

COMMITTEE ON EDUCATIONAL POLICY
Report on a Change in Student Health Center Policies
Regarding Medical Excuses

To the Academic Senate, Santa Cruz Division:

The UCSC Student Health Center intends to cease offering students medical excuses or documentation of visits as of the start of fall quarter 2007. The Health Center has consulted with CEP about this change in practices because it has implications for instructors' course policies. The medical centers of many other colleges and universities (Cornell University, Penn State University, the University of Iowa, the University of Wisconsin-Madison, etc.) have made similar decisions not to provide students with routine medical excuses. CEP supports this change in Health Center policies. The reasons why should become apparent from what follows.

THE PROBLEM:

In an effort to maintain a high level of attendance in classes and to forestall the late submission of assigned coursework, some faculty require that students present medical excuses for any absence from class and/or for late submissions or missed quizzes and exams.

These policies have had a spill-over effect, in that students sometimes feel that it is necessary or to their benefit to turn in medical excuses even in courses where the instructor does not require them.

Partly as a result, the campus Health Center in recent years has seen a sharp increase in the number of students seeking medical excuses, particularly around the time of midterms and finals.

Of students visiting the Health Center because of cold symptoms, approximately 30 percent are seeking medical excuses. Overall, roughly 20 percent of students who go to the Health Center ask for a doctor's excuse. Given the volume of patients seen by the Health Center each day, this amounts on average to the workload of a full-time physician.

The requirement by some instructors that students provide medical documentation of illness in case of absence or late work not only increases the workload of the Health Center staff and absorbs time and resources that could better be spent in caring for sick patients, but also creates additional problems. The desire to obtain a medical excuse can potentially motivate students to exaggerate their symptoms, which in turn can lead to unnecessary and expensive tests. Further, such behavior undermines the trust so important in the clinical relationship between doctors or nurses and their patients. Finally, the Health Center staff would like to help students at this transitional time in their lives learn how to make sensible and appropriate use of medical services. The need for a medical excuse, on the other hand, can lead students to visit the Health Center for problems that could normally be well managed by self care.

Faculty should be aware that a note signed by Health Center staff does not constitute “proof” that a student has in fact been ill. Patients at the clinic often describe symptoms - - of headaches, nausea and vomiting, etc. -- that have already resolved themselves by the time of their visit. Indeed, a large number of the students visiting the Health Center are not seeking treatment, but merely the required medical documentation of their illness. In consequence, the doctors and nurses at the Health Center have less time and attention to give to patients who truly need their assistance.

PROPOSED SOLUTIONS:

To resolve these problems and improve the quality of care it is able to provide, the Student Health Center will cease offering routine medical excuses or documentation of visits as of the start of fall quarter 2007.

Consultation with faculty colleagues in a variety of disciplines suggests that there are other ways besides requiring medical excuses to ensure regular attendance and to deal with missed exams or late assignments. For example:

- 1) Faculty may stipulate a certain number of allowed absences (e.g. 2 or 3 per quarter), beyond which further absences will have a negative impact on the student’s grade and may cause him/her to fail the course. Instructors should clearly indicate that these allowed absences are meant to cover contingencies such as illnesses, family emergencies, and the like.
- 2) Faculty may require that students contact them about all absences, preferably in advance of class.
- 3) Faculty may require students to complete make-up work for each class for which they were absent. Thus the students may be asked to complete additional exercises (in a language or math class) or to write a 2 to 5 page paper on the subject matter covered in the class they missed.
- 4) In courses with a number of quizzes and exams, reading responses, lab reports, etc., the faculty member may allow students to miss one such assignment without penalty.

There are many other possibilities as well. The critical factors are that faculty clearly lay out their expectations, set parameters, and then encourage students to act responsibly within these defined limits.

In cases of missed exams or late papers and other assignments, faculty and/or their teaching assistants will need themselves to speak with students to determine how credible or acceptable their reasons for missing an exam or due date are. In any case, as mentioned above, the notes currently provided by the Student Health Center do not “prove” that a student has been ill. In fact, faculty and TAs are sometimes in a better position than Health Center staff to evaluate the credibility of student claims, since they have an ongoing relationship with their students, whereas doctors and nurses may see a patient only once and briefly.

Finally, CEP urges faculty to lay out clearly their policies on missed exams and late submission of assigned work, preferably in the course syllabus. Such policies can vary

significantly from one instructor to another, even within a single major, and students are more likely to adhere to faculty expectations if these are clearly articulated.

EXCEPTIONAL CASES:

It is unfortunate but does happen that a student in the course of a quarter may suffer from a significant, ongoing illnesses or have a serious accident. In such unusual cases, the Health Center can provide documentation of the problem, provided that the student in question signs a special consent form allowing the Health Center to release information.

In these instances, students have a responsibility to inform faculty in a timely way about the problem and to discuss how the illness or injury will impact their performance in the course. Students do enjoy privacy rights and hence have no obligation to divulge the exact nature of the illness or injury.

Faculty frequently will do what they can to accommodate the problems such serious illnesses or injuries produce for students. But students are still under an obligation to complete the basic requirements for each course for which they receive credit.

In rare and exceptional instances, ailing or injured students may need to request an “Incomplete” for one or more courses, to withdraw from a class, or to withdraw from the University for the rest of a quarter. Faculty and students are advised to consult existing campus policies about Incompletes and Withdrawals.

Addendum: Statement from Gannett Health Services, Cornell University, Ithaca, New York:

Gannett does not provide medical excuses. It is, and has been for many years, Gannett’s policy not to routinely provide medical ‘excuses’ for students who have missed classes, exams, or due dates for papers or projects. Our reasons are several, including our commitment to patient confidentiality, our role in educating students about appropriate use of health care, our concern for furthering the developmental transitions of young adulthood, our lack of direct knowledge about illness or injuries effectively managed by self care, and our own finite resources. It is important that students and faculty resolve concerns that arise when illness interferes with academics with appropriate honesty and trust.

Respectfully submitted,

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