

## General Legislative Action

At its meeting on May 13, 2021, the Faculty Senate approved Class B Legislation to amend *Student Governance and Policies*, Chapter 112 (Examinations). President Ana Mari Cauce has also approved the proposed legislation. This legislation prohibits instructors from requesting medical documentation as proof of short-term illness to justify an absence. The faculty was given the opportunity to submit written objections to its substantive nature, under the Faculty Code, Chapter 22, [Section 22-74](#) Senate Procedure: Class B Actions. There were twelve objections to this legislation.

### **Class B Legislation Student Governance and Policies Scholastic Regulations Chapter 112, General Requirements**

#### **Background and Rationale**

In practice, many UW instructors may currently require that students provide “medical excuse notes” following a short-term absence. These are documents from a medical provider attesting to the severity of the illness and the necessity that the student be absent from class. These notes are required with good intentions: to discourage students from missing class for frivolous reasons and to protect against fraudulent claims of illness. However, this strategy of routinely requiring students to obtain medical excuse notes does little to meet these goals and has unintended, adverse consequences for the student, the medical providers, and the University.

Faculty Senate and ASUW leadership (Board Bill 5.03), in conjunction with colleagues at Hall Health, have identified several key areas of concern:

- Student Safety and Autonomy — Requiring a medical excuse note removes students’ autonomy to responsibly assess and practice self-care for minor ailments and health concerns. Students who see a provider to get a note have a specific objective: to get the note. There is pressure to make sure that the symptoms are presented in such a way that the provider will generate a note. This may result in students not taking care of their symptoms in a timely manner at home or they may exaggerate their symptoms, leading to testing or treatments that incur risk. In either case, and patients may be harmed -physically or financially- as a result. The risk/benefit ratio in these cases is significant. Hall Health promotes responsible self-care and self- reliance among students, including making one’s own determination about when to see a doctor and when to practice self-care for minor ailments and health concerns.
- Financial Burdens and Inequities – Students who are uninsured/underinsured, including low income students, DACA students, and minority students are at a financial disadvantage when seeking medical care. Policies that require a student to seek care for an administrative reason place a financial burden on these students and affect students in unequal ways. Further, there are many online sources to purchase a fraudulent medical note - resulting in dishonest behavior by students who can afford this route, which also highlights financial inequities among students.
- Respecting the identities and safety needs of students — Requiring students to provide a doctor’s note implicitly or explicitly asks students to engage with Western medicine. For students who utilize healthcare traditions that align with other cultural backgrounds, this setting may not be supportive of their identities and practices. Further, Western medical settings in the U.S. have not always been safe spaces for BIPOC, trans, fat, and disabled people, and this precedent continues in many modern medical settings. Requiring students to see a doctor is a gatekeeping mechanism that forces students into a space that may be emotionally perilous and potentially threatening. Removing this requirement eliminates the need for students to enter into a system that may feel unsafe for them.

- Protecting the provider-patient relationship — Lacking omniscience, a provider must rely on the patient's description of the symptoms. Sometimes this is after the illness has already resolved and the student is only seeking a note. Providers are trained to be advocates for their patients and so a note will be provided almost 100 percent of the time. Thus, a medical excuse note provides no actual confirmation of the veracity, intensity, or duration of a student's illness, and thus is of no value as a check on student behavior.
- Hall Health Access and Resources — Hall Health is often filled to capacity. Students who don't really need to be a patient limit access for those who do have a medical need for care. The generation of excuse notes is a wasteful use of expensive and limited health care staff time and resources. Estimates from Hall Health suggest as much as \$250,000 annually is spent attending to some 2,500 note requests, and that visits for such requests represent approximately 5 percent of total student visits.
- Education and personal responsibility — The relationship between instructors and students should be focused on classroom behavior and academic performance. Medical information is private, and is no more a part of this relationship than it would be in any other professional context. As students develop intellectually and prepare for their careers beyond college, they should experience an environment that requires personal responsibility and accountability, reflecting the professional realities that they will experience after graduation. An important educational component of college life is developing personal responsibility, self-reliance, and resilience, in addition to professional conduct and communication skills.

Given these serious concerns, the Faculty Senate and ASUW leadership propose the following change to prohibit requests for medical excuse notes by instructors. Of note: limiting routine medical excuse notes would not have any bearing on documentation needed for disability, hardship, or other significant circumstances (including medical conditions) requiring longer term absences from the University; nor would such limitations prevent instructors from requiring students to justify the unavoidable nature of an absence, or require that instructors develop new accommodations. This change is intended to protect students from having to disclose private information to faculty, engage in potentially risky behaviors, or face undue financial and emotional burdens, to conserve resources at Hall Health, and encourage personal responsibility and professional conduct among students.

Nevertheless, changing faculty use of medical excuse notes will have meaningful impacts on many courses across all three campuses. This change will encourage consideration of the rationale behind using medical excuse notes and how to replicate or improve upon the pedagogical role of such documentation. Ideally, this may lead to collegial and department-level conversations on classroom management strategies that will benefit faculty and students. Eliminating medical excuse notes will also change student-faculty communication and facilitate development of more realistic expectations and conduct necessary in the professional, post-college world.

Many faculty members have already abandoned the practice of requiring medical excuse notes for short-term absence. Drawing on their experience, as well as the expertise of the Center for Teaching and Learning and the University of Washington Office of the University Registrar, a set of best practice guidelines that protect students, support evidence-based pedagogy, and maintain instructors' rights and authority have been developed. These guidelines offer templates for syllabus language and student requests for adjustments, organizational and pedagogical strategies, and an FAQ section addressing concerns about this change. This supportive framework, along with more information about this new policy, related scholastic regulations, examples of unavoidable absences, references to provisions for dropping classes, changing grade status to S/NS, the leave of absence provision for long-term illness, and a complaint procedure for students who may be denied a request for a reasonable adjustment, is available to students, as well as current and future instructors on the University of Washington Office of the University Registrar's website.

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## Student Governance and Policies

### Scholastic Regulations Chapter 112

#### 1. General Requirements

B. A student absent from any examination or class activity through sickness or other cause judged by the instructor to be unavoidable shall be given an opportunity to take a rescheduled examination or perform work judged by the instructor to be the equivalent. If the instructor determines that neither alternative is feasible during the current quarter, the instructor may exempt the student from the requirement. Examples of unavoidable cause include death or serious illness in the immediate family, illness of the student, and ~~provided previous notification is given, observance of regularly scheduled religious obligations and might possibly~~ include attendance at academic conferences or field trips, or participation in University-sponsored activities such as debating contests or athletic competition. ~~Instructors may require written communication from students in making these determinations, but instructors are prohibited from requesting, and students should not provide, medical documentation as proof of short-term illness to justify an absence.~~ The regulations for Incompletes in Scholastic Regulations, Chapter 110, Subsection 1.A.3 shall apply.

*S-B 110, May 26, 1970; S-B 112, October 27, 1970; S-B 140, December 1982; S-B 155, June 18, 1993: 24 all with Presidential approval.*

*Approved by:*  
Senate Executive Committee  
May 3, 2021

*Approved by:*  
Faculty Senate  
May 13, 2021