PERSONAL CARE ATTENDANT POLICY & AGREEMENT

# Policy

Berkshire Community College strives to reasonably accommodate students with disabilities in accordance with applicable laws and policies. Accommodations may include the service of a personal care attendant to address the physical and/or health and safety needs of a student with a disability in order to fully participate in activities, services, and programs at the College. Students must request all accommodations through the Disability Resource Center (DRC). The DRC staff will then determine if the student’s documentation is sufficient to support the request of a PCA. The College does not provide individuals with devices or services that are personal in nature, including assistance with activities of daily living. It is the responsibility of the student with a disability to make appropriate arrangements to provide his/her own PCA service. Berkshire Community College does not assume coordination or financial responsibilities for PCA services and is not responsible for any consequences resulting from a student’s association with a PCA. Personal care attendants are not classroom assistants and have no authority to assist any academically related tasks (i.e. note taking, class participation, group activities, etc.) in the classroom or other academic settings.

# Responsibilities

## Disability Resource Center

* Communicate the student’s need for a PCA in the student’s *Academic Accommodation* letter to faculty.
* Communicate the student’s need for a PCA to additional campus resources, when necessary.

## Student

* Provide documentation to the DRC which indicates the need for a PCA.
* Employ PCA before classes begin.
* Complete the *Personal Care Attendant Agreement* each academic year.
* Ensure that each PCA completes the *Personal Care Attendant Agreement* each academic year prior to beginning their duties on campus.
* Ensure that if personnel changes occur during the semester, the student and the new PCA completes the *Personal Care Attendant Agreement* prior to beginning their duties on campus.
* Ensure that each PCA clearly understands is or her duties and supervise these activities. The student is responsible for all actions of each PCA.
* Establish and maintain an alternative contingency plan should the regularly scheduled PCA be unavailable.
* Follow College policies and abide by the Berkshire Community College *Student Policy Guide.*

## Personal Care Attendant

* Follow all applicable Berkshire Community College (BCC) policies and abide by the BCC *Student Policy Guide* at <https://www.berkshirecc.edu/student-services-and-support/student-policy-guide/>.
* Complete the Personal Care Attendant Agreement each academic year prior to beginning work on campus.
* Provide only the agreed upon personal care services. PCA’s should refrain from participating in academically related tasks (i.e. class discussions, writing papers, in or out of class assignments, providing classroom accommodations such as note –taking) in the classroom or other academic settings.
* Conduct themselves in a courteous and professional manner.
* In the event of an emergency evacuation, the PCA should assist the student with exiting the building safely. The PCA understands the importance of seeking immediate assistance from college officials (e.g. faculty, staff) in order to evacuate the student quickly and safely, since waiting for the arrival of fire/rescue could be fatal.

I understand that PCAs may be subject to loss of privileges or any other action Berkshire Community College considers appropriate in the event the College decides that the PCA has acted in a manner inconsistent with the above.

I understand that a PCA’s employment and individual services contract is between the PCA and the student and/or agency for whom I work, and that I have no employment relationship with Berkshire Community College.

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| Personal Care Attendant (please print): | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_ |
| Personal Care Attendant Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_ |
| Student Name (please print): | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_ |
| Student Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_ |
| Disability Resource Center Staff Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date: | \_\_\_\_\_\_\_ |