MARSHALL COMMUNITY HEALTH CONSORTIUM
GRADUATE MEDICAL EDUCATION

POLICY ON ACCOMMODATIONS FOR RESIDENTS WITH DISABILITIES

SECTION 1. POLICY STATEMENT

1.1. This policy is in accordance with the Accreditation Council for Graduate Medical Education (ACGME) Institutional Requirements, that the Marshall Community Health Consortium, as a Sponsoring Institution, must have a policy regarding accommodations for Residents with disabilities.

1.2. The policy shall be consistent with all applicable laws and regulations pertaining to people with disabilities, i.e., Americans with Disabilities Act of 1990 (ADA) and ADA Amendments Act of 2008 (ADAAA). Accordingly, the Marshall Community Health Consortium is committed to providing reasonable accommodations to qualified Residents with disabilities.

1.3. It is the intent of this policy to describe the process by which Residents with a disability may request accommodations.

1.4. This policy applies to all ACGME accredited graduate medical education programs sponsored by the Marshall Community Health Consortium.

SECTION 2. INTENT OF POLICY

2.1. The intent of this policy is not to address the selection of Residents who have applied for a position in a training program. Such selection is based upon, among other things, an applicant’s ability to achieve the requisite competencies in the particular specialty or subspecialty training program to which the applicant has applied, as defined by the relevant ACGME Program Requirements.

2.2. An applicant will not be disqualified from consideration because of a disability or be required to disclose the existence or nature of any disability during the application process but all applicants and Residents must be able to satisfy the technical standards listed below, with or without reasonable accommodation.

2.3. Should applicants and Residents not be able to meet the technical standards outlined below, and not be able to fulfill the essential requirements of the training program, the program may deny admission to or exclude them from their program on that basis.
SECTION 3. RESPONSIBILITIES OF GRADUATE MEDICAL EDUCATION

3.1. It is the responsibility of all Residency Program Directors, the Designated Institutional Official and the Marshall Health Care Consortium, and all of its affiliates to comply with this policy.

3.2. Qualified Residents who have a disability will not be excluded from participation in, denied the benefits of, or be subjected to discrimination in connection with the training programs or other services offered by the Consortium.

3.3. In response to an approved request made by a qualified Resident with a disability, the Consortium will arrange for the provision of reasonable accommodations necessary to afford such Resident the full opportunity to participate in his or her training program. However, the Consortium is not required to provide an accommodation that compromises the essential requirements or makes a substantial modification in an essential element of the relevant training program, imposes an undue financial burden based on Consortium or any of its affiliated sites’ overall institutional budget, or poses a direct threat to the health or safety of the Residents, patients or others.

SECTION 4. DEFINITIONS

4.1. The Americans with Disabilities Act (ADA) of 1990 and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more “major life activities.” The ADA Amendments Act of 2008 (ADA-AA) expands the ADA definition of “major life activities” from walking, seeing, speaking, breathing, learning, working, etc. to also include eating, sleeping, standing, lifting, bending, reading, concentrating, thinking, as well as the “operation of a major bodily function.” Transitory or minor conditions (<6 months duration) do not qualify as a disability under the laws. Further information can be obtained from the ADA website (http://www.ada.gov).

4.2. A reasonable accommodation is a modification or adjustment to a job, an employment practice, or the work environment that makes it possible for a qualified individual with a disability to enjoy an equal employment opportunity.

4.2.1. Examples of accommodations for GME may include but not be limited to: acquiring or modifying equipment or devices; modifying training materials; making facilities readily accessible; modifying work schedules; and reassignment to a vacant position as eligible and permitted by the accrediting requirements of the program.
4.2.2. Reasonable accommodation applies to three aspects:

4.2.2.a. To assure equal opportunity in the application process;
4.2.2.b. To enable a qualified individual with a disability to perform the essential functions of a job; and
4.2.2.c. To enable a resident/fellow with a disability to enjoy equal benefits and privileges

4.3. Reasonable accommodations, when necessary, will be made for current and future activities, but cannot be made retroactively to remove remediation, probation or termination.

4.4. While the use of accommodations may enable the Resident to better demonstrate his/her abilities, accommodations do not guarantee improved performance.

4.5. The Resident must be able to successfully complete ALL requirements for the specialty as defined by the Accreditation Council for Graduate Medical Education (ACGME) Residency Review Committee (RRC) and the subspecialty board with the approved accommodations.

SECTION 5. ESSENTIAL RESIDENT TECHNICAL SKILLS ELIGIBILITY CRITERIA

5.1. Graduate medical education programs must require Resident applicants accepted into the program to develop competence in six essential areas:
5.1.1. Patient Care
5.1.2. Medical Knowledge
5.1.3. Practice-based Learning
5.1.4. Systems-based Practice
5.1.5. Interpersonal Skills and Communication, and,
5.1.6. Professionalism.

5.2. Toward this end, residency programs in consideration of the Accreditation Council for Graduate Medical Education Essentials for ACGME Institutional and Program Requirements define the specific knowledge, skills, and attitudes required and provide educational experiences as needed in order for Residents to demonstrate the necessary competencies.

5.3. In most instances, timeliness is an essential element and requirement in performing essential technical skills and meeting necessary competencies whether or not separately expressed in these standards.

5.4. In order to achieve competency in these six areas, the Resident must be able to successfully complete ALL requirements for the specialty as defined by the Accreditation Council for Graduate Medical Education (ACGME) Residency Review Committee (RRC) and the subspecialty board with the approved accommodations.
SECTION 6. REQUEST FOR ACCOMMODATION/
DOCUMENTATION OF DISABILITY

6.1. Residents who wish to seek reasonable accommodation must submit to the Program Director of her/his Residency program, a Request For Reasonable Accommodation Form prior to starting the training program when possible. Required documentation from a qualified professional includes, may include not be limited to:

6.1.1. Verification of the existence of a disability by articulating a diagnosis;

6.1.2. Description of the nature and severity of any functional limitations that result from the disability, including in particular how the disability affects the Resident’s ability to comply with the technical standards applicable to their program;

6.1.3. Description of the duration for which any such functional limitations are expected to continue; and

6.1.4. Suggestions of any possible reasonable accommodations that he or she may consider appropriate in light of the technical standards needed to competently and independently practice their specialty.

6.2. It is the Resident’s responsibility to arrange for the required documentation, and the Consortium or any of its affiliates are not required to pay for any required diagnosis or testing. The type, nature, and extent of documentation required may vary depending on the disability at issue.

6.3. Residents may have to update or augment documentation to ensure that the Consortium has all of the information necessary to evaluate a request for reasonable accommodation.

6.4. To determine whether the required documentation is adequate or an accommodation is reasonable, the Consortium or any of its affiliates may reserve the right to seek input on a confidential basis from outside service providers.

6.5. The Program Director, the Office of Consortium Graduate Medical Education designee, and the Office of Diversity will work with a Resident in the development and implementation of reasonable accommodations for a disability as defined in the ADA.

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