DOCUMENT RESUME

ED 413 001   JC 970 557

AUTHOR   Armstrong, William B.; Lewis, Mary; Neault, Lynn C.
TITLE   Americans with Disabilities Act Continuing Education
               Self-Evaluation Study.
INSTITUTION   San Diego Community Coll. District, CA. Research and
               Planning.
PUB DATE   1997-04-00
NOTE   41p.
PUB TYPE   Reports - Evaluative (142)
EDRS PRICE   MF01/PC02 Plus Postage.
DESCRIPTORS   *Accessibility (For Disabled); Assistive Devices (For
               Disabled); Community Colleges; *Compliance (Legal);
               Continuing Education; Disabilities; Educational Resources;
               Faculty Development; Focus Groups; Institutional Evaluation;
               *Self Evaluation (Groups); Staff Development; Student
               Attitudes; Teacher Attitudes; Two Year Colleges
IDENTIFIERS   *Americans with Disabilities Act 1990; San Diego Community
               College District CA

ABSTRACT
               In 1997, the San Diego Community College District conducted
a self-evaluation study of their continuing education programs to assess the
program's compliance with the Americans with Disabilities Act (ADA). Ten
focus groups revealed their knowledge and views of the ADA. Students cited
the availability of special instructional accommodations, but noted the lack
of emergency telecommunication devices for the deaf (TDD) services.
Administrators felt that an ADA training session was needed. They cited some
necessary improvements of facilities, though most felt that the architecture
and programs were accessible. Staff held divergent views on the status of ADA
implementation, though there was a general consensus that there was a lack of
campus space, and a need for a campus review of access for the disabled. The
Disabled Student Programs and Services Department Staff acknowledged
instructional accommodations, but cited the need for an emergency evacuation
procedure. Faculty and Special Admit Programs, and Business, Facilities, and
Operations staff acknowledged architectural and program accessibility, but
felt that faculty would find ADA training helpful. Although most staff and
faculty believed that accessibility to education and services was
implemented, vital areas such as information, training, and emergency
services needed improvement. (YKH)

SAN DIEGO COMMUNITY COLLEGE DISTRICT

AMERICANS WITH DISABILITES ACT (ADA)

SELF-EVALUATION STUDY

(CONTINUING EDUCATION FINDINGS)

APRIL 1997

San Diego Community College District
Americans with Disabilities Act
Continuing Education Self-Evaluation Study

Prepared by:

William B. Armstrong
SDCCD Institutional Research

Mary Lewis
SDCCD Disabled Students
Programs & Services

Lynn C. Neault
SDCCD Assistant
Chancellor, Student
Services

April, 1997

San Diego Community College District

Americans with Disabilities Act

Continuing Education Self-Evaluation Study

Background

The Americans with Disabilities Act of 1990 (ADA) is a comprehensive civil rights law that

prohibits discrimination against qualified individuals with disabilities in the areas of employment, public

accommodations, state and local government services, transportation and telecommunications. Title II,

Subtitle A, became effective on January 26, 1992, and all programs, activities, and services of public

institutions are subject to its provisions. Under Title II, a public agency or institution must make its

programs, activities, and services accessible and useable for individuals with disabilities. The only

exception to these fundamental provisions of usability and accessibility is if complying with these

mandates ...*would result in a fundamental alteration in the nature of its programs, activities, or services,*

or would result in undue financial and administrative burdens.

As a public educational institution, the San Diego Community College District (SDCCD) is

subject to the provisions of the ADA and has taken steps since its passage to ensure its implementation.

The SDCCD has sponsored workshops for SDCCD staff to learn about the background, goals, and

provisions of the ADA and its implications for the SDCCD. The SDCCD also has central office support

for ADA, affirmative action compliance at the centers, and liaisons for individuals with complaints to

SDCCD staff. They are also available to help interpret and ensure compliance with the provisions of the

ADA at the campus and center level.

Purpose

The regulations governing the implementation of the ADA are comprehensive with respect to how

affected entities are to ensure access, both architectural and programmatic, for individuals with disabilities.

Beyond identifying and remediating architectural barriers, the ADA has other provisions that may be more complex and difficult to measure. For example, the anti-discrimination provisions of the Act are comprehensive and far-reaching. Barriers to full participation in programs and services are viewed in much the same way as are architectural barriers to access. As with architectural barriers, public institutions and agencies are to identify and remove all non-essential barriers or impediments to ensure full participation in programs and services. Section 35.105 of the US Department of Justice's regulation implementing Title II requires all affected institutions to conduct an appraisal or self-evaluation of local compliance with the anti-discrimination features of the Act. For example, one of the intended outcomes of this legislation and the implementing regulations was to raise both the awareness of access and opportunities for equal participation by individuals with disabilities. Affected entities were also instructed to take steps to ensure that awareness is demonstrated by staff who potentially work with individuals with disabilities in the center. This need to both inform and evaluate the awareness of ADA compliance has led to the focus group interview approach taken here in the SDCCD. The activity of those participating in the focus group discussion coupled with the pre-focus group survey and the discussion during the group meeting enables participants to evaluate the level of their own awareness and learn from others. This approach also allows evaluators to determine the effectiveness of efforts taken to improve awareness and knowledge of relevant law and approaches to assisting those with disabilities to access programs and services. In meetings held between the Assistant Chancellor for Student Services, the Manager of DSP&S, and the Research Director, the focus group approach emerged as the most effective means to both educate center and district staff as well as evaluate the level of ADA awareness.

Section 35.105 of the U.S. Department of Justice's regulations implementing Title II requires all public entities to conduct a self-evaluation, to be completed by January 26, 1995. However, the law also states that public entities are liable for any discriminatory policies or practices in effect after January 26, 1992. As a result, *any* discriminatory practices or policies identified by the self-evaluation process should be modified immediately. Until this work was undertaken to identify potential program and non-architectural barriers to full participation in SDCCD programs and services, little systematic effort had been expended to gather this information other than through the complaint process. This effort should be

viewed as both complying with federal law, and as preventative work to identify practices or policies that fail to provide equitable access for individuals with disabilities. Prior to this work, there has not been a systematic effort to evaluate the effectiveness of the SDCCD ADA awareness efforts. This report, while not exhaustive, is therefore a significant first step in both compliance and in evaluating our efforts at education and staff development.

The ADA defines a person as having a disability when they:

1.   Have a physical or mental impairment that substantially limits one or more major life activities,

2.   Have a record of a physical or mental impairment that substantially limited one or more of the individual's major life activities, or mental impairment that substantially limited one or more of the individual's major life activities, or,

3.   Are regarded as having such an impairment, whether they have the impairment or not.

Thus, the term disability covers a wide range of conditions and includes mobility, vision, hearing or speech impairments, learning disabilities, chronic health conditions, emotional illnesses, HIV disease (whether symptomatic or asymptomatic) and a history of drug addiction.

A qualified individual with a disability is someone who meets the eligibility requirements for participation in SDCCD disabled programs and services. The person falls under this definition with or without SDCCD's efforts to modify rules, policies, regulations, remove architectural, communication, or transportation barriers, or provide auxiliary aids and services.

Through this self-evaluation, the SDCCD centers must:

1.   Evaluate current services, policies and practices, and identify those that do not meet Title II requirements, and

2.   Specify what modifications will be made to identified services, policies or practices that deny or limit participation of individuals with disabilities in their educational programs or activities. Areas that need careful examination include, but are not limited to: general policies and practices, communications, auxiliary aids, eligibility and admission requirements, evacuation from buildings,

employment, building and construction policies, and architectural barriers.

Physical Access

Accessibility for individuals with disabilities is often viewed solely as architectural access. The

ADA, however, goes beyond this concept to require that all services, programs, and activities are

accessible. An extensive review of architectural barriers to program accessibility in the SDCCD was

completed on February 1, 1993. The campus ADA Transition Plan can be found in the Business or

Facilities Office. The intent of this review was to identify the major physical barriers to program access.

Participants were asked to identify other impediments to access in Section I of the ADA Compliance

Survey in preparation for the focus group discussions.

Prior to meeting in the focus group activity, individuals selected for participation were sent a

survey covering the intended discussion of the focus group. Respondents were asked to complete the

survey prior to attending the focus group. This was done to help direct discussion and provide a review, or

for some respondents, to give a first look at the terms, issues, and guidelines of the ADA as it applies to

educational institutions. It was the function of this survey to cover the programmatic aspects of

accessibility. For the sake of brevity, the term "program" will be used in this report as inclusive of the

phrase, "programs, activities, and services." The survey was designed to provide a framework for the

conduct of the focus groups required for ADA self-evaluation.

Ten focus groups were identified at each center to complete the self-evaluation survey prior to

their participation in the group. Individuals selected for participation in the focus group were chosen by

the center deans and the continuing education president. Participants were asked to first complete the self-

evaluation surveys and bring their responses to the focus group meeting. Participants were given the

opportunity to change, add, or delete any responses during the focus group discussions. The surveys were

thus intended and designed to make the focus group discussion more directed and informative.

Respondents were chosen according to their membership or affiliation in a particular group.

Respondents were chosen to participate in one of ten focus groups. Groups were formed comprised of:

1.   Students

2.   Students with disabilities

3.   Academic and Student Services Managers

4.   Classified Staff

5.   Student Services Staff

6.   Disabled Services Program and Services Staff

7.   Faculty (including counselors and librarians)

8.   Business Office and Facilities Staff

9.   Special Admit Program Representatives

10.   Districtwide Group for 504 Site Compliance

These ten groups were convened during late April and early May, 1997. In certain instances, questionnaires were received from some participants who did not come to the group interviews. When the number of interviewees from a particular group was small, their observations were combined to strengthen the reliability of the findings. The following discussion summarizes the observations of each group organized by survey question. Where survey questions are inapplicable to a particular group, these questions were omitted from the survey and subsequent group interview.

Continuing Education Findings

Part I: Access to Programs

Section 35.150 of the ADA Title II regulations requires that each center, program, activity, or service, when viewed in its entirety, be readily accessible to and usable by qualified individuals with disabilities. The center can provide program access by reassigning services from inaccessible to accessible locations by providing the following: auxiliary aids (e.g., note takers, qualified sign language interpreters and readers, taped texts, assisting listening devices, and large print, Braille, or ASCII diskette materials);

redesigning equipment; modifying policies; providing accessible vehicles; altering existing facilities to remove architectural barriers; and/ or by constructing new accessible facilities.

Student and Disabled Student Focus Group

In April, 1997 several disabled and non-disabled students were asked to participate in 90 minute focus groups. Six students with disabilities and five non-disabled students participated in the focus group meetings and survey completions. Because of the similarities in responses for both student groupings, their comments were combined to strengthen the reliability of the findings. The following discussion briefly summarizes the findings of the student focus group interviews and combines the information received from both student groupings.

Access to Programs

Students did appear to be somewhat aware of how many students and faculty with disabilities had identified themselves to the particular program they were involved in. The disabled students stated that they were aware of individuals with disabilities in need of special services but had not yet identified themselves. Neither grouping could identify any faculty or staff members in need of special services who had not yet identified themselves. The Disabled Student Programs and Services (DSP&S) students were able to identify modifications made to policies or programs for individuals with disabilities since January 26, 1992, which is noted in the legislation and regulations as a point of reference to note program changes or modifications. These changes included adapted computers, American Sign Language (ASL) interpreters, closed circuit TV, and classroom aides for deaf students. The non-disabled students also identified a special class in ceramics for individuals with disabilities.

There was a general consensus stated many times and in many different ways that additional information on the ADA as it pertains to non-structural barriers and accommodations is sorely needed. This was a consistent theme throughout the other group respondents as well. Although not directly stated, it appears that many in the focus groups believed the provision of ADA information in the hands of decision makers will make the argument for additional funding and support of DSP&S more cogent and

6

forceful. For example, there was a perceived need for additional interpreters. Many cited the need to reduce the ratio of interpreters to individuals with disabilities. Many of the student focus group respondents stressed the need for additional classroom aides and auxiliaries. These perceived needs inevitably involve questions of funding allocation. To create more effective demand and to give voice to their needs, many felt that timely, up-to-date, and understandable information on the ADA needs to be provided.

Continuing Education students indicated awareness of some policies or practices that needed modification to include more individuals with disabilities in various Continuing Education programs and services. For example, some cited the provision of auxiliary aides or accommodations to individuals with disabilities in particular programs at Continuing Education. In the instructional area, students cited the availability of interpreters, closed circuit television, and classroom aides. However, as noted above, many thought the availability of such instructional resources for individuals with disabilities was inadequate at current levels.

There was some disagreement between the student groupings regarding the availability of emergency telephone services. Generally, all agreed that emergency telephone services were provided by their respective programs in Continuing Education, but were mixed in their knowledge concerning direct TDD and modem access to emergency services for individuals with disabilities. Some were aware while others were not. None of the DSP&S students indicated that there was direct TDD and modem access provided to emergency services. Interestingly, the non-disabled student grouping indicated that direct TDD and modem access to emergency services could be found in some classrooms, and the DSP&S counseling office. This disagreement between students merits investigation given the importance of availability and access to emergency telephone services. There seems to be a need here for such a service, or the information concerning its availability needs to be circulated.

Additional TDD's were called for by the DSP&S student grouping. Where the TDD's were available, some suggested a clear posting of the availability of this service. The availability of TDD's was thought to be inconsistent between campuses and centers. Some students thought they were available, while at some centers, none were thought to be available. Again, the lack of consensus over the

availability of emergency telephone services to individuals with disabilities militates strongly for either the service or information regarding the availability of the TDD, or modem services.

The most cogent recommendations from these findings are for local Continuing Education staff to make certain as many are informed as possible about the availability (or lack thereof) of these emergency telephone services via TDD or modem.

There were also mixed perceptions about the architectural accessibility of all programs at Continuing Education. A couple of the students either did not know or stated that not all programs were architecturally accessible and questioned if potential users were informed of the accessibility of all programs, events (particularly those off-campus), and services. Some noted specific areas where accommodations or modifications were needed. For example a ramp was requested to provide accessibility from the cafeteria to the patio. A ramp was also cited as a need in the bookstore, particularly for emergency evacuation. Some off-campus events were cited as being inaccessible, such as events held in locations in historically significant sites or buildings without ramps where modifications cannot be reasonably made.

The majority of students did state that campus events were programmatic and accessible through the provision of interpreters, captioned video, assisting listening devices, large print, and Braille handouts or programs. One student cited difficulties in obtaining closed caption video at some events, although no specific examples were given.

As was found in prior focus groups at other SDCCD locations, nearly everyone was aware of how to file an unlawful discrimination complaint based on disability against the SDCCD. This finding cut across all groups, from managers, faculty, staff and students. However, some suggested that more efforts should be made to advise students of their rights to file unlawful discrimination complaints. Suggestions included sending letters to individuals with disabilities, flyers, handouts, and other formats.

Some of the interviewees were aware of planning or advisory boards on which individuals with disabilities serve. However, most did not know this information.

Students were aware of and able to list some smaller architectural features (those not apt to be found in the Transition Plan) that limited access to programs. One area mentioned for improvement were

the restrooms on the first floor and the cafeteria which have heavy doors. Students were split on the perception that following admission, inquiries about student's disability were collected only on a voluntary basis. Most did not know if this information was collected voluntarily, while one respondent thought that inquiries about an individual's disability status were collected in a non-voluntary way.

Classroom and Curriculum

Students were divided on the question regarding the use of tape recorders in the courses they have taken. The disabled students did however indicate that tape recorders were available and could be used with the instructor's permission. They were also unclear as to the availability of Braille note taking devices. There was more agreement that attendants, note takers and sign language interpreters were available and provided for individuals with disabilities. However non-disabled students were not as aware of these services. According to the students, guide dogs were allowed on campus and in classrooms and additional accommodations were made for students needing modified exams or tests in class. Students were not aware that certain courses could be substituted in the event that students with disabilities could not be accommodated.

The ADA also requires that individuals with disabilities are provided reasonable accommodation when registering for courses. The registration process for Continuing Education generally is conducted in the classroom. Both student groupings observed that individuals with disabilities requiring assistance with registration are often helped by classroom teachers or other members of the class. None cited the registration process as limiting access for individuals with disabilities.

Computers and Information Technology

In this area of the interview, respondents were asked about access to information for individuals with disabilities. These questions focused on the availability of adaptive technology to facilitate access to computer hardware and software. These adaptations included print enlargers, speech output systems, document scanners and Braille printers. In this section of the interviews, environmental adaptations refer to physical access to the computing facility and within the facility. This may include directional signs to

indicate a computer lab with adaptive equipment that provides wheelchair access with unlocked, accessible doors between the building entrance and the lab, accessible rest rooms, and adaptive equipment in labs that are open a maximum number of hours.

There was a general lack of knowledge regarding the accessibility of computing labs and classrooms at the campus. Only one student claimed to be aware of inaccessible computing labs or classrooms. Most were also not aware of the availability of alternate, accessible locations in the event that one site or lab was inaccessible. Only one student was aware of alternate locations. Practically none of the students were aware of the availability of adaptive technology in computing. Further, only two students believed that adaptive technology was available during the same times and had the same capabilities of the non-adapted computers. The vast majority of student interviewees from both groupings were unaware of the availability of adapted computers in the same room as non-adapted computers. Only one student indicated that both types of computers could be found in the same location. There was a general lack of knowledge on this subject displayed by both groups. It is not clear if this is due to the limited use of computers by these two groups of interviewees. What seems clearer is that there is a general lack of knowledge in this area by those non-disabled and disabled students interviewed and those that completed surveys.

Within the computing lab, accessibility of technology can be determined by the availability of computer tables that are wheelchair accessible, keyboards positioned within reach of the user, and conveniently placed printers. Respondents were asked to indicate each accommodation currently available on campus. The computer adaptations for individuals with disabilities that were cited by the students included; labels giving priority use for those with disabilities, detachable keyboards and monitors, accessible on-off switches, raised dot indicators on keyboards, and accessible printers at table height. What is interesting from the foregoing observations of the students is that while they were able to cite several examples of available adaptive technology within the computing rooms or labs, practically none displayed any knowledge of the availability of adaptive technology in various labs or rooms. Students were also not aware whether or not the adapted computers were in the same room as non-adapted computers.

General Comments

The level of knowledge displayed by both student groupings varied widely according to the questions asked. Some were highly aware of accessibility of various programs, services, and technologies, while others knew very little. Some interviewees noted that this self-evaluation process told them more about the ADA than they had previously discovered through regular campus channels. There were some differences in the level and amount of knowledge concerning programmatic access between the disabled respondent and non-disabled students. Most were aware that a student could file a discrimination complaint. Practically no one knew whether individuals with disabilities serve on governing or leadership bodies in Continuing Education. The process used for registration is conducted in each classroom, and none of the interviewees cited that the registration process inhibited access by a broad array of students. None of the students were aware of any special telephone numbers to provide assistance to individuals with disabilities. Several students mentioned the lack of emergency TDD services. This was a consistent theme from both groupings. Students cited the availability of special instructional accommodations such as tape recorders, interpreters, and adaptive computer facilities. One disabled student indicated that the doors to the first floor rest room and the cafeteria were difficult to open and required a push button. Some indicated the need for a ramp that would provide accessibility from the cafeteria to the patio. A ramp was also cited as a need in the bookstore, particularly for emergency evacuation.

Administrative Interview

During the final week of April 1997, academic and student services managers and department heads from Continuing Education were asked to participate in separate group interviews to determine ADA compliance and awareness. Of the six invitees from the Student Services department head group, two participated in the meeting while three of the seven invitees from the academic and student services managers' group were able to attend. One respondent, unable to attend, completed and submitted a questionnaire for inclusion in this report. The following summarizes the responses to the interview questions for the academic and student services managers and department heads.

Access to Programs

Administrators were generally aware of the number of students with disabilities in their particular program and were also aware of individuals with disabilities who had not yet identified themselves as having some sort of disability. These unidentified individuals with disabilities included faculty, staff, and students.

Participants were asked to indicate any modifications made to particular program policies and practices to increase accessibility for individuals with disabilities. Participants indicated that class meetings have been reassigned or relocated to a first floor location. Certain classrooms have been made wheelchair accessible. A ramp was installed at an off-campus location. Work tables in sewing classes were raised or modified to accommodate students. Participants also cited some work in progress such as an elevator under construction at the Career Center.

The interviewees stated that the programs at Continuing Education provided auxiliary aids and accommodations to individuals with disabilities. There were several examples cited. Among them were qualified sign language interpreters, special equipment available from the SDCCD offices, provisions for learning disabled students taking the GED test, disabled parking spaces, an elevator, improved rest rooms, and referral to DSP&S for any accommodations or requests when such needs arise.

The interviewees cited some areas as needing modification to provide access to individuals with disabilities. These included more elevators, particularly in the buildings leased or rented by Continuing Education, more TDD's, and a wheelchair van for use on field trips by Continuing Education instructors. Many anticipated that the new Mid-City Continuing Education center will have improved access for individuals with disabilities.

The interviewees indicated that there will be continued steps taken to ensure that all faculty and staff involved in the instructional programs at Continuing Education are informed periodically of ADA requirements. This will be accomplished through dissemination and publication of information regarding ADA requirements and the responsibilities and rights of faculty, staff, and students. This will take place in

meetings such as the report day activities. Some suggested that ADA information needs to be provided in greater detail and more frequently. The faculty handbooks were an example of how greater amounts and more detailed information could be provided. Some cited an inability or lack of training in how to recognize individuals with disabilities, particularly those with learning disabilities. Access to information is also provided by the DSP&S office.

The respondents indicated that there are no TDD services for students needing telephone access at the Continuing Education Mid-City center. Many cited reliance on the California Relay service. In the area of emergency telephone services for individuals with disabilities, the respondents indicated that a lack of TDD telephone services at Mid-City also meant that no emergency services were available in alternate technologies. No modem or TTY access is provided by the program to emergency services. Many suggested that TDD's are needed at each site and should be purchased. The lack of availability of TDD emergency services was cited as a serious problem by several interviewees.

There were mixed perceptions on the provision that public notices, consent forms, announcements, and other communications are readily available in accessible formats such as Braille, large print, ASCII diskette, or tape recorded. Most respondents did not believe such communications were made accessible in these formats. One respondent believed that the Continuing Education class schedule needed to be produced in alternate formats upon request. Some suggested a Braille version or a class schedule on the Internet. Only one respondent stated definitively that such formats were available. Most indicated that they felt that such formats and communications needed to come from the SDCCD central offices.

ADA Section II-8, 2000 requires a review to ensure that disabled individuals are not portrayed in an offensive or demeaning manner. One respondent indicated that a comprehensive review had been conducted that examined the portrayal of individuals with disabilities in written and audio-visual materials. Others said that to their knowledge, no such examination had been conducted. No steps were identified as to how to begin such a review or who should conduct it. The central ADA compliance office was noted by some respondents as a place to begin such a comprehensive review.

The interviewee stated that special programs and social and entertainment events at Continuing Education were architecturally accessible and that provisions were made upon request to make special

programming accessible to individuals with disabilities. For example sign language interpreters are available upon request to assist the hearing impaired.

Individuals with disabilities are often not able to carry what is considered a full-time load. The respondents indicated that there were no certain programs available only to full-time students in Continuing Education.

It was not clear from these interviews if emergency evacuation procedures for individuals with disabilities are available and reviewed periodically. Respondents indicated that individuals who used wheelchairs only attend classes on the first floor which has a ramp for rapid egress in case of emergency. Some respondents also noted that emergency egress routes are posted on all doors in the building. Fire drills are conducted on regularly scheduled basis. This respondent suggested that a good plan for the future would be to work with the ADA compliance office to develop an evacuation procedure and publish the results to all staff and faculty.

Nearly all respondents indicated that faculty, staff, students, and the general public were informed that they could file a complaint based on center or district failure to accommodate a disability. There were mixed perceptions whether or not there were planning or advisory boards on which participants with disabilities served. Perceptions were also mixed as to whether or not accommodations had been provided to assist disabled participants in serving on these boards. One respondent indicated that greater efforts could be made to encourage individuals with disabilities to serve on various boards and councils in Continuing Education.

Non-Architectural Barriers

As part of the center ADA Transition Plan, programs are to identify structural barriers to access for individuals with disabilities. As part of this plan, the major architectural barriers have been identified, although smaller obstacles may exist such as furniture or equipment in inaccessible arrangements. Participants were asked to identify smaller architectural features that potentially limit access to a program. Participants cited doors that were difficult to open for individuals with a disability. Non-structural measures of the ADA were also discussed in the interviews. These measures might include; relocating

programs from inaccessible to accessible areas, revising program format, redesigning equipment, assigning

aides to beneficiaries, and conducting home visits, which may be effective in providing program

accessibility in certain cases. Previously in the interviews, respondents indicated knowledge of programs

or classes moved to first floor locations in buildings where no elevators existed. According to

respondents, furniture is arranged to maximize access. However some cited difficulties with old buildings,

heavy doors, concrete steps, and steep staircases. Respondents appeared confident that the new Continuing

Education building would provide greater access to individuals with disabilities.

Program Eligibility

The respondents stated that there were no limits on the proportion of individuals with disabilities

able to participate or enroll in center programs. There was no awareness of any pre-admission evaluation

or testing for applicants in addition to districtwide assessment and placement testing. Information about a

student's disability status is collected voluntarily and all such information is kept confidential according to

the participants. It was also noted that the admissions office is accessible to all students and that

accommodations are made when needed to enable students with disabilities to come to the office.

Classroom and Curriculum

The participants agreed that when necessary, classes are reassigned or relocated to accessible

locations in order to accommodate students with special needs. The respondents were not aware of

departmental or center time limits for the completion of degree requirements that could not be modified for

students with disabilities. No programs were identified that excluded students with hearing or vision loss

or impairment, speaking difficulties, emotional or mental disabilities, or chronic health conditions. When

students with these sorts of disabilities had to be excluded it was normally due to health and safety

requirements, such as power sewing, or state and federal licensing requirements. The participant indicated

that students with visual or learning disabilities were allowed to use tape recorders in lieu of standard note-

taking. Braille note taking devices are available for students who need them as are sign language

interpreters for students who require this accommodation. Guide dogs are permitted in all campus

locations or meetings. Special accommodations were also available for students taking tests. Since there are no library facilities available to students in this Continuing Education program, there was no problem identified with regard to access or accommodation for individuals with disabilities.

Computers and Information Technology

This part of the interview and survey is designed to gather information about computer access for individuals with disabilities. The focus here is on adaptive computing technology. This refers to the hardware and software that allow individuals with disabilities to use computers effectively. Such technology might include print enlargers, speech output systems, document scanners, and Braille printers. According to the respondent, some of the available input technologies are accessible to disabled students. These include technological adaptations such as, trackballs and alternative labels for the keyboard and keypad, and enlarged screens. There is also output technology available to individuals with disabilities. These include output devices such as large monitors, speech synthesizers, magnifying closed circuit cameras, and screen magnification. Most computing facilities and labs are accessible to individuals with disabilities and all have adaptive technologies. The respondents indicated several adaptations available for individuals with disabilities including labels giving priority for use by those with disabilities, keyboards that are detachable and movable, and monitors that are detachable.

Employment

Both groups of respondents indicated that training and written material had been provided to staff involved in all employment related activities including recruitment, hiring, interviewing, testing, training and supervising. Many respondents suggested that a training session on the ADA was needed. Departmental staff were familiar with typical forms of reasonable accommodation and notification of such accommodations is given to applicants. The participants indicated that job descriptions were current and up to date and that duty statements identify the essential functions of the job. They reaffirmed that the required skills, knowledge, and abilities required for a position were related specifically to the demands of the job. The qualifications statements were written so as not to arbitrarily screen out applicants with

19

disabilities. When physical requirements are included, they have been reviewed by Compensation or Employment consultants. Internal job postings included information pertaining to reasonable accommodation for applicants. Postings and notices were made available in alternative formats when requested. All job postings were displayed in accessible locations. Testing and interviews were given in accessible locations and accommodations were provided during the interview process when requested. All interview questions were job related and the interviewers know what questions can be asked of applicants with disabilities. In all aspects of employment, whether on the job, staff development, or in the workplace, the respondent indicated that accommodations and access are provided to all.

Staff Focus Group

On April 22, 1997 a focus group of classified staff was conducted at Continuing Education to get their perspectives on the center compliance with the ADA and to further disseminate information to the staff at Continuing Education about the provisions of the ADA. Staff from different areas of center operations were represented in the four attendees that both participated in the group interviews and survey activities.

Access to Programs

The staff interviewed indicated knowledge of many individuals with disabilities who had currently identified themselves in various programs at the center. Staff indicated that since January 26, 1992 some modifications had been made to buildings and technology at Continuing Education, including new ramps, large print textbooks, audio tapes, modified doors, raised tables in the sewing classroom, magnification, ramps into the sewing class, new elevators, and additional disabled parking spaces. There was provision of auxiliary aids or accommodations to individuals with disabilities in programs at Continuing Education. Their comments reflected the divergence of views on this question and the places on campus with which they were familiar. Some noted the need for special events for swimmers, while others thought that amplified handsets on telephones were a necessary accommodation.

Staff did not indicate awareness of any policies or practices that needed to be modified in order to include individuals with disabilities in various programs or activities, particularly those held off-campus i.e. field trips. Some thought that a posting of notices in classrooms regarding the ADA and including this information in staff meetings and faculty handbooks would be helpful. Others suggested seminars or training sessions, perhaps a quarterly newsletter to provide information on new ADA requirements. Some thought that the SDCCD needed to publish notices and conduct workshops on recent ADA requirements. This need for additional, timely, and user-friendly information was echoed throughout the staff interview.

Interestingly, although other respondents indicated that TDD services were not available on the campus, the staff interviewed here, with the exception of one, indicated that such services were either unavailable or they did not know of such services. The staff indicated that while there were no TDD services, many used the California Relay Service to provide telephone access. Many thought that each site in Continuing Education should have a TDD. Currently, many students needing TDD technology are referred to the DSP&S office. Some also indicated a need for several public TDD services on the campus.

Interviewees indicated that there was neither telephone emergency services provided in their work areas nor direct TDD and modem access provided as an emergency service. When this service is needed the staff indicated that they refer to DSP&S. One staff member suggested that TDD's were needed in more offices on the campus in the event of an emergency involving individuals with disabilities.

Of the staff interviewed, nearly all indicated that public notices, consent forms, announcements, and other communications were provided in accessible formats. Four of the participants said that alternative formats such as large print, type, and tape recordings were available on the site. Additional staff training was also cited as another method to help in the development of forms and information for people with sight impairments.

The ADA Title II Technical Assistance Manual states that a review of how individuals with disabilities are portrayed must be conducted to ensure that the portrayals are positive and not demeaning. Of the interviewees, most either stated that no such review had been conducted or they did not know of such a review. They suggested that workshops or seminars be offered to provide guidelines on the proper portrayal of individuals with disabilities in official publications and announcements.

There was uncertainty expressed by several of the respondents in the area of accessibility for all center events, including those held off campus. Two participants stated that not all events are accessible while three were not sure. They suggested that advertisements needed to be added to all announcements for center events describing the accessibility of the event for individuals with disabilities. In addition they suggested that a thorough review needs to be completed when an office is remodeled.

Three participants believed that campus events are programmatically accessible to individuals with disabilities. This refers to the provision of interpreters for the deaf, captioned videos, assisting listening devices, and large print or Braille handouts. One participant disagreed that all campus events were programatically accessible while two did not know.

The ADA requires that emergency evacuation procedures for individuals with disabilities be reviewed so that access to evacuation in the event of an emergency is assured. The group cited the need for visual alarms and ramps on all multi-level buildings. Some members also suggested that egress or escape routes need to be more plainly visible with light signals to alert all individuals as to routes of escape and exit, particularly those with hearing difficulties.

Respondents appeared to be aware of the existence of a complaint process or how to file an unlawful discrimination complaint against the District. Only one person claimed not to know such a process existed. It was suggested that the procedure for filing complaints against the District be published and provided during new employee orientations.

The participation of individuals with disabilities on planning or advisory boards was discussed. One-half of the staff respondents believed that there were planning or campus advisory boards that had individuals with disabilities serving on them. Three did not know if individuals with disabilities served on such boards or in what capacity.

One group participant suggested that Continuing Education needed to conduct a comprehensive review of all offices and other areas on campus to identify areas where access may be limited. Some general problems were noted such as raising or lowering counters for use by individuals in wheelchairs, installing door handles, and having doors that require a push button for opening because they are too heavy. Additional problems include the need to widen some of the doorways, hallways, and stairwells.

19

Others suggested that some rooms and offices were cramped for space and that furniture would need to be rearranged to provide maximum access for individuals with disabilities. This was echoed by participants calling for a thorough review of all Continuing Education offices and classrooms by those responsible for ADA compliance.

Program Eligibility

None of the staff interviewed suggested that their particular work area limited the number or proportion of individuals with disabilities who could participate in a program or activity. The group indicated that following admission to programs, inquiries about an applicant's disability were only collected on a voluntary basis and that such information was kept confidential.

Computers and Information Technology

In general, the staff group felt that adequate and reasonable accommodations had been made for access to computers and information technology by staff with disabilities. They also emphasized ergonomic improvements to prevent injuries. Trackballs, closed caption television, documentation on diskette in ASCII format, and screen magnification devices have been provided to staff. When there were questions, the staff in the DSP&S office were consulted. Some staff were aware of some computing stations located in rooms not accessible to individuals with disabilities, there were, however, alternate and equivalent locations available. Generally, staff did not know if adaptive technology was available during the same times and if it had the same computing capabilities as non-adapted computers.

Within the computing environment, accessibility factors included computer tables that were wheelchair accessible, keyboards positioned within reach of the user, and conveniently placed printers. Staff indicated several accommodations available to individuals with disabilities. These included labels giving priority for use by individuals with disabilities, keyboards that were detachable and movable, monitors that were detachable and movable, disk drives and other peripherals that were easily reached, power controlled by one switch on an easily reached power strip, and printers in accessible rooms at table height.

Employment

Some staff interviewees believed that training or written materials on Title 1 of the ADA (employment related regulations) had been provided to staff involved in employment related activities, including preparing job descriptions, advertising, interviewing, testing, hiring, training, and supervising. A couple indicated that the departmental staff were familiar with typical forms of reasonable accommodation such as wheelchair access, sign language interpreters, note takers, readers, audio materials, large print, ASCII diskette, or Braille materials, job modifications, and restructuring. Most did not know of these accommodations, however. All interviewees believed that internal departmental application forms included notice that reasonable accommodation would be provided upon request by individuals with disabilities. Staff were certain that reasonable accommodation was provided during the application process when requested by individuals with disabilities. A majority felt that job descriptions were current and up-to-date and that duty statements detailed the essential functions of the job. All agreed that the required skills, knowledge, and abilities directly related to specific job duties were included on the job descriptions. None believed that qualification statements were written such that they could improperly screen out applicants with disabilities. Almost none were aware that the physical requirements of the job had been reviewed by Compensation and Employment consultants. Most believed that job postings were accessible to individuals with disabilities either through convenient locations, alternate formats, or through other accommodations.

On the question of the validation of employment related tests, there was general agreement that these were given to all applicants and not just to those with disabilities. Some were not certain if reasonable accommodations were provided during the testing process when requested by individuals with disabilities. Two of the participants thought, however, that this was provided upon request. A majority of the interviewees agreed that employment interviews were conducted in physically accessible locations and that reasonable accommodations were provided. They also agreed that all interview questions were job-related, and that interviewers were aware of both proper and improper questions of individuals with disabilities during the interview process. The group believed that reasonable accommodation was

generally provided in all phases of employment. Five of the six respondents indicated that in general, center staff were aware that the ADA prohibits discrimination against applicants or employees who have a relationship or an association with a person with a disability.

General Comments

There were divergent views found on the status of complete ADA implementation. Some staff interviewed felt that most provisions on accessibility of programs, technology, employment, and campus areas had been or will be accomplished. Others disagreed citing specific areas where access needed to be improved. Most tended to agree that a general lack of space on a very busy center campus is a factor which inhibits access in many areas. There was a general consensus that a thorough campus and center review must be conducted to identify non-structural barriers to access for emergency egress, admissions, and employment. A lack of emergency TDD and modem access was also a consistent theme. Staff observed that these services were needed at all campuses and centers. A comprehensive review of all centers and campuses was called for to be conducted by ADA compliance administration. In addition, staff training was advocated to improve accommodation and access for individuals with disabilities.

Focus Group 6: DSP&S Department Staff

On May 1, 1997, several DSP&S staff members were interviewed regarding ADA implementation. As with the academic management survey, the completed written survey for the DSP&S area reflects the views of several individuals in the DSP&S program at Continuing Education. Their comments and responses are summarized below.

Overall, there was a high level of awareness about the presence of individuals with disabilities in particular DSP&S programs. The group was able to identify in some detail modifications that had been made to increase accessibility for disabled persons since January 26, 1992. These modifications include: purchase of software, equipment, computers for individuals with disabilities, TDD answering machines, telesensory enlargers, added interpreters, adjusting the height of desks, physical modifications at some centers, speech synthesizers on computers, and wearing plain colored smocks or shirts so as not to confuse individuals with visual impairment.

All interviewees stated that the Continuing Education program provides auxiliary aids or accommodations to individuals with disabilities. These include adaptive software and hardware, note-takers, additional counseling, assessment, and registration assistance. Educational technicians are used to improve adaptive technology for individuals with disabilities. Assistive listening devices are provided for hard of hearing students. In addition to note-takers in the classroom, tape recorders are provided as is extended test time. Handouts can be provided in extra large print. Certain class requirements have been waived for individuals with disabilities. None could cite any policies or practices that needed to be modified in order to include individuals with disabilities in the various Continuing Education programs.

To maintain the dissemination of information regarding the provisions of the ADA to Continuing Education staff and faculty, the DSP&S grouping offered several examples of good practices, including in-service training by DSP&S representatives at department meetings and dean's meetings, and informative presentations conducted at the start of the school year. They also suggested paid workshops to provide in-service training for classified or adjunct faculty. They also suggested materials written in plain English be disseminated by ADA compliance staff, not photocopies of regulations that arrive without interpretation or context. Regular posting of written material in and accessible locations was also endorsed.

The DSP&S staff indicated that their respective areas have a TDD and that TDD's and modem access are available in their offices for emergencies. This finding stands in stark contrast to the observations made by other groups interviewed, where the availability for TDD's, even for emergencies, was seen as a rarity.

Program staff indicated that they had provisions to ensure that public notices, consent forms, announcements, and other communications can be made readily available in accessible formats such as Braille, large print, ASCII diskette and tape recordings. However, there was less agreement that the SDCCD had set aside sufficient funding and designated responsibility to a department to see that these provisions were carried out.

Some agreed that materials and public information notices are reviewed regularly to ensure a positive portrayal of individuals with disabilities. Many were uncertain if such a review had been undertaken. There was mixed agreement on the accessibility of all student services and programs on the

campus both architecturally (lack of structural barriers) and programmatically (provision of materials and proceedings in alternative formats). Some stated the compliance function of the SDCCD needs to read the accessibility review plans to begin to make all Continuing Education centers and sites accessible. Some were concerned that such a review had not taken place. If this had occurred, then center staff were not aware of this review nor of the plan to make centers accessible.

Campus events are programmatically accessible to individuals with disabilities through the provision of interpreters, captioned video, assistive listening devices and special format programs. As noted by other groups, most did not know that students with disabilities could take less than a full time course load dependent on their limitations. Most did not know if such provisions existed at Continuing Education.

A comprehensive plan for emergency evacuation procedures for individuals with disabilities was cited as a need by the DSP&S interviewees. Although classroom procedures seem to exist, most did not know what to do once out of their particular classroom. Interviewees were worried that no information is given to the Continuing Education staff or faculty regarding emergency evacuation of individuals with disabilities. Either maps showing routes of egress from the various centers are not plainly visible, or staff and faculty are not aware of them. Postings and procedures for emergency evacuation of individuals with disabilities were viewed as inconsistent. It was believed by some that the central office responsible for ADA compliance needs to take a lead role to ensure that the vital area of emergency evacuation of individuals with disabilities is reviewed. Beyond this review, the group is looking for assurances of concrete steps to address the emergency evacuation process for individuals with disabilities. To their knowledge, this area has not received the attention it merits. As was noted by the classified staff interviewees, an overall campus wide plan for emergency evacuation of faculty, staff, and individuals with disabilities needs to be developed and disseminated widely to prepare for any unknown emergency circumstance.

Compared to the knowledge of emergency evacuation procedures and availability of information concerning emergency egress, nearly all agreed that knowledge of grievance filing procedures was widespread. Access and information concerning grievance filing procedures is provided for individuals

with disabilities. None knew if there were individuals with disabilities participating on planning or advisory boards in the Continuing Education programs.

Several smaller architectural features were identified by participants as limiting access to individuals with disabilities. Interviewees cited the following: limited classroom access and space in the Continuing Education centers in general (this theme was echoed across several interviews), more accessible computer work stations, and, difficult door handles and heavy doors, particularly for bathrooms at ECC. Some suggested new desks and ramps that connect rooms, such as for the Mesa ABI program. Others thought the water fountains and signs were too high for individuals with disabilities in wheelchairs. One suggested that the door handle to 61-C, the DSP&S office, needs to be modified for individuals with disabilities. In the H-building, one person suggested that larger, more stable desks and tables are needed in the classrooms in addition to a connecting ramp from L-503 to the parking lot to increase accessibility.

Program Eligibility

The majority of the group agreed that limits were not placed on the number of individuals eligible for participation and that no pre-admission evaluation or testing for applicants was required for admission to center programs. The Admissions office was only provided information about a person's disability on a voluntary basis. However the DSP&S staff interviewed indicated that following admission, inquiries about an applicant's disability are not necessarily done strictly on a voluntary basis. They indicated that to receive state funding the DSP&S office must verify that students have one or more verifiable disabilities. When it is collected, the participants maintained that all information is kept confidential. In other instances when information about a person's disability is collected, the staff indicated that it is done so to prepare for accommodation and to improve access, not for tracking or admissions information. On the issue of access to the admissions process and office, all maintained that the admissions office is physically and programmatically accessible. The admissions process is facilitated through the registration of students in the classroom in Continuing Education. DSP&S staff are available to assist in this process if requested by faculty, staff, or students.

Classrooms and Curriculum

The interviewees mentioned that when necessary, classes are reassigned or meetings relocated from inaccessible to accessible rooms in order to accommodate students or faculty with mobility impairments. The DSP&S staff were not aware of any departmental or center time limits for certificate or degree completion requirements that could not be modified for students with disabilities. There was general agreement that in Continuing Education there were no programs, activities, courses, or degree requirements that exclude individuals with disabilities. The only possible exception would be emotional or mental disabilities which result in a safety concern, such as those with uncontrollable seizures.

In general, the DSP&S interviewees confirmed that tape recorders were permitted in class sessions as were Braille note taking devices and computers. Respondents also indicated that attendants, note takers, and sign language interpreters were available for students with disabilities. Certified guide, service, and signal dogs were permitted in all classes and meeting rooms. Accommodations were made for individuals with disabilities who needed to take tests or exams in alternate formats such as oral exams, large print, readers, scribes, time extensions, and alternate locations. To ease student registration, individuals with disabilities have the option of assistance from the DSP&S staff. Special assistance in registering for classes is also available from the Resource Center for Disabled Students.

Computers and Information Technology

The DSP&S staff maintained that access to computer technology in their particular program was facilitated through the availability of several modifications. Among these were "sticky-key" software, keyguards, trackballs, adaptive computers, ergonomic keyboards, dictation software, screen readers, touch screens, voice input and output, software to enlarge displays and scanners. Output modifications and technologies available include large monitors, screen magnification software, speech synthesizers, closed circuit television cameras, screen flashers, and screen readers. In addition, interviewees noted that voice recognition software was available, as well as a "mouse-free" system.

Documentation for computer hardware and software was also available in a number of alternative formats including Braille, audio tape, large print, ASCII, videotape, and through assistance from the high tech center (Mesa, City or Miramar campuses).

The majority of respondents felt that the computing facilities were offered in accessible locations. In general, respondents felt that the adaptive technology was available at the same times and locations as other computing facilities on campus. A similar pattern was found with respect to the question of whether adapted computers were located in the same room as other computers. Six agreed with that statement while one disagreed.

Within the computing labs, respondents felt that adequate access was provided to individuals with disabilities. Examples cited were detachable keyboards and monitors, accessible disk drives and peripherals, easily reached power strips, raised dot indicators on keyboards and Braille labels. Labels and signs giving priority use to individuals with disabilities were posted and visible in the computing facilities.

Employment

Three respondents stated that training or written material on Title 1 (employment) of the ADA had been provided to staff involved in any employment related activities, the majority, however, could not answer related questions. Of the seven interviewed, two indicated that additional training on the ADA would be helpful. It was indicated that departmental staff were familiar with typical forms of reasonable accommodations such as wheelchair access, sign language interpreters, note takers and other modifications to the work environment. Most respondents indicated that internal departmental application forms did include notice that reasonable accommodations will be provided when requested. Six indicated that such notice was provided. There was general agreement that reasonable accommodations were provided during the application process when requested by applicants with disabilities. Most felt that job descriptions were current and up-to-date and that duty statements identified the essential functions of the job. Most did not believe that qualification statements were written to improperly screen out individuals with disabilities.

Some agreed that job postings are made available in alternative formats and displayed in accessible locations according to the respondents. However, most did not know if this occurred. Most had

never seen where job postings are located much less if the material was available in alternative formats. Some agreed that when applicants are tested, these tests are given uniformly to all applicants, not just to individuals with disabilities. They also agreed that reasonable accommodations are provided during the testing process when requested by individuals with disabilities. There was consensus that employment interviews were conducted in physically accessible locations and that reasonable accommodations were provided. Interview questions were job related and interviewers were sensitive and trained in knowing the types of questions suitable for individuals with disabilities. Staff development and training is made accessible to individuals with disabilities and nearly all areas used by staff are accessible to individuals with disabilities. One respondent believed that the SDCCD central offices were not adequately accessible to individuals with disabilities. This person cited the need for a ramp in front of the building to improve access.

In general, respondents believed that the center staff was aware that the ADA prohibits discrimination against applicants and employees who have a relationship or an association with a person with a disability. No training in this area was cited by the respondents to be necessary at this time.

Focus Groups 7 and 9: Faculty and Special Admit Programs

On April 28, 1997, five faculty were interviewed from Continuing Education regarding ADA implementation. Two days later, four additional faculty representing Special Admit program areas were interviewed. A review of their questionnaire responses revealed similarities in their perceptions and views. For this report, their findings were combined. The following narrative summarizes their responses.

In the areas of access to programs, most indicated that modifications to classrooms had occurred and that sign language interpreters, tutors, and translators were provided in the classroom. They also cited the addition of one TDD, more signs in Braille, larger print on signs, permission to use guide and service dogs and more ramps. Faculty respondents also indicated that interpreters are available for the hearing impaired, and tables were lowered in the classroom for individuals using wheelchairs. In addition, auxiliary aids and accommodations were provided to individuals with disabilities, and tape recording of

lectures was permitted. Other accommodations included tutoring, raised study tables, and individualized assistance with testing. Some cited DSP&S as a key resource in this area.

Some cited a general need to improve access through construction of more ramps at various Continuing Education centers. Others called for more instructional aides to help vision impaired students. One person indicated that a general improvement of attitude toward individuals with disabilities in various programs was needed. To remain informed and current on the status of ADA implementation at the center, faculty respondents cited the need for more written materials, more postings, clearly written and interpreted information, and release time to learn more about the ADA. Faculty also suggested the need for reports on faculty duty days, an ADA representative at each Continuing Education center, and seminars and training during faculty report days. In addition they suggested that the central office ADA compliance staff check with all classes regarding knowledge and status of the ADA and include this information in an annual report to the faculty and staff of Continuing Education. Interviewees also requested information to be disseminated at school or department meetings and better planning for facilities modification.

Practically none of these faculty or special admit groupings knew of a TDD in their program, and most either were not aware of or indicated that telephone emergency services were not available in their programs to students with disabilities, but that access was available through the California Relay Service. Most were not aware if their particular programs had provisions to ensure that public notices, consent forms, announcements, and other communications are readily available in accessible formats such as Braille, large print, ASCII diskette or tape recorded.

This group in general did not know if materials had been reviewed to determine the fair portrayal of disabled persons in notices and public information. Similarly, none were aware of the provisions that state that individuals with disabilities may not have to take a full time course load. For the special admit faculty and staff, this finding was surprising given the often specialized nature of the special admit programs, some of which may have special requirements for full-time attendance. Most were unaware that the faculty, staff or students could file an unlawful discrimination complaint against the SDCCD. None seemed aware of these provisions and cited a lack of adequate information in this area from the ADA compliance staff. Two of the respondents felt that all instructional programs were architecturally

accessible and that potential users were informed of this through the course syllabi. However two disagreed with this assessment.

There was a general perception that campus events were both structurally and programmatically accessible to individuals with disabilities. Program accessibility was accomplished through sign language interpreters and with DSP&S assistance. Smaller architectural changes suggested by the faculty included more ramps and automatic door openers, particularly for restrooms.

The awareness of emergency escape or egress routes did not vary. The impression is that emergency evacuation has not been adequately addressed by the district ADA compliance staff. Some suggested that individuals with disabilities are not included in Continuing Education emergency evacuation procedures. Maps are provided, but the impression is that most are not aware of them, or that they are poorly thought out. In some cases, persons were asked to designate escape routes with no knowledge or background in fire or emergency evacuation. They felt that the practice of delegating safety evacuation procedures to individuals who have had no training or background in such procedures is irresponsible. Many asked that a comprehensive site review be conducted by trained professionals to best design and recommend emergency evacuation routes of egress for all staff, and individuals with disabilities in particular. One individual commented that simply telling program managers or leaders to design an evacuation route even though they have not received training in this area is an abrogation of responsibility. The feeling was that greater planning and dissemination of this information needs to be conducted by trained and experienced individuals. Many felt that they had not received adequate information or training in this important area. In addition, many stated that each room at the center should have obvious emergency routes posted.

Many faculty seemed unaware of what their role or responsibility in ADA implementation ought to be. Many claimed that their role had not been adequately explained to them.

Faculty and special admit respondents indicated that persons involved in their instructional programs were aware of the option of filing unlawful discrimination complaints based on the district's failure to accommodate a disability. Compared to emergency evacuation knowledge, most were aware of the provisions to file a complaint.

In the area of program eligibility, only one respondent stated that there was a limit on the proportion of individuals with disabilities admitted to their instructional programs. This person indicated that a person with emotional problems may be disruptive to others in a classroom or vocational training session. Those with uncontrolled seizures may not be able to operate some equipment due to health and safety considerations. Some of the Special Admit interviewees stated that pre-admission evaluation and testing was conducted. These could be written or taped tests. There were also physical exams for certain occupational training programs. None were aware if criterion-related validity evidence had been gathered for any of the assessment tests given for the Special Admit programs. None knew how such a process should be conducted. Federal law also requires that admissions tests reflect aptitude or achievement rather than impaired sensory, motor, or speaking skills. One respondent felt that the admissions tests used in their particular program met this criterion. Others were not sure. None were aware of special or alternative admission tests available for individuals with disabilities.

One half of the Special Admit grouping believed that pre-admission inquiries as to a person's disability status were conducted. When this was gathered it was done to provide safety to others and to protect the SDCCD from liability due to injury or unsafe practices by individuals with motor or manual disabilities. Information from individuals with disabilities is collected only on a voluntary basis and such information is confidential.

Faculty respondents claimed that when necessary, classes are reassigned or relocated to accessible locations to accommodate individuals with disabilities. One respondent did cite certain programs that could not be modified due to licensure requirements or degree stipulations. Certain programs were noted as being inaccessible to students with loss of vision (presses), mobility impairments, and coordination problems (health and safety concerns in nursing, welding, soldering). Some physical education programs such as tennis were cited as being inaccessible to students with disabilities.

As was the case in determining physical access and egress, both groups of faculty emphasized that the determination of health risk needed to be conducted by a physician or trained professional for chronic health and emotional conditions, not by local staff who were untrained in this area. This would best serve the individual and protect the SDCCD.

Faculty respondents noted that students with visual impairments were allowed to use tape recorders in their classes. In addition, Braille note taking devices, attendants and note takers, guide dogs, and special arrangements were allowed for students needing modifications. Two respondents believed that guide dogs were not allowed on campus or in classrooms. They cited that guide dogs would not be of much help in a graphics program. Guide dogs were also not allowed in a hospital for six weeks of the nursing program around health sensitive individuals or those with allergies. In the Special Admit grouping none stated that program requirements for individuals with disabilities could not be modified. This included substitution of required courses. This group cited special state licensing or certification requirements as the primary reasons. No concerns were voiced regarding access to internships or field placements and most believed that libraries and reading rooms were accessible to individuals with disabilities.

Computers and Information Technology

There was a general lack of knowledge among faculty respondents regarding available adaptive computing technology for individuals with disabilities. None were able to answer computing questions related to input, output, environmental, or documentation issues. Most stated that they were unfamiliar with the computing labs or environments at their particular campus, site, or center.

In the area of classrooms and curricula, the interviewees responded that special accommodations and modifications were made for individuals with disabilities. These included those listed earlier under other group responses, such as large print, sign language interpreters, note takers, tape recorders, extra time for testing, and services offered by DSP&S. The only instance where students are not permitted to substitute required courses is where state licensing requirements prohibited such practices.

In general, this group felt that adequate access was provided and that there were no non-structural barriers preventing full participation of disabled persons on the Continuing Education campus. When necessary, auxiliary aids were provided to students to assist them in participating. Referral to the DSP&S office was a frequent response. None of the respondents were aware of any changes that needed to be made to facilitate participation by students with disabilities.

In the classroom, provisions for disabled students were made when necessary. This included testing, proctoring for exams, note takers, and other modifications. Computing facilities were both physically and programmatically accessible to individuals with disabilities and adaptive technology was available in the same rooms and at the same times as traditional technologies.

Employment

One of the faculty interviewees was aware of training and/or written material on the employment regulations of the ADA. The faculty group felt that training on the provisions of the ADA for faculty was needed, as many appeared unfamiliar with the employment related provisions of the Act. Some (approximately one-half) believed that the application, testing, and staff development processes for applicants and staff were accessible and that reasonable accommodation was provided when necessary. One-half were uncertain if job descriptions in their departments were current and up-to-date or if physical requirements of jobs had been reviewed by compensation or employment consultants. There was general uncertainty as to whether qualification statements referred to essential functions of a job or if these statements were written so as not to improperly screen out people with disabilities. Most seemed unaware or poorly informed as to the contents of internal job postings with regard to providing notice to applicants with disabilities and the availability of reasonable accommodations. Most did not know if employment tests had been validated nor whether they were given solely to individuals with disabilities.

Faculty respondents had greater knowledge about the interview procedures and practices for hiring staff. Most believed that interview questions were job related and that interview committees were aware of what questions could be properly asked of individuals with disabilities. Interviews were scheduled in accessible locations. There was uncertainty regarding the provision of reasonable accommodation , when requested, to enable staff with disabilities to participate in staff development or training functions. There was also disagreement, as was found with other interviewees, on the accessibility of all areas used by employees during the work day. For the most part, this group seemed less aware of many of the employment related aspects of ADA. Their call for training, written materials, and additional staff development appears warranted.

Focus Group 8: Business, Facilities, and Operations Group

Staff from the business, and facilities and operations departments were also interviewed in a group that met on April 28, 1997 at Continuing Education. The following paragraphs summarize their responses to the questionnaire and discussions in the group interviews.

These interviewees indicated that they have received additional training and instruction since January 26, 1992 on implementing various provisions of the ADA. They cited the availability of a new electric door on the east end of a particular building and improved access to main electric doors. They also cited modifications to exterior door entrances to eliminate safety hazards. Interior signs at some sites have been added or modified. Many of these signs are in Braille. TDD's have been installed since 1992.

Staff interviewed indicated that their program provided auxiliary aids and accommodations to individuals with disabilities and that the work space was adequate and accessible for staff and students with disabilities. Adaptive equipment has been purchased for the Centre City center and a ramp was constructed at the Cesar Chavez center. More classes are accessible to individuals in wheelchairs. Some instructional aides have been provided to hearing and sight impaired teachers. None could cite any policies or procedures that needed modification to include individuals with disabilities in their particular program or service.

Contrary to other interviewees this group stated that telephone emergency services are provided and public TDD phones on campus are provided. All interviewees stated that they had access to emergency telephone service for individuals with disabilities. Most of the interviewees stated that Continuing Education has provisions to ensure that public notices, consent forms, and other communications can be made readily available in accessible formats.

In contrast to other groups, this group was certain that a review of public announcements or publications with regard to the portrayal of individuals with disabilities has taken place. This group generally believes that all programs are architecturally accessible and that Continuing Education events are

both structurally accessible and programmatically accessible through the provision of special equipment and sign language interpreters.

However, as with other staff interviewed, the knowledge of emergency evacuation procedures for individuals with disabilities was non-existent. This lack of information has been noted previously in this report. More and better planning appears to be needed in this area.

Also, as in prior interviews, everyone was aware of the option of filing discrimination complaints against the district. This feature of the ADA has received widespread publicity from ADA personnel. Most seem aware of this option. This group could identify center planning or advisory boards on which individuals with disabilities serve.

All were in agreement that building and construction policies have been reviewed to ensure that any new construction or alteration of existing facilities adheres to all applicable accessibility standards. Some indicated that this was accomplished in the ADA Transition Plan in 1993. Some of the group members were aware of modifications that could make Continuing Education programs and rooms more accessible through smaller, non structural modifications. These included door handles, better signs, push-button doors, retrofitted handles in restrooms and in sinks. Areas cited for additional improvement included access to the cafeteria and bookstore at ECC and the lowering of sinks and paper towel dispensers in the restrooms. No one in this group could cite a major architectural barrier for individuals with disabilities, particularly after the new Continuing Education center is constructed and the current program is relocated to this new center location in the mid-city area.

Computers and Information Technology

The business, facilities, and operations staff maintained that access to computer technology in their particular program was facilitated through the availability of several modifications. Among these were "sticky-key" software, keyguards, trackballs, adaptive computers, ergonomic keyboards, dictation software, screen readers, touch screens, voice input and output, and software to enlarge displays and scanners. Output modifications and technologies available include large monitors, screen magnification software, speech synthesizers, closed circuit television cameras, screen flashers, and screen readers. In

addition, interviewees noted that voice recognition software was available, as well as a "mouse-free" system.

Documentation for computer hardware and software was also available in a number of alternative formats including Braille, readers, and sign language interpreters.

The majority of respondents felt that the computing facilities were offered in accessible locations. In general respondents felt that the adaptive technology was available at the same times and locations as other computing facilities on campus. A similar pattern was found with respect to the question of whether adapted computers were located in the same room as other computers. Several agreed with that statement.

Within the computing labs, respondents felt that adequate access was provided to individuals with disabilities. Examples cited were detachable keyboards and monitors, accessible disk drives and peripherals, easily reached power strips, raised dot indicators on keyboards and Braille labels. Labels and signs giving priority use to individuals with disabilities were posted and visible in the computing facilities.

Employment

In the area of employment, there was clear agreement that training and/or written material on the employment related provisions of the ADA have been provided to staff involved in employment related activities. Unlike other Continuing Education representatives, the business, facilities, and operations group were not interested in a training session on the ADA. They responded that departmental staff were familiar with typical forms of reasonable accommodation and that these accommodations are provided upon request to both applicants and staff with disabilities. Although they felt that job descriptions in their area were current, however, none agreed that the job descriptions identify the essential functions of the job. Most believed that qualification statements are written so as not to improperly screen out individuals with disabilities. The interviewees were not aware if job postings were made available in alternative formats when requested by applicants. According to the staff interviewed, all employment related provisions of the ADA are met in their department.

General Comments

Although the majority of staff and faculty interviewed appeared to be confident that most of the accessibility and accommodation components were implemented, there appeared to be significant gaps in knowledge and process in many vital areas. Very few felt that training and dissemination had been adequate. A consistent theme echoing across several groups was the need for greater information, training, coordination, and assistance. Some felt that responsibility for ADA implementation was too diffuse and unclear. Many participants expressed the belief that those with responsibility for ADA compliance lacked adequate authority, while those with authority lacked responsibility. A consistent call for better training, coordination, and timely information was found across nearly all groups. With the exception of a few groups, general awareness of the problems facing individuals with disabilities at the centers was low. There appeared to be a stronger call for more training and coordination regarding the non-structural components of the ADA.

Some felt that comprehensive planning and training had not been systematically conducted and there were clear areas for improvement of awareness and practices. This was heard consistently in the absence of training or information on evacuation routes, the need for visual alarms, and more intensive and relevant staff development. Greater dissemination of training materials and information about the ADA were cited as needs as well.

Many interviewees cited a need for emergency TDD services for individuals with disabilities. Although many rely on DSP&S or the California Relay Service, to provide emergency services, many felt that safety for individuals with disabilities would be greatly improved in emergency telephone services via TDD. Some called for a TDD or a public TDD at each site or center in Continuing Education.

As in other interviews at other sites and locations in the SDCCD, nearly everyone was aware of the legal recourse available to those perceiving discrimination on the basis of a disability. The knowledge of how to file complaints was widespread. Some suggested that if similar emphasis had been placed on evaluating emergency egress routes and ensuring compliance in this area, there would be much more knowledge of how to proceed in emergency situations. Notices and postings are often inconveniently located or placed. There are not regular announcements, updates, or newsletters. Information at regular

intervals, or during report day presentations or staff meetings was cited as a potential improvement in the dissemination of information.

Some suggested that a list of relevant reports or policies in a user-friendly format be produced for dissemination. Photocopying regulations when questions are posed is not viewed as a helpful source of information when responding to ADA related questions.

More training was cited as a need. This training should be available to faculty, staff, students, and members of the community.

For a complete review of the focus group responses, the field notes and summaries are located in the Institutional Research Office.

41

U.S. Department of Education
Office of Educational Research and Improvement (OERI)
Educational Resources Information Center (ERIC)

ERIC®

JC 970 557

REPRODUCTION RELEASE
(Specific Document)

I. DOCUMENT IDENTIFICATION:

Title: San Diego Community College District
Americans With Disabilities Act (ADA), Sel-Evaluation Study, Continuing Education
Findings

Author(s): William B. Armstrong

Corporate Source: .San Diego Community College District	Publication Date: April 1997

II. REPRODUCTION RELEASE:

In order to disseminate as widely as possible timely and significant materials of interest to the educational community, documents announced in the monthly abstract journal of the ERIC system, *Resources in Education* (RIE), are usually made available to users in microfiche, reproduced paper copy, and electronic/optical media, and sold through the ERIC Document Reproduction Service (EDRS) or other ERIC vendors. Credit is given to the source of each document, and, if reproduction release is granted, one of the following notices is affixed to the document.

If permission is granted to reproduce and disseminate the identified document, please CHECK ONE of the following two options and sign at the bottom of the page.

The sample sticker shown below will be affixed to all Level 1 documents

[X]
↑
Check here
For Level 1 Release:
Permitting reproduction in microfiche (4" x 6" film) or other ERIC archival media (e.g., electronic or optical) *and* paper copy.

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

_____ Sample _____

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

Level 1

The sample sticker shown below will be affixed to all Level 2 documents

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN OTHER THAN PAPER COPY HAS BEEN GRANTED BY

_____ Sample _____

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

Level 2

[ ]
↑
Check here
For Level 2 Release:
Permitting reproduction in microfiche (4" x 6" film) or other ERIC archival media (e.g., electronic or optical), but *not* in paper copy.

Documents will be processed as indicated provided reproduction quality permits. If permission to reproduce is granted, but neither box is checked, documents will be processed at Level 1.

"I hereby grant to the Educational Resources Information Center (ERIC) nonexclusive permission to reproduce and disseminate this document as indicated above. Reproduction from the ERIC microfiche or electronic/optical media by persons other than ERIC employees and its system contractors requires permission from the copyright holder. Exception is made for non-profit reproduction by libraries and other service agencies to satisfy information needs of educators in response to discrete inquiries."

Sign here→ please

Signature:	Printed Name/Position/Title: William B. Armstrong/Mng. Research
Organization/Address: San Diego Community College District 3375 Camino Del Rio South SAn Diego, CA 92108	Telephone: (619)584-6941 FAX: (619)584-7311
	E-Mail Address: Date: 11/11/97

ERIC
Full Text Provided by ERIC

III. DOCUMENT AVAILABILITY INFORMATION (FROM NON-ERIC SOURCE):

If permission to reproduce is not granted to ERIC, or, if you wish ERIC to cite the availability of the document from another source, please provide the following information regarding the availability of the document. (ERIC will not announce a document unless it is publicly available, and a dependable source can be specified. Contributors should also be aware that ERIC selection criteria are significantly more stringent for documents that cannot be made available through EDRS.)

Publisher/Distributor:
Address:
Price:

IV. REFERRAL OF ERIC TO COPYRIGHT/REPRODUCTION RIGHTS HOLDER:

If the right to grant reproduction release is held by someone other than the addressee, please provide the appropriate name and address:

Name:
Address:

V. WHERE TO SEND THIS FORM:

Send this form to the following ERIC Clearinghouse:

Jonathan Kelly
ERIC Clearinghouse for
    Community Colleges
3051 Moore Hall
Box 951521
Los Angeles, CA   90095-1521

However, if solicited by the ERIC Facility, or if making an unsolicited contribution to ERIC, return this form (and the document being contributed) to: