Policies
Americans with Disabilities Act (ADA) Policy Statement

http://manoa.hawaii.edu/library/help/ada/ada_policy/
Purchasing Procedures for Electronic Resources

As stated in the MSU Libraries’ Accessibility Statement, it is a priority to select and acquire, whenever possible, resources and technologies that are accessible to all. To help us work toward more accessible library resources, we have implemented accessibility purchasing procedures for electronic resources (e-resources) that we purchase from vendors/publishers.

As part of these procedures, the Libraries is asking publishers/vendors:

- For accessibility contact information.
- For Voluntary Product Accessibility Templates (VPATs) and/or other accessibility documentation.
- To accept/insert accessibility language into our e-resource licenses/contracts. The MSU Libraries asks vendors to accept the accessibility license language developed by the Big Ten Academic Alliance Libraries.

Big Ten Libraries’ E-Resource Accessibility Efforts

The MSU Libraries is helping lead efforts in the Big Ten Academic Alliance Libraries related to e-resource accessibility. In addition to creating accessibility license language for vendor e-resources, the Big Ten Libraries are collectively funding third-party accessibility evaluations of library e-resources. This program provides vendors with a report and the opportunity to improve the accessibility of their products while giving members of the library community information about the accessibility of specific library e-resources.

Accessibility & MSU Libraries’ Digital Collections

Accessibility is also a priority for digital collections created by the MSU Libraries. We have staff in our Digital Information unit working on ensuring new digital collections are created with accessibility in mind and that the accessibility of older collections is improved.
RUL 02.61.08 – Unassisted Access to D. H. Hill Library (Hillsborough Street Entrance)

1. Purpose
To set forth procedures for obtaining unassisted access to D. H. Hill Library's Hillsborough Street Entrance for disabled users, while maintaining library security and protecting collections.

2. Access to D. H. Hill Library's Hillsborough Street Entrance
D. H. Hill Library has an electronic door-opening system that provides unassisted access to the building from the Hillsborough Street Entrance for those with mobility disabilities.

3. Eligibility
3.1 Users affiliated with NC State University who have mobility disabilities are eligible to apply for an electronic proximity access card to this system. (See Application for Unassisted Access to D. H. Hill)
3.2 Eligibility for an electronic proximity access card is determined in the same way as eligibility to use campus handicapped parking. Verification of a current, approved NC State University Division of Transportation handicapped parking application or placard is acceptable to establish eligibility for permanent or temporary access to the D. H. Hill Library through the Hillsborough Street Entrance.
3.3 An applicant must meet one or more of the following criteria:
3.3.1 Cannot walk without use or assistance of a wheelchair, braces, cane, walker, crutches, prosthetic device, another person, or assistive device;
3.3.2 Cannot walk 200 feet without stopping to rest;
3.3.3 Uses portable oxygen;
3.3.3 Uses portable oxygen;
3.3.4 Has restricted mobility due to a respiratory, cardiac, arthritic, neurological, or orthopedic condition; and/or
3.3.5 Is totally blind or has severe visual impairment.
3.4 Temporary approval/permission may be given for non-chronic mobility impairments to include:
3.4.1 Temporary mobility impairment due to recent surgery, accident, or illness.
3.4.2 Pregnancy when there are extenuating circumstances, complications or limitations.

4. Approval Process

4.1 Permanent Access Cards
4.1.1 The NCSU Libraries Administration bases its approval on information supplied by the applicant, and upon verification of affiliation status by the appropriate university unit.
4.1.2 Final decisions will be made five (5) working days of receipt of an application.
4.1.3 Once approved, electronic proximity cards will be sent by mail to the applicant or delivered by campus mail, if possible.
4.1.4 Permanent approvals are usually for a period of one year.
4.1.5 Permanent approvals may be renewed unless there is a change in status, such as separation from NC State University.
4.2 Temporary Access Cards
Temporary approvals are issued for a specified period of time in accordance with the physician’s recommendation.

4.3 Misuse of Electronic Proximity Access Cards
4.3.1 Proximity cards are considered misused if they are loaned to or used by any unauthorized person.
4.3.2 Proximity cards whose period of use has expired will be invalidated electronically.
4.3.3 Fees for Proximity Cards
There is no fee associated with the use of a proximity card, but persons who do not return a card upon expiration of the approved use period will be billed for the cost of replacing the card.

Audience: Faculty, Staff, and Students
Category: Library
REG 04.20.05 – Service Animals for Persons with Disabilities

Authority: Provost & Executive Vice Chancellor


Related Policies:
- NCSU POLICY 20.01 – Equal Opportunity and Non-Discrimination Policy Statement
- NCSU REG 06.02 – Reasonable Accommodations in Employment
- NCSU POLICY 29.01 – Faculty Grievance and Non-Reappointment Review Policy
- NCSU REG 00.02 – FrmA Grievance and Appeal
- NCSU POLICY 63.01 – Grievance Procedure for Undergraduate Students

Contact Info: ADA Coordinator, (919-513-3798)

1. Introduction
In accordance with Section 504 of the Rehabilitation Act of 1973 (“Rehab Act”), the Americans with Disabilities Act of 1990 (“ADA”), and state law, North Carolina State University (“NC State”) may be required to accommodate otherwise qualified individuals with a disability by making a reasonable modification in its services, programs, or activities. The university acknowledges the health and safety interests of its general community. This regulation addresses the use of service animals on campus by qualified individuals with disabilities. Pets and therapy animals are not considered service animals and therefore are not covered by this regulation.

2. Definitions
2.1 Service animal means any guide dog, signal dog, or other animal individually trained to work or perform tasks for the benefit of an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals with impaired hearing to intruders or sounds, providing animal protection or rescue work, pulling a wheelchair, or fetching dropped items. If an animal meets this definition, it is considered a service animal for purposes of this regulation even if it has not been licensed or certified by a state or local government, or by a private agency.

2.2 Pet means a domestic animal kept for pleasure or companionship.

2.3 Therapy animal means an animal with good temperament and disposition, and who has reliable, predictable behavior, selected to accompany people with disabilities. The animal may be incorporated as an integral part of a treatment process. A therapy animal does not assist an individual with a disability in the activities of daily living. The therapy animal does not accompany a person with a disability at all times, unlike a service animal that is always with a person with a disability. A therapy animal is not considered to be a service animal under this regulation or other disability law.

2.4 Disability means a physical or mental impairment that substantially limits one or more major life activities of an individual.

2.5 Visitor means a person other than a student, faculty member, or employee of NC State who is a guest on campus and/or who participates in a university program, service, or activity.
3. Responsibilities of Persons Using Service Animals

3.1 The care and supervision of a service animal is the responsibility of the person using the animal’s services (hereinafter “owner”). The owner must ensure that the animal is in good health and has been vaccinated against diseases common to that type of animal as recommended by the American Veterinary Medical Association. For example, dogs should have routine maintenance for flea and tick prevention, de-worming, and have annual examinations.

3.1.1 Dogs must wear a rabies tag. (NC Rabies Law N.C. Gen. Stat. § 130A-185) (City of Raleigh Code, § 12-3008). If an animal other than a dog is to be used as a service animal, the Director of University Animal Resources must approve the health requirements regarding that animal. The owner must comply with the City of Raleigh ordinance (Sec 12-3015) requiring that all dogs be licensed.

3.1.2 The owner must keep the service animal on a leash/lead when the animal is in a public area (i.e. classroom, library, common area of a residence hall, outdoors on campus, etc.), unless the service animal is required to perform a task that it could not accomplish while on a leash/lead or the owner is otherwise unable to maintain the animal on a leash/lead due to a disability, in which case the owner must be able to maintain control over the animal. The owner does not need to keep the service animal on a leash/lead in private areas assigned to the owner (e.g., the owner’s office or residence hall room) or private areas assigned to a third party if the third party consents to the animal being off leash/lead.

3.1.3 The owner must be in full control of the animal at all times.

3.1.4 The owner is responsible for the cost to repair any damage done by the service animal to university property.

3.1.5 If a student plans to live on campus, the owner must notify University Housing in writing about his/her need to have a service animal in campus housing at least two months prior to the date when prospective housing will be needed. University Housing, in consultation with the ADA Coordinator, shall process such requests.

3.1.6 Any student who violates any provision of this regulation is subject to discipline under the Code of Student Conduct. Such discipline may include the restriction or removal of the service animal.
4. Responsibilities of the University Community

4.1 Members of the university community shall:

4.1.1 Allow a service animal to accompany the owner at all times and everywhere on campus except where specifically excepted by Section 5;

4.1.2 Not touch or feed a service animal unless invited to do so;

4.1.3 Not deliberately startle an animal;

4.1.4 Not separate nor attempt to separate a service animal from its owner;

4.1.5 In emergency situations:

4.1.5.1 Notify all safety and security personnel of the existence and possible location of service animals on campus;

4.1.5.2 Identify places where service animals will be dealt with in cases of emergencies; and

4.1.5.3 Provide training to safety and security personnel as to possible service animal responses to smoke, fire, wind, excessive rain, hail or flooding, noise, explosions, and similar emergency situations.

5. Areas Restricted to Service Animals

5.1 The university may prohibit the use of service animals in certain locations due to health or safety restrictions, where service animals may be in danger, or where their use may compromise the integrity of certain research. Such restricted locations include, but are not limited to, food preparation areas, certain research laboratories, mechanical rooms/custodial closets, wood/metal/machine shops, nuclear research areas, classrooms with demonstration/research animals, areas where protective clothing is necessary, and other areas where the animal’s presence may constitute a danger or a fundamental alteration of the program or activity conducted in the area. Access to restricted areas may be granted on a case-by-case basis by contacting the appropriate department and/or laboratory representative and the ADA Coordinator. The university will pursue an interactive process to determine whether or not admission of the service animal will be granted or denied. The person directing the work in the restricted area will make the final decision regarding access based on the nature of the activities occurring in the area and the best interest of the animal.
6. Removal of Service Animals

6.1 The university has the authority to remove a service animal from its grounds or facilities if the service animal becomes unruly or disruptive, unclean, and/or unhealthy to the extent that the animal’s behavior or condition poses a direct threat to the health or safety of others or otherwise causes a fundamental alteration in the university’s services, programs, or activities. If such behavior or condition persists, the owner may be directed not to bring the animal into public campus areas until the problem is rectified.

7. Conflicting Disabilities

7.1 If another person on campus has a covered disability under the ADA and it includes an allergic reaction to animals, and that person has contact with a service animal approved for presence on campus, a request for assistance will be made to the ADA Coordinator who will consider all facts surrounding the contact and make an effort to resolve the issue.

8. Appeal Procedure

8.1 In the event of a dispute about an accommodation relating to a service animal, or an animal restriction, a complaining party, who is a member of the university community (i.e., student, EHRA employee, SHRA employee, etc.) may file a formal grievance through the established grievance procedure applicable to that classification of individual. All others should contact the Office for Equal Opportunity to file a complaint.

Audience: Faculty, Staff, and Students.
Category: Health, Safety and Welfare.
AD69 Accessibility of Electronic and Information Technology

Policy Status: Active
Policy Steward: Vice President for Administration

Contents:
- Purpose
- Scope
- Definitions
- Standards
- Policy
  - Active EIT
  - Legacy EIT
    - Archived Information Resources
    - Statement of Accessibility on all Web Pages and Web-based Applications
    - Exemptions from the Policy
    - Training and Resources
- Requesting Exemption From Policy
- Further Information
- Cross References

PURPOSE:
The Pennsylvania State University is committed to ensuring equal access to information, programs, and activities through its information technologies, web pages, web-based applications, operating system-based applications, online instructional content, services, and resources "electronic information technology" or "EIT" for all its constituencies. This policy establishes standards for the accessibility of EIT considered necessary to meet this goal and ensure compliance with applicable local, state and federal regulations and laws.

SCOPE:
This policy applies to all official University electronic and information technology (EIT) used to conduct core University academic and business activities. Individual Web pages published by students, employees or non-university organizations that are hosted by the University and do not conduct University related business are outside the scope of this policy.

DEFINITIONS:
Accessible - means a person with a disability is afforded the opportunity to acquire the same information, engage in the same interactions, and enjoy the same services as a person without a disability in an equally effective and equally integrated manner, with substantially equivalent ease of use. The person with a disability must be able to obtain the information as fully, equally and independently as a person without a disability.

Accessible format – the structure and composition of digital documents and applications that are readable and usable by people with disabilities, using assistive technologies, and/or special configurations for user agents. These may include, but are not limited to: large print; recorded audio and DAISY format; HTML, MathML; and other digital formats; video captioning; and Braille.
Electronic and information technology (EIT) - Includes, but is not limited to, information resources such as web pages, websites and databases; web- and computer-based applications allowing for interaction between software and users; services employing information technology and telecommunications equipment.

Information resources - Includes web pages, videos, images, and other digital materials. Information resources differs from EIT in that it does not include technology components such as software applications and hardware devices.

Active EIT - EIT that is regularly accessed by people greater than or equal to 5 times per year is considered active.

Legacy EIT - EIT that is accessed less than 5 times per year.

Archived information resources - EIT containing core administrative or academic information, official records, and similar information that are no longer available to a wide audience, but are subject to record retention plans. Note that technology components such as software applications and hardware devices are not placed in an archive status.

Equally effective - means that the alternative format communicates the same information in as timely a fashion as does the original Web page. For interactive applications and hardware devices, "equally effective" means that the user action (e.g., registration) is accomplished in a comparable time and with comparable effort on the part of the requester.

STANDARDS:

Penn State has adopted widely accepted international and national accessibility standards and guidelines in order to ensure compliance with federal laws and regulations, particularly Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973.

Those standards to which AD69 requires conformance are the following:

- WCAG2ICT Guidance on Applying WCAG 2.0 to Non-Web Information and Communications Technologies (or current version)
- AM-HEA Accessible Instructional Materials in Higher Education Act (in development and pending legislative approval)

In the event that a person makes a request to make non-active EIT accessible, the unit responsible for its maintenance must make it compliant with the applicable standard, or provide an equally effective accommodation.

POLICY:

Active EIT:

EIT considered to be active must be in compliance with the applicable standards and guidelines described in the STANDARDS section of this policy.

Legacy EIT:

Legacy EIT must be updated to be in compliance with the applicable standards and guidelines described in the STANDARDS section of this policy, or the content must otherwise be made available in an equally effective accessible format, and in a timely manner, to any individual requesting access. The unit responsible for its maintenance must make it compliant with the applicable standards, or provide an equally effective accommodation.

Each University college, department, program, or unit must establish its own priorities and timetables for updating legacy EIT; or plan for its transition to archival status, or its removal. Priority must be given to creating accessible EIT for core institutional information such as course work, registration, advising, admission, and catalogs; and student, faculty, and staff information.

Archived Information Resources:

Information resources in archive status must be made available in an accessible format to any individual eligible for, and needing access to, such content. The unit responsible for its maintenance is responsible for providing the information resource in an accessible format.

Statement of Accessibility on all Web Pages and Web-based Applications:

All web pages and web-based applications must display in a consistent location (e.g., menu or text in the banner or footer) a statement, or link to a statement, referring to a commitment to accessibility by the University, college, department, program or unit. In addition, each page must have a link allowing users to contact the designated responsible position or positions within a college, department, program, or help desk (instead of individuals, who often change positions or outages). The link may point to Penn States’ accessibility statement: www.psu.edu/accessibilitystatement, or for full statements on web pages, the suggested language is:

The Pennsylvania State University is committed to making its websites accessible to all users, and welcomes comments or suggestions on access improvements. Please send comments or suggestions on accessibility to helpdesk@psu.edu.
OR:

“The [name of department or unit] is committed to making its websites accessible to all users, and welcomes comments or suggestions on access improvements. Please send comments or suggestions on accessibility to the [position to contact].”

Exemptions from the Policy:

The following circumstances may qualify as exemptions from this policy:

1. Where compliance is not technically possible or may require extraordinary measures due to the nature or intent of the information resource, application or service, a request for exemption must be made. Lack of sufficient funding for any particular college, department, program, or unit of the university would not be considered for an exemption.

2. Where compliance would result in a fundamental alteration of the information resource, application, or service, and not satisfy the original intent.

3. Where, in the case that information resources, applications and services that are procured through third party vendors or contractors, and that no alternative accessible products are available from other third party vendors or contractors, procurement can be made of a non-compliant product.

4. Where the product is not currently in compliance, but efforts are underway to fix the defects by a defined date.

Training and Resources:

Penn State has identified considerations and helpful hints for faculty, staff, and students that will assist in ensuring the accessibility of EIT maintained by University colleges, departments, programs, and units. Information is centrally located at http://accessibility.psu.edu/

REQUESTING EXEMPTION FROM POLICY:

Purchasers and developers of EIT may request exemption from meeting the requirements of this policy by completing the Policy AD69 Accessibility Exception Request, then submitting it to the ADA Compliance Office for review and approval if determined to be a justifiable reason for exception.

FURTHER INFORMATION:

For questions, additional detail, or to request changes to this policy, please contact the Office of the Vice President for Information Technology.

CROSS REFERENCES:

AD54 - Web Page Design and Image

Most recent changes:

• September 26, 2016 - Major updates have been made to the policy to reflect current standards and best practices.

Revision History (and effective dates):

• August 2, 2011 - New policy.

Date Approved: September 26, 2016

Date Published: September 26, 2016

Effective Date: September 26, 2016
Policy UL-AD15 Web Accessibility

Main Policy Content

Contents:
- Purpose
- Policy
- Guidelines
- Pages Authored Within the CMS
- CMS Development
- Libraries Applications and Pages Authored Outside the CMS
- Third Party Applications
- Cross References

PURPOSE:
This policy complements University Policy AD69 Accessibility of Penn State Web Pages and defines the Libraries' Web accessibility requirements.

POLICY:
Creating and maintaining an accessible web site is an ongoing Libraries priority and responsibility. Our goal is to provide effortless access for all students, faculty, staff and visitors to the University Libraries' online resources. The Penn State University Libraries are committed to making the Libraries web site and resources accessible to all.

The Penn State University Libraries' Websites, sites, and services must be in compliance with the World Wide Web Consortium's standard: Web Content Accessibility Guidelines (WCAG) Version 2.0, AA conformance level.

GUIDELINES:
The University Libraries will make a consistent effort to provide fully accessible Web pages for University students, faculty, staff and visitors. If a user is in one of these University categories identifies a need for Web page content that is not accessible and requests assistance, all reasonable efforts will be made to provide an accessible page.
Requests for exemption may be submitted by the unit to the University Libraries’ Web Liaison for review in cases where accessible access is not possible (e.g., the content due to its nature or format cannot be made accessible, the issue is with third party software and code changes cannot be made, etc.) or may require extraordinary measures. The Libraries’ Web Liaison will investigate the request, and if no other options are available, may submit the request for exemption in writing according to AD69 guidelines.

If it is not possible to make the page accessible, the unit or department will consult with the requester and provide an equally effective alternative to the information whenever feasible. “Equally effective” means that the alternative communicates the same information in as timely a fashion as does the Web page. For those sites or individual pages that cannot be made accessible, the unit or department representative may contact Adaptive Technology and Services in the office of Access Services or the University Libraries’ Web Liaison for consultation on providing an alternate format when requested by a University library user (faculty, student, or staff).

PAGES AUTHORED WITHIN THE CMS:
Standard Web pages authored within the CMS will be WCAG 2.0 AA compliant.

Authoring of pages with non-standard or non-text content may in some cases bring pages out of WCAG 2.0 AA compliance. I-Tech will be responsible for conducting monthly accessibility scans to ascertain whether any new posted content is accessible and will make authors aware of any inaccessible content on their pages. Authors will follow the recommended workflow in making their pages accessible. If pages cannot be made accessible, I-Tech will work with the page creator to create an accessible alternative in a reasonable timeframe.

CMS DEVELOPMENT:
Every effort has been made in development to create CMS components and templates that deliver pages that are accessible according to WCAG 2.0 AA. Any new components and templates developed by I-Tech will be written to ensure accessibility. Where necessary, components and code delivered by Adobe CQ will be customized to produce pages that are WCAG 2.0 AA compliant.

The footer on every page must contain the approved accessibility icon and associated link to the Libraries’ accessibility statement/guidelines.

LIBRARIES APPLICATIONS AND PAGES AuthORED OUTSIDE THE CMS:
Libraries applications and web pages authored outside of the CMS will be WCAG 2.0 AA compliant. Responsibility for testing the accessibility of Web pages and Libraries applications resides with the creators and their unit or department. Pages or application must pass the automated accessibility scans with University-provided auditing software, and must also be manually checked with the use of assistive technology. The pages will be scanned as part of the weekly accessibility audit. Any accessibility issues will be reported to the responsible unit and corrected in a timely fashion. Contact: I-Tech for assistance in automated and manual web page scans and accessibility remediation.

THIRD PARTY APPLICATIONS:
The Libraries will include compliance with AD69 as a requirement in future RFPs and as an evaluation criterion for purchase of or subscription to third party software/resources.

The University Libraries’ Web Liaison will review the policy and guidelines annually.

CROSS REFERENCES
University Policy AD69 Accessibility of Penn State Web Pages
Web Content Accessibility Guidelines (WCAG) Version 2.0
Effective Date: September 19, 2005
Date Approved: September 19, 2005 (Dean’s Library Council)
WORLD WIDE WEB ACCESSIBILITY POLICY

POLICY

1. All new or revised Web pages and other Web resources published, hosted or otherwise provided by the University must be in compliance with the World Wide Web standards defined in the Federal Rehabilitation Act Section 508, specifically subsections 1194.22 and subsection 1194.31.

   a. Reasonable effort must be taken to ensure that legacy Web pages and resources are in compliance with these subsections of Federal Rehabilitation Act Section 508 no later than November 1, 2003. That effort must be documented. Legacy Web pages and resources will be considered those that are published prior to November 1, 2001.

   b. Upon specific request, information on legacy Web pages and resources is to be made available to any individual needing access to such content by revision or otherwise. The unit responsible for the creation of the information on the Web is responsible for providing that access.

   c. Upon specific request, information on Web pages and resources in archive status (e.g., no longer in use but subject to records retention plans) containing core administrative or academic information, official records, and similar information is to be made available/accessible to any individual needing access to such content, by revision or otherwise.

   d. What constitutes a Web page or other Web resource is to be interpreted broadly, and for example, does not depend upon the type of client or host device, the type of software on the client or host devices, or the technical means by which the client and host communicate over the Web.

2. Web pages or resources specifically requested to be made accessible as part of a formal accommodation request shall be made accessible as soon as possible, or an equally effective alternative shall be provided. Equally effective means that it communicates the same information and provides the equivalent functions in as timely a fashion as does the Web page or resource.

3. For items 1 and 2 above, undue administrative or financial burdens may contribute to a determination that alternative formats be used to provide the information to individuals requiring use of the information. If compliance in specific instances appears to be impossible or an undue burden, the Office of the Chief Information Officer (CIO) may grant exceptions.

4. Each Web site must contain an accessible link or a person to contact if users have trouble accessing content within the site. This would usually be the Web developer or publisher. The addition of a link or contact person is not sufficient, in and of itself, to comply with the World Wide Web Accessibility Policy.
BACKGROUND

The World Wide Web is a major, if not a primary source of information for many people. Acknowledging that the University of Wisconsin–Madison (hereafter referred to as the “University”) is engaged in Web development and publishing for all its constituencies, this policy establishes minimum standards for Web accessibility.

The University, along with UW-System, endorses the Guidelines of the World Wide Web Consortium (W3C) as the standard for World Wide Web accessibility and compliance with the Americans with Disabilities Act. W3C is composed of over 400 member organizations worldwide (public and private) developing common protocols to promote the evolution of the World Wide Web and ensure its interoperability. As part of its work, the W3C has developed accessibility guidelines for the World Wide Web. The standards of the Federal Rehabilitation Act (Section 508) are consistent with the W3C Guidelines and provide achievable, well-documented guidelines for implementation.

AUTHORITY

This policy is issued by the Vice Provost for Information Technology.

ENFORCEMENT

If necessary, at the discretion of the university leadership or their designees, some or all non-compliant portions of Web pages and resources may be brought into compliance by designated staff or contractors and the expense of that work may be charged to the UW–Madison unit that is responsible for assuring the accessibility of that information on the Web.

RELATED DOCUMENT

The associated Implementation Procedures are an extension of the policy.

CONTACT

Please direct questions about this policy to accessibility@wisc.edu.

WORLD WIDE WEB ACCESSIBILITY IMPLEMENTATION PROCEDURES FOR THE UW–MADISON WORLD WIDE WEB ACCESSIBILITY POLICY

These procedures implement the UW–Madison World Wide Web Accessibility Policy. The rationale is discussed in the background section of the policy.

PRIORITY OF IMPLEMENTATION

Priority should be given to creating accessible Web pages and resources for core institutional information such as course work, registration, advising, admission, catalogs, and student services information. Units with large Web sites and resources containing core institutional information should establish priorities for ensuring access to these according to the pages and resources being used or requested most often. For setting priorities to make Web pages and resources accessible, the following guidance is suggested:
• All new and revised web pages should be made accessible at the time of creation or revision.

• The top 20% of existing Web pages and resources most frequently used (e.g., those that get the largest number of hits) should be placed in the first priority for review and made accessible as indicated. Pages and resources required for participation, funding, disability-related services and other key information or functions needed by people with disabilities, not already in the top 20%, should also be placed in the first priority. Each department or University entity is responsible for determining the top 20% used and other first priority Web pages and resources.

• Any remaining pages and resources providing core institutional information or functions should be reviewed and made accessible as indicated.

• All other Web pages and resources should be reviewed and made accessible as indicated.

RECOMMENDED ASSESSMENT PROCEDURES

It is recommended that a variety of evaluation methods be used to test the accessibility of Web pages and resources, including automated testing, client and/or device testing, expert evaluation, and user testing.

EXCEPTION PROCEDURE

Narrowly tailored exceptions to this policy may be granted by the UW–Madison Office of the Chief Information Officer (CIO) in specific instances where compliance is not possible or would constitute an undue administrative or financial burden. To request an exception send an e-mail to accessibility@cio.wisc.edu.

RESOURCES

Information about training, consulting, and technological tools can be found through Information Technology as well as definitions and resources related to the Federal Rehabilitation Act (Section 508) and W3C.