



University of Toronto  
Faculty of Medicine, Postgraduate Medical Education

## **PGME Statement of General Principles for Accommodation**

**Approved by: Postgraduate Medical Education Office**

**Date of original statement: June 2009**

**Date of last review: PGMEAC January 2013, HUEC May 2013**

**Date of next scheduled review:**

### **1. BACKGROUND AND DEFINITIONS:**

Residents with disabilities are entitled to the same opportunities and benefits as those without disabilities. In some circumstances, those with disabilities may require short or long-term accommodation to enable them to complete their training. "Disability" is defined by the Ontario Human Rights Code and covers a broad range and degree of conditions that may have been present from birth, caused by an accident, or developed over time. It includes physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, environmental sensitivities, and other conditions.

Accommodation is a legal obligation and the goal of any accommodation plan is to allow equal benefit from and participation in services, education or the workplace. Reasonable accommodation may require members of the University community to exercise creativity and flexibility in responding to the needs of residents with disabilities. However, such accommodation cannot compromise patient safety and well-being and must take into consideration the rights and needs of other residents.

Regardless of disability, all residents must meet educational standards for certification and independent practice which are determined by the Royal College of Physicians and Surgeons of Canada or the College of Family Physicians of Canada.

Accommodation is a shared responsibility. It is most effectively provided when those involved, including the medical resident, approach the process with fairness, sensitivity, respect for confidentiality and co-operation. This requires the exchange of relevant information to the appropriate parties, and constructive negotiation to reach mutually acceptable solutions.

## **2. PROCESS:**

See appendix 1 (flow chart) attached.

If a resident has a disability for which s/he requests accommodations, the Program Director must be made aware of the request and the justification for it, including relevant documentation from the appropriate medical practitioner(s). The resident is encouraged to consult with knowledgeable members of the University Faculty of Medicine, the training site, or other organizations prior to making this request to their Program Director. Examples of those available for consultation include the Director, Resident Wellness in the Postgraduate Medical Education Office, the Student Affairs Office of the graduating medical program, the Associate Dean, Equity and Professionalism, PAIRO, the Occupational Health Office at a training site or the Ontario Medical Associations' Physician Health Program.

If the disability primarily requires workplace accommodations, such as an environmental sensitivity or the need for an assistive device, the Program Director will be required to contact the Occupational Health Office of the training site to consider and develop an accommodation plan consistent with the policies and procedures of that site. This will frequently require the involvement of the training site Education Lead.

Residents who prefer not to disclose the specifics of their disability to their Program Director can submit documentation to the Director, Resident Wellness who can then convey the relevant information to the Program Director that will be required for the consideration of accommodation. While every attempt will be made to preserve confidentiality, specific information regarding the resident's limitations may be shared in order to consider and/or implement appropriate educational accommodations. This will be reviewed with the resident during the process who may at any time decline to disclose specific information, understanding that it may impact the accommodation process.

In addition to a resident request for accommodation, a disability requiring accommodation may arise in the course of proceedings before the PG Board of Examiners, either: 1) as a rationale for failure of a rotation(s) or an examination(s), or 2) following consultation and advice from a health care or learning needs professional. In these circumstances accommodation will be addressed in the context of the Remediation Plan; and the procedures described below apply.

Residents must be aware of the objectives for achieving certification upon entrance to their program and understand that regardless of disability, essential competencies as determined by their program and accrediting bodies must be achieved for successful completion of the program. Residents who chose not to disclose their disability and request accommodation prior to a rotation may not appeal unsuccessful evaluations on the basis of their disability.

When there is uncertainty or disagreement between the resident's request for accommodation and what the program determines reasonable, with the resident's permission, the case should be referred to the Board of Medical Assessors-PG for independent review. The Terms of Reference for the PG BMA are attached as Appendix 2. Residents and/or Program Directors will be referred to the Director, Resident Wellness to understand and initiate the process. Recommendations of the BMA –PG, will be considered by the Dean through the Vice Dean, PGME who will determine the outcome.

If accommodations have been granted, intervals reports may be periodically required from treating health care practitioners and accommodation plans reviewed regularly to ensure accordance between the accommodation needs of the resident and requirements of the program.

If it becomes apparent that despite reasonable training accommodations, the nature of the disability may prohibit the resident from successfully achieving the standards of the training program, the resident is encouraged to seek career counseling from a mentor, faculty member, or the Office of Resident Wellness regarding alternative career options.

**Resident with a communicable disease:**

Accommodations for residents who have been identified with a communicable disease are reviewed by the Faculty's Expert Panel on Infection Control. The Panel reviews the procedures the resident will perform according the Level of risk for blood borne pathogen transmission as outlined in the *Society for Healthcare Epidemiology of America (SHEA) Guideline for Management of Healthcare Workers Who Are Infected with Hepatitis B Virus, Hepatitis C Virus, and/or Human Immunodeficiency Virus, March 2010*. Program Directors are involved in the Panel's discussion of rotation service and call modification required to accommodate.



## Appendix 2:



### **Board of Medical Assessors (BMA)**

#### **TERMS OF REFERENCE**

##### **1. Definitions**

**"Board"** means the Board of Medical Assessors as constituted by the Dean.

**"Dean"** means the Dean of the Faculty or the designate of the Dean.

**"Faculty"** means the Faculty of Medicine of the University of Toronto.

**"Student"** means a student enrolled in any of the following programs of the Faculty:

- Medical Radiation Sciences; and )
- Occupational Therapy; )
- Physical Therapy; )
- Speech-Language Pathology. )
- Undergraduate Medical Education)
- Physician Assistant Professional Degree Program)

**"Trainee"** means a Resident registered in a Postgraduate training program or a Fellow in a registered fellowship program under the auspices of Postgraduate Medical Education.

**"Associate Dean"** means the Associate Dean, Health Professions Student Affairs.

**"Director"** means the Director of Resident Wellness, Postgraduate Medical Education

##### **2. Purpose**

The purpose of the Board is to consider and determine whether there is a medical condition that affects or may affect the ability of a student or trainee to participate, perform or continue in the Health Professional Educational Programs (Program) of the Faculty, and to make recommendations regarding such matters to the Dean. The Board is advisory to the Dean

##### **3. Structure**

**3.1** The Board shall consist of two distinct Sub-boards which will address matters pertaining to students or trainee in different Faculty of Medicine Programs:

- a. Postgraduate Medical Trainees (PME Sub-Board)

Approved by Dean Whiteside February 7, 2010

- b. Students in Medical Radiation Sciences, Rehabilitation Sciences (Occupational Therapy, Physical Therapy, Speech and Language Pathology), Physician Assistant Professional Degree Program and Undergraduate Medical Education (Sub-Board)

Administrative support for the function of the Board shall be derived from the Faculty Affairs Officer.

### **3.2 Membership Appointments**

Membership shall be at the request of the Dean. Advice shall be sought from the Chairs of the Clinical Departments and the Rehabilitation Sciences. The following members shall be appointed:

- Chair, PME Sub-Board
- Chair, UME Sub-Board
- Vice Chair, PME Sub-Board
- Vice Chair, UME Sub-Board
- *Ex Officio*
  - Director
  - Associate Dean

Quorum is to be drawn from a list of thirty preselected members to include broad representation from Faculty with experience in Postgraduate Medical Education, Medical Radiation Sciences, Rehabilitation Sciences (Occupational Therapy, Physical Therapy, Speech and Language Pathology), Physician Assistant Professional Degree Program and Undergraduate Medical Education. Members may serve on one or both Sub-Boards. Membership for meetings will be composed based on the requirements for that Sub-Board as indicated below.

### **3.3 Term of Office**

Board members including the Chairs and Vice Chairs shall have a term of three years, renewable at the discretion of the Dean

### **3.4 Quorum and Composition of a Board Meeting**

Meetings of the Board shall be called by the Chair (or Vice Chair in the absence of the Chair) when a referral has been received. Board meetings will consist of a quorum of five members of the Board. Such members shall not consist of someone who has either supervised or taught student or trainee. Membership of meetings will consist of at least:

3. 4. 1. PME Sub-Board
  - a. Chair or Vice Chair
  - b. Four members:
    - One Faculty member from the Trainee's specialty or related specialty
    - One Faculty member from another specialty
    - One Psychiatrist
    - One other Physician member from any other area
  - c. The Director

Approved by Dean Whiteside February 7, 2010

3. 4. 2. UME Sub-Board
  - a. Chair or Vice Chair
  - b. Four members:
    - i. One Faculty member from the Student's program
    - ii. One Faculty member from another program
    - iii. One Psychiatrist
    - iv. One other Physician member from any other area
  - c. The Associate Dean Health Professions Student Affairs or designate

3. 4. 3 The Chair or Vice Chair may invite consultants to provide advice or opinion(s) on complex situations.

3. 4. 4 In individual cases at the discretion of the Chair, a special Board meeting drawn from the membership (appropriate to the matters(s) at hand) may be composed to address specific health/medical issues.

#### **4. Process**

Meetings of the Board shall be called at the request of the Chair or Vice Chair and shall be scheduled by the Faculty Affairs Officer who will set the dates. The composition of the requisite Board will be based on the source of the case. All meetings will be held in camera.

4. 1 Referrals to the Board shall be made by the Dean on the advice of:
  - a. Vice Dean Postgraduate Medical Education, Vice Dean, Undergraduate Medical Education, Vice Dean of Graduate Studies, Chairs of Rehabilitation Sector, Director of Medical Radiation Science, Medical Director of Physician Assistant Education Program or any of their designates, such as Associate Deans, Academy Directors, Chairs of Education Committees or Residency Training Committees.
  - b. The Board of Examiners Postgraduate Medical Education, Undergraduate Medical Education or Medical Radiation Sciences.

#### 4. 2 Assessment Procedure:

- a. The reason(s) for referral must be clearly stated in writing and any relevant documentation must be included for Board review.
- b. The student or trainee shall be invited to meet with the Associate Dean or Director to discuss the concerns/issues raised in the referral and the role of the Board.
- c. The student or trainee shall be provided with a copy of these Terms of Reference.
- d. The student or trainee may provide the Associate Dean or Director with any written documents that will inform the Board about the referral.

4. 3 Board Procedure:

- a. In the case of the UME Sub-Board, the Associate Dean shall assemble any documentation relevant to the referral for the Board. In the case of the PME Sub-Board, the Director and/or the Program Director or designate shall assemble any documentation for the referral.
- b. The Board shall meet to review the relevant documentation, including any /all documents provided by the Program and any/all documents provided by the student or trainee. The Board may:
  - i. Determine whether there is a medical condition that affects or may affect the ability of a student or trainee to participate, perform or continue in Program and decide on a recommendation concerning the student or trainee; or
  - ii. Determine that further information or medical or other assessment is required.
- c. In the case of (ii.), any further information shall be assembled by, and any medical or other assessment arranged by, the Associate Dean, Director, Program Director or designate.
- d. Once any further information is assembled and any medical or other assessment is completed and reports received for PME the Director, Program Director or designate, or for Medical Radiation Sciences, Rehabilitation Programs or Undergraduate Medical Education the Associate Dean shall invite the trainee or student to meet to review the information and/or reports. The trainee shall be invited to provide any further written documents for the Board.
- e. The Board shall then meet to review the further information, assessments, reports and/or student or trainee documents. The Board may:
  - i. Determine whether there is a medical condition that affects or may affect the ability of the student or trainee to participate, perform or continue in Programs and decide on a recommendation concerning the student or trainee; or
  - ii. Decide that further information and/or assessments are required, in which case the steps in (c.) through (e.) shall be repeated as necessary.
- f. The Faculty Affairs Officer will secure all documents relevant to the Board's deliberations and decisions In accordance with appropriate Private Legislation.

4. 4 Board Report:

Approved by Dean Whiteside February 7, 2010



The recommendation(s) of the Board shall be a report in writing from the Chair addressed to the Dean. The student or trainee shall be provided with a copy of the report. In the event the Board determines that there is a medical condition that affects or may affect the ability of a student or trainee to participate, perform or continue in Program the report of the Board may include a recommendation but is not limited to:

- a. The student or trainee be required to withdraw either:
  - i. Permanently; or
  - ii. For an indefinite or specific period of time with appropriate investigation and/or treatment including medical and/or neuropsychological assessment to be obtained with re-registration or return to training conditional upon further review and recommendation by the Board;
- b. The student or trainee be allowed to continue in Program on the condition that the student or trainee receive appropriate further investigation and/or treatment, which may include further review and recommendations by the Board; or
- c. The student or trainee be allowed to continue in Program with specified modifications or accommodations to Program; or
- d. The student or trainee be allowed to continue in Program without modifications or accommodations to Program.

## **5. Reports of the Board**

The report of the Board must be addressed to the Dean and to the appropriate Vice Dean, Chair of Rehabilitation, Director of Medical Radiation Sciences or designate and copied to the Director or Associate Dean. The report at this stage may be forwarded for further action to the respective Board of Examiners by the appropriate Vice Dean or Chair. Any decision about the academic standing of the student or trainee such as remediation, probation, dismissal or withdrawal must be made by the appropriate Board of Examiners and follow the Appeals process of the Faculty of Medicine at:

<http://www.facmed.utoronto.ca/Assets/about/guide.doc?method=1>

## **6. Confidentiality**

All deliberations of the Board shall meet in camera. The documents provided to the Board at meetings shall be retained by the Faculty Affairs Officer. All deliberations of the Board and all information received by the Board shall be confidential except for such disclosure as is necessary for the Board's Report.