

## **Health Professional's Report (HPR)**

Student to complete					
Family Name:					
Given Name:				Student Number:	
I give authority to (Health Professional's name): to release information relating to my disability/medical condition to the ECC Student Counsellor to facilitate the identification and provision of appropriate support during my studies at ECC.					
Student signature:				Date:	
Health Professional to comple	ete				
Nature of student's disability / medical condition(s):					
Duration of disability / medical condition:	□V	Temporary	weeks / months		
	□٧	Or Ongoing / Permanent	inc. fluctuations		
Likely impact of disability and/or medical condition and/or side-effects of medication on study at ECC, including performance in classes, laboratory, assessment or exam situations.  Please consider: reading, writing, listening, cognitive processing, concentration, interaction, sitting tolerance, stamina, mobility, seating requirements, accessing library resources, etc.  Recommendations					
Please recommend any adjustments or accommodations which you believe would assist the student to complete their studies in a manner equitable with other students. Provide additional details where relevant.					
Health Professional Details / Practice Stamp					
Name and profession:					
Address:				Contact Number:	
Signature:				Date:	



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## **Information for Health Professionals**

Edith Cowan College provides accommodations for students with a temporary or permanent disability and / or medical condition to facilitate equal access to all aspects of their studies, including access to and effective participation in:

- facilities, buildings and equipment;
- classes hearing, reading and viewing information, participation in discussions, note-taking, etc.;
- laboratory and workshop activities mobility and safe and effective use of equipment; and
- assessment and examinations time allowances, alternative formats, computer access, breaks, additional exam adjustments, etc.

To facilitate this, ECC requires supporting medical documentation outlining the functional impact of the disability / medical condition so appropriate accommodations can be identified and implemented. To assist with this, please discuss this with your client and complete the Health Professional's Report overleaf. The completed Report can then be emailed directly to or given to the student to provide to ECC.

**Please note:** The medical information remains confidential and is not made available to or accessible by anyone other than the Student Counsellor.

Based on your recommendations, a Learning Access Plan (LAP) detailing the accommodations identified as necessary to facilitate the student's studies will be developed in collaboration with the student. This is then provided to all relevant ECC teaching staff by the student so that they are made aware of the required adjustments. The LAP is reviewed with the student and adjustments made as needed.

If you would like to discuss this report with the ECC Student Counsellor, the contact details are listed below.

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