Core Competencies on Disability for Health Care Education
The Team

- **Alliance for Disability in Health Care Education**
  - Not-for-profit organization
  - Diverse health care educators
  - Mission: integrate disability-related content into health care education and training programs

- **The Alliance identified a need for national consensus on core disability competencies**
  - Purpose: Develop standards for interprofessional health education about a broad range of patients with disabilities through Core Disability Competencies

- **Ohio Disability and Health Program**
  - Purpose: Establish a national consensus on the Core Disability Competencies among people with disabilities, disability advocates and professionals, health care providers and health educators using a Delphi method
The Problem

• **People with disabilities are**
  • More likely to report poor health status
  • At greater risk for chronic diseases such as cardiovascular disease and obesity
  • More likely to smoke, have poor diet, and be inactive

• **Health care barriers for patients with disabilities include**
  • Lower rates of preventative health services include screenings for cancer and age-related health concerns
  • Higher rates of inaccessible health care facilities, communication issues, poor health literacy, and bias from health providers and staff
The Problem

Barriers to Health Care for People with Disabilities

Health Environment
- Absence of disability standards in provider training
- Insufficient data on the health of people with disabilities
- Lack of inclusive health promotion programs

Health Care System
- Scheduling constraints
- Payment/Reimbursement issues
- Lack of age appropriate services and supports

Clinical Practice
- Inaccessible office and equipment
- Lack of staff training
- Communication barriers

Provider
- Lack of disability training
- Poor attitudes
- Incomplete knowledge of care coordination
The Solution

1. Establish consensus on Core Disability Competencies to prepare health care professionals to provide quality care

2. Collect endorsements from key professional health care organizations

3. Integrate Core Disability Competencies into health education standards
The Process

• Core Competencies Development Committee
  • Over 150 people with disabilities, disability advocates and professionals, health care providers and health educators

• Delphi process:
  • March 2017 – March 2018
  • Core Competencies Development Committee provided qualitative feedback on each disability competency and completed a summary evaluation
  • Systematically collected feedback from participants and made revisions on two iterations
  • Participants rated each competency’s clarity and importance, along with overall ratings
The Consensus

• **Importance**
  • Over 95% of participants rated the 6 competencies as mostly or very important for health care providers

• **Clarity**
  • Over 90% of participants rated the 6 competencies as either mostly or completely clear
The Consensus

To what degree do you think the competencies and sub-competencies address the range of **knowledge, attitudes, and skills necessary** for health care students to appropriately and effectively address the needs of people with disabilities?

92% Indicated Very well or Extremely Well

To what degree do you think the **competencies are applicable to people across the full spectrum of disabilities**?

84.4% Indicated Very Well or Extremely Well

To what degree do you think the **competencies are appropriate across health professions**?

96.2% Indicated Agree or Completed Agree
The Competencies

**Competency 1: Contextual and Conceptual Frameworks on Disability**
- Acquires a conceptual framework of disability in the context of human diversity

**Competency 2: Professionalism and Patient-Centered Care**
- Demonstrates professionalism and recognition of health and quality of life from the patient’s perspective

**Competency 3: Legal Obligations and Responsibilities for Caring for Patients with Disabilities**
- Legal requirements for providing health care in a manner that is, at minimum, consistent with federal laws

**Competency 4: Teams and Systems-based Practice**
- Collaborate with interprofessional teams to provide health care

**Competency 5: Clinical Assessment**
- Engage patients with disabilities in assessing their health and function

**Competency 6: Clinical Care over the Lifespan and during Transitions**
- Collaborate with patients in providing coordinated care
Q & A

Q1: What is the goal with this project?
   A: Collaborate with accreditation and licensure bodies to include disability competencies among educational standards.

Q2: Does this apply to my discipline?
   A: People with disabilities represent a broad demographic and take advantage of all health specialties and subspecialties.

Q3: Does this apply to specific types of disability?
   A: The competencies are cross-disability and were developed with input from people with a broad range of functional limitations.

Q4: Is this Resolution putting my organization at risk?
   A: No. In fact, teaching future health care providers about disability will prepare them to provide care to a large segment of the population and will protect your students from legal liability under Americans with Disabilities Act (ADA).

Q5: How can I add more content to my already demanding curriculum?
   A: These competencies align with existing interprofessional educational standards, including the Interprofessional Education Collaborative (IPEC) core competencies. Instead of a separate module on disability, disability content should be integrated throughout the health education curriculum to prepare students to care for the diversity of the patient population.
Suggestion Citation