

<u>Practice Review: Access Arrangements and Reasonable Accommodation</u> <u>Policy</u>

|                            | Practice Review: Access Arrangements and Reasonable       |                  |            |
|----------------------------|---|------------------|------------|
| Title:                     | Accommodation Policy                                      |                  |            |
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| Review Date:               | 01/08/2023  |                  |            |
| Author:                    | Sarah Drumm & Michelle Scott, Irish Institute of Pharmacy |                  |            |
| Reviewed By:               |   | Signed           | Date       |
| IIOP Practice Review Lead: |   | Ailbhe O'Mahoney | 01/08/2022 |



#### 1.0 INTRODUCTION

The Equal Status Acts 2000 (as amended) require the Irish Institute of Pharmacy (IIOP) to make reasonable accommodation where a pharmacist selected for Practice Review, who has a disability or has a specific learning difficulty, would be at a substantial disadvantage in comparison to someone who does not have a disability or learning difficulty. The IIOP is required to take reasonable steps to overcome that disadvantage. This policy outlines the processes to follow in applying for a reasonable accommodation in relation to all components of Practice Review and the basis for which reasonable accommodation can be granted.

# 2.0 **DEFINITIONS**

#### 2.1 Reasonable Accommodation

Anyone providing a service to the public has a duty to make the service equally available to as many people as possible. If a person with a disability is prevented from accessing the service in the normal way, the person or organisation providing the service has a duty to do all that is reasonable to accommodate them in accessing it. The particular arrangements that need to be made are then called "reasonable accommodations".

A reasonable accommodation for a pharmacist selected for Practice Review may be unique and how reasonable the accommodation is will depend on a number of factors including the needs of the pharmacist. An accommodation may not be considered reasonable if it involves unreasonable costs, timeframes or affects the security or integrity of Practice Review.

The needs and circumstances of each pharmacist are different. The IIOP will consider any request for a reasonable accommodation on a case-by-case basis.

The format of Practice Review will also have a bearing on whether a requested reasonable accommodation is permissible. The competence level of Practice Review cannot be altered.

The IIOP reserves the right to seek independent advice to ensure any accommodation or arrangement is appropriate and in accordance with any applicable legislation.

# 2.2 Access Arrangements

Access arrangements enable pharmacists with special educational needs, disabilities or temporary injuries to:

a) access Practice Review;



b) demonstrate what they know and can do without changing the competence level of Practice Review, or provide an unfair advantage over participants who do not request a reasonable accommodation.

The intention behind an access arrangement is to meet the particular needs of an individual pharmacist without affecting the integrity of Practice Review.

# 2.3 Definition of Disability

The Equal Status Act defines disability as:

- a) the total or partial absence of a person's bodily or mental functions, including the absence of a part of a person's body;
- b) the presence in the body of organisms causing, or likely to cause, chronic disease or illness;
- c) the malfunction, malformation or disfigurement of a part of a person's body;
- d) a condition or malfunction which results in a person learning differently from a person without the condition or malfunction; or
- e) a condition, disease or illness which affects a person's thought processes, perception of reality, emotions or judgement or which results in disturbed behaviour.

# 3.0 REASONABLE ACCOMMODATION PROCESS

# 3.1 Scope of Reasonable Accommodation Process

The reasonable accommodation process (RA process) as operated by the IIOP for Practice Review, is designed to cover pharmacists who intend on presenting themselves at the Practice Review event, and who are affected by one of the following:

- Hearing Impairment or deafness
- Speech Impairment
- Dyslexia
- Learning difficulties
- Mobility problems which may restrict access to certain rooms
- Physical Impairment
- Temporary conditions due to illness or injury

Any pharmacist who feels that they are unable to present themselves for Practice Review is required to contact the Pharmaceutical Society of Ireland (the PSI) directly as this will be managed through their extenuating circumstances process. Such requests are beyond the scope of this reasonable accommodation policy.



#### 3.2 The Process

Student, Academic and Regulatory Affairs (SARA) within the Royal College of Surgeons in Ireland (RCSI) will facilitate the management of applications for reasonable accommodation on behalf of the IIOP. The process for applying for reasonable accommodation is as follows:

- a) Pharmacists wishing to apply for reasonable accommodation must forward a completed application form (See Appendix 1), with supporting medical documentation, to SARA via email (<a href="mailto:practicereview@rcsi.ie">practicereview@rcsi.ie</a>) within four weeks of receipt of the initial email from the IIOP advising them of the arrangements for Practice Review.
- b) Participants should send the original copy of their medical documentation to SARA within one week of closing date of applications. Medical documentation sent at a later date will not be considered. All reports will be returned at the participant's request. SARA will not be able to accommodate a reasonable accommodation request if there is insufficient time between receiving the medical documentation and the date of the Practice Review event.
- c) Upon receipt of the medical documentation SARA may request additional evidence if deemed necessary.

# 4.0 SUBMISSION OF EVIDENCE

Appropriate evidence of need must be provided to SARA within one week of closing date of application. It should provide the relevant information of the nature and extent of the disability and confirm that without reasonable accommodation the pharmacist would be at a substantial disadvantage.

The original medical documentation could be supported with:

- a) a full report from a clinical psychologist or a psychiatrist; or
- b) a letter from a hospital consultant; or
- c) a letter from a local/national disability organisation; or
- d) a letter from a Speech and Language Therapist

When supplying a report in the case of dyslexia, the assessment should have been completed at the age of 16 years or over.

Please note that disclosure of personal and medical information is confidential and no information disclosed will be provided to a third party without consent at any time.



#### **The Process**



Application for Reasonable Accommodation Closing date: Four weeks from date of initial email from IIOP

Pharmacist to forward application form with supporting medical documentation



#### One week after closing date:

Submit medical documentation if not previously submitted



# **≥One week after the closing date:**

SARA may request additional evidence if necessary



One to three weeks after closing date:

SARA to assess application



# ≥Five to six weeks BEFORE Practice Review:

SARA to inform pharmacist of any reasonable accommodation to be provided



# **Clinical Knowledge Review (CKR)**

Each reasonable accommodation request will be assessed on a case by case basis. The following reasonable accommodations for the CKR are not exhaustive and are provided as examples only:

| Category  | Special Provisions |   |  |
|---|--------------------|---|--|
|   | Separate Room      | Extra Time  | Other  |
| Hearing Impairment or deafness  | No                 | No  | <ul> <li>Written instructions issued at the start of Practice Review</li> <li>Sign language interpreter</li> <li>Inform relevant staff members</li> </ul>  |
| Speech Impairment   | No                 | No  | o Inform relevant staff members  |
| Dyslexia  | Yes                | 25% (up to a maximum of 50% dependent on recommendations) | <ul> <li>CKR provided in a suitable format with all material in dyslexic "friendly" fonts, appropriately sized</li> <li>All material on appropriately coloured paper if required</li> <li>Specific formatting</li> </ul> |
| Learning difficulties   | Yes                | 25% (dependent on recommendations)                        | Supervised rest breaks   |
| Mitigating<br>Circumstances   |                    |   | Possible effect on performance   |
| <ul><li>Recent<br/>bereavement</li></ul>                                  | No                 | No  | <ul> <li>To be considered by the Review<br/>Board</li> </ul>   |
| <ul> <li>Temporary<br/>conditions due to<br/>illness or injury</li> </ul> | Possibly           | Possibly  | <ul> <li>May need scribe or disabled access<br/>depending on nature of injury</li> </ul>   |



# STANDARDISED PHARMACY INTERACTIONS (SPIs)

As with the CKR, reasonable accommodation requests for the SPIs are also assessed on a case by case basis. The examples below are not exhaustive and are provided as examples only:

| Category   | Special Provisions |  |  |
|--|--------------------|--|--|
|  | Extra Time         | Other  |  |
| Speech Impairment  | No                 | <ul> <li>Inform relevant Practice Reviewers, actors and staff<br/>members</li> </ul>   |  |
| Dyslexia   | No                 | <ul> <li>All written material in dyslexic "friendly" fonts, appropriately sized</li> <li>All written material on appropriately coloured paper if required</li> <li>A reader should be offered for the SPIs</li> <li>Specific formatting</li> </ul> |  |
| Mobility problems which may:  o Restrict access to certain rooms | No                 | <ul> <li>Ensure access is possible for all rooms and appropriate toilet facilities are available.</li> <li>Adjustable desk</li> </ul>  |  |
| Mitigating Circumstances   |                    | Possible effect on performance   |  |
| Recent bereavement   | No                 | To be considered by the Review Board   |  |
| Temporary conditions<br>due to illness or injury                 | No                 | May need scribe or disabled access depending on nature of condition  |  |

# **5.0** APPEALS

Where the participant does not believe the accommodations made are reasonable, they may ask for their case to be reviewed.

# 6.0 CONTACT DETAILS

Any queries relating to access arrangements and reasonable accommodations for Practice Review should be directed to the IIOP.



# **Application for Reasonable Accommodation**

# Please read the Reasonable Accommodation policy before completing this form

- Complete all sections and sign and date the form.
- This form, along with supporting evidence, should be emailed to practicereview@rcsi.ie.
- Participants should send the original copy of their medical documentation to SARA within one week of closing date of application (FAO Emma Scally, SARA, RCSI, 123 St Stephen's Green, Dublin 2). Medical documentation sent at a later date will not be considered. All reports will be returned at the participant's request.
- All information provided on this form and during the application process will be treated as confidential by RCSI and in accordance with the Data Protection Act of 2018.

| Section 1 – Persor  | nal Details (please use block o | capitals) |
|---------------------|---------------------------------|-----------|
| Surname             |                                 |           |
| Forename            |                                 |           |
| Date of birth:      |                                 |           |
| Address:            |                                 |           |
|                     |                                 |           |
| Telephone Number    |                                 |           |
| Email               |                                 |           |
| PSI Registration No |                                 |           |



# Section 2 – Circumstances

| Name of disability, medical condition or impairment  |
|--|
|  |
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|  |
| Section 3 – Reasonable Accommodation Request   |
| Please outline below the particular/specific treatment or facilities you think that you may nee  |
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|  |
|  |
| Please indicate whether you have been granted reasonable accommodation by another educational establishment before and if so, what the arrangements were |
|  |
|  |
|  |
|  |
| Signed   |
| Date   |