
Supporting Residents with Accommodations: Tip Sheet for Teachers

Overview of accommodations in postgraduate education

Accommodations are designed to remove barriers to participation and performance in the learning environment, and foster more equitable training experiences.¹ Residents may access accommodations for many reasons including disability (i.e., chronic health conditions, mental health, learning, sensory, and mobility disabilities), pregnancy, and personal circumstance (ie. family status, religious). Residents request accommodations centrally through the Office of Learner Affairs (OLA), Postgraduate Learner Affairs (PG-LA) Unit, where a specialized PGME Accessibility Advisor reviews learners' access needs and medical documentation, and provides recommended accommodations to the Residency Program Director.

Examples of accommodations in residency

- Protected time away from clinical duties for provider appointments
- Changes in rotation structure
- Modified call duties (ie. weekend daytime/evening call in lieu of overnight call)
- Modified assessments (ie. STACER exams)
- Gradual return to work after an extended leave from training

Principles for supporting residents with accommodations

Confidentiality is a key principle guiding the accommodations process in the Department of Psychiatry Residency Program. Residents with accommodations obtain a letter from the PG-LA Unit of OLA (who verifies the disability necessitating accommodations) or from the Program Director outlining any training modifications, which they are encouraged to share with relevant supervisors, site directors, and chief residents. In receiving this documentation, the Program recommends that teachers use the following principles:

- Do not request personal or health information from residents regarding their accommodations.
- Do not assume what access issue or diagnosis has given rise to the listed accommodations.
- Respect resident dignity by maintaining confidentiality and communicating accommodations only on a 'need to know' basis, with consent/direction from the resident.
- Work with the resident to ensure that their clinical experiences can meet their educational needs for the rotation
- Teachers should not modify expectations of core competencies on a given rotation or attempt to implement accommodations themselves.
- As always, if a resident is struggling to meet learning objectives for a rotation, engage the site director and program director early on in the rotation to ensure adequate support for the resident.
- Do not offer your own clinical recommendations to residents, and maintain clear professional boundaries as a teacher (not a care provider).

Pathways for supporting residents experiencing educational difficulties

Access to accommodations has been shown to increase learner wellbeing, and reduce medical errors.² If residents disclose they are struggling to meet their educational objectives on the rotation, you may direct them to the appropriate pathways for support. These supports include:

- All accommodations go through the Postgraduate Learner Affairs (PG-LA) Unit of OLA. To do so, residents can [book an appointment](#) online with the OLA PGME Accessibility Advisor.
- **Immediate interim accommodations** for up to 2 months while a resident waits to confirm accommodations with OLA. Residents can email the Program Director directly. Residents are not required to disclose a diagnosis or personal health information.
- **Personal counselling** through OLA, which includes free short-term individual counselling from Learner Life Specialists, who are trained mental health professionals. ([Link](#))
- **Resident Advisors** in the Department of Psychiatry, who provide confidential support, discussion, advice, and system navigation. ([Link](#))

Relevant Policies:

Department of Psychiatry, [Guidelines for Resident Accommodations and Leaves of Absence](#)
Office of Learner Affairs, [Guidelines for Accommodations for Postgraduate Trainees with a Disability](#)

References:

1. Meeks LM, Neal-Boylan L, *Disability as Diversity*. Springer; 2020.
2. Meeks LM, Pereira-Lima K, Frank E, et al. Program Access, Depressive Symptoms, and Medical Errors Among Resident Physicians With Disability. *JAMA Netw Open*. 2021;4(12):e2141511. doi:10.1001/jamanetworkopen.2021.41511