



Disabled Student Commitment: Information sharing best practice guide

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The
Disabled Student
Commitment



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Executive summary

The Disabled Student Commitment (DSC) – sometimes referred to as the ‘Commitment’ - was published in April 2023 by the Disabled Students’ Commission. The Commitment is a voluntary, non-regulatory framework that aims to enhance the disabled student experience in Higher Education (HE). Since its launch, 36 Higher Education Providers (HEPs) have signed up to the Commitment.

The DSC is supported by several Communities of Practice and Special Interest Groups (SIGs) established by the DSC steering group to facilitate sector collaboration on specific topics, including information sharing. This guide comes from the work of the Information Sharing SIG.

The guide presents institutional case studies, centred on the Commitment’s information sharing principles, and informed by interviews with Disability Services staff in the HE sector. Using an anonymous online survey, this guide also highlights existing practice from the wider HE sector and provides key recommendations for providers that are seeking to improve their provision in line with the Commitment. Recommendations could be used as a starting point for HEP’s Disabled Student Commitment action plan.

This guide references the Equality and Human Rights Commission’s (EHRC) Advice note for the higher education sector from the legal case of the University of Bristol vs Abrahart (2024), with the view to helping institutions understand how this relates to the Commitment.

This guide highlights that most HEPs provide students’ adjustments through Support Plans. However, practices vary in how much detail is shared and who can access student information, with some HEPs allowing students to control visibility while others do not. Requirements for medical evidence and resubmission of disability information also differ, with some HEPs requiring evidence for all adjustments or updates, while others adopt a more flexible approach aligned with urgent needs and self-certification. Overall, these findings highlight inconsistencies across the sector and suggest a need for clearer guidance on information sharing, evidence requirements, and student-centred support.

Variation in evidence requirements, information sharing, and support access across HEPs creates inconsistent student experiences and may risk non-compliance with the EHRC advice note. Clear, consistent policies and staff training aligned with the social model of disability could improve equity, confidentiality, and the effectiveness of support for all students.

The case studies within this guide demonstrate that integrated systems and clear referral pathways can significantly reduce the need for students to repeatedly share their disability, improving both efficiency and student trust. They also show that flexible approaches to evidence align with the EHRC advice note and reduce unnecessary barriers. Collectively, these findings highlight the importance of whole-institution frameworks that balance confidentiality with timely, anticipatory support to create a more consistent and equitable experience for disabled students.

1 About this guidance

This guide, produced by the Disabled Student Commitment Information Sharing SIG, examines how HEPs manage and share disability-related information, drawing on survey data, sector case studies, and practitioner expertise. Disabled students often face frustration and inequity when required to repeatedly share the same information or undergo unnecessary reassessments, highlighting the need for more consistent and effective practices.

The guide identifies four guiding principles for improvement: consistency, through streamlined systems that avoid duplication; communication, ensuring timely and effective support; choice, empowering students to control what is shared; and certainty, giving students confidence that their needs will be met without unnecessary barriers. To achieve meaningful change, HEPs should adopt whole-institution approaches, align with EHRC guidance, and embed the social model of disability.

It reflects the combined best practices of practitioners from a significant number of HEPs and beyond. It is a first attempt at summarising these and, as such, should be viewed as a living document, open to enhancement and enrichment.

Dr Iliyan Stefanov

Chair of the Information Sharing Special Interest Group and Group Director Library and Student Services, London South Bank University

2 Introduction

This guide has been developed by the Information SIG, commissioned by the DSC, and chaired by London South Bank University. The purpose of this report is to understand where best practice already exists within the HE sector, in line with the Commitment principles on sharing information.

Effective information sharing is a crucial touchpoint in the disabled student journey. It is essential that this is viewed by students as a positive step in the student experience. The Commitment acknowledges that HEPs have a range of record systems, but often the systems do not work together. This can result in repeated requests for information. Disabled students have consistently expressed that they find it frustrating, off-putting, and disrespectful to be repeatedly asked to share information about their disability. The Commitment concludes that disabled students want four things: communication, consistency, choice, and certainty (The Disabled Students' Commission, 2023).

The guide is structured around the following principles taken from the Commitment (The Disabled Students' Commission, 2023, p.7):

- 1 Over time, students are asked only once to share information about their disability during their course of study. Students may want to update the information shared and should have opportunities to do so during their course, for the purpose of ensuring appropriate reasonable adjustments are in place.
- 2 If a disabled student is required to share information more than once about their disability, it should be for the purpose of ensuring appropriate support is provided and not be a request to provide further evidence of their disability.
- 3 Explicit student consent is in place before information about their disability and the adjustments they require are shared between staff, departments and services within the provider. Where a student chooses not to provide consent, steps are taken to ensure that they understand the implications of their decision for the support that can be provided.
- 4 Open channels of communication are in place, to help create appropriate and timely information sharing across the provider with relevant individuals and departments.

To remain focused, this guide provides limited case studies based on each principle. The contact details for each contributing institution can be found in Appendix B.

While effort has been made to collect case studies from a variety of providers (e.g., from different geographic locations, student population, and staffing numbers), further research could seek case studies from Scottish and Welsh HEPs as these are absent in the current research.

3 Ethics

This study was conducted in accordance with ethical research guidelines. Prior to data collection, ethical approval was sought and granted by the NADP (approval number 0023). All participants were fully informed about the purpose of the research, and informed consent was obtained before participation. Data was collected and stored securely to ensure confidentiality and anonymity, and participants retained the right to withdraw at any stage without consequence.

4 Methodology

The research used a mixed-methods approach, combining qualitative and quantitative data collection. Case studies were developed through semi-structured interviews, allowing for in-depth exploration of participants' experiences and perspectives. Participants were recruited through the Information Sharing SIG and networking at several HE events. Explicit permission has been given by the case study participants for their institutions to be named.

To complement this, an anonymous survey was distributed to a wider range of disability practitioners through the NADP mailing list, providing quantitative insights while ensuring participant confidentiality. The survey was initially piloted with two practitioners. This combination of methods enabled a richer understanding of the research topic by balancing detailed personal accounts with broader trends.

5 Key recommendations

Based on the evidence collected, the following recommendations are proposed to support better experiences and processes relating to information sharing.

Data & confidentiality

- + Provide clear, institution-wide guidance on who can access students' disability information and how. This approach needs to balance confidentiality with enabling the implementation of appropriate student support.
- + Give students a choice over what information is shared and with whom.
- + Ensure consistent communication of student-chosen information to staff and departments.
- + Provide clear data protection statements on storage and sharing. An example is in Appendix C.

Evidence & support

- + Reduce reliance on medical evidence—use it only for supplementary information or not at all.
- + Allow the implementation of adjustments while evidence is pending.
- + Enable academic staff to make interim adjustments, with clear guidance and a referral process to the Disability Service.
- + Request evidence only when necessary (for example, for internally funded support) and ensure policies for evidence requests are justified and implemented consistently.
- + Enable student self-certification for Extenuating Circumstances and late submissions. Alternatively, automatically share students' medical evidence with the Extenuating Circumstances Team or allow disabled students to apply for Extenuating Circumstances using their Support Plan as evidence.
- + Staff training should be provided aligned with the social model of disability.

Processes & systems

- + Ensure Disability Services are notified of Higher Education Statistics Agency (HESA) code updates made by students. Offer timely reviews of support after updates.
- + Create a formal referral process to the Disability Service for disclosures made to other departments.

- + Put robust systems in place to provide certainty on when and how information is shared. Embed these approaches into policy and processes for consistency across the institution.

6 Sector survey

As part of the SIG's work, London South Bank University, in collaboration with NADP, invited HEPs to participate in an anonymous survey. Participation was open to all institutions, regardless of whether they had signed up to the Commitment.

A total of 22 HEPs responded to the survey, reflecting a cross-section of the sector in terms of institutional size, age, and student population.

The 11 survey questions are set out below with accompanying analysis of the response rates and key insights.

Question 1: Are students asked to re-share their disability at any point whilst studying?

- + 0 HEPs stated that students need to re-share their disability with the Disability Service.
- + 8 HEPs stated that disclosure is not needed for services linked closely to the Disability Service (e.g., Mental Health, Student Advice) but is still required for others, such as Accommodation or Careers.
- + 11 HEPs reported that students are not required to reshare their disability.
- + 3 HEPs selected 'other' as their processes are under review.

The EHRC's advice note for the higher education sector from the legal case of *University of Bristol vs Abrahart* states that "where the evidence of a disability is apparent from the student themselves, for example through their behaviour or language, the education provider has knowledge of the student's disability" (2024, p.2).

Variation in practice suggests the sector needs clearer guidance on who can access disability information and a whole-institution approach to sharing it. A balance must be struck between protecting confidentiality and ensuring students receive **consistent** support.

Question 2: Can students update their disability information themselves?

- + 6 HEPs allow students to update their disability identification or diagnosis themselves.
- + 16 HEPs do not have a mechanism for students to update their own information.

All case study participants confirmed that students can change their HESA code at enrolment or re-enrolment. However, this information is often not shared with the Disability

Service meaning students may assume their update has been received but no proactive review of support is initiated.

A more robust process is needed to notify the Disability Service when HESA data is updated to provide **certainty** for students that the University is aware of when they share data.

Question 3: Do you have a formal process or platform for staff members outside of the Disability Service to refer students should they share a disability or Specific Learning Difference?

- + 7 HEPs stated that they have a formal process or platform for referrals to be made to the Disability Service.
- + 15 HEPs reported having no formal mechanism for referrals.

Case study interviews and free-text responses from the survey indicated that, in the absence of a formal referral process, there is a reliance on signposting and self-referral. This guide recommends that a formal referral process would benefit both students and staff. It would ensure **consistency** of information sharing and improve **communication** between students and the University.

Question 4: Is providing evidence mandatory to access reasonable adjustments?

- + 11 HEPs require evidence before implementing any adjustments regardless of the disability.
- + 1 HEP only requires evidence for certain disabilities.
- + 8 HEPs do not require evidence but request it as supplementary information.
- + 2 HEPs do not request evidence at all.

HEPs stated that there may be specific situations where evidence is requested. For example, in cases where students need to have priority access to Halls. Some HEPs also noted that, although their policy states students need to provide evidence to access adjustments, they can implement temporary arrangements without evidence and offer support for those experiencing poor mental health.

Many HEPs noted in the survey and case study interviews that they are moving towards a model where evidence is needed only as supplementary evidence or is not required at all. For **consistency** and to improve **communication** with students, this approach should be built into policy and processes.

Question 5: If a student doesn't provide evidence, can they still access adjustments?

- + 16 HEPs allow students to access some adjustments without medical evidence (eg., a dyslexia assessment or doctor's letter).
- Out of these 16 HEPs, 10 said funded or more complex adjustments would require evidence.
- Out of these 16 HEPs, 6 said students can access any support without evidence.
- + 6 HEPs stated that students cannot access any adjustments without evidence.

The EHRC advice note (2024) states that reasonable adjustments may be made without evidence in cases of severe or urgent need, and Disability Services should be trained to recognise crises and determine appropriate support. Training should align with the social model of disability, which focuses on removing societal barriers rather than emphasising medical proof. HEPs requiring evidence in all cases may be acting against EHRC advice when students are in urgent need.

Some respondents noted that, while evidence is mandatory, they adopt a flexible approach by implementing adjustments while documentation is pending. As noted above, for consistency and to improve **communication** with students, this approach should be built into policy and processes.

Where evidence is requested, a clear and justified policy should be in place and followed in a **consistent** manner to ensure equity in the student experience.

Question 6: Do students need to provide additional or new evidence for their adjustments to be updated?

- + 6 respondents stated that updating a student's adjustments requires clear medical evidence, specifically stating the new adjustments and their usual way of working.
- + 4 HEPs stated that students need evidence, but it doesn't need to state the specific adjustment.
- + 12 HEPs reported that students don't need to provide updated evidence.

The EHRC advice note (2024) states that reasonable adjustments may be made without evidence in cases of severe or urgent conditions. This approach could be extended to cover updates to adjustments. HEPs should ensure evidence is requested only when necessary or when a request may not be reasonable for the student's learning.

Question 7: Do students need to provide evidence for Extenuating Circumstances or late submission?

- + 8 HEPs require disabled students to reshare or provide new evidence when applying for Extenuating Circumstances.
- + 6 respondents reported that students need to provide evidence for Extenuating Circumstances only.
- + 0 HEPs require evidence solely for the late submission process.
- + 8 HEPs do not require evidence for either process.

Where evidence is not required, case study participants reported using self-certification, automatic sharing of medical evidence between teams, or allowing students to use their Support Plan as evidence. Where possible, clear processes should be implemented to provide **certainty** to students and aid in **communication** across the HEP.

Question 8: Does your HEP have a consent to share process which, when agreed to, allows the team to share the student's adjustments?

- + All 22 HEPs surveyed have a consent to share process.

Appendix C shows an example of a consent to share document provided by Queen Mary's, University of London. Data protection statements should be clear and concise to ensure students understand where their data is stored and how it is shared.

Question 9: What disability and adjustment information do you put in a student's Support Plan?

- + All 22 HEPs include a student's adjustments.
- 15 HEPs allow students to share their disability type via a HESA category.
- 18 HEPs allow students to share their specific disability.
- 19 HEPs enable students to share information about how their disability affects them.

In many cases, students are given a choice in what information is included in their Support Plan. It is recommended that all HEPs provide students with a **choice** in what information is included in their Support Plan.

Question 10: Can students choose who their information is shared with?

- + 6 HEPs allow students to select individual staff members who can access their information.

- + 3 HEPs allow students to choose which teams can view their information.
- + 13 HEPs do not allow flexibility in who can view a student's disability information and adjustments once consent is given.

It is more common for HEPs not to provide students with a choice about who their information is shared with. Systems should be implemented which allow students a **choice** in which departments see their information. If possible, this should be made even more granular so that students can choose which individual members of staff see their information.

Question 11: Can students then choose what information is shared?

- + Once consent is given, in 7 HEPs students can select which pieces of information are shared.
- + 15 HEPs share a predetermined set of information as part of the student's Support Plan.

Students should have confidence that the information they wish to share is communicated **consistently** with the departments or members of staff they would like to see it. Robust processes should be in place to provide **certainty** to students in when the information will be shared, or made available to staff, especially as they progress through their course.

7 What can we learn from other HEPs?

Case studies were gathered via semi-structured interviews with practitioners from participating HEPs as part of the DSC Information Sharing SIG's work; brief summaries below illustrate approaches aligned to each DSC principle.

7.1 Students are only asked once to share information about their disability

University of Hertfordshire **Action taken**

Once a student registers with the Disability Service and provides consent to share, their Support Plan becomes accessible to all relevant staff involved in their education and support. This includes academic staff, health and safety teams, advisory teams, and other support services.

The Support Plan is stored in a case record management (CRM) system which integrates data from the student record system. An academic portal within the CRM enables staff to view students' details, adjustments, and interactions with professional services in one place.

CRM permissions are tailored to each member of staff to ensure they only see information relevant to the students they teach or support. Permission setting is part of the onboarding process for new staff members. All staff access is then reviewed annually.

In some instances, students may share a disability or request adjustments outside the scope of their Support Plan. For example, they need to inform the Accommodation Team if they need different adjustments for Halls to those recommended for their course. With consent, the Disability Service can facilitate this conversation to avoid the need for students to repeat their requirements.

Outcome and impact

This integrated approach means students are less likely to be repeatedly asked to share their disability, creating a more supportive environment. Staff have timely access to the information they need, reducing duplication and improving response times. As students progress through their course, updated CRM permissions ensure that only relevant academic staff can view their information. This increases **consistency** across departments, giving students confidence that their needs will be understood wherever they engage.

Student feedback confirms the effectiveness of this approach, with many noting that academic staff are well informed about their adjustments and ready to provide appropriate support.

7.2 Students may wish to update their disability-related information

London South Bank University

Action taken

Through a CRM all students can request updates to their disability information by submitting an enquiry which comes directly to the Disability Service case queue. This includes changes to their HESA category and specific diagnosis or identification.

For students with a Specific Learning Difference (SpLD), the process is streamlined further. Students can complete an online form, available on the CRM, selecting their SpLD from a list and optionally uploading supporting evidence. If a student does not have a formal identification, they are directed to complete QuickScan (a dyslexia and dyspraxia screening tool) before further steps are taken.

Once submitted, the CRM automatically applies four standard support arrangements:

- + 25% extra time in exams.
- + DDS Marking Policy.
- + Access to the Assistive Technology Rooms.
- + A five working day late submission.

Consent to share is also built into the form, enabling immediate communication of the adjustments to academic staff.

Finally, an enquiry is automatically generated in the CRM promoting a Disability Advisor to review the student's record, follow up as needed, and share the adjustments. Students who use this process are not required to book an appointment. However, all are offered the opportunity as they may wish to discuss further support.

Outcome and impact

This process gives students control over how and when they share their SpLD, offering flexibility and reducing pressure on the Disability Service during peak periods. By enabling quick implementation of standard adjustments, students gain early assurance that support will be in place. This is particularly important ahead of the Semester 1 exam deadline in November.

This approach not only provides **certainty** for students but also allows Disability Advisors to prioritise appointments for those with more complex needs or who wish to discuss the support available in more depth. Overall, students benefit from faster access to core adjustments while remaining empowered to seek further support.

7.3 Sharing information to ensure appropriate support

New College Durham

Action taken

Disabled students are contacted three times per academic year with prompts to review their support arrangements, update any changes to their diagnosis or identification, and book an appointment with a Disability Advisor if needed. Students progressing into a new academic year are specifically invited for a review meeting to ensure the support is still relevant.

Once updates are made to a student's Support Plan, it is reuploaded to the institution's CRM and the student's Course Leader is attached to the Support Plan. This action generates a notification, promoting them to review the updated support arrangements. Course Leaders are encouraged to acknowledge receipt by responding through the CRM. This also allows them space to directly communicate with the Disability Advisor to request clarification where needed.

Outcome and impact

This structured and proactive approach ensures students have **certainty** that their updated support needs are recognised and reviewed by relevant staff. In the smaller academic environment at New College Durham, Course Leaders can efficiently communicate changes to the wider teaching team.

Regular active communication from the Disability Service reduces the burden on students to initiate contact and support arrangements remain relevant.

7.4 Students should not be asked to provide further evidence

Hartpury University

Action taken

At many institutions, students are required to resubmit medical evidence when applying for Extenuating Circumstances – even for long-term conditions already shared. Hartpury University has taken a more inclusive approach by allowing students to use their existing Support Plan as evidence for applications. Students can indicate, when completing their Extenuating Circumstances form, that the Disability Service has approved the use of the Support Plan for this purpose.

The Extenuating Circumstances Team can access and review the plan as needed, removing the need for students to obtain additional evidence. Students are also permitted to submit a limited number of self-certification applications.

Additionally, the Extenuating Circumstances Team proactively monitors applications that mention a disability or recurring health condition. They then refer the student to the Disability Service for further support, as needed.

Outcome and impact

By accepting Support Plans as valid supporting evidence, Hartpury University eliminates the need for students to repeatedly seek external verification of disabilities or long-term health conditions already known to the HEP. This reduces financial and administrative burdens and ensures applications are not delayed due to a lack of evidence. The process promotes **consistency** by aligning support across departments, ensuring students receive timely and coordinated responses. It also provides an opportunity to identify students who may benefit from further support.

Students provided feedback that they liked not being repeatedly asked for further medical evidence. They also appreciated being able to add further information to their application should there be other factors or personal circumstances affecting their attainment.

The EHRC guidance recommends that HEPs should avoid requiring students to repeatedly share or provide evidence of their disability when it is already known to the provider. Hartpury's approach aligns with this recommendation as they allow students to use their Support Plan as pre-agreed evidence and have a clear referral pathway for students who may need additional support.

7.5 Explicit student consent is in place before information is shared

Queen Mary's, University of London **Action taken**

After meeting with an Advisor, a student's Support Plan is created as an online document, with a PDF copy sent to the student for review. Consent to share the plan is collected through an online form within the university's CRM – see Appendix C. A physical form is also available.

Students can choose which internal and external teams can access their Support Plan. They may select individual services or opt to share with all appropriate teams. Each consent form is signed, dated, and completed again whenever the Support Plan is updated.

Students can withdraw or change their consent at any time by contacting their Disability Advisor. In these cases, the Advisor meets with the student to explain the implications of adjusting or removing consent.

Outcome and impact

This approach empowers students to make informed decisions about how their personal information is shared. Feedback shows that students appreciate the **choice** in the consent to share process. For example, one student said they'd used the flexibility to share their SpLD identification but not their mental health diagnosis with their course team.

The regular opportunity to review and re-sign the consent form ensures that students retain **control** over their data as circumstances change. This creates trust and a sense of ownership.

Birmingham City University

Action taken

Birmingham City University has implemented a clear and structured process for sharing Support Plans. This has been developed in consultation with the institution's Data Protection Manager to ensure compliance with the General Data Protection Regulation (GDPR) and internal policies.

Once a Support Plan has been created by a Disability Advisor, it is first sent to the student. The student is invited to review and agree to the content before it is shared internally with relevant academic and professional staff.

If the student agrees, by signing the digital document, the Support Plan is immediately shared with appropriate colleagues. If the student has questions or concerns, they are encouraged to contact their Disability Advisor.

If the student does not sign the document within five working days, the Support Plan is shared with appropriate internal colleagues. This is clearly communicated to students during advisory appointments and in written communications, ensuring transparency.

Consent to share with external agencies or parents and guardians is needed before any information is shared.

When a Support Plan is updated, the student is resent the consent to share form and asked to sign it again.

This process is reviewed annually to maintain legal and procedural accuracy.

Outcome and impact

This process ensures students are fully informed about how and when their Support Plan is shared. By separating internal support sharing from external consent and providing clear **communication** at each stage, students are provided with the information needed to engage with the process.

The automatic release of the Support Plan after 5 working days to internal staff ensures timely support and means staff receive consistent information.

7.6 Information is shared between academic staff and other professional services effectively

University of Hertfordshire

Action taken

Student Support Plans are shared via a CRM with automated email notifications sent to all academic staff registered to teach the student. These alerts are triggered each time a Support Plan is created or updated, and again at the start of each semester and academic year. This ensures ongoing awareness of the student's arrangements.

To ensure students are engaging with their support and completing any necessary follow-up tasks, such as applying for the Disabled Students' Allowances or confirming consent to share, they are scheduled for a three-week follow-up appointment with their Disability Advisor. This provides an opportunity to review adjustments, raise concerns, and make amendments to their Support Plan.

Outcome and impact

This structured, automated approach gives students confidence that their academic team has been reliably informed of their adjustments without the need for repeated manual emails. As the CRM controls which staff can access a student's information, and notifications are sent only to relevant lecturers, the risk of incorrect staff accessing information is reduced. For students, this ensures **consistency** and provides **certainty**.

7.7 Choice over disability information shared

Birkbeck, University of London

Action taken

At Birkbeck, the Disability Service, Wellbeing Team, and academic staff have different levels of access to disability and adjustment-related information through a CRM. The Disability Service and Wellbeing Team can view a student's disability, how it affects them, and their recommended adjustments. In contrast, academic staff can only see the student's disability and the adjustments that are relevant to teaching and assessment. Access is role-based and managed via the university's CRM and student records systems.

Outcome and impact

This clearly defined, role-based access model ensures **consistency** when handling sensitive information. Students are given clarity on who can access which aspects of their data, reinforcing trust in the university's processes. By standardising what academic staff can see, Birkbeck maintains a consistent approach across departments and minimises the risk of inappropriate information sharing.

Queen Mary's, University of London

Actions taken

Student Support Plans are developed collaboratively with the student to ensure they accurately reflect their needs and preferences. While the inclusion of adjustments is required, students can choose whether to include additional details such as their diagnosis or identification, how this affects them, and their preferred learning or communication style.

If students opt not to share their diagnosis or contextual information, a note is added to the Support Plan indicating that this was their choice.

Outcome and impact

This approach gives students control over what information is shared with academic staff, promoting autonomy and trust in the support process. When a student chooses not to share specific details, the note included in the Support Plan prevents confusion or follow-up questions from academic colleagues about missing information. This, alongside the structured consent process (detailed in 6.5), gives students a clear sense of agency and reinforces that their **choice** around sharing information is respected.

7.8 When students withhold consent to share information

During the research for this guide, no clear processes were identified around what happens when no consent to share is given. However, several HEP's stated that a student would be prompted to speak with a Disability Advisor about their reservations to give consent and the potential consequences would be explained.

7.9 Open channels of communication

University of the Built Environment

Action taken

The University of the Built Environment has strived to embed baseline adjustments and inclusive practices across all teaching. This includes lecture recordings, the advance provision of slides and notes, and, with the removal of traditional exams, a focus on coursework-based assessments.

Once a Support Plan is agreed and consent to share is given, the student's adjustments are communicated to the academic team via an automatically updated report. The academic team is responsible for reviewing this report to stay informed of any new or revised arrangements.

For complex or non-standard adjustments, a meeting is arranged between the Disability Service and the Course Leader to discuss potential challenges and clarify how adjustments can be implemented. This is especially important given the distance learning nature of the courses the university offers. Following the meeting, a physical copy of the Support Plan is shared directly with the team in addition to the information being added to the report to ensure the bespoke arrangements are shared effectively.

Outcome and impact

This dual approach, embedding inclusive teaching practices and using clear, direct **communication** channels, ensures that students receive timely support. For students requiring more complex adjustments, early communication with Course Leaders allows issues to be identified and discussed. As a result, academic teams have clarity on their responsibilities and students can feel confident that their needs have been communicated clearly.

7.10 Timely adjustments and information sharing

University of Lancashire

Action taken

The University of Lancashire uses a CRM as its core system to manage and store disability-related information and student adjustments. This information, along with further details about the student's academic journey, is available to academic staff through the CRM.

In addition, staff have access to data reports, updated each semester, which provide insight into student demographics, course types, and disability categories (via HESA codes). These reports help both academic course teams and the Disability Service monitor the impact of Support Plans on student engagement and attainment.

Each school has a dedicated Business Partner who collaborates with the Disability Service to review this data and develop action plans where needed. For example, this might involve delivering targeted training to academic teams or designing specific interventions for underrepresented groups, such as disabled international students.

Outcome and impact

Through regular reporting, collaborative planning, and strategic use of student data, the Disability Service creates a **consistent** and responsive approach to supporting disabled students. The ability to track engagement and attainment outcomes allows the HEP to identify where support is effective and where improvements are needed. This data-led model creates accountability and ensures students receive a consistent experience.

Ulster University

Action taken

The Disability Service is actively working with academic teams to enable them to put in place their own adjustments where appropriate and time sensitive. Through targeted training, academic staff are shown which types of teaching or assessment-related adjustments can be made without referring to a Disability Advisor. For example, offering coursework extensions or adapting teaching methods.

These adjustments are made based on the student's presentation and challenges without requiring medical evidence. The process is designed to be flexible and student-centred while

still providing clear guidance on when referral to the Disability Service is necessary. For example, when adjustments could impact competency standards.

Training also includes key information for staff to pass on to students, such as the role of the Disability Advisor and cut-off dates for exam adjustments.

Outcome and impact

This approach fosters clear **communication** between students and their course teams, ensuring timely support when it's needed most. Importantly, it also aligns with the EHRC's advice note, which reinforces that HEPs have an anticipatory duty to make reasonable adjustments. It recommends that academic teams are empowered to make adaptations immediately and escalate student cases where adjustments may affect competency standards.

University of Leeds

Action taken

The Disability Service has developed a process that empowers academic staff to provide temporary adjustments to disabled students, where appropriate. This ensures support is not delayed due to waiting times for registering with the Disability Service.

Comprehensive guidance has been developed to support staff in responding when a student shares a disability or presents with support needs. The guidance outlines the types of adjustments that can be made temporarily by staff, how to respond sensitively to a student, and the requirement to actively refer the student to the Disability Service – not simply signpost them. Referrals may be made via email, telephone, or by accompanying the student to a drop-in appointment.

Outcome and impact

This process was introduced in direct response to the EHRC's advice note, which highlighted the legal obligation of HEPs to take anticipatory action to support disabled students and ensure effective internal **communication** and coordination. Further, the guidance emphasises that HEPs must not rely solely on student self-advocacy or place the burden on the student to navigate university processes such as accessing reasonable adjustments.

By clearly defining the referral process and reinforcing shared responsibilities across the institution, the university creates a **consistent** experience for disabled students.

8 References

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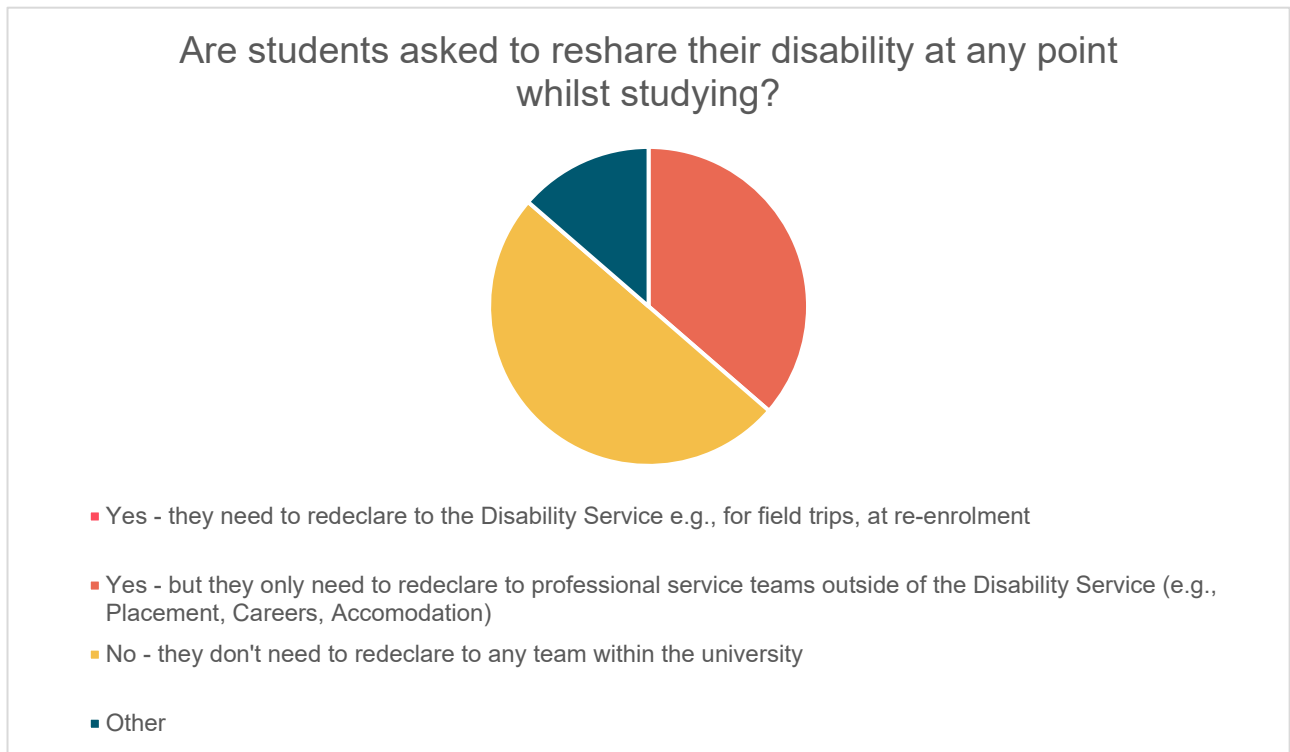
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[he/The%20Disabled%20Student%20Commitment_1681910327.pdf](https://s3.eu-west-2.amazonaws.com/assets.creode.advancehe-document-manager/documents/advance-he/The%20Disabled%20Student%20Commitment_1681910327.pdf) [Accessed 20 Aug. 2025].

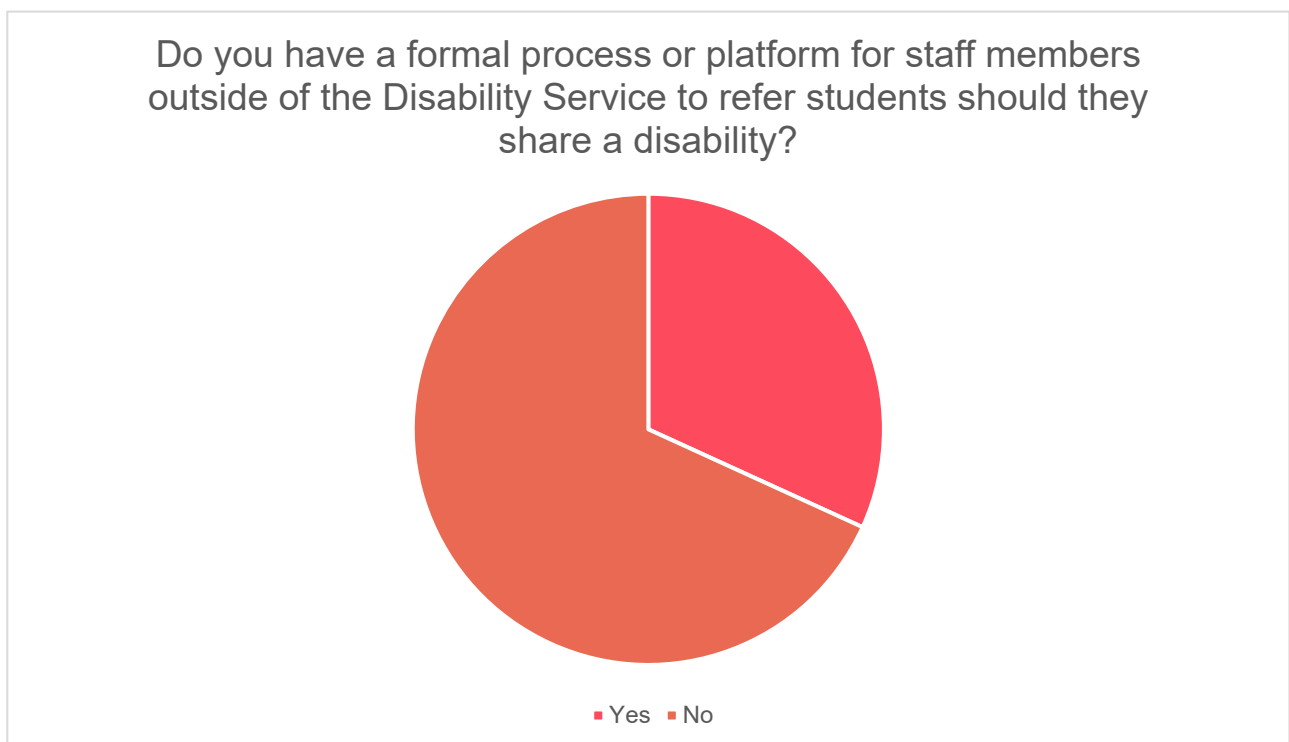
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Appendix A – Charts from sector survey

Question 1 - Are students asked to reshare their disability at any point whilst studying?

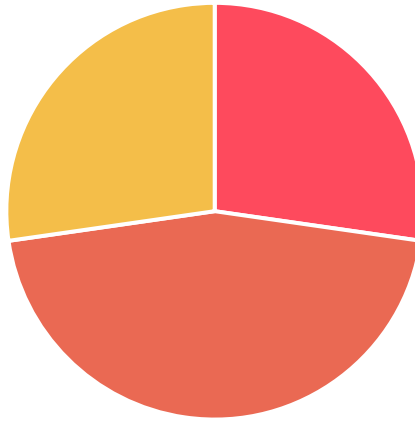


Question 3 - Do you have a formal process or platform for staff members outside of the Disability Service to refer students should they share a disability?



Question 5 - If a student doesn't provide evidence, can they still access adjustments?

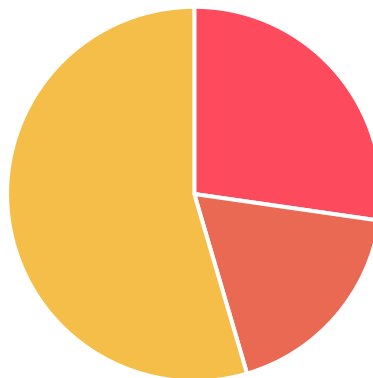
If a student doesn't provide evidence, can they still access adjustments?



- Yes - they can access any adjustments
- Yes - but they can only access certain adjustments e.g., evidence is needed for internally funded support
- No

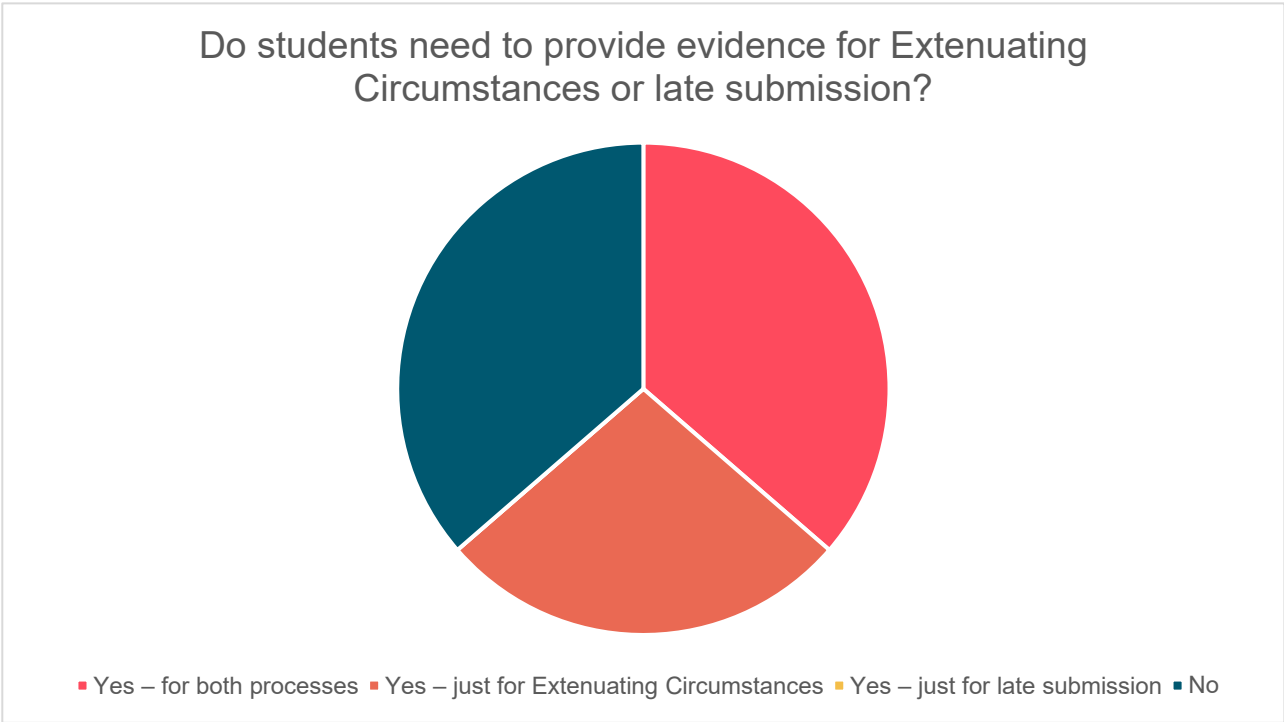
Question 6 - Do students need to provide additional or new evidence for their adjustments to be updated?

Do students need to provide additional or new evidence for their adjustments to be updated?

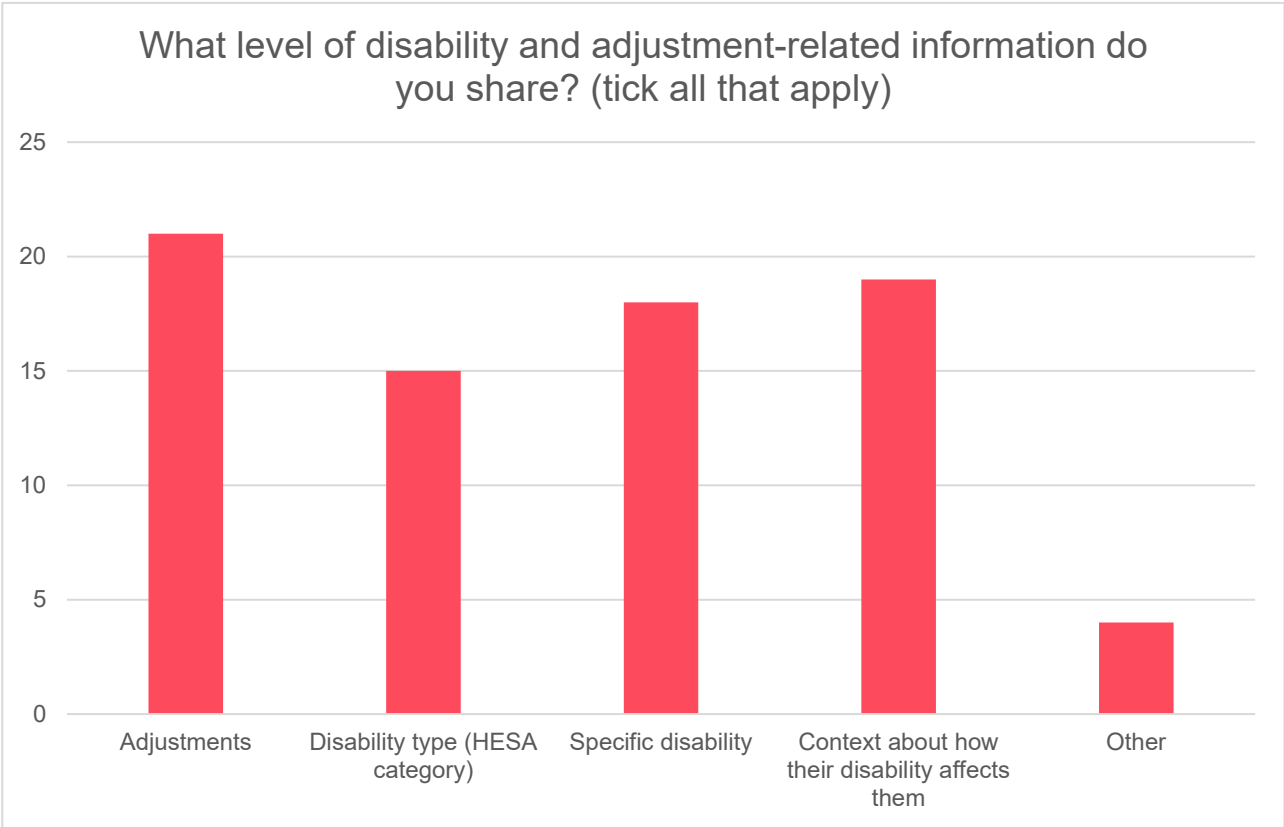


- Yes – they need evidence which clearly states the adjustment they're requesting (e.g., a GP letter supporting an at home exam)
- Yes – but it doesn't need to state the specific adjustment
- No

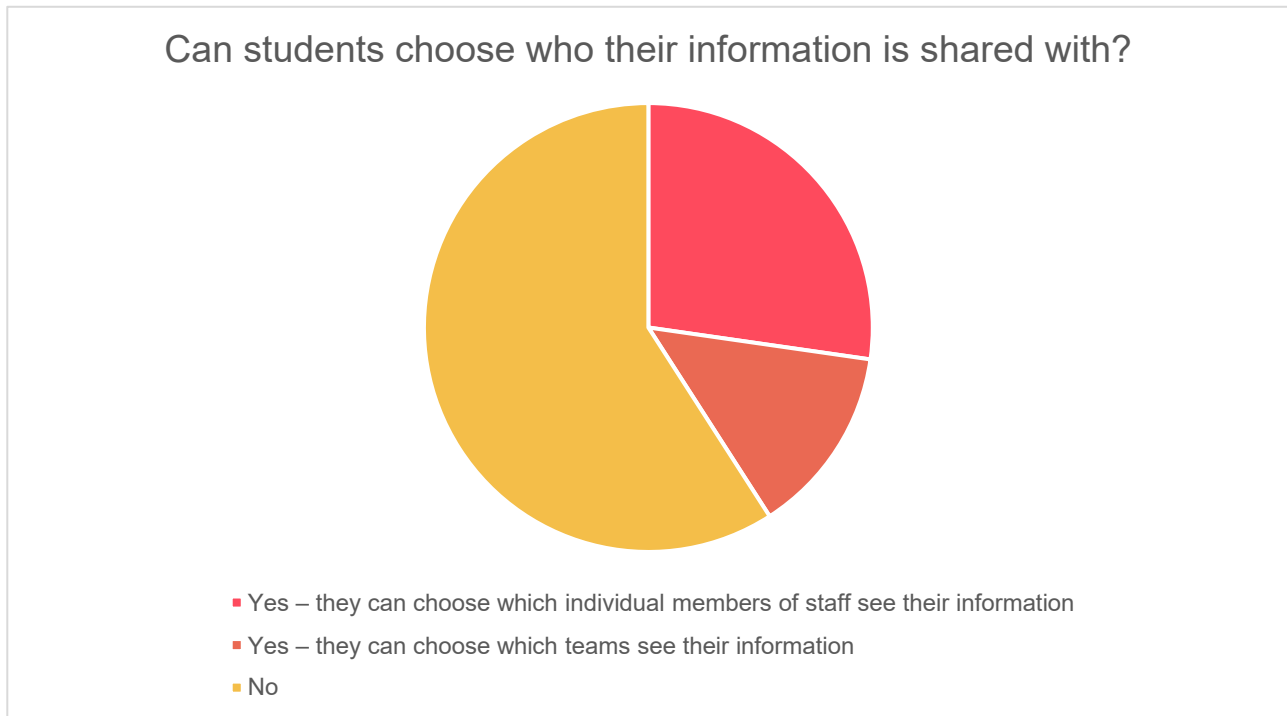
Question 7 - Do students need to provide evidence for Extenuating Circumstances or late submission?



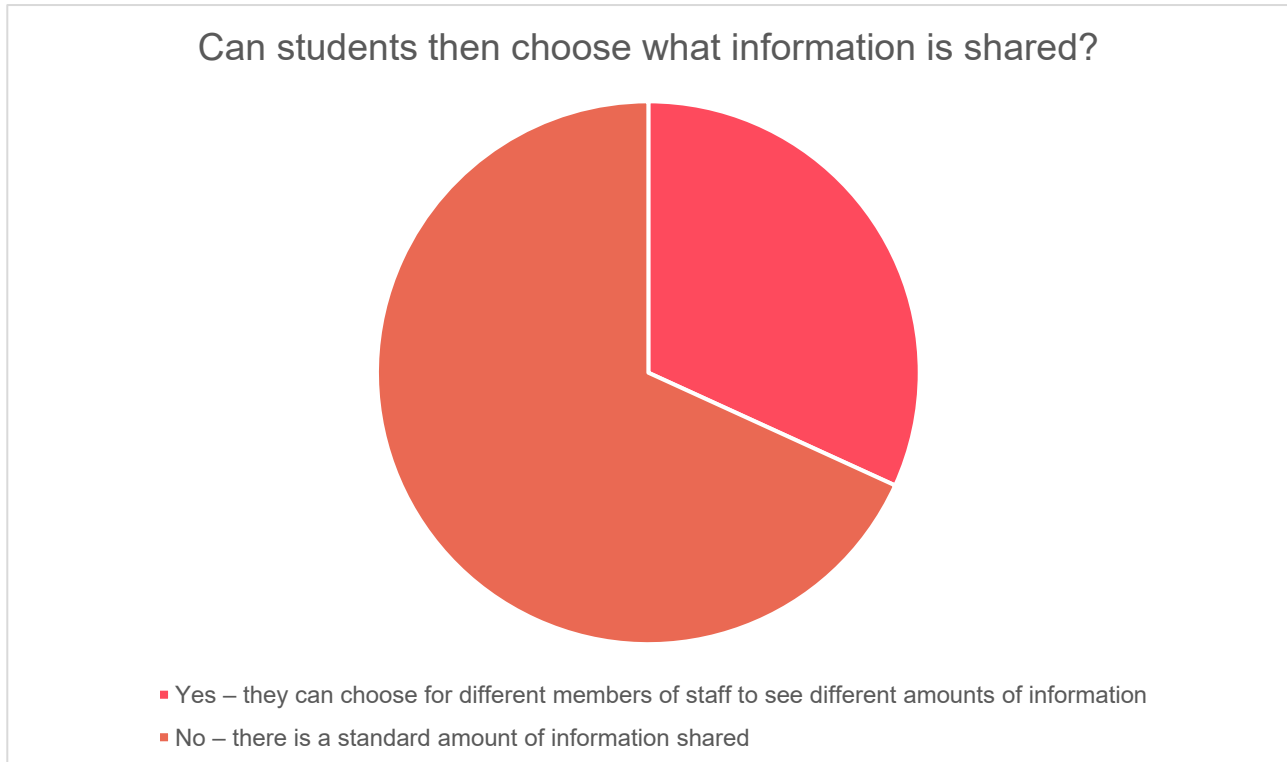
Question 9 - What level of disability and adjustment-related information do you share?



Question 10 - Can students choose who their information is shared with?



Question 11 - Can students then choose what information is shared?



Appendix B – Table comparing HEP demographics (contact details included)

Higher Education Provider	Student population	Disabled student population	Disabled students engaged with Disability Service	Staff in Disability Service	Academic year data taken from	Contact details
Birkbeck, University of London	7,000	2,132	1,800	9.0 FTE	24/25	disability@bbk.ac.uk
Birmingham City University	30,000	4,500	2,835	13.5 FTE	24/25	disability@bcu.ac.uk
Hartpury University	2,555	598	582	3.8 FTE	24/25	ASC@hartpury.ac.uk
London South Bank University	16,553	3,445	2,936	6.6 FTE	24/25	disability@lsbu.ac.uk
New College Durham	550	73	73	0.5 FTE, term-time only	24/25	ALS@newdur.ac.uk
Queen Mary's, University of London	33,000	4,395	4,285	11.5 FTE	24/25	dds@qmul.ac.uk
Ulster University	25,000	8,000	4,109	9.5 FTE	24/25	studentwellbeing@ulster.ac.uk

University of Hertfordshire	34,253	3,152	1,951	16.5 FTE	23/24	StudentWellbeing@herts.ac.uk
University of Lancashire	29,000	7,000	4,407	10.0 FTE	23/24	inclusivesupport@uclan.ac.uk
University of Leeds	34,345	9,033	6,120	10.3 FTE	24/25	disability@leeds.ac.uk
University of the Built Environment	4,000	600	440	4.7 FTE	24/25	disabilitysupport@ucem.ac.uk

Appendix C – Consent to share example

This example has been provided with the permission of Queen Mary's, University of London.

Department:

Nature of disability/medical condition/mental health:

- ☒ Disability not listed
 - ☒ Autistic Spectrum Condition
 - ☒ Blind / partially sighted
 - ☒ Deaf / partial hearing
 - ☒ Specific learning difference (e.g., dyslexia, dyspraxia, ADHD)
 - ☒ Mental Health
 - ☒ Multiple disabilities
 - ☒ Wheelchair/Mobility difficulties
 - ☒ Other
 - ☒ SpLD diagnosis under investigation
-

CONFIDENTIALITY AND DATA PROTECTION

DDS staff will only pass on personal information to anyone outside the Service with the express permission of the student. (See further information under Student and DDS agreement below).

I agree that information about my disability/specific learning difference may be passed to named agencies/departments in the interests of meeting my support needs. Consent to share this information can be withdrawn at any time by emailing dds@qmul.ac.uk with "Withdrawal of consent to share 250770980" in the subject title advising whether you want to withdraw some or all consent to share with the following departments. For more information about data protection please see here [[link to full policy on university website](#)].

Please tick the boxes to confirm that you consent to share information with these departments:

Inside QMUL

- ☒ All of the following
- ☒ Advice & Counselling
- ☒ Staff in your school / department
- ☒ Academic Registry & Council Secretariat
- ☒ Residences
- ☒ Library
- ☒ QMUL Academic Advice Service
- ☒ Global Opportunities
- ☒ Other (please specify below)

Outside QMUL

- ☒ Funding Body
 - ☒ DSA Assessment Centre
 - ☒ DSA Quality Assurance Group
 - ☒ Higher Education Statistics Agency
 - ☒ Randstad Recruitment Agency
 - ☒ Specialist Mentoring Agency
 - ☒ NHS and other external services
-

- ☒ Queen Mary Online
 - ☒ Other (please specify below)
-

I agree to confidential case notes and other relevant material being kept in the files stored by DDS on their shared drive and on MySIS (this can only be viewed by DDS staff). I also agree for QMUL to update disability code information within MySIS.

Signed: _____ **Date:** _____

We will send information about your DSA to those agencies in order for you to be able to access the support that DSA provides.

Student and Disability and Dyslexia Service (DDS) agreement

What DDS will do

- DDS will post correspondence only to your QMUL email address, unless we are replying to an email that you have sent from another address. Please be aware that there are certain emails that we can only view on MySIS and these will go exclusively to your university email address.
 - DDS will support your confidentiality and only share information with the departments and agencies you have consented to and no one else. However, if we feel that you present a risk to either yourself or others, we may need to break this confidentiality. You would be informed that confidentiality was to be broken. If you have any queries about this, please speak to your adviser.
 - DDS will work with you and your academic department in preparing a Student Support Summary. This document ensures that your tutors know about the support you have or your DSA funding body or by the university.
 - DDS will store your disability documentation securely and electronically in line with QMUL's data protection policies.
 - DDS will review your support if you are not issued with an updated student record sheet in school, i.e. the Student Support Summary and agree adjustments. This ensures that you have access to reasonable adjustments.
 - DDS will help you to apply for DSA if applicable, and check that the Support Summary agrees with the DSA2 details so that you can be permitted to make sound recordings of lectures.
-

What I will do

- Keep copies of my emails and letters from DDS in case I need to re-provide information to another member of staff or department at the university, e.g. if you should need to make two key form deadlines such as the Special Examination
-

Deadline, and the Housing Services application deadline. (It is possible to arrange for your QMUL emails to be forwarded to another email client).

- Inform DDS of any changes in my circumstances, such as changing modules or courses, impacting my support, or any significant changes to your disability or medical condition.
- Check my QMUL email account regularly as this is the main route by which DDS communicates. Messages and deadlines are regularly sent by email only and may not be communicated by any other means.
- Ensure I provide accurate information about my disability/specific learning difference and respond promptly to DDS and any deadlines, e.g. the Housing Services application deadline.
- If I wish to record lectures, I will submit an application for recording lectures form. I understand that I may only record lectures once I have obtained permission from the lecturer. Permission to record lectures does not provide students with any intellectual property in or title to use the content other than for their own personal study. Content includes information imparted by the lecturer or session lead, as well as the views and arguments of fellow students. Any other use will require written consent from the lecturer concerned. I have completed my own.

Signed (Student): _____ **Date:** _____
Signed (DDS member of staff): _____

Contact

This document is published on behalf of the DSC Information Sharing Special Interest Group (SIG).

The Group was chaired by Dr Iliyan Stefanov, Group Director Library and Student Services South Bank University. The lead author of this guide is Phoebe Cleary, Disability Advisor at London South Bank University.

You can find more information about, and recent reports from, the DSC on the Advance HE website. If you have any questions or would like support, please don't hesitate to get in touch via email at dsc@advance-he.ac.uk.

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All enquiries

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