

Ordinance No. 87/2021

of the Rector of the Pomeranian Medical University in Szczecin of 26 July 2021 on introducing the "Regulations for the cooperation of a person with a disability with an Educational Assistant within the project entitled "Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities".

Pursuant to Art. 23 sec. 1 and 2 points 2 of the Act of 20 July 2018 - Law on higher education and science (Journal of Laws of 2021, item 478 as amended), I order the following:

§1

I am introducing the "Regulations for the cooperation of a person with a disability with an Educational Assistant within the project entitled "Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities", which constitutes an annex to this Order.

§2

The Ordinance shall enter into force on the day of signing.

prof. dr hab. Bogusław Machaliński
Rector of PUM

W. 2 -
Z upoważnienia Rektora
Pomorskiego Uniwersytetu Medycznego
w Szczecinie
prof. dr hab. n. med. Jerzy Samochowiec
Prorektor ds. Nauki PUM

**REGULATIONS FOR THE COOPERATION
of a person with disabilities with an Educational Assistant
as part of the project titled "Improving the accessibility of the Pomeranian Medical
University
in Szczecin for persons with disabilities"**

**§1
Glossary**

Whenever the Regulations refer to:

- 1) PUM - this refers to the Pomeranian Medical University in Szczecin.
- 2) Persons with disabilities - students or doctoral students of PUM who have a current disability certificate, a certificate on the degree of disability, or a certificate referred to in Art. 5 and Art. 62 of the Act of 27 August 1997 on Vocational and Social Rehabilitation and Employment of Disabled Persons.
- 3) Regulations - means these Regulations.
- 4) BON - Office for Persons with Disabilities.
- 5) DFZ - Department of External Funds - an organisational unit of the PUM.
- 6) Educational Assistant - shall be understood as a person who performs tasks related to support within the teaching or research process which is adapted to the individual needs of a person with disabilities.
- 7) Teaching unit - 60 minutes
- 8) Project - shall be understood as the project titled *"Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities"*, implemented by PUM on the basis of a funding agreement; number POWR.03.05.00-00-A066/20, co-financed by the European Union from the European Social Fund under the Operational Programme Knowledge Education Development; Priority axis: III. Higher education for the economy and development; Measure: 3.5 Comprehensive university programmes.

§2

Rules for applying for the support of an Educational Assistant

1. Applying for the support of an educational assistant is possible for a person who:
 - 1) has the status of a PUM student/doctoral student at the time of application;
 - 2) is a person with a disability who has a current certificate of disability, a certificate on the degree of disability, or a certificate referred to in Art. 5 and Art. 62 of the Act of 27 August 1997 on Vocational and Social Rehabilitation and Employment of Disabled Persons.
2. The basis for applying for the right to take advantage of the support of an Educational Assistant is for the person with a disability to submit an application form (Annex 1) to the BON for an Educational Assistant, stating the extent of the expected assistance and the reasons for it.

3. The application form referred to in sec. 2, requires a current certificate of disability, a certificate on the degree of disability or, a certificate referred to in Art. 5 and Art. 62 of the Act of 27 August 1997 on Vocational and Social Rehabilitation and the Employment of Persons with Disabilities (original for inspection) as well as a timetable for a given semester of the academic year indicating the classes or dates in which the student/doctoral student needs the support of an EA.
4. The application form should be submitted in person at the BON or sent as a scan to: bon@pum.edu.pl.
5. The support of an Educational Assistant is granted for one semester of a given academic year.
6. A student/doctoral student with disabilities who applies for the support of an Educational Assistant may propose a person to perform the indicated duties or request the BON to designate such a person.
7. Application forms for the support of an Educational Assistant must be submitted at least seven days before the start of the term in question.
8. Priority for the support of an Educational Assistant is determined by the order in which the application is submitted.
9. In exceptional random cases, the support of an Educational Assistant may be requested during the semester

§3

Processing applications

1. Applications for the support of an Educational Assistant are considered by the Plenipotentiary of the Rector for Persons with Disabilities of the PUM.
2. Granting the support of an Educational Assistant is subject to the availability of funds provided for this purpose in the project budget.
3. PUM reserves the right to reject an application for the support of an Educational Assistant if:
 - 1) the person applying for the support of an Educational Assistant does not meet any of the conditions set out in §2 sec. 1;
 - 2) the scope of the support of an Educational Assistant goes beyond that specified in §4 of the Regulations;
 - 3) there are other grounds on the basis of which the Plenipotentiary of the Rector for Persons with Disabilities will not see a basis for granting the support of an Educational Assistant
 - 4) the funds provided for the support of an Educational Assistant are exhausted in the project budget.

§4

Scope of responsibilities of an Educational Assistant

1. The scope of responsibilities of an Educational Assistant relates to support related to the teaching or research process and is tailored to the individual needs of the person with disabilities.
2. The scope of responsibilities of an Educational Assistant is defined at the stage of filing the application form. It may include:

- 1) support for persons with disabilities in completing documents related to the educational process.
 - 2) supporting a student with disabilities in dealing with any formalities related to the educational process in the deaneries and other organisational units of the University.
 - 3) familiarisation with the layout (location) of the various PUM units in terms of accessibility, e.g. University Faculties, Deaneries, Libraries, PUM Clinical Hospitals, or other medical entities.
 - 4) ensuring that classes for groups including persons with disabilities are planned on the ground floor or in a building best suited to their needs.
 - 5) informing students with disabilities about facilities for them introduced by the University.
 - 6) support in contacting lecturers to organise teaching materials.
 - 7) other tasks as required - to be determined on a case-by-case basis by mutual agreement between the Educational Assistant and the student/doctoral student.
3. The scope of responsibilities of an Educational Assistant may not include the following activities care (e.g. hygiene, toileting) and other activities requiring specialised skills.
 4. An Educational Assistant is not obliged to provide assistance outside of the indicated duties and time frame.
 5. An Educational Assistant is obliged to keep confidential the personal data of the person with a disability, information about his/her health, or other information that could harm that person or expose him/her to material damage or harm from third parties.

§5

Principles for employing an Educational Assistant

1. A person can become an Educational Assistant if he or she has attended a training course entitled "**Status of an Educational Assistant for a person with a disability at the university**" organised by the PUM or was trained by a BON employee.
2. The employment of an Educational Assistant is based on:
 - 1) annex to the employment contract - remuneration supplement (PUM employee), in accordance with the "Principles of obtaining, implementing, and accounting for projects financed or co-financed from European Union Structural Funds at the Pomeranian Medical University in Szczecin", constituting an annex to Ordinance No. 87/2010 of the Rector of the Pomeranian Medical University in Szczecin of 22 October 2010,
 - 2) or a civil law contract (student/doctoral student). A template agreement constitutes Annex No. 2 to these Regulations.
3. Employing an Educational Assistant is carried out for the duration of the support granted to a person with disabilities.
4. The detailed scope of activities of an Educational Assistant is set out in an annex to the employment contract/civil contract.

5. The working hours of an Educational Assistant are determined by the BON in cooperation with the DFZ, depending on the needs of the student and the project budget, before the initiation of the semester, no later than the date on which the Annex to the employment contract or the civil contract is signed.
6. The hourly rate (1 clock hour = 60 minutes) of an Educational Assistant's work is set at PLN 40.00 gross, including all the employer's public-law liabilities.
7. An Educational Assistant is obliged to keep a monthly Work Sheet, in accordance with the model attached as Annex No. 3 to these Regulations, in which he/she keeps a record of the hours worked in a given month, together with a description of the performed activities.
8. The Work Sheet is approved in terms of content by a BON employee and the student/doctoral student being supported.
9. The remuneration of an Educational Assistant is financed with funds from the project budget allocated for tasks related to creating conditions for students and doctoral students who are persons with disabilities to participate fully in the educational process.
10. Payment of remuneration to an Educational Assistant who is an employee of the PUM shall be made in accordance with the Work Regulations attached to Ordinance No. 102/2019.
11. The payment of remuneration to an Educational Assistant who is employed under a civil law contract is made on the basis of a submitted Bill, which is verified and approved in terms of content by an employee of the BON and for formal and accounting purposes by an employee of the DFZ.
12. An Educational Assistant must submit a monthly Work Sheet with the Bill in accordance with the template attached as Annex No. 3 to these Regulations. Submitting a Work Sheet after this date will result in a postponement of the payment date.
13. Payment of an Educational Assistant's remuneration shall be made to the bank account designated by the Educational Assistant by the 15th day of the month for the activities performed during the previous month, subject to sec. 12.
14. An Educational Assistant is required to attend disability-related training courses organised by the BON,
15. PUM shall not be liable for any damage caused by the Educational Assistant in connection with performing the commissioned activities.

§6

Responsibilities of the person with disabilities resulting from working with an Educational Assistant

1. A person with disabilities is required to provide a current disability certificate or equivalent document for inspection without delay in the event that the disability certificate or equivalent document is no longer valid.
2. A person with disabilities loses the right to support when:
 - 1) removed from the list of students/doctoral students - as of the date of removal,

- 2) graduating before the end of the period for which he/she was granted support - on the date of graduation,
 - 3) suspending the rights of a student/doctoral student
 - 4) violating the provisions of these Regulations.
3. A person receiving support is obliged to notify the PUM immediately if a circumstance arises that causes him/her to lose the right to support.
 4. In the event of illness or any other circumstance resulting in an absence from classes, a person with disabilities who is supported must notify the educational assistant and the BON immediately by telephone or email.
 5. If a person with disabilities fails to attend twice the scheduled classes or other classes specified in the application, during which he/she is receiving the support of an assistant, without giving notice of the absence by e-mail or telephone properly before the start of the scheduled classes with an educational assistant and without justifying his/her absence at the dean's office, the PUM reserves the right to withhold the services of an educational assistant for that student/doctoral student.
 6. If support is awarded to a person with a disability on the basis of false information provided by the person with a disability, the person is liable to repay the equivalent of the support and any costs incurred by PUM in awarding support to the person with a disability.
 7. It is reserved to limit the number of hours of support requested by a student, taking into account the current project budget.

§7

FINAL PROVISIONS

In matters not covered by the Regulations, decisions are made by the Plenipotentiary of the Rector for Persons with Disabilities.

prof. dr hab. Bogusław Machaliński
Rector of PUM

W. Z. 7
Z upoważnienia Rektora
Pomorskiego Uniwersytetu Medycznego
w Szczecinie
prof. dr hab. n. med. Jerzy Samochowiec
Prorektor ds. Nauki PUM

to the Regulations for the cooperation of a person with a disability with an Educational Assistant within the framework of the project "Improving Accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities"

Place and Date

**APPLICATION FORM
FOR GRANTING AN EDUCATIONAL ASSISTANT AS PART OF THE PROJECT
"IMPROVING
ACCESSIBILITY OF THE POMERANIAN MEDICAL UNIVERSITY IN SZCZECIN
FOR PERSONS WITH DISABILITIES"**

Applicant

name and surname:

PESEL:

Correspondence address:

Contact telephone or e-mail:

Applicant status: student */doctoral student* (*mark as appropriate*)

Year of study/year of training:

Course (if applicable):

I request the support of an Educational Assistant for the academic year
in a semester

Justification

(please provide details concerning the extent of the required assistance, e.g.: help with filling in documents, familiarisation with the location of the various PUM units; timetable of classes, indicating during which classes the assistant's help is necessary, and justification of the need for the assistant's support):

I hereby declare that the information contained in the application is correct.

date and signature of student/doctoral
student

Attachments:

- > Timetable of classes indicating during which classes the support of an Educational Assistant is required.
- > A current certificate of disability, a certificate on the degree of disability, or a certificate referred to in Art. 5 and Art. 62 of the Act of 27 August 1997 on Vocational and Social Rehabilitation and the Employment of Persons with Disabilities (for verification).

DECISION:

date and signature

The Plenipotentiary of the Rector for Persons with Disabilities

Annex No. 2
to the Regulations for cooperation with an Educational Assistant of a person with disabilities within the framework of the project titled "Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities"

Contract of mandate No CRU

concluded onin Szczecin between:

Pomeranian Medical University in Szczecin, ul Rybacka 1, 70-204 Szczecin, NIP 8520006757, REGON 000288886, represented by:

The Chancellor of the PUM - Mr. Krzysztof Góralski, M.Sc. Eng., hereinafter referred to as the **Ordering Party**,
and
Ms/Mr

(name and surname, PESEL)

residing at

(city, street)

hereinafter referred to as the **Contractor**

§1

The subject of the agreement consists in establishing the principles for performing the function of an Educational Assistant in the project entitled "*Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities*", co-financed by the European Union under the Operational Programme Knowledge Education Development, priority III. Higher education for the economy and development, Measure 3.5. Comprehensive university programmes, grant agreement no. POWR.03.05.00-00-A066/20-00 of 27.11.2020.

§2

1. The Ordering Party commissions and the Contractor undertakes to perform the service of acting as an Educational Assistant to a student/doctoral student of the Pomeranian University of Szczecin, for Ms./Mr.
.....
who is a person with disabilities.
2. The Contractor undertakes to perform the service referred to in sec. 1 as of
..... to
3. The detailed responsibilities of an Educational Assistant for a person with disabilities are set out in Annex No. 1 to this agreement.
4. The Contractor may not entrust third parties with performing activities covered by the contract.

5. Changing or expanding the responsibilities of an Educational Assistant for a person with disabilities may only be made in writing (i.e. in the form of an annex to this contract).
6. The place of performing this agreement consists in the Pomeranian Medical University in Szczecin except when the study programme obliges the student/doctoral student to take part of their courses outside the University.

§3

1. For performing the contract, the Ordering Party shall pay the Contractor remuneration in the amount of: (in words:) PLN gross per hour (60 minutes). The wage rate includes all the employer's public law obligations.
 - 2) Payment of the Contractor's remuneration shall be made on the basis of a Bill (*Annex No.2*) which is verified and approved in terms of content by a BON employee. The Contractor shall attach a Work Sheet (*Annex No. 3*) to the bill concerning the completed hours of work confirmed by the student/doctoral student and a BON employee.
2. The Contractor must submit the Bill with the Work Sheet by the 5th of the month in question for work carried out during the previous month. Submitting a Work Sheet after this date will result in a postponing the payment date.
3. Payment of the Contractor's remuneration shall be made to the designated bank account by the 15th day of the month for the activities performed during the previous month, subject to sec. 3.

§4

1. In the event that the Contractor fails to fulfil or improperly fulfils its obligations under this agreement, the Ordering Party reserves the right to terminate this agreement immediately.
2. All changes, additions to the contract and termination of the contract must be in writing under pain of nullity.
3. Disputes between the contracting parties shall be settled by the court having jurisdiction over the Ordering Party's place of business.
4. The Contractor declares that he/she became familiar with the contents of the Regulations concerning the cooperation with an Educational Assistant of a person with disabilities in terms of the project titled "Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities" and acknowledges the information contained therein.
5. In matters not covered by this agreement, the provisions of the Civil Code shall apply.
6. The parties undertake to settle any disputes that may arise in connection with implementing the provisions of this agreement by means of mutual negotiations and only if these fail before a common court with jurisdiction over the Ordering Party's registered office.
7. The annexes to this agreement are:
 - 1) scope of responsibilities - Annex No. 1,
 - 2) bill (template) - Annex No. 2,
 - 3) work sheet (template) - Annex No. 3,
 - 4) ZUS questionnaire (template) - Annex No. 4,
 - 5) ZUS statement (template) - Annex No. 5,
 - 6) information clause - Annex No. 6.
8. The contract is drawn up in 2 identical copies, one for each party.

ORDERING PARTY

CONTRACTOR

Annex No. 1 to the contract of mandate No.

CR.U/A066/AE/.../20.../DFZ

Scope of Responsibilities of an Educational Assistant

.....

.....

Annex No. 2 to the contract of mandate No.

CRU/A066/AE/.../20.../DFZ

Surname and name

Address.....

PESEL:...

ACCOUNT No. ...

for the Pomeranian Medical University in Szczecin issued on

for performing tasks in accordance with contract of mandate No. **CRU/A066/AE/.../2021/DFZ** of
....., for the amount of **gross** (in words:
..... PLN 00/100).

I declare that I have personally performed the tasks specified in the aforementioned contract during
the period of in terms of hours.

(legible signature of the Contractor)

The bill has been verified in
formal and accounting terms

Verified in terms of content/
I confirm the performance of work

.....
Approved for payment

PUM Bursar

PUM Chancellor

WORK TIME SHEET - RECORD OF CORRECTLY EXECUTING TASKS

NAME OF BENEFICIARY	POMERANIAN MEDICAL UNIVERSITY IN SZCZECIN
NAME AND SURNAME OF THE PERSON INVOLVED IN IMPLEMENTING THE PROJECT	
NAME AND NUMBER OF PROJECT	"Improving the accessibility of the Pomeranian Medical University in Szczecin for persons with disabilities" - POWR.03.05.00-00-A066/20
MONTH/YEAR	
POSITION/TASKS WITHIN THE PROJECT	Educational Assistant
FORM OF INVOLVEMENT IN THE PROJECT:	ANNEX TO CONTRACT OF EMPLOYMENT/contract of mandate

TOTAL NUMBER OF CLOCK HOURS PER MONTH IN TERMS OF A GIVEN PROJECT 00:00 YES

At the same time, I declare that I have additionally performed the following number of hours of work in the month under consideration in terms of the framework of employment contracts, civil-law contracts, business activities, performed outside projects financed from the structural funds, which accordingly increased the number of hours performed by me during the month. NO

Number of hours worked in terms of the project	Total number of hours worked per month in terms of other projects financed by the Structural Funds and the SF	Number of hours worked during the month in terms of Other sources (e.g. Employment contract, contract of mandate, work contract, business activity, etc.).	Total number of hours worked per month	Maximum total number of hours allowed per month
				≤ 276 <input type="checkbox"/> YES

I declare that during the month in question I was involved in other projects financed by the Structural Funds and the Cohesion Fund

NO

Being aware of the criminal liability, I declare that the data indicated in the table above is true and consistent with the facts possible to be determined from the project documentation, contracts confirming employment in the above-mentioned positions, scopes of tasks, records of tasks and working time, and other documents related to the involvement of particular persons in the indicated tasks.

Signature of the Contractor

Being aware of the criminal responsibility under the binding project funding agreement, I declare that I have read and accept the information presented in the above document.

Signature Employee of the Office persons with disabilities