in the classroom
- Clearly enunciate speech
- Repeat or rephrase information when necessary
- Provide the student with down time (break from listening) if needed
- Provide the student with step-by-step instructions

HEMOPHILIA

Example: Hemophilia is a disorder where an individual's blood doesn't clot normally. A person with hemophilia may have many large or deep bruises, joint pain and swelling, and unexplained bleeding.

Resources:

- https://www.cdc.gov/ncbddd/hemophilia/facts.html
- https://my.clevelandclinic.org/health/diseases/14083-hemophilia
- https://medlineplus.gov/hemophilia.html
- https://www.mayoclinic.org/diseases-conditions/hemophilia/symptoms-causes/syc-20373327

Accommodations:

- Allow the student to have extra time for transitions
- Provide the student with tutoring for missed instruction
- Record instruction for the student to view at home or at an alternate time
- Allow a note taker or provide detailed notes to the student
- Provide the student with an extra set of books to keep at home
- Do not count absences against the student
- During field trips, include a nurse or parent to support the student
- Provide the student with tutoring opportunities due to absences
- Allow the student to have pass for the school elevator
- Allow the student to gain P.E. credits for participating in outside physical therapy
- Provide the student with extra recess supervision
- Post all assignments online for the student and their parents to access easily
- Ensure that necessary medical supplies is maintained in central office or nurse's office
- Provide the student with a seating arrangement that allows them to easily access the classroom and the exits
- Ensure that the student can easily access their locker
- Provide assistance for the student when they are carrying objects (lunch tray, books, etc.)
- Give the student a permanent pass to the school nurse
- Ensure that the student has a private to administer factor
- Allow the student to have extra time to complete assignments
- Allow the student to use a rolling book bag.
- Work with the school nurse and the student's team to prepare for emergency situations
- Provide the student with access to wheelchair/crutches as needed.
- Ensure that the student has access to special needs student transportation if needed

LEARNING DISABILITIES

Example: The student has a learning disability that impacts his/her ability to read and process written information. The student struggles with word decoding, but also has delayed processing and comprehension. The student is easily distracted and has difficulty focusing for long periods of time.

Resources:

- https://www.understood.org/en/school-learning/partnering-with-childs-school/instructional-strategies/classroom-accommodations-to-help-students-with-learning-and-attention-issues
- https://ldaamerica.org/accommodations-techniques-and-aids-for-learning/
- https://www.smartkidswithld.org/getting-help/know-your-childs-rights/understanding-section-504/

Accommodations:

- Allow the student to have extended time on tests
- Provide the student with study guide/review sheets
- Read aloud what's written on the board
- Use oral and written instructions and guidelines in the classroom
- Provide instructions that are brief and uncomplicated
- Permit the student to use a computer or other assistive technology
- Allow the student to take frequent breaks
- Permit the student to take tests in a small group or individual setting
- Allow the student to have multiple testing sessions throughout the day
- Provide special lighting and/or acoustics in the classroom
- Provide the student with audiotapes of lessons, readings, etc.
- Provide the student with information in large print or reduce the number of items per page/line
- Allow the student to use spelling dictionaries or electronic spell checkers
- Allow the student to use a word processor to type notes or give responses in class
- Host review sessions before assessments
- Implement a weekly home-school communication system
- Allow for peer note taking
- Reduce distracting displays and objects around the classroom
- Provide the student with activities through multiple learning domains
- Provide the student with personalized examples
- Give immediate feedback to the student
- Schedule daily check-in sessions with case manager or special education teacher
- Provide the student with mnemonics and other study tools
- Follow a schedule and steady routine
- Create a space to be reserved as a quiet corner/room for the student to calm down and relax when anxious

LEUKEMIA

Example: A student has been diagnosed with leukemia, which is a form of cancer where the white blood cells rise in number. They may need different treatments such as chemotherapy, radiation, stem cell transplant, etc. Different treatments may have effects on their cognitive and physical functioning. School may be affected for the student with leukemia because they may need help with learning and/or caring for themselves. On average, a student with leukemia may be absent from school more often than others. They may also have to visit the hospital periodically throughout the school year for treatments.

Resources:

- https://www.cancer.org/cancer/leukemia-in-children.html
- https://www.lls.org/childhood-blood-cancer/about-childhood-blood-cancer/school
- https://curesearch.org/Preparing-School-Staff-for-Your-Childs-Return-to-School

Accommodations:

- Utilize homebound teaching for missed school days or concepts that the student needs more help with
- Extend the time to complete homework or assignments
- Give the student easy access to elevator systems throughout the school
- Provide the student with preplanned, open, quiet, and available space designated for rests or breaks
- Provide the student with preferred classroom seating (to avoid germs, be closer to the door if feeling ill)
- Incorporate the school nurse in all information and accommodations. The school nurse can help accommodate the student's needs and develop a health plan
- Make accommodations for the student for recess and/or gym class to avoid overworking them and making them tired. Have a gym and recess plan for the student and teachers involved to follow
- If a student should be sent home from school for some reason, have a plan in place to send the student home and to communicate with parents to pick the child up efficiently
- Have the school nurse appropriately and effectively educate the peers/teachers/principal on leukemia and the best ways to accommodate the student (with parent permission)
- Parents should be notified when there is a communicable disease that has broken out in the school facility, in order to keep the student from getting sicker (i.e. flu, chicken pox, etc.)
- Student should be provided with an adjusted school day if possible. Have an adjusted school day plan in place that is easy to follow for parents and the student
- Parents, teachers, and school nurses should know when and where the student will take medications if needed at school. Teachers and nurses should be monitoring student when taking medications for possible side effects, and notify the family if side effects are being seen
- Student should be given the option to leave the classroom early for transitions to lunch, recess, or another classroom space (about 5 minutes early). This will allow the child to travel in uncrowded hallways at a leisurely pace. It also reduces the risk of being exposed to more germs

- If available, a second set of textbooks should be given to the student to keep at home for assignments. If student is out of school they still have access to their texts. Also, it lessens the weight of materials the student has to carry home
- Allow the student to carry around water and snacks. They will be permitted to have a mid-morning and afternoon snack, if needed
- Students with leukemia often lose their hair. Allow student to wear a hat if wanted throughout the school day to keep their head warm
- Provide grades based on assignments completed rather than work assigned because the student may need more time to complete their work
- The student should be able to use restroom as needed without having to ask for permission. There should be a plan set in place for fewer disruptions as well as less attention being drawn to the student
- Provide the student with copies of classroom notes and/or lesson plans that are being presented in each class session
- Utilize a buddy system for walking to the nurse when the student is feeling ill. Have a student who sits near them be their buddy who can escort them to the nurse.
- If the student is having difficulty with writing by hand, have technology available for them to use when required
- When learning difficulties arise, the student should be permitted to having an extended school year (during spring, winter, and/or summer breaks) to complete assignments and to stay on track with grade level peers
- If the student has an assigned locker, it should be close to his or her classes and they may have 2 if needed. If they do not have a locker, they should have easy access in the classroom to all materials
- The student will be given a designated parking space near the entrance of the building, or will be able to be dropped off right in front of the school entrance

NUT ALLERGIES

Example: The student has a severe allergic reaction when they come in direct contact with nuts or products contaminated by nuts. Symptoms can include swelling, problems breathing, or itching and their onset can be very sudden.

Resources:

- https://www.foodallergy.org/common-allergens/peanut-allergy
- https://acaai.org/allergies/types/food-allergies/types-food-allergy/tree-nut-allergy
- https://www.anaphylaxis.org.uk/wp-content/uploads/2015/06/Peanut-v7-formatted-with-new-logo.pdf

Accommodations:

- Teachers and other staff members will be properly trained in how to administer an EpiPen and how to recognize an allergic reaction.
- Develop an emergency action plan with the assistance of certified medical professionals.
- Sparingly use food for activities, if food must be used make sure it did not come in contact/was not manufactured with nuts.
- Teachers, staff members, parents, and students must wash their hands upon arrival of the room.
- The student's table must be washed before consuming food.
- A keyboard cover will be provided to the student when using a computer.
- When leaving the classroom for an extended period of time the teacher will carry an EpiPen.
- All specialty teachers and substitutes will be notified of the 504 plan and accommodations.
- Preferential seating by the exit in the event of an emergency needs to be followed.
- The student will not be given food that is not from their home or approved by parents/trained medical professional.
- Provide visual signs that alert people when peanut products are in use.
- Provide advanced notice to parents of when peanut products are on the school's lunch menu.
- Provide staff members with emergency numbers (school nurse, building principal, etc.)
- Educators and parents should be aware of how they can support students in managing their own allergies.
- Ensure that the student is aware of the symptoms associated with their allergies.
- Identify all potential risk factors that the student could potentially come in contact with throughout the school day or during their commute to school.
- Ensure that all substitute staff are aware of all potential allergies in the classroom and have been trained to handle emergency situations.
- Make sure that all food purchased for classroom gatherings does not contain potential allergens.
- Make sure that the sharing and trading of food and other items is monitored or prevented.
- Consider all allergies when going on field trips or outside of the school setting.
- Provide a support plan for students if they do suffer from an allergic reaction.

- Determine what will be done with the other students in the room if an allergic reaction occurs.
- Determine what and how to inform other students of allergic reactions.
- Make sure that students are included in all classroom activities regardless of their allergies.
- Plan a way in which students will be able to keep up with their schoolwork in the case that they are absent from class for an extended period of time due to an allergic reaction or doctor's appointments.

OBESITY

Example: A student has a severe eating disorder that affects their ability to walk and maneuver around the classroom or school. Special accommodations are needed to ensure the student has an adequate learning experience.

Resources:

- medlineplus.gov/obesityinchildren.html
- https://www.hsph.harvard.edu/obesity-prevention-source/obesity-prevention/schools/school-obesity-prevention-recommendations-read-and-print/
- http://pelinks4u.org/articles/conatser2_11.htm

Accommodations:

- Serve healthy choices for school meals and make dietary accommodations with a physician's guidance
- Have nutrition facts listed on all food
- Provide meal planning/nutritional resources for families
- Provide the student with opportunities for hands-on learning away from their desk
- Make transportation accommodations when needed
- Train food service staff on healthy and appropriate food preparation
- Prior to engaging in physical activity, ensure that the student has a complete physical assessment completed by a physician
- Accommodate the temperature in the classroom and be cautious of taking the student outside on a hot day to avoid overheating
- Provide the student with opportunities for socialization and peer-interaction
- Provide/have healthy snacks in the classroom
- Provide the student with supportive seating and work areas
- Provide the student with easy access to classroom resources
- Incorporate movement into classroom activities/lessons
- Allow the student to have extra time for transitions
- Accommodate any physical activity with a physician's guidance
- Provide the student with accessibility to water throughout the day
- Allow elevator usage when needed
- Incorporate nutrition education into the classroom curriculum
- Help the student set physical/nutritional goals when appropriate
- Allow the student to have privacy to apply any necessary hygienic items prior to physical activities (baby powder, lubricants)
- Allow the student to have time throughout the day to meet with the school counselor if needed
- Make class location changes if needed

ORTHOPEDIC IMPAIRMENT

Example: Zac is a 6-year-old boy with Cerebral Palsy. He is in a wheelchair and totally dependent on staff for all his self-care needs. Zac is non-verbal and currently has no reliable form of communication apart from smiling for 'yes', head shaking for 'no' and some eye pointing for simple choice making. Zac does not appear to have an intellectual disability and his teacher is working hard with his therapists to develop a communication system and the ability to better access the curriculum through assistive technology.

Resources:

1. http://education.ohio.gov/Topics/Special-Education/Students-with-Disabilities/Orthopedic-Impairment
2. http://wvde.state.wv.us/osp/Fact_Sheet_Orthopedic_Impairment.pdf
3. http://www.projectidealonline.org/v/orthopedic-impairments/
4. https://www.nsta.org/disabilities/motor.aspx

Accommodations:

- Secure assistive technology/augmentative communication devices for the student to utilize during the school day
- Allow the student to have extended time to finish assignments
- Give the student frequent and timed breaks if they become tired easy
- Provide the student with note-taking assistance
- Provide the student with special seating arrangements or larger tables
- Give the student instruction designed on improvement of gross and fine motor skills
- Ensure that the classroom has wide aisles and is ADA compliant
- Utilize group assignments or a specific lab/assignment buddy
- Ensure that class materials are available to the student in electronic format
- Have tables in your classroom that you can alter the height of
- Break large amounts of texts into smaller sections for the student
- Allow the student to have adequate transportation time between classes
- Be open and flexible with the idea of allowing students to record the lecture
- Arrange for library personnel to assist in access to card catalogues, bookshelves, and microfiche and other equipment
- While working with the student, consider using alternate procedures while not disengaging the student from the activity
- Increase size of wheels, dials, handles, and buttons on lab equipment if needed
- Lower the chalkboard, whiteboard, or screen for information to be accessed by all of the students
- Provide oral or computer based exams to the student if necessary

SKIN DISORDERS

Example: A student has a severe skin condition that affects their ability to participate in everyday activities. Special accommodations are needed to fulfill the student's learning experience.

Resources:

- http://www.firstskinfoundation.org/special-education-accommodations
- https://askjan.org/disabilities/Skin-Conditions.cfm
- https://nationaleczema.org/what-is-a-504-plan/
- https://my.clevelandclinic.org/health/articles/6951-skin-problems-in-children

Accommodations:

- Allow the student to have privacy to apply lotions/moisturizers when needed
- Allow the student to have time throughout the day to meet with the counselor if needed
- Provide supportive seating and work areas to the student
- Allow the student to use a fan for sensitivity to heat
- Allow the student to use hand warmers/blanket for sensitivity to the cold
- Allow the student to have access to water throughout the day
- Avoid using harmful substances in the classroom that may affect the student
- Accommodate restrooms/classrooms with mild soap to avoid irritating skin
- Provide the student with their own classroom supplies separate from the other students
- Break large projects/assignments into smaller pieces
- Use a variety of instructional resources based on the student's preference
- Allow the student to visit the school nurse when needed nurse
- Provide the student with a private work space to avoid being too close to other students
- Allow the student to wear a hat and other protective clothing
- Allow the student to have extra time for transitions
- Sanitize all work areas that the student is using
- Change the temperature and lighting in the classroom to accommodate the student
- Be cautious of the weather when taking the student outdoors
- Avoid physical activities that will cause rubbing of the skin
- Monitor the student's skin throughout the day and make note of any changes. Report any changes to the student's parents or treatment team
- Avoid overstressing the student
- Accommodate the student's schedule and allow breaks when needed

SPECIAL HEALTH CARE NEEDS

Example: A student requires clean intermittent catheterization twice each day. The procedure helps prevent UTI's and possible extra wetting. The school is required to provide trained personnel to perform the procedure and to give a private location to perform said procedure. The student's condition limits their ability to care for themselves.

Resources:

- https://mchb.hrsa.gov/maternal-child-health-topics/children-and-youth-special-health-needs
- https://www.cdc.gov/childrenindisasters/children-with-special-healthcare-needs.html
- https://www.cahmi.org/wp-content/uploads/2014/06/CSHCNSwhoarecshcn_revised_07b-pdf.pdf
- https://www.dshs.texas.gov/cshcn/

Accommodations:

- Create and practice an emergency plan as decided by the student's treatment team
- Adapt testing locations and procedures for the student
- Adapt the student's lunch and snacks as needed
- Provide the student with appropriate transportation to and from school transportation needed for field trips
- Provide the student with appropriate bathroom time with assistance if needed
- Collaborate with the school nurse and the student's treatment team to prepare for emergencies
- Create an individualized daily schedule for the student which includes bathroom breaks, lunch, transportation, and dispensary of medications
- Work with the student's parents and treatment team to develop a Special Health Care Plan
- Have a list of medications, schedules, administrations (who and where)
- Provide trained personnel to perform special medical procedures
- Adjust the classroom environment to accommodate the student
- Provide a beeper/paging system for trained personnel for emergency situations
- Make homebound services and instruction available as needed
- Involve parents, nurse, teachers, and staff in periodic reviews.
- Provide the student with adapted school work and equipment (pencils, scissors, etc.) if needed
- Leave extra equipment at school in case of an emergency (wheelchairs, walkers, catheter)
- Leave a change of clothes at school in case of an accident
- Provide the student with a personal aide if needed.
- Provide a storyboard and/or other AAT devices if needed
- Make sure the school building is accessible (elevators, wide doorways, ramps)
- Create adaptive P.E. time to incorporate physical therapy with trained staff based off of the student's needs.

TOURETTE'S SYNDROME

Example: A student with Tourette's has tics that involve cursing and making loud sounds. The outbursts have been affecting his ability to perform academically and take care of himself.

Resources:

- https://tourette.org/about-tourette/overview/what-is-tourette/
- https://www.ninds.nih.gov/Disorders/Patient-Caregiver-Education/Fact-Sheets/Tourette-Syndrome-Fact-Sheet
- http://www.parentcenterhub.org/wp-content/uploads/2015/04/Classroom-Strategies-Techniques1.pdf
- https://www.ctdinstitute.org/sites/default/files/file_attachments/IEPS-504s-AccomodationsForPeopleWithTouretteSyndrome-pptx.pdf
- https://www.cdc.gov/ncbddd/tourette/index.html

Accommodations:

- Recognize that tics are involuntary movements and sounds that wax and wane and can change unpredictably
- Provide the student with a separate test location
- Waive or provide the student with extended time limits for tests
- Allow the student to have breaks out of the classroom
- Allow the student to use a tablet, computer, or other electronic assistive devices
- Provide the student with graph paper to help line up math problems or turn paper sideways to calculate "columns " using wide ruled paper
- Do not penalize students for poor handwriting. Provide alternatives for doing tests, assignments
- Provide the student with a copy of class notes rather than having the student copy from the board or overhead
- Allow the student to doodle if it is helpful for them
- Allow the student to bring sensory items/ strategies
- Collaborate with the student and their treatment team to develop a plan to limit stress and anxiety
- Be aware of co-occurring conditions
- Allow the student to have shorter class time (leaving early, or coming later)
- Allow the student to have a separate place to go during persistent symptoms
- Allow the student to have a buddy to help carry books in the hallway in case of an attack in hall.
- Educate your students about Tourette's Syndrome and what it entails in an accepting way
- Teach strategies and coping strategies that will help the student in life and not just in the classroom
- Take note of what increases stress and anxiety for your student with Tourette's and do your best to reduce that stressor in your classroom
- Ignore the tics that can be ignored, therefore creating an air of acceptance.
- Involve the student who has Tourette's to be a part of the planning of strategies for managing tics that cannot be ignored.

- Rather than requiring the student to do oral reports in front of the class, allow the student to record him or herself in a setting of their choice and at a pace of their choice so they are most comfortable.
- Give student a printed copy of instructions in addition to the ones given orally.
- Give the student directions in small chunks and check for understanding of the directions given.
- Try to be as understanding as possible as the outbursts and tics are probably more disruptive to the student than others.
- Create a "contract" with the student outlining goals and expectations

TRAUMA

Example: A student has had significant trauma sometime in their life from either birth until the present. Trauma can be defined as having a deeply disturbing experience or physical injury. Trauma can be something that is disturbing or stressful for a short or long amount of time in someone's life. Some examples of trauma that children can experience are homelessness, abuse, a car accident, domestic violence, the loss of a loved one, etc. Trauma can cause problems with behavior and learning in children. Some symptoms of trauma in school may include poor self-regulation, executive function challenges and trouble forming relationships.

Resources:

- https://childmind.org/article/how-trauma-affects-kids-school/
- https://traumaawareschools.org/impact
- https://chalkbeat.org/posts/chicago/2018/08/01/trauma-can-make-it-hard-for-kids-to-learn-heres-how-teachers-learn-to-deal-with-that/

Accommodations:

- Provide the student with frequent breaks throughout the day to regroup after symptomatic behavior by using sensory activities
- Give the student limited to no homework because the trauma is most likely based outside of the school causing it to be difficult to complete homework
- Provide the student with a safe adult mentor to help them throughout the day and to help control symptoms
- Provide the student with assistive technology (smart pen, voice recorder, etc.) to help keep them more interested or focused on learning
- Give the student access to noise-cancelling or noise-reducing headphones to help limit distractions while they are working
- Provide the student with preferential seating (by the teacher, near the door for frequent breaks, away from distractions like the AC, etc.).
- Allow the student to stand at their desk if they want to, or sit on a fitness ball or a wiggle seat.
- Keep groups small for the student (no more than 5 students) during activities to limit impulsive actions at peers and to limit distractions.
- Give directions, tasks, or assignments one at a time to limit overwhelming the student.
- Help boost the student's confidence by allowing them to help another student in a designated area.
- Provide the student with a designated safe place to retreat when they need to self-regulate.
- Provide the student with easy access to sensory or self-regulation tools (chewing gum, fidgets, stress ball, etc.).
- Provide the student with a visual schedule to carry around so they know what comes next in their day.
- Provide the student with movement or sensory activities at least every hour or two, which can include the entire class if desired.
- During assessments, the student can have extended time or take it with no time limit for completion of the test.

- The student may have alternate formats for a test like multiple choice, oral or have someone script for them.
- At lunch, the student can eat in smaller settings with familiar friends or a safe adult.
- At recess, the student may play in a smaller area or have an adult stay with them to help interact with others.
- During specials, or other times of the day when the instructor is not as familiar to the student, they should be made aware of plans to help the child if necessary.
- Homework for the student may have fewer problems on the page to avoid overstimulation.
- Worksheets and homework should have more white spots on the page to limit stress and being overwhelmed.
- Have the teacher give advance notice when homework will be given.
- Allow parents to transcribe for the student when written work is given for homework.
- When the student acts out, view the behavior as a way the student is trying to communicate how they feel so the teacher may prepare a conversation with them instead of punishing them.

TRAUMATIC BRAIN INJURY (TBI)

Example: The student sustained a brain injury when they fell during an athletic event and an external force caused one of the following to their head: bump, blow, jolt, or penetration. The diagnosis of the severity of the head injury for this student, which ranges from mild to severe, is still in progress as they undergo medical testing. If the student is expected to recover, they may not qualify for special education under IDEA. However, a TBI can affect the student's memory, thinking, concentration, physical, and emotional regulation abilities. Accommodations and services will likely be necessary to meet their needs and facilitate their success within the school environment as they are in the process of recovery.

Resources:

- https://www.biausa.org/
- https://www.cdc.gov/traumaticbraininjury/index.html
- https://www.aans.org/Patients/Neurosurgical-Conditions-and-Treatments/Traumatic-Brain-Injury

Accommodations:

- Dimmed classroom lighting
- Establish a designated resting area to be used upon request
- Provide a quiet area for testing and completion of assignments
- Preferential seating located away from possible distractions/loud noises
- Stand within close proximity while speaking to student
- Create clear pathways throughout the classroom free of possible tripping hazards
- Gain the student's attention before speaking (e.g. touching their shoulder/desk, saying their name, etc.)
- Accompany oral instruction/directions with visuals and written information
- Repetition of instruction/directions and monitor for student understanding
- Create alternatives for physical activities
- Use memory aids during instruction (e.g. mnemonics, imagery, acronyms, choral responses, etc.)
- Develop graphic organizers and note outlines for the student to use during lessons
- Provide the student with a written/visual schedule
- Allow the student to record class lessons
- Assist the student with organizing materials
- Select a peer to assist the student (e.g. peer tutor, peer helper, buddy, etc.)
- Extend the student's time to complete assignments, activities, quizzes, and tests
- Provide the student with shortened directions for task completion
- Shorten assignments or divide into smaller components for the student
- Allot time for breaks during task completion and transitions
- Focus grading on content rather than conventions; quality vs. quantity of student work (e.g. no penalties for spelling, handwriting, or grammar errors)
- Create meaningful out of class assignments and make tutoring opportunities available when student is medically unable to attend school
- Monitor and record signs of fatigue, exhaustion, and changes in behavior

- Stay alert for signs of seizure activity and provide staff with proper training for possible emergencies
- Provide strategies for self-advocacy

TUBERCULOSIS

Example: A new student has tested positive for tuberculosis after living in another country with a guardian who has untreated TB. After a CT scan, it was determined that it is active tuberculosis. Although treatment and antibiotics might be required for six to nine months, the student will no longer be contagious after a few weeks. Upon their return to school, it is important that medication ingestion is monitored as well as the student's symptoms during their recovery. Due to frequent medical appointments and their weakened immune system, the tuberculosis has posed challenges regarding the student's learning and social interaction opportunities.

Resources:

- https://www.lung.org/lung-health-and-diseases/lung-disease-lookup/tuberculosis/
- https://www.cdc.gov/tb/default.htm
- https://www.mayoclinic.org/diseases-conditions/tuberculosis/symptoms-causes/syc-20351250

Accommodations:

- Establish a designated resting area to be used by the student upon request
- Create a spreadsheet to record the daily cleaning of the classroom and materials to reduce dust particles that may further increase coughing (include janitor); think about involving students by making classroom cleaning a weekly job
- Offer tutoring opportunities (e.g. peer tutor, home tutor, etc.) to the student
- Allow the student to have extended time to work on assignments, activities, quizzes, and tests
- Plan for meaningful out of class assignments (Do not plan make-up just as an attempt to, "play catch-up")
- If the student cannot attend school for a period of time, meet with the school social worker to inquire about the provision of a laptop for academic assignments
- Allot time for breaks during instruction and transitions for the student
- Shorten assignments for the student, or break-down into smaller components
- Monitor and record data on weakness, fatigue, or other exhibited signs and symptoms
- Create a signal with the student that they can use to inform others that they need to go to the nurse
- Inform staff about the signs and symptoms of Tuberculosis to increase awareness
- If necessary and with the consent of guardians, discuss Tuberculosis with students (e.g. what it is, signs and symptoms, treatment, etc.)
- Train students on proper hand washing and how to cough/sneeze into their elbow to prevent germs from spreading in the air
- Train staff on monitoring medication distribution and inform them on the medication to increase awareness for possible symptoms
- Understand and familiarize yourself with potential side effects of the medication the student is prescribed
- Create a daily communication system (e.g. a journal) between staff and the student's guardians to stay informed about how they were feeling the previous night, school day, or weekend as well as possible changes in their health care needs

- Frequently meet with the student's family to discuss academic progress and help with academic growth while the student is not in school
- Have student self-assess how they are physically feeling throughout the day (e.g. smiley face, no smile, or frown that is colored in during the morning, lunch, and afternoon; can include space for specific descriptors of symptoms)
- Frequently meet with child's family to stay informed on student's condition
- Create a transition plan to promote student comfort following their reentry in school
- Continue to share classroom activities and plans with the student's family to maintain partnership and engage in shared decision-making
- Create a standard form of communication between the school and home so that no messages or information are lost or overlooked
- Provide the student's family with resources on medical information, vaccination, treatment, etc.
- Implement a pen-pal system with students within the classroom, school, or community to create opportunities for the child to engage in social interactions with peers/others
- If student is not able to physically return to school, plan with the student's family to determine times of the day where the student can be present in the class through digital platforms such as Skype or FaceTime
- Arrange for hospital/home visits to promote interaction between the teacher and the student to help ease the transition back into the classroom.

VISUAL IMPAIRMENT

Example: A student has a progressive medical disorder, which results in increasing loss of visual acuity. Normal visual acuity is 20/20, which denotes that objects seen from a distance of 20 feet can be seen with accuracy expected for that distance. A reduction in visual acuity, for this student now requires both enhanced lighting and enlarged print materials in order to read.

Resources:

- https://www.teachingvisuallyimpaired.com/accommodations--modifications.html
- https://kidshealth.org/en/parents/vision-factsheet.html
- https://sites.allegheny.edu/disabilityservices/students-who-are-blind-or-have-a-visual-impairment/

Accommodations:

- Provide preferential seating for all assemblies, films, and demonstrations in which the student attends.
- The student can move about the room as needed to see the information that is being taught away from the student's desk.
- Allow the student to explore the room during the first week and when the room is rearranged. Adapting the physical environment to fit the needs of all students in the classroom.
- Ensure all doors, storage areas, or cabinets are either completely open or closed at all times
- Procedures need to be created for the student and others to follow in the event of emergencies, such as the need to evacuate the school building.
- Copies of text/reading materials for adaptation readily available for student to have at his/her desk.
- The contrast of the material being presented on a white-board, smart board, overhead projector, etc. should be presented to the student in high contrast color.
- Computer, laptop, iPad, or other personal electronic device used to aid in instruction delivery or for personal use to complete schoolwork, should be at student's eye level and tilted to avoid a glare.
- Extended time and/or shortened amount of time to complete assignments due to visual fatigue. Including standardized tests (i.e., state standardized tests, SAT)
- Clutter free workspace, (i.e. desk) and limit the visual clutter.
- Lay out materials and show the student where the materials are located on his/her desk or working area. This allows for the student to find the materials he/she needs at a faster rate.

- Allow students to use modified writing tools (bold marker, 20/20 pen, mechanical pencil, or other unique writing tool) to complete assignments.
- Allow for early dismissal from class to get to the next class on time.
- Provide single sided papers to the student
- Darken or highlight margins or lines on paper if dark lined writing paper is not available.
- Provide a supplementary light source (i.e. desk lamps)
- Provide access to any magnifying devices for viewing or completing class tasks (i.e. magnifiers, monocular glass, closed-circuit TV)
- Provide a desktop slant board or three ring binder.
- Provide a sun visor or light shield to block light or reduce glare
- Provide the student with enlarged print materials; textbooks, workbooks, worksheets. New: Large print textbooks that are used for instruction are enlarged as needed for the student
- Print should be put in a font that can be easily read by the student (i.e. Arial font)
- Provide the student with books on tape (i.e. audiobooks) or an audiotape recorder, tapes and organizational location (headphones if needed)
- Oral instead of written tests if the student is comfortable with performing oral test
- Be clear when stating directions, provide a copy of directions to the student in a format that can be easily read by the student.
- Standardized tests (i.e., state standardized tests, SAT) in large print or Braille
- Provide raised (tactile) maps, illustrations, and diagrams for the student
- Materials are provided in an electronic format to be accessed with a computer or electronic note taker. Ensuring that the print on the screen is enlarged and easy to read by the student.
- Provide student with your master copy so he or she can read and/or copy from it
- Avoid having students work in their own shadow or facing the light
- A classmate takes notes of material written on the board and provides a copy to the student with visual impairments.
- Explicit language is used when giving directions, such as “pass your papers to the left,” instead of “over there”