

Supplemental Digital Appendix 1

The Accommodations Process at U.S. Medical Schools

Medical schools may vary in the specific manner in which they arrange for accommodations, determine eligibility, and deliver services to students with disabilities. Most institutions, however, follow similar procedures and guidelines for students to request academic and clinical accommodations. The following describes two protocols, representative of the way many schools handle such requests. We strongly encourage schools to assign the decision-making responsibility for disability accommodations to one designated person or office that includes a well-trained disability services counselor rather than relying on a faculty committee, for the reasons described below.

Designated disability services counselor

Within the university or medical school, a counselor from an office of disability services or a departmental dean in student affairs is designated as the individual to review and make determinations regarding medical school accommodation requests (see the five-step process outlined below). This person, who has specific training and knowledge regarding disability law and accommodations, consults with the student and specialists, including the curricular dean and clerkship directors as needed to make informed decisions. If this person is outside the medical school, a designated contact within the medical school is often identified to act as the liaison between the disability expert and the medical school. Students' information is held in the strictest of confidence during the process; specific student disability information is not shared with faculty.

Disability or Americans with Disabilities Act (ADA) committee

Some schools still utilize a committee of representatives who meet on a scheduled basis (usually monthly) to review requests and make determinations. These committees often include deans, faculty members, and other disability focused offices (the compliance or disability services office staff).

Use of a committee to review accommodation requests is risky for several reasons:

1. Committee members may not have relevant training or expertise regarding disabilities in educational settings and/or fashioning appropriate accommodations, and thus would not be able to effectively evaluate and make valid recommendations.
2. Knowing that private medical information is shared with a campus committee can serve as a deterrent to students with disabilities seeking needed accommodations. It can also increase students' anxiety related to who on campus knows about their personal disability history.
3. Faculty with intimate knowledge of a student's disability history may unknowingly slip into a doctor/patient role or display unconscious bias when evaluating the student's performance.
4. Decisions by a committee can be delayed because of limited meeting times (once per month). Delayed determinations in a fast-paced environment can prolong lack of access to needed accommodations for students with disabilities and result in their continued poor performance and potential dismissal.

5. Legal risk could also ensue: When faculty are aware of a student's detailed disability history and the student receives a poor evaluation, the student may attribute the low marks to unlawful discrimination—even if none existed—and initiate a complaint or lawsuit.

The ADA requires that a knowledgeable person evaluate accommodation requests on a timely basis. When students provide their disability documentation to just a designated disability expert, who then obtains faculty input as needed to determine particular accommodations in certain clinical and didactic settings, the response is timelier, plus risks to both the school and the students' well-being are reduced.

Steps of the accommodations process

For the purposes of simplicity, below we illustrate the accommodations process in five steps.

Step 1: School informs students about the disability office and its services

For students to schedule an intake appointment with a counselor in the disability office prior to the start of their coursework or clerkships in which an accommodation is required, they must be given the information about how to do so. Medical students who have received accommodations in college know to seek out disability services to request accommodations. Other students may not be aware of the services available, especially if they become disabled after they begin medical school. To create an open and welcoming climate, disability offices provide a prominent web presence along with a request to faculty and instructors to include disability accommodation information in the syllabus.

Step 2: Student discloses disability and provides professional documentation

To obtain accommodations, students must self-disclose a disability and gather and submit any relevant disability-related documentation that they have on hand (e.g., psychoeducational evaluation, report from physician, etc.) to the disability services office. At the initial meeting with the disability counselor, the documentation is evaluated to determine if it was provided by a qualified health care professional and is sufficiently detailed to prove the student has a disability. Schools generally provide guidelines regarding documentation requirements specific to categories of disability such as psychiatric/mental health, learning disability, deaf/hard of hearing, and chronic health conditions, among others. If the documentation is incomplete, the disability counselor will address the insufficiencies and assist the student in obtaining new or supplemental documentation.

Disability information is considered private, and disability offices should be committed to ensuring all information regarding a student remains confidential as required or permitted by law. Any information regarding a disability gained from medical, psychiatric, or other evaluations should be shared with others within the institution on a need-to-know basis only.

Step 3: Engage in the interactive process to determine eligibility and accommodations

Once the documentation is accepted, the student and disability services counselor review the student's functional limitations, taking into consideration how these limitations impact his or her ability to meet course and clerkship requirements. To determine eligibility and decide on specific

accommodations, a collaborative partnership, commonly referred to as the “interactive process,” occurs between the student, counselor, and medical school representative. Each partner in the process has a critical and integral role. The student has personal knowledge and experience about the barriers personally confronted in the educational environment. The disability service counselor brings expertise about possible accommodations or modifications that remove or mitigate the effects of the identified barrier. The medical school contact brings a discipline-specific skill and knowledge about the fundamental or essential elements required by the medical school curriculum. By engaging in the interactive process, barriers are identified and a reasonable accommodation plan is developed that does not compromise the essential components of each course and clerkship or the institution’s technical standards.

Step 4: Implement the accommodations

Once the accommodation plan is verified, the disability services counselor provides an “accommodation or verification letter” for the student that states the specific modifications required. To protect confidentiality, this letter does not contain any details about the student’s disability, just the accommodations to address the student’s disability-related functional limitations. In many medical schools, the school contact receives the letter and ensures that the specific accommodations are implemented and that the cost is borne by the school. The student’s faculty may or may not learn that accommodations were used.

Step 5: Review and revise the accommodation plan

After accommodations have been in place for a while, it is wise to periodically engage the student in a discussion about the plan’s effectiveness and the student’s ongoing experience. In some instances, a revision of the accommodation plan is needed, either because the original accommodation plan is not effective or a particular clerkship rotation poses unexpected and challenging barriers.