

# POSTGRADUATE MEDICAL EDUCATION SCHULICH SCHOOL OF MEDICINE AND DENTISTRY

# REQUEST FOR ACCOMMODATIONS GUIDELINES & PROCESS

Approved by PGME Committee: April 12, 2023

**Date of Next Scheduled Review: 2026** 

## **Preamble**

The purpose of this policy is to provide a transparent process for the provision of accommodations of postgraduate medical trainees at the Schulich School of Medicine and Dentistry.

# **Purpose and Scope**

This policy applies to all postgraduate learners ('trainees') who are registered with the Postgraduate Medical Education (PGME) office at the Schulich School of Medicine and Dentistry. This policy applies to all residents, Area of Focused Competence (AFC) trainees and clinical fellows.

This policy applies to accommodations related to functional capacity and does not address requests for accommodations related to religious, cultural, spiritual, or family status.

# Relevant Policies, Guidelines, and Agreements

- Ontario Human Rights Code
- Personal Health Information Protection Act (PHIPA)
- Freedom of Information and Protection of Privacy Act
- PARO-OTH Agreement
- Western Human Rights Office
- PGME Safety Policy

#### **Definitions**

**Accommodation:** Accommodations serve to remove the barriers brought on by disability but do not change or lower the standards that a learner is required to meet. An adjustment may include, but is not limited to, modifications to clinical experiences, alternative teaching and assessment strategies, human supports or assistants, assistive technology, writing exams in an alternative location or being provided extra time or rest breaks to complete an exam, permission to audio record lectures for example.

**Disability:** Section 10 (1) of the *Human Rights Code* defines "disability" as follows:

"because of disability" means that the person has or has had, or is believed to have or have had,

 any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness and, without limiting the generality of the foregoing, includes diabetes mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech



impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device,

- 2. a condition of mental impairment or a developmental disability,
- 3. a learning disability, or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language,
- 4. a mental disorder, or
- 5. an injury or disability for which benefits were claimed or received under the insurance plan established under the *Workplace Safety and Insurance Act*, 1997.

A disability may be the result of a physical limitation, an ailment, a perceived limitation, or a combination of all these factors. The focus is on the *effects* of the distinction, preference or exclusion experienced by the person and not on proof of physical limitations or the presence of an ailment.

**Duty to accommodate:** the goal of accommodation is to ensure that a trainee who is able to work can do so. In practice, this means that the employer and program must accommodate the trainee in a way that, while not causing the employer/program undue hardship, will ensure that they can work. The purpose of the duty to accommodate is to ensure that persons who are otherwise fit to work are not unfairly excluded where working conditions can be adjusted without undue hardship. There is an obligation to understand the impact of the disability, explore accommodation options, and implement an accommodation that is reasonable. Every accommodation request must be fully considered.

**Undue hardship:** the duty to accommodate allows for three considerations when assessing whether an accommodation would cause undue hardship:

- 1. Cost;
- 2. Outside sources of funding (if any); and
- 3. Health and safety requirements

Impact on patient safety, other trainees, program accreditation standards and minimal essential requirements/competencies required to complete a specific program will be taken into consideration. The test of undue hardship is considered individually with input from the program, Learner Experience (LE), PGME, and affiliated sites when relevant.

## **General Principles**

The accommodation process is a shared responsibility. Accommodation cannot compromise patient safety and well-being and must consider the rights and needs of other trainees. Regardless of disability, all trainees must meet the educational standards for certification (residents), diploma (Area of Focused Competence trainees) or certificate of program completion (clinical fellows).

If a trainee would be unable to fulfill their duties and/or meet the educational competencies required, even after reasonable accommodation to the point of undue hardship, then accommodation is not appropriate. A trainee who cannot attain the required competencies, despite reasonable accommodation, may be dismissed from the program.

The below principles are adapted from Accommodations in Residency Training and Assessments PGME Collaborative Governance Council, 2018.



#### The triad of accommodations

When considering and making accommodation decisions, three key stakeholders must be kept in mind: patients, trainees and training programs. Patient care and safety are of primary importance. If the system provides the necessary supportive and enabling accommodations, trainees may be able to provide safe patient care from a different perspective.

Accommodations must not compromise patient safety or lower the academic standards of the postgraduate medical education program. Trainees must meet the academic and clinical requirements of the program, certifying colleges (Royal College (RCPSC) and College of Family Physicians of Canada (CFPC)) and licensing authorities.

Accommodation is both a shared responsibility and a collaborative process.

## **Abilities**

The focus of accommodations and related policy/procedures should be on the abilities, essential skills, and competencies a trainee needs in order to provide safe, effective, clinical patient care. Supportive and enabling accommodations may allow learner physicians with disabilities to demonstrate their abilities. These abilities and the resources required to accommodate may differ across the continuum of education and practice, but there should be as much alignment as possible between PGME, the program, and clinical practice.

# **Dignity and Equity**

Trainees have the inherent right to be valued and respected. Accommodations provided to trainees should be equitable, within the confines of a particular discipline or training site.

## **Transparency**

Trainees should be forthcoming about sharing their accommodation documentation in advance with those who need to know, with a fair process employed at the appropriate time (e.g. post-CaRMS match).

## Individualization

Each trainee's needs are unique. The emphasis must be on the individual trainee and not the category of disability.

## **Professional Integrity/Conduct**

There is a shared onus on the trainees, the postgraduate programs and the certifying bodies to efficiently and proactively inform regulatory authorities about accommodations and special needs, both during residency training and during transition to practice, in the interest of public safety.

#### Confidentiality

Accommodation information should be shared only with those individuals who need to know. Mandatory reporting to the College of Physicians and Surgeons of Ontario (CPSO) with respect to workplace monitoring may be required. In circumstances where this reporting is required, the information may be shared without the explicit consent of the learner. In all other cases, the sharing of accommodation information requires the learner's consent.

PGME, Learner Experience (LE) and programs will comply with the <u>Ontario Human Rights Commission</u> Policy on Ableism and Discrimination based on disability Section 8.7 'Medical information to be provided'



which provides the type and scope of medical information that is necessary to support an accommodation request.

Personal information, including supporting documentation (e.g. personal health information) requested by LE to facilitate the accommodation process, will be handled in accordance with the <u>Freedom of Information and Protection of Privacy Act</u> and the <u>Personal Health Information Protection Act</u>. Where a trainee's personal health information is shared with LE, it will be treated confidentially and shared with the program director and other individuals only as required to facilitate the accommodations. Only the functional limitations and required accommodations, and not the diagnosis, illness, nor the treatment, will be disclosed to the program director and only as required to facilitate accommodations.

Leaves of absence, including those arising from a disability, will be reported to the CPSO and PARO in accordance with applicable legislation and contractual obligations.

# **Guiding Principles for the Accommodation of Learners**

Accommodations serve to remove barriers brought on by disability but do not change or lower the training standards that a trainee is required to meet.

## Accommodations may require:

- i. Modifying rules, practices and/or procedures;
- ii. Making changes to the physical environment to remove barriers for trainees with disabilities;
- iii. Obtaining input and collaboration from key parties such as programs and clinical sites;
- iv. Disclosure of confidential information as required, only on a 'need to know' basis, and only with the trainee's written consent;
- v. Communication of the details of the accommodation to the CPSO when required.
- vi. Communication of the details of the accommodation to Occupational Health at London Health Science Centre in circumstances where the trainee requires the hospital/employer to provide adaptive equipment.

# **Roles and Responsibilities**

# **Trainee Responsibilities:**

- It is the responsibility of the trainee to self-identify and initiate the process for accommodation needs, as well as arranging for their assessment of disability and accommodation requirements.
- For medical students who have had accommodations during medical school, and/or will require
  accommodations when beginning their residency program (post-CaRMS match), it is their
  responsibility to contact LE prior to or at the beginning of their residency training program.
- Trainees must submit requests for accommodations and the required medical documentation to the LE in a reasonable and timely manner\*.
- Trainees must respond to communications from LE, PGME, and their program and supervisors in a timely manner\*. Failure to respond in a timely manner is a breach of professional responsibility.
- Trainees must collaborate with the program, LE and PGME to establish and review the design and implementation of the accommodation plan.
- It is the responsibility of the trainee to notify LE as soon as possible of any changes to their disability status or functional limitations that may impact their accommodation plan so that appropriate modifications can be implemented. Trainees must notify LE when the requirement for an accommodation ends.



- If a trainee is returning from a leave of absence they must confirm with LE that their accommodation plan is still accurate.
- Trainees must notify LE if the accommodation plan is not being adhered to by the program, including off-service rotations.

\*Note: It will be considered that an ill/injured trainee may have medical appointments/hospital stays which limit their ability to communicate in a timely manner.

# Important information for trainees:

- Trainees may be asked to provide consent for disclosure of information to CPSO and/or their program.
- Failure to submit required documentation, which includes the rationale for the accommodation, in a timely manner may result in a delay in the implementation of the requested accommodation, and potentially delay progress and completion of the program.
- It is the trainee's responsibility to request an accommodation in a timely manner; the failure to request an accommodation when the need was known, or ought reasonably to have been known, by the trainee is not an explanation for performance deficiencies or a ground for appeal for any appeal submitted.
- Adequate time is required to review requests for accommodation, and to coordinate implementation if accommodation requests are approved.
- Trainees may be required to take a leave of absence while accommodation requests are considered and, if approved, a plan for implementation is being developed.
- Accommodations may lead to an extension of training time.
- Trainees are responsible for any costs associated with third party assessments, providing documentation, and any costs associated with ongoing monitoring and care by health care professionals.
- The duty to accommodate exists to the point of undue hardship and is subject to the requirement to obtain the knowledge, skills and competencies required to complete a specific training program. Accommodations must not compromise patient safety or lower the standards of the program or PGME.
- Where a trainee fails, or does not comply with an accommodation plan, or if a reasonable accommodation plan cannot be identified, the following outcomes may occur:
  - the trainee may be required to take a leave of absence in accordance with <u>PGME Leave</u> of Absence policy.
  - the trainee may be required to withdraw from the PGME training program.
  - other outcomes as appropriate in the circumstances.
- Trainees are solely responsible for arranging any accommodations required for certification examinations directly with the licensing body (i.e., RCPSC, CFPC).

#### **Documentation:**

- Documentation about disability and accommodations is to be provided to LE and will be housed and shared in accordance with the principles of confidentiality.
- Documentation required for accommodations must include the following information:
  - Treating health professional name, title, contact information, on an official letterhead, and be signed.
  - Date(s) of assessment.
  - Diagnosis and a description of the trainee's limitations due to the diagnosis.



- Information about how the diagnosis was made, for example testing or procedures, with a comprehensive interpretation of the results.
- Statement of the nature of the disability and care plan (including any medications that are a component of the care plan, and any medications that may affect clinical performance), with information provided on the health impact of not following the care plan.
- Explanation of the impact of the disability on the trainee's participation and performance in their training program, including any impact on patient care, safety and trainee wellbeing.
- Recommendations for accommodation and how they will reduce the impact of the limitation due to the diagnosis.
- LE may request additional information if the information is reasonably necessary to evaluate the accommodation request.

# **Learner Experience Office:**

- Responds to trainee communication in a timely manner.
- Advises and informs the trainee about accommodations and process, including confidentiality.
- Provides information about supports available for the trainee.
- Receives and reviews required documentation, requests additional documentation if required.
- Takes into consideration all available resources when developing the accommodation plan and takes into consideration prior accommodation plans.
- Develops initial accommodation plan requirements.
- The accommodation plan will include details regarding to whom the plan will be communicated. If a trainee rotates out of their home program or pursues an elective outside of Schulich School of Medicine and Dentistry, LE and the trainee will discuss the need to inform the receiving program of the accommodation plan.
- Works collaboratively with the trainee, PGME and the program to:
  - Finalize and implement the accommodation plan.
  - Provide ongoing review and support to ensure that the accommodation plan is meeting the needs of the trainee.
  - Review and revise the accommodation plan as required; review of the accommodation plan will ordinarily be every 6 months, and as required.

## **Program Director (or Fellow Supervisor):**

- Must ensure that trainees are aware of PGME policies and guidelines including the Assessment and Appeal Policies, PGME Safety Policy and Accommodation Guidelines as part of the program orientation.
- Responds to trainee, LE, and PGME communication in a timely manner.
- Advises LE and PGME regarding the program requirements and essential competencies required for completion of training.
- Consults with LE and PGME and provides information on the accommodation plan including, but not limited to:
  - Anticipated resource implications
  - If the plan will span several programs/disciplines requiring coordination
  - Concerns regarding the ability to implement the accommodation plan
  - Any extension of training that may result.
- Will implement the approved accommodation plan, and forward logistical requests for accommodation to those responsible for facilitating them (for example rotation or site coordinators) without disclosure of the nature of the disability.



 Monitors trainee progress, assessments and implementation plan; advises LE of concerns with respect to trainee progression and/or implementation of the accommodation plan, including a request for review of the plan.

## **Postgraduate Medical Education:**

- Works collaboratively with LE, the trainee and the program to develop and implement an accommodation plan.
- Responds to trainees, programs, and LE in a timely manner.
- Decides, with the program, of any requirements for extension of training resulting from an accommodation plan.
- Reviews with the program the competencies required for completion of training, to ensure they
  will be met.
- Approves the accommodation plan.
- Meets with LE and the trainee to review the accommodation plan.
- If the accommodation plan is integrated into a remediation or probation plan, the remediation or probation plan, including the accommodations, must be approved by the PGME Advisory Board.

## **Reassessment of Accommodation Plan**

Accommodation plans will be reviewed and reassessed every six months and as needed. A trainee may request a review and reassessment of an accommodation plan by providing a request in writing to LE, and an explanation of why the accommodation plan requires review and possible revision, and the revisions they request. LE may request permission from the trainee to consult with the trainee's health care provider for further information or may request an independent external assessment to assist in the development of a revised accommodation plan.

If the request for reassessment is approved and the revised accommodation plan is agreed to by the trainee, LE, PGME and the program, the revised plan will begin as soon as reasonably possible.

# **Assessment and Appeals Policy**

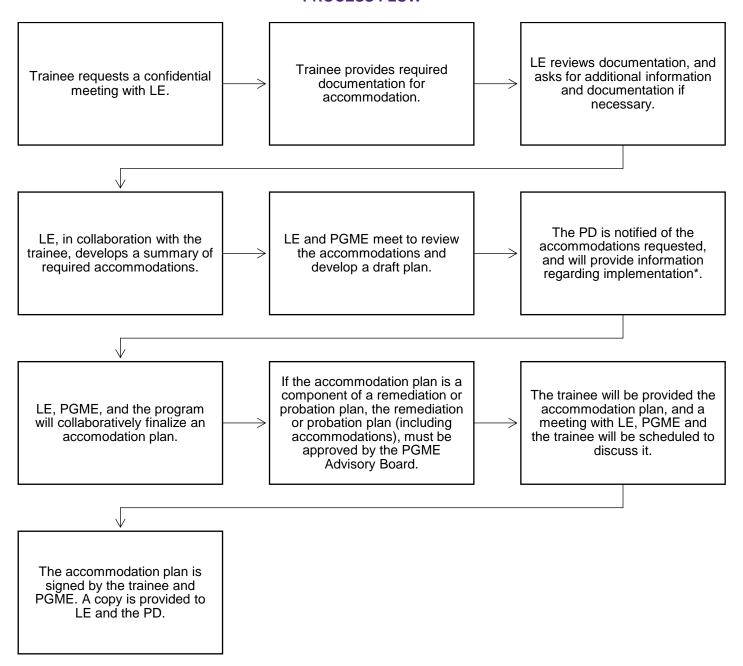
The Associate Dean, PGME will liaise as required with Western Legal Counsel, the Associate Dean Equity, Diversity and Inclusion, LE and any affiliated sites as required in deciding a reasonable accommodation plan.

For trainees who are not progressing as expected, or are failing to progress, despite reasonable accommodations, the <u>PGME Assessment and Appeals Policies</u> are applicable.

If it becomes apparent, that even with reasonable accommodations, that the trainee will be unable to successfully meet the required program requirements they are advised to meet with LE for guidance.



# **PROCESS FLOW**



\*Information to include regarding implementation of the accommodation:

- Anticipated resource implications
- Any anticipated effect on other trainees in the program
- If the plan will span several programs/disciplines requiring coordination
- Concerns regarding the ability to implement the accommodation plan
- Any extension of training that may result.