



JOSIAH MACY JR. FOUNDATION

Exploring the Barriers to Inclusion for Medical
Trainees with Disabilities: A Webinar Series

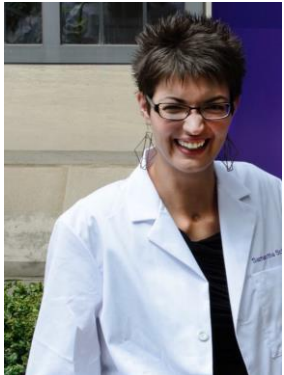
Barriers and Belief Systems: Medical Education for
Learners with Disabilities

June 7, 2022



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Preview of Webinar

- Macy background
- Conference recommendations
- Prevalence of students with disabilities in medical education
- Barriers to inclusion for students
- Elements needed for a successful learning environment
- Discussion
- Follow up



Conference Overview

Conference Overview:

Addressing Harmful Bias and Eliminating Discrimination in Health Professions Learning Environments

- Conference Recommendations:
<https://macyfoundation.org/publications/conference-summary-eliminating-bias-discrimination>
- 44 leaders in health professions education, health care delivery, learners, and educational accreditors
- Four commissioned papers and three case studies
- Final product reviewed and approved by all conferees



Conference Recommendations

Relevant Conference Recommendations

- I. Develop, assess, and improve systems to mitigate harmful biases and to eliminate racism and all other forms of discrimination.
 - I. Leaders of health professions schools should review their technical standards for learner performance, ensuring that they reflect a commitment to diversity, equity, and inclusion. These standards should seek equity in learning environments for health professions students who are living with disabilities. On academic health center campuses, this should be an interprofessional effort (i.e., it should engage all health professions schools in updating technical standards across the board).
- II. Increase the numbers of health professions students, trainees, faculty, and institutional administrators and leaders from historically marginalized and excluded populations.



List of Webinars

Exploring the Barriers to Inclusion: A Three-Part Series

- **Barriers and Belief Systems: Entering Medical Education for Learners with Disabilities**
- Barriers and Belief Systems: Evaluating Trainees with Disabilities
July 12, 2022 at 3:00 pm ET
- Barriers and Belief Systems: Physicians with Disabilities in Medicine
July 26, 2022 at 3:00 pm ET



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Learning Objectives:

L1

Describe the prevalence of students with disabilities in medicine and the benefits of training disabled physicians with disabilities.

L2

Identify the barriers for medical students with disabilities, particularly at points of transition including entry to medical school and residency

L3

Characterize factors and elements needed to connect admissions-driven efforts to learning environment engagement for students with disabilities



Information Overload



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#Nursing







L1

Physicians with Disabilities

Increased Empathy

Inform patient care

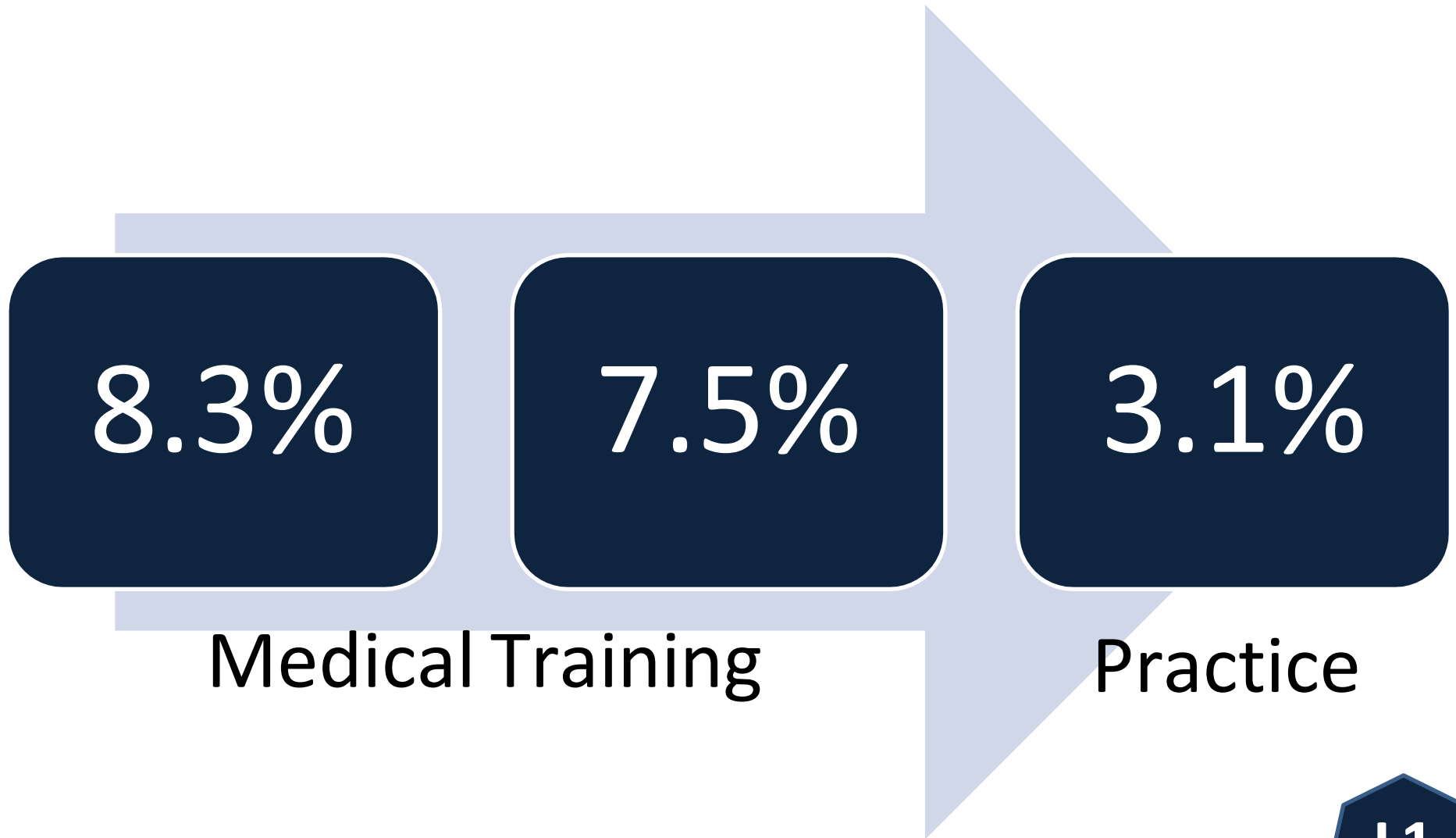
Facilitate shared decision making

Contribute to innovation

Practice concordant medicine

Enter primary care

People with Disabilities



Barriers To Inclusion AAMC Report (2018)

Structural

- Uninformed DRP
- Lack of transparency
- Uninformed decision-making
- Burdensome arduous processes
- Technical Standards

Cultural

- Bias
- Stigma
- Clinicalized Culture
- Negative Peer Attitudes
- Restricted Views of Disability

Ableist Beliefs

Structural

- Poor messaging | Lack of messaging
- Lack of transparency
- Uninformed decision-making | Structures of Disclosure | Conflicts of Interest
- Lack of Accommodations on Board Exams
- Burdensome arduous processes
- Threats of Professionalism Citations for Disclosing Disability
- Failure to connect Disability and Mental Health Supports | Defaulting to LOA's | Fitness for Duty Evaluations

Cultural

- Bias
- Stigma
- Shame | Bullying | Misinformation



Ableism


“Discrimination of and social prejudice against people with disabilities based on the belief that typical abilities are superior. At its heart, ableism is rooted in the assumption that disabled people require ‘fixing’ and defines people by their disability. Like racism and sexism. Ableism classifies entire groups of people as less than, and includes harmful stereotypes, misconceptions, and generalizations of people with disabilities.”

“What if we don’t have the resources to support the student?”

“It’s really inspirational what they’ve accomplished, but medical school is just so hard”

“It’s really not fair of us to accept them and then have them not match”

“Can they even be a Doctor if they have a disability?”

A high-angle, top-down photograph of a diverse group of nine healthcare professionals gathered around a large wooden conference table. The group includes a woman in green scrubs and a surgical cap, a woman in a white lab coat with a stethoscope, a man in a dark suit and tie, a man in a light blue shirt and tie, a man in a blue sweater, a woman in a blue blazer, a man in a green shirt, a man in a dark suit, and a woman in a blue shirt. They are all looking towards the center of the table, which is covered with papers, notebooks, a tablet, a coffee cup, and a small potted plant. The background is plain white.

Is this reasonable?
How will we accommodate?



Performance
of Medical
Students
with
Disabilities

Research Letter | Medical Education



May 21, 2021

Examination of Medical College Admission Test Scores and US Medical Licensing Examination Step 1 and Step 2 Clinical Knowledge Scores Among Students With Disabilities

Joel Purkiss, PhD¹; Melissa Plegue, MA²; Christina J. Grabowski, PhD³; [et al](#)

» [Author Affiliations](#) | [Article Information](#)

JAMA Netw Open. 2021;4(5):e2110914. doi:10.1001/jamanetworkopen.2021.10914

> [Acad Med.](#) 2022 Mar 1;97(3):389–397. doi: 10.1097/ACM.0000000000004510.

The Performance and Trajectory of Medical Students With Disabilities: Results From a Multisite, Multicohort Study

Lisa M Meeks ¹, Melissa Plegue ², Bonnielin K Swenor ³, Christopher J Moreland ⁴, Sharad Jain ⁵, Christina J Grabowski ⁶, Marjorie Westervelt ⁷, Ben Case ⁸, William H Eidtson ⁹, Rahul Patwari ¹⁰, Nancy R Angoff ¹¹, Jack LeConche ¹², Bliss M Temple ¹³, Peter Poulos ¹⁴, Mijiza Sanchez-Guzman ¹⁵, Caitlyn Coates ¹⁶, Christine Low ¹⁷, Mark C Henderson ¹⁸, Joel Purkiss ¹⁹, Michael H Kim ²⁰

Affiliations + expand

PMID: 34817411 PMCID: [PMC8855952](#) DOI: [10.1097/ACM.0000000000004510](#)

[Free PMC article](#)

Welcome to your Anti-Ableist Training Module



DISCRIMINATION





WELCOME

Table 1.

Manuscripts to date on the topic of technical standards in medical education.

ARTICLES		
TITLE	AUTHORS	YEAR PUBLISHED
Beyond Technical Standards: A Competency-Based Framework for Access and Inclusion in Medical Education	Curry, Meeks, and Iezzoni	2020
Leading Practices and Future Directions for Technical Standards in Medical Education	Kezar et al	2019
The Americans With Disabilities Act, Reasonable Accommodations, and Medical Education	Pavlik et al	2019
Removing Barriers and Facilitating Access: Increasing the Number of Physicians With Disabilities	Meeks, Herzer, and Jain	2018
U.S. Medical Schools' Compliance With the Americans With Disabilities Act: Findings From a National Study	Zimmer et al	2016
Medical schools' willingness to accommodate medical students with sensory and physical disabilities: Ethical foundations of a functional challenge to "organic" technical standards	McKee et al	2016
Technical Standards and Lawsuits Involving Accommodations for Health Professions Students	Samuel R. Bagensky, JD	2016
Technical Standards and Deaf and Hard of Hearing Medical School Applicants and Students: Interrogating Sensory Capacity and Practice Capacity	Michael Argenyi, MD	2016
Learning from Physicians with Disabilities and Their Patients	DeLisa and Lindenthal	2016
Unjustified Barriers for Medical School Applicants with Physical Disabilities	Stanley F. Wainapel, MD, MPH	2015
Technical requirements to become an osteopathic physician	Mark Sandhouse	2014
Reflections on Diversity and Inclusion in Medical Education	DeLisa and Lindenthal	2012
North American Medical Schools' Experience With and Approaches to the Needs of Students With Physical and Sensory Disabilities	Eickmeyer, Do, Kirschner, and Curry	2012
Technical Standards for Admission to Medical School: Deaf Candidates Don't Get No Respect	Michael Schwartz	2009
Physicians with Disabilities and the Physician Workforce: A need to Reassess Our Policies	DeLisa and Thomas	2005
Technical standards for the education of physicians with physical disabilities: perspectives of	Van Matre, Nampiaparampil, Curry, and Kirschner	2004

What are Technical Standards?

- The term **`technical standards'** refers to all nonacademic admission criteria that are essential to participation in the program in question.
- **Liaison Committee on Medical Education**
 - **10.5 Technical Standards:**
- *A medical school develops and publishes technical standards for the admission, retention, and graduation of medical students, in accordance with legal requirements.*



My Experience

- Lived experience driver of deciding to enter medicine
- Reviewing TS was important consideration

Guidance

- **AMA (2022):** That our American Medical Association (AMA) urge that all medical schools and graduate medical education (GME) institutions and programs create, review, and revise technical standards, ***concentrating on replacing “organic” standards with “functional” standards that emphasize abilities rather than limitations***, and that those institutions also disseminate these standards and information on how to request accommodations for disabilities in a prominent and easily found location on their websites.
- **AAMC (2018):** Review and revise technical standards in light of current promising practices. Follow LCME Element 10.5, which states that medical schools should develop and publish technical standards for the admission, retention, and graduation of applicants or medical students with disabilities in accordance with legal requirements. Follow Office of Civil Rights (OCR) recommendations on making technical standards available to applicants and students. Ensure that technical standards rely on current technology and medical standards. Give careful consideration to what is truly essential.



No Improvement

73% of technical standards from newly established fifteen MD and DO granting medical schools remained elusive online.

Only 13% included language that supported disability accommodations

73% used technical standards language that were coded as 'restrictive' for students with physical or sensory disabilities.

Actual Technical
Standards:
Communication
Domain

“Students must be able to communicate effectively and sensitively with patients and their families, as well as with all members of the health care team in a variety of different settings. Communication includes **speaking**, reading, writing, and perceiving nonverbal communication and interpretation of patient monitoring devices. Students must communicate effectively and efficiently in both **oral and written English**. They must be able to accurately elicit, comprehend, interpret, transmit and record information regarding all features of a patient’s physical and emotional status. As members of the health care team, students must be able to provide **audible and intelligible verbal information** in urgent and semi-urgent situations, and respond immediately and appropriately to verbal communication, even in unpredictable and chaotic clinical settings.”

But then...

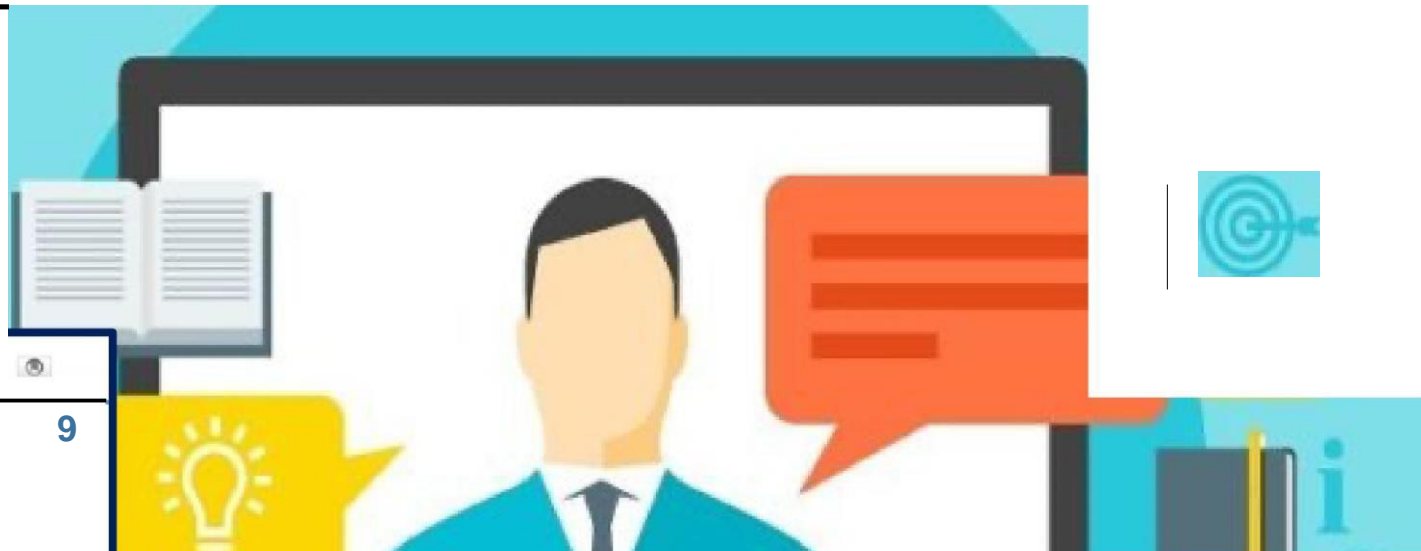
Students must have the ability to **respond without assistance to alarms and other warning signals** in patient care areas.

Ableist informed

>30 years of DHOH Physicians

Functional TS: Communication

“Students must exhibit interpersonal skills that enable effective patient care; this requires accurate evaluation of patients’ history, medical conditions, and the context of their care. Students must be able to record information clearly and accurately and interpret patients’ verbal and nonverbal communication. Students must demonstrate effective communication, participation, and collaboration with all members of a multidisciplinary health care team, patients, and those supporting patients, **in person and in the written record.**”



Technical Standards

9

Technical Standards

Technical Standards are neither technical, nor standard.
-Dr. Kent Hesse, commenting on the lack of utility and inconsistency in most technical standards

What Are Technical Standards?

The term "technical standards" refers to all non-academic admission criteria that are essential to participation in the program in question" [1]. In *Swann v. Charlotte-Mecklenburg Board of Education*, 438 U.S. 264 (1978), the US Supreme Court considered a case where an

The original version of this chapter is revised and updated. The correction to this chapter can be found at https://doi.org/10.1007/978-1-4939-9818-4_11

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L. M. McKen, L. Neal-Ryan (eds.), *Disability in Diversity*
https://doi.org/10.1007/978-1-4939-9818-4_11

Webinar 101

Aligning Technical Standards with 21st Century Medical Education - October 28

Overview Speakers Contents (2)

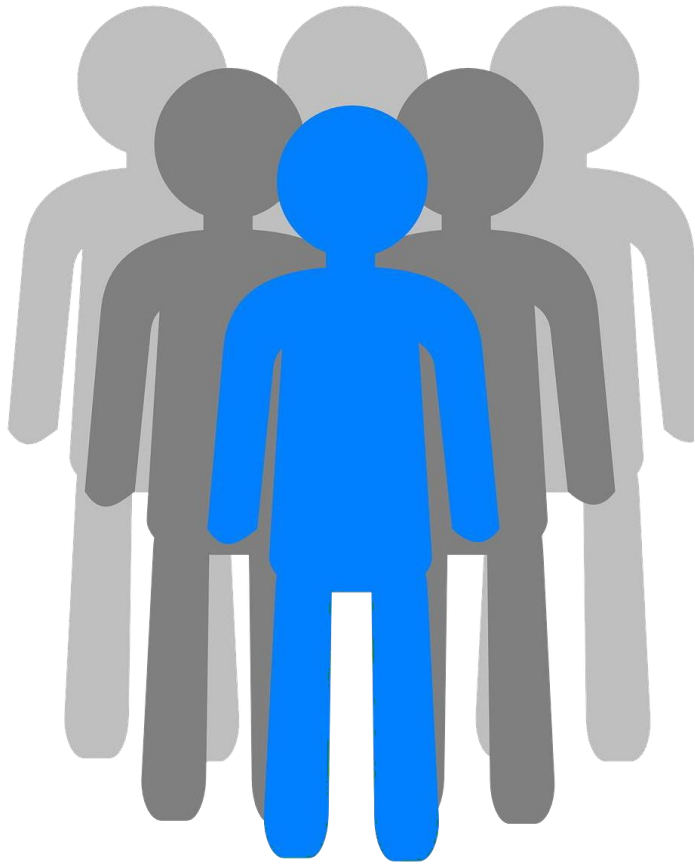
Technical standards have been identified as a barrier to medical school admissions for individuals with disabilities. This webinar is designed to assist schools in seeking to align their technical standards to more accurately reflect 21st-century medical education and technology. The speakers will provide a history of technical standards, legal and educational implications, review welcoming and inclusive language, and a side-by-side comparison of inclusive and restrictive technical standards domains. Finally, the speakers will outline a thoughtful and informed process of reviewing and revising technical standards.

Learning Objectives:




At the end of this webinar, participants will be able to:

- Understand the intended use of technical standards, legal and accreditation requirements for technical standards, and critical elements of inclusive technical standards.
- Apply the information and resources to the review of programs' technical standards.
- Engage relevant institutional stakeholders to revise an updated set of technical standards that reflect recent guidance and inclusive language.

Please use Google Chrome, Firefox, Edge or Safari on this registration site. Internet Explorer will not function properly as it is too old to be compatible with the registration system.



Experiences, Perceptions and Belief
Systems Drive Policy and Practice





Comprehensive Commitment





Recommendations

- Conduct a self evaluation using the AAMC considerations appendix in the back of the report.
- Join the Coalition for Disability Access in Health Professions Education to be part of a community of DRP's and faculty focused on this topic.
- Join the newly established DIGME listserv, a community of GME stakeholders seeking information and support to make informed decisions in the training space.
- Avail yourself of the resources, all of which are free, and a click (or two) away.
- Avoid the "front of the house/back of the house issue" by training your academic leaders at all tiers so they can set the expectations for their division.
- Know and publish the process for disclosing disability and requesting accommodation. Make it easy for learners to find.
- Embrace that you don't know what you don't know and ask.



Questions & Responses

Please use the Q & A function to ask questions

<https://macyfoundation.org/publications/conference-summary-eliminating-bias-discrimination>



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