



OFFICE OF THE VICE PRESIDENT AND
CHIEF INFORMATION OFFICER
Information Technology Services

OFFICE OF THE PRESIDENT
1100 Broadway, 6th Floor
Oakland, California 94607-4192

September 15, 2025

CHANCELLORS
ACADEMIC COUNCIL CHAIR PALAZOGLU
LABORATORY DIRECTOR WITHERELL
ANR VICE PRESIDENT HUMISTON

Re: Systemwide Review of Proposed Presidential Policy IMT-1300 Information Technology Accessibility

Dear Colleagues:

Enclosed for systemwide review are proposed revisions to Presidential Policy IMT-1300 Information Technology Accessibility.

The IT Accessibility Policy was issued in 2013, and it was overdue for a revision. The policy update provides UC with the opportunity to align with recent updates to the federal accessibility regulations implementing Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act. Additionally, the initial version of the policy was too sparse to provide locations with the necessary guidance to effectively initiate and maintain an accessibility program, so the policy was completely rewritten during the revision process.

Interested members of the systemwide Electronic Accessibility Committee (EAC), which has membership appointed by the CIO Council (CIOC), participated in creating the draft policy. The drafters represented a range of locations: Berkeley, Irvine, UCLA, San Diego, Santa Cruz, UCLA Health, UCSD Health, and Office of the President.

The draft policy that is being submitted for systemwide review today addresses the following key issues:

- Aligns with the technical standard (Web Content Accessibility Guidelines (WCAG) 2.1 AA) set by two new digital accessibility regulations, which implement Title II of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act.
- Requires locations to establish an accessible course content program to ensure faculty support in creating accessible course content and to assist faculty in remediating course content.
- Provides guidance and necessary frameworks for procurement of accessible products, a more defensible exception process for goods and/or services that do not conform to the WCAG 2.1 AA technical standard, and a complaint/grievance process.
- Establishes a reporting requirement for better systemwide oversight and coordination.

- Provides additional guidance around processes and authority.

From April 2024 through February 2025, the policy group shared the draft with stakeholders representing key departments at UCOP and locations, including IT, academic affairs, disability service offices, human resources, legal, procurement, the systemwide Academic Senate, and technology and learning.

The policy group received substantial feedback on impactful issues and has already incorporated the feedback into the current draft. The key issues raised by stakeholders that were addressed in the attached draft policy include:

- Added language for vendor agreements that are not on UC terms.
- Updated the policy definitions of "IT" and "disability."
- Removed most of the timelines, except those imposed by federal regulations.
- Added reference to guidance documents, which stakeholders frequently requested.
 - The policy group will finalize guidance documents during the comment period.
- Softened wording to emphasize that the policy serves as a guidance document, not procedures.
- For digital instruction, added language to leverage campus accessibility efforts.

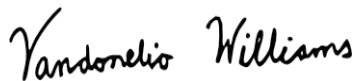
Systemwide Review

Systemwide review is a public review distributed to the Chancellors, the Chair of the Academic Council, the Director of the Lawrence Berkeley National Laboratory, and the Vice President of Agriculture and Natural Resources requesting that they inform the general University community, especially affected employees, about policy proposals. Systemwide review also includes a mandatory, 90-day full Senate review.

Employees should be afforded the opportunity to review and comment on the draft policy. Attached is a Model Communication which may be used to inform non-exclusively represented employees about these proposals. Systemwide Labor Relations at the Office of the President is responsible for informing the bargaining units representing union membership about policy proposals.

We would appreciate receiving your comments no later than **December 19, 2025**. Please submit your comments and questions to ITAPcomments@ucop.edu.

Sincerely,



Van Williams
Vice President for Information Technology Services and
Chief Information Officer

Enclosures:

- 1) Draft Presidential Policy IMT-1300 Information Technology Accessibility
- 2) Model Communication

cc: President Milliken

Provost and Executive Vice President Newman
Executive Vice Chancellors/Provosts
Executive Vice President and Chief Operating Officer Nava
Executive Vice President Rubin
Senior Vice President Bustamante
Vice President Brown
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Chief Policy Advisor McAuliffe
LBL Chief Human Resources Officer Crosson
Director Chin
Director Garcia
Director Weston-Dawkes
Associate Director Dicaprio
Associate Director Soria
Associate Director Woolston
Assistant Director LaBriola
Policy Analyst Durrin
Program Policy Analyst D'Agostino
Policy Advisory Committee



[Draft] IMT-1300: Information Technology Accessibility

Responsible Officer:	Chief Information Officer & VP – Information Technology Services
Responsible Office:	IT – Information Technology Services
Issuance Date:	8/27/2013
Effective Date:	TBD
Scope:	All UC Locations, to all members of the University of California community. Also applicable to Lawrence Berkeley National Labs to the extent that the provisions of this Policy are not superseded by those of the Department of Energy.

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I. POLICY SUMMARY

The University of California (UC) is committed to ensuring its Information Technology (IT) is Accessible to people with Disabilities, enabling full, equal, and independent use. This Policy applies to the development, procurement, and use of IT across all UC Locations. It mandates compliance with Web Content Accessibility Guidelines (WCAG)

2.1 at level AA success criteria, unless the Location has approved an exception under this Policy.

This Policy supports an inclusive digital experience, ensures compliance with the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, and helps the University avoid financial, legal, and reputational risks.

II. DEFINITIONS

- **Accessible/Accessibility:** Individuals with Disabilities can meaningfully and independently acquire the same information, engage in the same interactions, and enjoy the same services within a similar amount of time as individuals without Disabilities, with substantially equivalent ease of use.
- **Accessibility Standard:** The technical standard adopted by the UC, pursuant to the Americans with Disabilities Act of 1990 as amended, and Section 504 of the Rehabilitation Act of 1973, establishing minimum Accessibility requirements for IT as of the effective date of this Policy.
- **Archived Content:** IT that meets each of the following criteria:
 1. Was created before April 24, 2026, reproduces paper documents created before April 24, 2026, or reproduces the contents of other physical media created before April 24, 2026;
 2. Is retained exclusively for reference, research, or recordkeeping;
 3. Is not altered or updated after the date of archiving; and
 4. Is organized and stored in a dedicated area or areas clearly identified as being archived.
- **Assistive Technology/Assistive Technologies:** Technology and/or devices that promote greater independence and access for individuals with Disabilities. Examples of Assistive Technology include, but are not limited to, head or foot mouse, puff-and-sip switches, screen magnifiers, screen-reading software, and speech recognition.
- **Click-through Agreement:** Terms and/or conditions that an individual must read through and agree to before being able to use free or low-cost IT.
- **Designee:** An individual authorized to act on behalf of an Executive Officer or Senior Administrator for a specific purpose, office, or duty.
- **Disability/Disabilities:** A mental or physical impairment that limits one or more major life activities. Major Life Activities include, but are not limited to, performing manual tasks, seeing, hearing, learning, reading, and working. A major life

activity also includes the operation of a major bodily function, including but not limited to, functions of the neurological system and brain.

- **Electronic Hardware:** Computer system or physical electronic device that processes information or controls a system. Examples include computers, digital displays, and kiosks.
- **Emerging Technologies:** Any future technologies (e.g., augmented and virtual reality devices) that may not fit within any of the categories of IT as of the effective date of this Policy.
- **Equally Effective Alternative Accommodation Plan (EEAAP):** A key component of the exception process that outlines the short-term actions a Location must take to ensure individuals with Disabilities can acquire the same information, engage in the same interactions, and enjoy the same services while Inaccessible IT is remediated.
- **Executive Officer:** The University President, Chancellor, Laboratory Director, or Vice President-Agriculture and Natural Resources.
- **Inaccessible:** Individuals with Disabilities are prevented from meaningfully and independently acquiring the same information, engaging in the same interactions, and enjoying the same services within a similar amount of time as individuals without Disabilities, with substantially equivalent ease of use.
- **Information Technology (IT):** A range of technologies to acquire, create, display, process, and share information. These tools and resources include, but are not limited to:
 1. The internet (e.g., websites, web applications, emails, online surveys, social media, webcasting, and all content delivered in digital format);
 2. Software, including Software as a Service;
 3. A Learning Management Systems (LMS), including instructional software and LTIs (learning tools interoperability), and content that faculty and other educational teams provide or make available, e-courses, edtech;
 4. Recorded broadcasting technologies (including podcasts and/or video livestreams);
 5. Mobile applications; and
 6. Electronic documents (e.g., Box Docs, Excel spreadsheets, Google Docs, Google Sheets, Google Slides, portable document format files (PDFs), PowerPoint presentations, Word documents).

IT excludes the following:

1. Content posted by any third party unless the content is posted or made available by a Location due to the third party's contractual, licensing, or other arrangements with the University;
 2. Archived Content; and
 3. UC social media posts that were posted before April 24, 2026.
- **Location/Locations:**
 1. All physical sites with a UC presence, including, but not limited to UC campuses, medical centers and health care clinics; the California Digital Library; UC managed national labs; UC Agriculture and Natural Resources; UC Extensions, and satellite offices within the United States;
 2. All sites where UC services, programs, or activities are provided, including field placement sites; and/or
 3. All online services, programs, or activities owned, operated, provided, or made available by the UC.
 - **Material Alteration/Materially Altered:** Any change to IT that:
 1. Alters the substantive nature of its content;
 2. Alters the structure/organization of the content;
 3. Impacts an individual's interaction with the content; or
 4. Changes the underlying software and/or platform.
 - **Medical Centers:** University of California Medical Centers and Hospitals, including, University-owned Children's Hospitals (e.g., UC Davis Medical Center and Children's Hospital, UC Irvine Medical Center, Ronald Reagan UCLA Medical Center, Resnick Neuropsychiatric Hospital at UCLA, UCLA Mattel Children's Hospital, UC San Diego Medical Center, UCSF Medical Center, UCSF Benioff Children's Hospital San Francisco, UCSF Langlely Porter Psychiatric Hospital and Clinics). The term "Medical Centers" does not include Student Health Centers.
 - **Reasonable Accommodation/Reasonable Accommodations:** may consist of either of the following:
 1. *Auxiliary Aids and Services*, which include, but are not limited to:
 - Open and closed captioning, videotext displays, Accessible IT, or other effective methods of making aurally delivered information available to individuals who are deaf or hard of hearing and/or have limitations in processing information;

- Audio recordings, Accessible IT, or other effective methods, such as Accessible alternative formats, of making visually delivered materials available to individuals who have limitations in processing information, are blind or have low vision;
 - Ergonomic mice and keyboards, eye gaze tracking systems, microphones and other equipment necessary for voice control, and other Assistive Technologies that make IT usable for people with physical Disabilities;
 - Acquisition or modification of equipment or devices; and
 - Other similar services and actions.
2. *Reasonable Modification*, which is a change or modification to policies, practices, or procedures when the modifications are necessary to avoid discrimination on the basis of Disability. Reasonable modification(s) is required unless the Location can demonstrate, and has documented, that making the modification(s) would fundamentally alter the nature of the service, program, or activity.
- **Senior Administrator:** Any employee or official holding the title of Director or above. Senior Administrators include, among others, all Chancellors and Vice Chancellors, Provosts and Vice Provosts, Deans, Associate Deans, and Assistant Deans, Department Chairs, Division Chiefs, and Chief Executive Officers.
 - **UC Community:** All individuals who participate in or use UC services, programs or activities, or otherwise consume UC IT content.
 - **Voluntary Product Accessibility Template (VPAT)/Accessibility Conformance Report (ACR)/Higher Education Community Vendor Assessment Toolkit (HECVAT):** Document that describes IT conformity with the Accessibility Standard.
 - **Workforce Member:** An employee, faculty, staff, volunteer, contractor, researcher, student worker, student supporting/performing research, medical center staff/personnel, clinician, student intern, student volunteer or person working for UC in any capacity or through any other augmentation to UC staffing levels.

III. POLICY TEXT

The mission and values of the UC require the adoption, deployment, development, and procurement of Information Technology (IT) that is Accessible. To ensure the UC upholds these obligations, Locations must adopt an IT Accessibility Policy Program (ITAPP), processes, and standards, in accordance with this Policy and the law.

All IT covered by this Policy must meet the Accessibility Standard, including IT behind a firewall or authentication.

This Policy applies broadly to all IT and Electronic Hardware the University develops, procures, provides or makes available, or otherwise requires the use of in the provision of its services, programs, and activities. This Policy also applies to Emerging Technologies.

Each Location must address the different functional needs of the academic, administrative, Medical Centers and health clinics, research, and student areas. Locations must also support IT Accessibility for decentralized academic and research activities.

A. Accessibility Requirements

1. **Accessibility Standard:** The Accessibility Standard for the UC is Web Content Accessibility Guidelines (WCAG) 2.1 at level AA success criteria. IT at Locations must comply with this Accessibility Standard by April 24, 2026. The Accessibility Standard represents the minimum compliance level at UC. Locations are encouraged, but not required, to adopt updated WCAG standards.
2. **Accessibility of Electronic Hardware and/or Emerging Technologies.** Individuals with a Disability must not, on the basis of Disability, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any service, program, or activity of a Location provided through Electronic Hardware and/or Emerging Technologies.

B. IT Accessibility Policy Program Effective Date

Locations must implement the ITAPP described in [Procedures](#) by April 24, 2026.

IV. COMPLIANCE / RESPONSIBILITIES

A. Implementation of the Policy

The UC (systemwide) Vice President for Information Technology Services and Chief Information Officer (CIO) is responsible for issuing and updating any requirements, standards, or guidelines that support this Policy, and must facilitate systemwide coordination and regular communication among Locations to address consistent implementation of this Policy throughout the UC.

The Executive Officer at each Location must establish and implement local procedures consistent with this Policy. Exceptions to local implementation procedures required by the Policy must be approved by the Executive Officer or Designee.

B. Revisions to the Policy

The UC President approves this Policy and has the authority to approve revisions upon recommendation by the Vice President for Information Technology Services and Chief Information Officer.

The Vice President for Information Technology Services and Chief Information Officer, or their Designee(s), has the authority to initiate policy revisions and is responsible for

regular reviews and updates in accordance with UC policy and to address regulatory and/or technological changes that may arise.

V. PROCEDURES

A. Establish an IT Accessibility Policy Program (ITAPP)

All Locations must implement an IT Accessibility Policy Program (ITAPP) by **April 24, 2026**. Executive Officers must delegate responsibility and establish the ITAPP programmatic elements.

B. Delegation of Responsibilities

The Executive Officer or their Designee at each Location is responsible for the designation of the following ITAPP oversight responsibilities.

Locations may use new or existing Workforce Member(s) to fulfill these roles. The individuals must have the requisite authority, accountability, bandwidth, and knowledge to meaningfully discharge the following responsibilities under this Policy.

1. **Policy Program Coordination:** Develop, implement, and oversee a Location's ITAPP, ensure Location's compliance with Accessibility Standard, coordinate any committee(s) established in furtherance of the Location's ITAPP, and promote Policy and Accessibility awareness.
2. **Exceptions Approval:** The individual(s) must have the requisite authority to accept risk on behalf of the Location. Review requests for exception to the Accessibility Standard, review extensions to exceptions, review EEAAPs, and review resolutions to complaints regarding IT Accessibility barriers. Consult the appropriate individual(s) for an Accessibility Consultation to determine compliance with the Accessibility Standard and the impact of an exception on individuals with Disabilities.
3. **Exceptions Coordination:** Provide an annual report of exceptions, extensions, and EEAAPs and their respective status to the individual responsible for Policy Program Coordination. To avoid conflicts of interest, the individual(s) cannot be the same as the individual(s) responsible for Exceptions Approval.
4. **Accessibility Consultation:** Provide subject matter expertise in IT Accessibility (including Accessibility Standard requirements and the impact of exceptions and/or Inaccessible IT on individuals with Disabilities) to individual(s) responsible for Exceptions Approval.
5. **Course Content Program Coordination:** Develop, implement, and oversee a Location's Accessible Course Content Program, ensure compliance of Location's course content with Accessibility Standard, coordinate advisory committee, and oversee tools for the creation and maintenance of Accessible course content. Provide training courses on the topics of IT Accessibility, Reasonable Accommodations, Disability awareness, and creation of Accessible course content.

Locations may form committees to support the successful implementation of the Location's ITAPP. Supporting committee(s) should represent a broad range of Workforce Members and be able to address academic, administrative, healthcare, legal, research, student, and technological concerns.

C. Required ITAPP Programmatic Elements

The ITAPP at each Location must include the following eight programmatic elements:

1. Accessible Procurement Program;
2. Accessible Course Content Program;
3. Accessible Software/Web Development Program;
4. Exception Process;
5. Complaint Process;
6. Prioritization Plan;
7. Disability Access and Awareness Training Program; and
8. Reporting.

1. Accessible Procurement Program

Locations must develop an Accessible Procurement Program to ensure procured or acquired IT meets the Accessibility Standard. Workforce Members cannot acquire free or low-cost IT through Click-through Agreements if they will use the IT to create Inaccessible digital material.

a. UC Terms and Conditions

As of the effective date of this Policy, all agreements and/or renewals of IT procured and/or acquired by Locations must use the standard "Accessibility" clause, located in the UC's Terms and Conditions, or a substantially similar clause if the agreement and/or renewal does not use the UC's Terms and Conditions. Any agreement or renewal must require the supplier's goods and/or services meet the Accessibility Standard, unless an approved exception has been granted in accordance with the [exception process](#). For all IT agreements and/or renewals, Locations should strive to include the indemnification language from the standard "Accessibility" clause.

b. UC Procurement Accessibility Questionnaire

To assist in evaluating IT goods and services for Accessibility, Locations should ask suppliers to complete the [UC Procurement Accessibility Questionnaire \(pdf\)](#) or provide a Voluntary Product Accessibility Template (VPAT) and/or Accessibility Conformance Report (ACR) to describe its compliance with the Accessibility Standard.

c. Evaluating Goods and Services for Accessibility

Before entering into an agreement or renewal with a supplier, Locations should verify that the supplier's IT meets the Accessibility Standard (e.g., testing environment, proof of concept, recent example of work product).

2. Accessible Course Content Program

Locations that offer courses, digital instructional material, and online training (i.e., compliance training, professional development training) to the UC Community must develop an Accessible Course Content Program to proactively ensure that the material is Accessible. Locations must complete the [exception process](#) for any instructional/training content that is known to be Inaccessible. All new and Materially Altered courses must comply with the Accessibility Standard.

A Location's Accessible Course Content Program must include the following:

- a. Specialized training on creating Accessible course content and remediation support;
- b. Training resources on IT Accessibility, Reasonable Accommodations, and Disability awareness for all Workforce Members who create content;
- c. An Accessibility tool integrated with the LMS that evaluates all uploaded content for Accessibility;
- d. An advisory committee that consists of a broad range of Workforce Members (e.g., faculty, IT Accessibility specialists, instructional designers, LMS administrators, student representatives, and student and staff Disability services);
- e. A complaint process to report digital Accessibility barriers;
- f. One or more individuals to fulfill the objective of Accessible Course Content Program Coordination;
- g. Where applicable, agreement between each Location and UC Online outlining responsibility for ensuring UC Online course content is Accessible and developing EEAAPs as needed; and
- h. Locations should develop a prioritization plan to include the Accessibility evaluation and remediation of the following:
 - i. New courses;
 - ii. Pre-existing courses that have been Materially Altered;
 - iii. High-volume gateway courses;
 - iv. General Education (GE) courses;
 - v. Courses with a high number of individuals with Disabilities who receive Reasonable Accommodations; and
 - vi. Fully online courses.

3. Accessible Software/Web Development Program

Locations must implement an Accessible Software/Web Development Program to ensure that technical staff and content editors procure and/or develop IT that meets the Accessibility Standard. As part of the Location's Accessible Software/Web Development Program, technical staff and content editors should:

- a. Complete role-appropriate training that covers up-to-date standards and practices for developing Accessible IT;
- b. Ensure that all procured and/or developed IT meets the Accessibility Standard;
- c. Remediate existing, Inaccessible IT per the [prioritization plan](#);
- d. Consult with the individual(s) responsible for Policy Program Coordination to determine steps for remediation of Inaccessible IT from a third party; and
- e. As a best practice, test their work with individuals with Disabilities.

For situations where software/web development services are procured, see [Accessible Procurement Program](#).

4. Exception Process

Conformance with the Accessibility Standard may not always be feasible. Locations may approve an exception to the Accessibility Standard for procured and/or developed IT through the following process.

a. Approving and Extending Exceptions

Locations must establish an exception process that considers legal risks and the impact of the Inaccessible IT on individuals with Disabilities.

The Location must conduct a meaningful consultation, including an Accessibility Consultation, with individuals having relevant subject matter expertise.

Exception requests require a signed, written statement from the department that would like to procure or has developed the Inaccessible IT. The written statement must be signed by the department head, or their Designee, and address all of the following:

- i. Briefly outline the reasons for reaching the conclusion that an exception is warranted.
- ii. List the names and titles of individuals consulted during the exception process.
- iii. Affirm that, to the best of the signatory's knowledge, the following is true:
 - (a) The Location conducted a meaningful consultation of individuals with relevant subject matter expertise, including:

- (i) An Accessibility Consultation with individual(s) who have relevant Accessibility technical expertise and knowledge of legal requirements; and
 - (ii) The individual(s) responsible for Exceptions Approval at the Location.
- (b) When considering the whole of the Location's resources, the Location does not have the ability or resources to develop similar Accessible IT;
- (c) At the time of review, no supplier can provide the IT in an Accessible manner;
- (d) Any delay in deploying the IT would have a significant adverse impact on the Location; and
- (e) The Location has prepared a [remediation plan](#) and approved an EEAAP to provide individuals with Disabilities an alternative means to access and/or use the IT.

Only the individual(s) responsible for Exceptions Approval, or their Designee, has the authority to approve exceptions. An exception request is not approved until the individual(s) responsible for Exceptions Approval has signed the requesting department's written statement.

Initial exceptions are limited to a duration of two years from the date the exception was granted. Throughout the initial two-year exception period, the individual(s) responsible for Exceptions Coordination, or their Designee, must regularly communicate with the department that was granted an exception to ensure there is meaningful progress toward making the excepted IT Accessible. For the duration of the Location's use of the Inaccessible IT, the Location must go through the exception process every two years.

b. Equally Effective Alternative Accommodation Plan (EEAAP)

Exceptions do not relieve Location programs or services of their obligations to make IT compliant with the Accessibility Standard. When there is a known Accessibility barrier, Locations must create and implement EEAAPs in a prompt and equitable manner.

EEAAPs provide immediate, temporary access to IT while the Location's remediation plan is executed; EEAAPs are not a primary or long-term mechanism to provide Accessible IT.

An EEAAP should indicate the following information:

- i. The Reasonable Accommodation(s) (e.g., alternative format) the Location will furnish to provide the UC Community member(s) access to that specific IT or information;

- ii. Instructions for using the Reasonable Accommodation (i.e., department contact and/or website linking to alternative format PDFs); and
- iii. Confirmed source of the funding to cover the costs of Reasonable Accommodation under the EEAAP.

If the EEAAP created is in response to a UC Community member's request for Accessible IT, the Location should consult with the requesting individual to determine the most appropriate Reasonable Accommodation.

Locations must use the EEAAP, which is available on the [IT Accessibility Policy Resources website](#), to ensure consistency of processes across the system.

c. Remediation Plan

The Exception Process requires a remediation plan to bring the Inaccessible IT into compliance with the Accessibility Standard.

A remediation plan must include:

- i. Approval of the individual fulfilling the objective of Exceptions Approval;
- ii. A detailed scope of the Accessibility barriers that will be addressed;
- iii. A timeline with specific dates of deliverables not to exceed the duration of the exception; and
- iv. A plan to test and validate that the fixes meet the Accessibility Standard.

If, for any reason, IT cannot be made Accessible upon request within a timely manner, the individual(s) responsible for Exceptions Coordination, or their Designee, must notify the UC Community member of:

- i. General reason for the delay;
- ii. Estimate of how long it will take to complete the remediation; and
- iii. Information regarding the Location's [complaint process](#).

d. Cost

When a Location procures or acquires Inaccessible IT, the Location cannot pass on the cost of an EEAAP to the individual requesting a Reasonable Accommodation. Locations have the discretion to determine how to cover all costs related to any EEAAP required by the approved exception. This analysis must evaluate cost based on all of a Location's resources, not just the department involved.

5. Complaint Process

Each Location must have a process for individuals with Disabilities to request remediation of Inaccessible IT, report Accessibility issues, and/or file complaints regarding Inaccessible IT. This process requires an external review by Workforce Members that are not implicated by the complaint. The individual(s) responsible for Exceptions Approval at the Location must review and resolve all complaints.

Locations should post a link to the complaint process website on all Location websites and web applications. The complaint form should list the contact information (e.g., name(s), e-mail address, telephone number, and office address) for the individual or office responsible for responding to such complaints. UC Community members also need to be able to file a complaint in a non-electronic way.

The Location should strive to address the complaint promptly and equitably and communicate to the complainant in a timely manner about the status of any resolution.

6. Prioritization Plan

Each Location must create and implement a plan to prioritize the remediation of existing Inaccessible IT to the Accessibility Standard. Prioritization plans should consider local needs, practices, and available resources. Locations should prioritize IT that:

- a. Is for public consumption;
- b. UC Community members are required to use;
- c. Has large numbers of known users with Disabilities;
- d. Has critical features with known Accessibility defects;
- e. Does not include conformance with the Accessibility Standard in the contract; and
- f. Is undergoing a Material Alteration.

7. Disability Access and Awareness Training Program

To meet the ongoing Accessibility needs of the UC, Locations will establish a Disability Access and Awareness Training Program.

Within two years of the effective date of this Policy, the Vice President for Information Technology Services and CIO will designate individuals to provide a basic online Accessibility training on IT Accessibility no longer than one hour in length.

Workforce Members who create or manage electronic content will be required to complete the training when hired and every two years thereafter.

8. Reporting

Each Location must provide an annual report to the Vice President for Information Technology Services and CIO. Locations must use the report template, which is available on the [IT Accessibility Policy Resources website](#), to ensure consistency of processes across the system.

VI. RELATED INFORMATION

- University of California
 - [IT Accessibility Policy Resources website](#)
 - [Electronic Accessibility at the UC](#)
 - [Anti-Discrimination Policy \(pdf\)](#)
 - [PACAOS 140: Guidelines Applying to Nondiscrimination on the Basis of Disability \(pdf\)](#)
 - [Systemwide Office of Civil Rights](#)
 - [Whistleblower Policy \(pdf\)](#)
- External
 - [W3.org: Web Content Accessibility Guidelines 2.1](#)
 - [Americans with Disabilities Act](#)
 - [WebAIM.org: United States Laws - The American with Disabilities Act \(ADA\)](#)

VII. FREQUENTLY ASKED QUESTIONS

- Q1. Will you be sharing documents with implementation guidelines and templates?
 - A1. Yes, we will start working on guidance documents and reporting templates after the policy update.
- Q2. Does password-protected IT need to meet the Accessibility Standard?
 - A2. Yes.
- Q3. Does IT intended for use by Workforce Members need to meet the Accessibility Standard?
 - A3. Yes.
- Q4. Are pre-existing electronic documents (e.g., PDFs, Word documents, PowerPoint presentations) required to meet the Accessibility Standard?
 - A4. Yes. Pre-existing electronic documents currently used to access the UC's services, programs, or activities must meet the Accessibility Standard per federal regulations.

- Q5. Are individualized, password-protected (or otherwise secured) electronic documents (e.g., W-2 forms for employees, transcripts for students, and patient medical records) required to meet the Accessibility Standard?
 - A5. Yes.

VIII. REVISION HISTORY

- **May 14, 2025:** Updated the policy to match federal regulations and clarify objectives and procedures.
- **September 13, 2022:** Updated the policy contact information.
- **July 14, 2017:** Updated the policy contact information.
- **August 1, 2013:** The initial version of the policy was issued.