

Reasonable Adjustments Guidance

Table of Contents

<i>Reasonable Adjustments Guidance</i>	1
<i>Definitions</i>	3
<i>Four categories of Reasonable Adjustment</i>	4
<i>Reasonable adjustments - Examples</i>	5
<i>Competence Standards</i>	6
<i>Policy version and owner</i>	8
<i>Regulatory references</i>	8

Reasonable Adjustments Guidance

Definitions

Disability – Section 6 of the Equality Act 2010 (the ACT) specifies that: **a person has a disability if they have a physical or mental impairment which has a long term and substantial adverse effect on their ability to carry out normal day-to-day activities.**

'Long term' means that the impairment has lasted or is likely to last (may well last) for 12 months or more.

'Substantial' means more than minor or trivial. Case law has established that 'day-to-day' includes sitting examinations, which are not regarded as a specialised activity. Unseen impairments are also covered (i.e. mental ill health, and conditions such as diabetes and epilepsy). Cancer, HIV infection and multiple sclerosis are considered disabilities under the Act from the point of diagnosis. Progressive conditions (such as lupus, multiple sclerosis) and fluctuating conditions (such as CFS/ ME, chronic pain) and conditions which may reoccur (such as depression) will amount to disabilities in most circumstances.

Disabled students may include those with:

- Specific learning difficulties, such as dyslexia, dyspraxia, attention deficit (hyperactivity) disorder (AD(H)D)
- Mental health difficulties, such as depression, anxiety, eating disorders, obsessive compulsive disorder (OCD), bipolar affective disorder, psychosis
- Autistic spectrum conditions, such as Asperger syndrome, high functioning or atypical autism
- Sensory impairments, such as a visual or hearing impairment, blindness, deafness (with or without British Sign Language as a first or preferred language)
- Mobility difficulties, such as para- and quadriplegia, scoliosis, chronic pain affecting mobility
- Long term health conditions, such as arthritis, cystic fibrosis, narcolepsy, repetitive strain injury (RSI), cancer, HIV, hepatitis, multiple sclerosis, Crohn's disease, chronic pain, lupus, chronic fatigue syndrome/ myalgic encephalopathy (CFS/ ME)

Students with any of the conditions listed above are regarded as disabled because they meet the definition of disability under the Act. This list is not exhaustive. A person with a long-term health condition or mental health difficulty continues to be regarded as disabled despite fluctuations in the severity of their condition or, in the case of cancer, after recovery.

Four categories of Reasonable Adjustment

Category of impairment	Type of impairment	Example arrangements
Cognition and learning needs	E.g. General and/or Specific Learning Difficulties (such as Dyscalculia and Dyslexia)	<ul style="list-style-type: none"> • supervised rest breaks • extra time • a computer reader or a reader • read aloud or an examination • reading pen • a scribe • a word processor • a prompter • a practical assistant • coloured overlays • coloured/enlarged papers • modified language papers.
Communication and interaction needs	E.g. Autistic Spectrum Disorder (ASD), Speech, Language and Communication Needs (SLCN)	<ul style="list-style-type: none"> • supervised rest breaks • extra time • a computer reader or a reader • read aloud or an examination • reading pen • a scribe • a word processor • modified language papers.
Sensory and physical needs	E.g. Hearing Impairment (HI), Multi-Sensory Impairment (MSI), Physical Disability (PD), Vision Impairment (VI)	<ul style="list-style-type: none"> • supervised rest breaks • extra time • a computer reader or a reader • read aloud or an examination • reading pen • a scribe • a word processor • a live speaker • a Communication Professional • a practical assistant • Braille papers, modified • enlarged and/or modified • language papers.
Social, mental and emotional needs	E.g. Attention Deficit Disorder (ADD), Attention Deficit Hyperactivity Disorder (ADHD), Mental Health Conditions	<ul style="list-style-type: none"> • supervised rest breaks • extra time • a computer reader or a reader • read aloud or an examination • reading pen • a scribe • a word processor • a prompter • alternative site arrangement • separate invigilation within the centre.

Reasonable adjustments - Examples

Organisations have a duty under the Act to make reasonable adjustments for students in relation to:

- A provision, criterion or practice – including assessment practices
- Physical features – including access to assessment venues
- Auxiliary aids – including exam support such as hearing loops, exam scripts in large print or Braille, and human support such as readers, scribes and sign language interpreters

Examples of reasonable adjustments to the assessment of disabled students

It is important that adjustments meet the needs of the individual student rather than providing a generic response to a class or type of disability. Once implemented, adjustments do not provide automatic precedents for other students, but may be taken into account when considering what would be appropriate in a different case.

The following list is not exhaustive – neither in terms of the kinds of adjustments that may be required nor the types of students who may require them.

Extra time is often recommended for students with some kind of processing difficulty. This can be the result of a specific learning difficulty (such as dyslexia), a mental health difficulty (such as depression), or an autism spectrum condition (such as Asperger syndrome). It is also recommended for students with fatigue conditions (such as CFS/ ME) and for students who are prescribed medication which may slow cognitive processing (such as some medications for hyperthyroid conditions, depression or chronic pain).

Extra time is often recommended at 25% of the prescribed examination time but may range up to 100% – for example, to allow a blind student to complete an exam using technological aids.

A **scribe** is recommended when a student can neither write nor type at a rate which would not significantly disadvantage them in relation to their peers.

An **exam paper in an alternative format** may be recommended for a student with a visual impairment, for example, an exam paper in large print or in Braille. A student with a particular dyslexic profile may be recommended an exam paper on a particular colour of paper or a reader to read exam questions to them aloud.

A student with anxiety might be recommended a **smaller venue**. This might also be recommended for a student with an attention deficit disorder. A sole venue may be

recommended for a student who needs to mobilise (e.g., because of chronic pain) or read exam questions aloud or 'think aloud' (due to their particular dyslexic profile).

A student may be recommended a **scheduling adjustment**. This might include a recommendation not to have more than one exam per day and/ or to have a least a one-day

break between exams, and/ or not to be scheduled for early AM or late PM exams. This may be recommended for students with fatigue conditions, long-term illnesses (such as cancer or the after-effects of cancer) or mental health difficulties -- or for students who require higher percentages of extra time (more than 25%) and/ or larger allowances for stop-the-clock rest breaks.

An **alternative form or time-course of examination** may be recommended where a student cannot display their learning in a traditional, speeded, timed assessment. Alternative forms may include:

- submitted (take home) work, a viva or a submitted portfolio in place of speeded, timed assessments
- a series of shorter unseen papers in place of one longer paper, thus allowing a student to be assessed in the traditional way but over a longer time period

Where an alternative way of demonstrating learning is permitted, the expectation is that it will be equally rigorous in comparison to the assessment undertaken by a student's non-disabled peers. It must be as capable of demonstrating that the student has met the requisite learning outcomes as the original form of assessment.

Examples of anticipatory adjustments to the assessment of disabled students

- Scheduling exams in venues with level/ lift access and easy access to accessible toilets
- Scheduling exams such that students do not have more than one exam per day and have a one-day break between exams
- Where possible, offering a range of assessment options in addition to speeded, timed exams

Competence Standards

Competence standards – reasonable adjustments are implemented to prevent disabled students from experiencing substantial disadvantage and hence to support such students to achieve their potential. However, in defining reasonableness, institutions are not required to compromise competence standards.

Within the Act, competence standards are defined as: **the academic, medical or other standard(s) applied for the purpose of determining whether or not a person has a particular level of competence or ability.**

These are the characteristics of a genuine competence standard:

1. Its primary purpose is to determine whether or not a student has achieved a particular level of competence or ability
2. It must be specific to an individual course
3. It must be relevant to the course
4. It applies equally to all students, not just to disabled students
5. It must not directly discriminate against disabled students
6. It must be a proportionate means of achieving a legitimate aim

The 'proportionate' and 'legitimate' elements of this guidance refer to such considerations as:

- There must be a pressing need that supports the aim
- The application of the competence standard must be causally related to achieving the aim
- There is no other way to achieve the aim that has a less detrimental effect on the rights of disabled people

While genuine competence standards are exempt from the obligation to make reasonable adjustments, the method by which students demonstrate their attainment of a learning outcome is not itself a competence standard (although there are exceptions, such as in the case of a musical performance). Thus, requiring all candidates to complete a written exam within three hours would lead to indirect discrimination and discrimination arising from disability against people with fatigue conditions, physical impairments, or specific learning disabilities unless it could be shown that the three-hour time limit meets all the characteristics of a genuine competence standard (see 1.-6., above). This would be unlikely in most cases.

It will generally be difficult to demonstrate that the ability to make a written, time-constrained response is an integral and irreplaceable component of any standards applied in order to determine whether a student has achieved the required level of competence or ability. Failure to make adjustments to the mode of assessment for disabled students could therefore give rise to claims of discrimination, including a failure to make reasonable adjustments. In contrast, a method of assessment which required candidates to demonstrate synoptic knowledge of material studied over the course of one or two years is likely to be regarded as an acceptable competence standard. However, a method of assessing this knowledge which requires high levels of stamina in order to complete a number of papers within a limited time scale would not be justifiable.

Examples of what would and would not be likely to be considered competence standards

The requirement for students to demonstrate a particular standard of knowledge of certain areas of tax law in order to pass the module is a competence standard.

It matches all the characteristics of a genuine competence standard (see 1.-6., above).

In contrast:

The requirement for students to demonstrate a particular standard of knowledge of certain areas of tax law **within a certain period of time** in order to pass the module is likely not to be a competence standard.

This is because the competence being tested is not the ability to do something within a limited time period.

Policy version and owner

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Regulatory references

Ofqual General Conditions of Recognition
Condition G6: Arrangements for Reasonable Adjustments