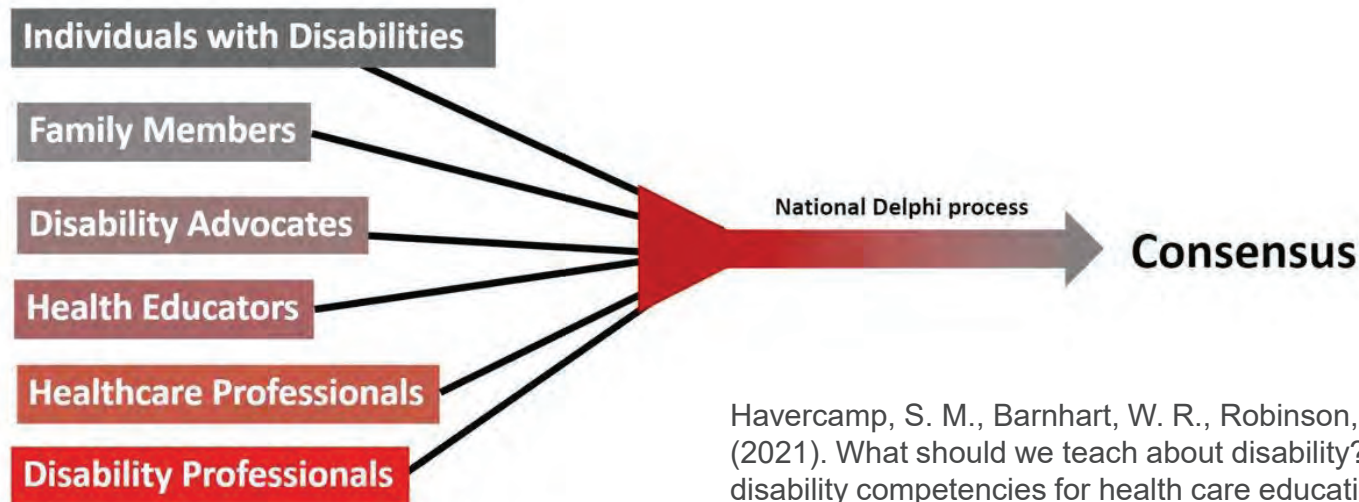


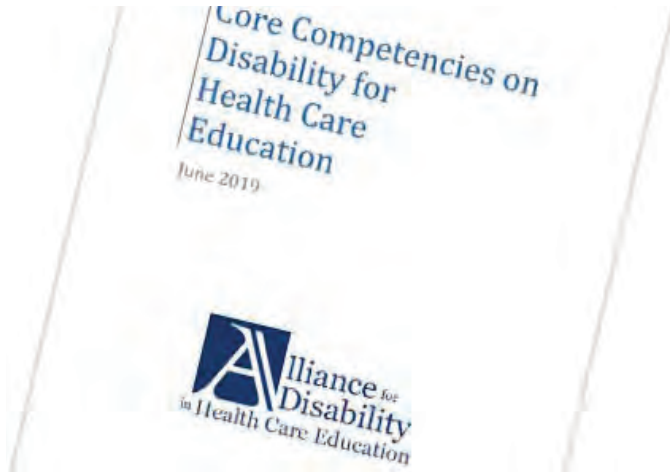
# Core Competencies on Disability for Healthcare Education

- The Ohio Disability and Health Program partnered with the Alliance for Disability in Health Care Education.
- Delphi process with disability stakeholders to reach consensus.



Havercamp, S. M., Barnhart, W. R., Robinson, A. C., & Smith, C. N. W. (2021). What should we teach about disability? National consensus on disability competencies for health care education. *Disability and Health Journal*, 14(2), 100989.

# Core Competencies on Disability for Healthcare Education



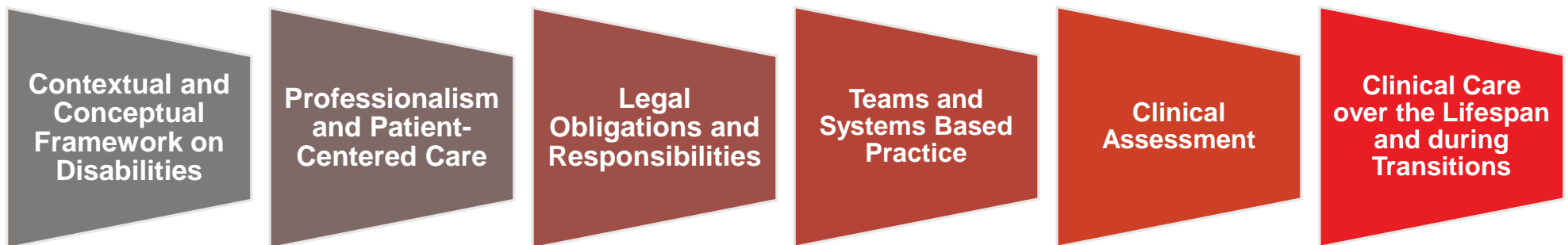
Learning objectives reflect the knowledge, skills, and beliefs essential to provide quality healthcare to patients with disabilities

- Interprofessional
- Cross-disability

Alliance for Disability in Health Care Education. (2019). Core Competencies on Disability for Health Care Education. Peapack, NJ: Alliance for Disability in Health Care Education. <http://www.adhce.org/>

# Core Competencies on Disability in Health Care Education

Broad stakeholder consensus was reached 6 core competencies



<https://go.osu.edu/disabilitycorecompetencies>

# GUIDING PRINCIPLES AND VALUES



- Guiding principles and shared values are essential to providing quality care to people with disabilities.

# DISABILITY MODELS



- Shift thinking from the biomedical to a social model of disability
- Describe how social determinants of health impact PwD
- Describe disability as an identity



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# PROFESSIONALISM AND PATIENT-CENTERED CARE



*Adherence to principles of professionalism, communication, and respect during interactions with people with disabilities, as well as building an understanding of the patient's perspective.*



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# Legal Obligations and Responsibilities

Providing equitable access to health care is a civil right,

not just a nice thing to do



<https://adata.org/factsheet/accessible-health-care>



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**"I'm sorry...excuse me...let me get out of the way"**



Creating a welcoming office environment for all patients takes forethought



# TEAMS AND SYSTEMS BASED PRACTICE



- *The input of professionals from multiple disciplines is often required to address the complex health needs of patients with disabilities.*



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# CLINICAL ASSESSMENT

- *Good clinical management requires that accurate and relevant information about the health and function of patients with disabilities is viewed in the context of the person's life activities, goals, and interests.*



## CLINICAL CARE OVER THE LIFESPAN AND DURING TRANSITIONS



*Patients with disabilities may require supports and accommodations to benefit fully from clinical intervention.*



HOW CAN WE INCLUDE  
DISABILITY CONTENT IN  
HEALTHCARE EDUCATION?

# BARRIERS TO INCLUDING DISABILITY CONTENT

## Common Barriers

1. Perceived lack of **relevance**
2. Lack of **time**
3. **Unsure of how** to recruit and work with community members with disabilities



## Potential Solutions

1. **Share data** on disability prevalence and health inequities
2. **Find opportunities** to imbed PWD in existing curriculum (population health, Diversity Equity Inclusion)
3. **Professional development-** share strategies for clear communication and establishing trust & partnerships



# INCLUDE PWD IN THE PLANNING OF EDUCATIONAL ACTIVITIES

- Establish relationships with **disability community** – social media, word of mouth, reach out to Centers for Independent Living, local disability organizations, consider student disability groups
- **Partner with PWD** recognizing their expertise
- **Plan** for accessibility – budgeting for accommodations such as ASL interpreters, plain language, transportation
- **Students can be powerful advocates**; involve them in planning educational activities and collect feedback to improve activities and to prove benefits of training

## ELECTIVE COURSES AT OSU

- **Global Health and Disability Seminar** – Interdisciplinary graduate course addresses the models of disability, the historical context of disability issues worldwide, and how disability issues align with current global health agendas to achieve equity in health for all people.
- Students explore current challenges in access to care for people with disabilities locally and abroad and discuss evidence-based interdisciplinary models and interventions to improve access to healthcare and rehabilitation for people with disabilities around the corner and around the world.



## ELECTIVE COURSES AT OSU

- **Advanced Competency in Developmental Disabilities** - Fourth year medical students can choose this elective during which they participate as a member of an interdisciplinary team, engage in online learning, and visit the homes of people with developmental disabilities.
- The goals are to demonstrate patient-centered, interprofessional, team-based care for children and adults with intellectual and developmental disabilities and their families and to discuss relevant legislation, legal and ethical issues, and civil rights of people with intellectual and developmental disabilities.



# 4-YEAR DISABILITY ELECTIVE AT SUNY

State University of New York (SUNY) at Buffalo implemented a longitudinal disability curriculum across all four years of undergraduate medical education. The curriculum included:

- **School-based education:** didactic teaching and encounters with standardized patients with disabilities.
- **Community-based experiences:** encounters with patients with disabilities, meetings with families of patients with disabilities, presentations by patient advocates, and visits to the specialized community agencies serving people with disabilities.
- **Clinical experiences:** precepted clinical experiences in local clinics which provide primary care and integrated services for patients with disabilities.
- **Research experiences:** mentored research opportunities related to disability. One area of research interest is the provision of community-based primary care services for people with disabilities.



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Symons AB, McGuigan D, Akl EA. A curriculum to teach medical students to care for people with disabilities: development and initial implementation. BMC Med Educ. 2009;9:78–78. doi:10.1186/1472-6920-9-78.



# REQUIRED DISABILITY LECTURE AT OSU

- All 1<sup>st</sup> year medical students have a lecture on developmental disabilities to
- Increase awareness and knowledge
- Challenge assumptions about disability



# PATIENT PANELS AT OSU

## Mobility limitations panel

As a part of the musculoskeletal unit, 1st year medical students are taught about physical and mobility related disabilities by a **disabled faculty member** and a **panel** of community volunteers with **musculoskeletal disabilities**.

# PATIENT PANELS AT OSU

## Autism Spectrum Disorder

As part of a patients within populations unit,  
3rd year medical students attend a **panel of autistic people** and family members of autistic children and adults who discuss the **healthcare experiences and needs**

# STRUCTURED CLINICAL LEARNING AT OSU

- All 3rd year medical students have a **disability-related FOSCE** (Formative Objective Structured Clinical Examination)
- **Simulated patients**, who are community members with disabilities, act out a new patient appointment to establish care.
- Students collect a **brief medical and social history** and receive **feedback** from the patient, a peer, and debrief with their instructor.



# FOSCE EVIDENCE

Analysis of data collected from the 2017-2018 academic year revealed that

- students were **highly satisfied** with the experience and
- anticipated feeling **more confident, more comfortable, less awkward, and more skilled** and efficacious when encountering a person with a disability in their future practice.
- **1-year follow-up** data suggested that students valued the encounter and desired more content on disability throughout their education.

# VIRTUAL NEURODEVELOPMENTAL DISABILITY TRAINING

## Virtual Behavior Skills Training

- Medical students received **training virtually** on behavioral procedures that could be incorporated into typical wellness exams.
- Results showed that the training **increased students' skills** in roleplay with the researcher and with patients with neurodevelopmental disabilities



Hoang, A. Q., Lerman, D. C., & Nguyen, J. T. (2023). Virtual Training of Medical Students to Promote the Comfort and Cooperation Of Patients with Neurodevelopmental Disabilities. *Journal of Autism and Developmental Disorders*, 1-15.

# IMPORTANCE OF ENGAGING PWD

Providing **clinical encounters with PWD** and the opportunity to reflect on those encounters results in **significantly higher levels of comfort, skills, and knowledge** compared to medical residents who received didactic information only.

Selick, A., Durbin, J., Casson, I., Green, L., Abells, D., Bruni, A., ... & Lunsky, Y. (2022). Improving capacity to care for patients with intellectual and developmental disabilities: the value of an experiential learning model for family medicine residents. *Disability and Health Journal*, 15(3), 101282.

Nursing students who participated in a clinical community course or an elective disability fellowship showed **greater changes in disability attitudes and skills**

Edwards, A. P., Cron, S., & Shonk, C. (2022). Comparative effects of disability education on attitudes, knowledge and skills of baccalaureate nursing students. *Nurse Education in Practice*, 61, 103330.

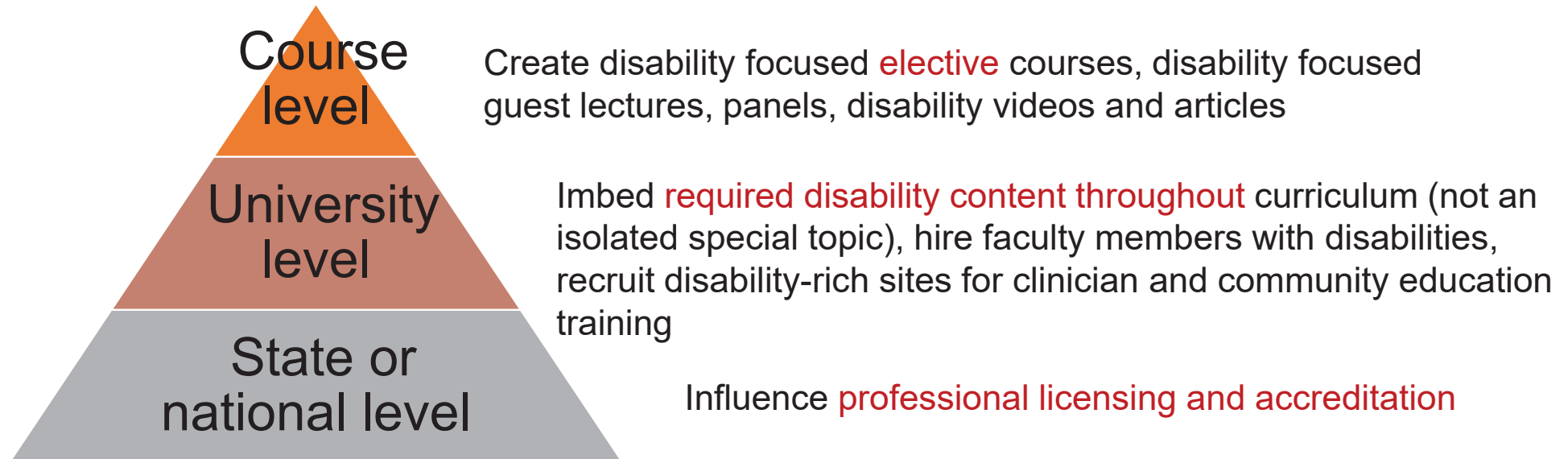
# WHAT STUDENTS SAY



When **disability content** is integrated in medical training curriculum, students describe the experiences as **relevant and meaningful**.

Borowsky H, Morinis L, Garg M. Disability and Ableism in Medicine: A Curriculum for Medical Students. MedEdPORTAL. 2021;17:11073. [https://doi.org/10.15766/mep\\_2374-8265.11073](https://doi.org/10.15766/mep_2374-8265.11073)

# LEVELS TO TARGET





By intentionally including disability in healthcare training, we can prepare a disability-competent healthcare workforce.



Questions?

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