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MEETING CHALLENGES IN CARING FOR PATIENTS WITH DISABILITIES: AN INTERCLERKSHIP COURSE

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Abstract

Purpose: People with disabilities use healthcare services more than those without disabilities, yet healthcare systems often fail these individuals. Understanding the needs of those with physical and cognitive disabilities is crucial in providing them with appropriate healthcare. A one-day Interclerkship introduced third-year medical students to key challenges for physicians who care for disabled patients: (1) building trust and confidence, (2) communication, (3) anticipating secondary medical conditions, (4) appropriately modifying clinical encounters, and (5) identifying

Methodology: Essential elements of patient-centered care for disabled individuals were presented in plenary sessions. In small groups, students met with individuals with physical or development disabilities, their families and their community advocates, discussing healthcare and access concerns. Other workshops, taught by clinical and community experts, addressed assistive technology, parenting challenges, mental health, community resources, sexuality, and end-of-life care. Sixtyseven (69%) students completed pre- and post-Interclerkship self-assessments that rated knowledge, skills, and attitudes about medical care for disabled patients, using a 14-item 5-point Likert scale; means were compared by paired t-test. Students also provided course feedback.

Results: There was a highly significant (p<0.001) pre-to-post improvement in students' self-assessed attitudes, knowledge, and skills mean scores concerning medical care for disabled patients (pre: 3.22 (sd=.53); post: 3.99 (sd=.37)). >80% of the students agreed or strongly agreed that the Interclerkship addressed a topic essential to physician training, providing knowledge and skills not obtained

Conclusions: A single-day Interclerkship successfully improved third year medical students self-assessed knowledge, attitudes and skills on providing appropriate medical care for disabled patient.

Overview and Background

Since AY1995-1996, Interclerkships—short, intensive 1-day courses interspersed between clerkships—have introduced 3rd-year UMass medical students to subjects that transcend traditional biomedical domains. Interclerkships were initially intended to combine basic science, clinical, psychosocial, legal and ethical perspectives on topics historically underrepresented in medical education. Interclerkships emphasize acquisition of new knowledge and skills not previously taught in the medical school experience.

The impact of disabilities on medical care clearly represents an area of profound importance to the practice of medicine, yet this topic had been poorly represented in the undergraduate medical curriculum. An Interclerkship addressing disabilities was launched in AY 2000/2001 and primarily focused on developmental disabilities until a recent collaboration between the Medical School and the Department of Mental Retardation gave rise to a new, multidisciplinary Interclerkship, Working with People with Disabilities in the Clinical Setting, inaugurated in AY2004-2005. Here we describe the curriculum and its impact on students' knowledge, attitudes, skills and confidence in addressing medical and advocacy issues for patients with disabilities. Data from the AY2005/2006 program are presented; they are comparable to the outcomes obtained from the AY2004-2005 Interclerkship.



Course Description and Evaluation

Students participated in lectures and numerous small group workshops during this one day Interclerkship. In facilitated small groups, students met with individuals with physical or development disabilities, their families and their community advocates, sharing a dialogue about healthcare and access concerns. Other workshops, taught by clinical and community experts, addressed assistive technology, parenting challenges, bladder management issues, spinal cord injuries, mental health, community resources, sexuality, and end-of-life care. Students and completed pre- and post-Interclerkship self-assessments that rated their knowledge, skills, and attitudes about medical care for disabled patients. Scores on this 14-item 5-point Likert scale were compared by paired *t*-test. Students also provided programmatic feedback about the course, using a 5-point Likert scale used for all Interclerkship courses.

Working with People with Disabilities in the Clinical Setting: Learning Objectives

This Interclerkship will enable students to:

 Approach people with physical and cognitive disabilities in a manner that builds trust and confidence.

 Understand the challenges that people with disabilities and their families experience when they seek medical care

 Anticipate potential secondary medical conditions related to a disability and work as partners with their patients to maximize health and well-being.

 Modify the clinical encounter when necessary to work with a person with a disability. Identify resources in the community.

Working with People with Disabilities in the Clinical Setting: Course Schedule





on the physician's role.







Sexuality and Physical Disability: The Ins and Outs

Sexuality and People with

Cognitive Disabilities

Basic concepts of sexuality and sexual function of persons with disabilities will be examined through a case study presentation and informal discussion. Please bring a discussion question related to sex and disability (from a social, physical or emotional context).

This workshop discusses the long-term physical and psychosocial effects

sexual beings can be compromised by cognitive disability, however, and the

better self esteem, sexual health, and personal safety. This session focuses

risk of abuse is also greater. Careful education and support by healthcare

professionals, families, teachers, and others who assist them will result in

Working with Individuals with Spinal Cord Injuries

MR/MI Dual Diagnosis

of spinal cord injury and describes management and treatment options that enhance quality care to individuals with spinal cord injury. An overview of the UMMHC Neuropsychiatric Disabilities Team, a specialized, locked short-stay inpatient psychiatric unit serving only individuals with co-occurring developmental disabilities and mental health

disorders. Case studies highlight interdisciplinary assessment and

multimodal (psychiatric, medical and behavioral) treatment strategies.

Finding Community Resources

Assistive Technology

This workshop discusses issues to be considered when referring a patient to a community resource. For instance, is the resource is "disability-based" or "inclusive"? Focus will be on resources for children with autism.

What is available in the way of assistive technology to help patients with communication, mobility, positioning, and everyday tasks? This session will introduce students to both low and high tech options in assistive technology, and provide resources for how to access further information including the MD's role in writing referrals for assistive equipment.

People with disabilities sometimes face unique challenges and situations

where there might be disagreement concerning medical treatment Ethics and End of Life Care decisions. This session uses end-of life case studies involving people with disabilities to build on knowledge students already have of the ethics and ethical principles relevant to this topic. People with disabilities often contend with issues of urinary incontinence, many of which can be resolved with good medical interventions.

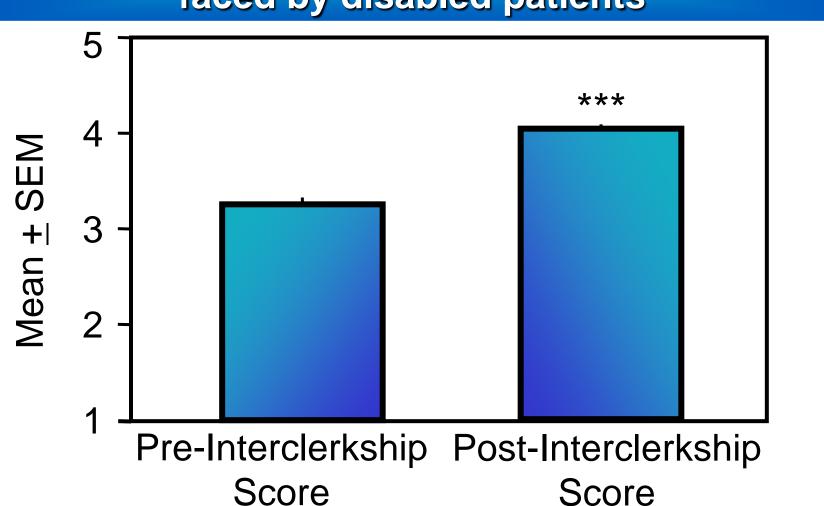
Bladder Management in **Disabled Populations**

Participants will gain a basic understanding of micturation physiology, appreciate the scope of urinary incontinence in disabled populations, and understand various management options (e.g. behavioral techniques, medications, catheters, surgery. For children with special health needs, health care is often delivered in

The Physician's Role in

educational and other settings. Medical monitoring, medication administration, assistive devices, and behavioral plans are all issues that Special Education Decisions can arise. This session discusses the physician's role in the student's Individual Educational Plan (IEP) and how physicians can partner with schools to assure children's health and well-being.

Pre- to Post- Interclerkship improvement in students' appreciation of medical care issues faced by disabled patients



Note the significant (p < 0.001) pre-to-post interclerkship improvement in students' self-assessed attitudes. nowledge, and skills concerning medical care for disable

Strongly

6%

32%

12%

16%

Agree

patients (measured with the scale to th			
Favorable Student Feedback			
This Interclerkship:	Disagree	Undecided/ No opinion	Agre
Integrated clinical, basic science, psychosocial aspects	3%	14%	77%
Provided new knowledge and skills not obtained elsewhere in medical education	7%	4%	65%
Focused on a topic			

0%

Feedback collected from 69 (69%) of the students who participated in this Interclerkship indicated that a large majority agreed that this was a valuable experience that was essential to medical training.



essential to

training as an MD

right length of time

Used appropriate

teaching formats

to meet objectives

Was about the



65%

64%

70%

Pre- and Post- Interclerkship Assessment Scale

5-point Likert scale: 1 (strongly disagree) to 5 (strongly agree)

I-I am aware of what primary care providers need to know when

working with people with disabilities: Cognitive

2- I am aware of what primary care providers need to know when working with people with disabilities: Physical

3 - I know how to access information on resources (such as community services, family supports, etc.) which would be relevant to patients with disabilities: Cognitive

4- I know how to access information on resources (such as community services, family supports, etc.) which would be relevant to patients with disabilities: Physical

5 - Medical care providers have an impact on the lives of people with disabilities in areas beyond health care: Cognitive 6 - Medical care providers have an impact on the lives of people

with disabilities in areas beyond health care: Physical 7 - I know how to modify the clinical encounter when necessary for working with a person with disabilities: Cognitive

8 - I know how to modify the clinical encounter when necessary for working with a person with disabilities: *Physical*

9 - I am aware of how my own experiences and beliefs about people with disabilities affect my work with people in the community: Cognitive

10 - I am aware of how my own experiences and beliefs about people with disabilities affect my work with people in the community:

- I am aware of the challenges that people with disabilities may experience when they seek medical care: Cognitive

12 - I am aware of the challenges that people with disabilities may experience when they seek medical care: *Physical* 13 - I am aware of the challenges that family members of people

with disabilities may experience when they seek medical care for their loved one: Cognitive

14 - I am aware of the challenges that family members of people with disabilities may experience when they seek medical care for their loved one: *Physical*

Positive Outcomes and Strong Student Feedback

This single-day Interclerkship improved third year medical students' self-assessed knowledge, attitudes and skills on providing appropriate medical care for disabled patients. 89% of participating students agreed that this Interclerkship provided new knowledge and skills not covered elsewhere in medical education and 97% agreed that this topic is essential to their training as physicians. Students offered many favorable comments about the experience, excerpted below:

"Great exposure, made me think, please do not change the interclerkship.^{*}

"Great topic."

"Spinal cord workshop – very USEFUL CLINICAL info – very

"Very pertinent and relevant info that is not obtained elsewhere in the curriculum."

"I liked the stories about real patients and how different accommodations helped one to work with them."

"Good to have patients' experiences. Relevant to future healthcare."

"One of the best interclerkships. Good small groups." "Definitely important to drill through the point of making no assumptions with a person with disabilities, to view their specific (individual) challenges and desires, rather than pigeonhole them

into a group. This was overall a GREAT day, thank you."

Acknowledgements

We would like to thank the individuals and their families from the community who shared their stories with students in this Interclerkship. We are also grateful to the many faculty from UMass Medical School, the Massachusetts Department of Mental Retardation and from the community who offered workshops and facilitated the small group dialogues between students and patients.