What would UofL be required to do if a patient wanted to bring an emotional support dog to an appointment or to have it with her during her hospital stay? Must a nursing school applicant with a hearing impairment be admitted? What if some of the examination equipment is not accessible to an individual with a mobility impairment? What if a student who performed well academically during the first two years of medical school had difficulty interacting with patients and nurses and other doctors during clinical rotations? Should a staff member who visited an African country during an outbreak of Ebola be quarantined before returning to the workplace? Must the videos about various medical procedures shown in clinical waiting rooms have closed captioning? What should be done if a physician with hospital privileges or a teaching physician begins showing signs of alcohol or substance abuse? What obligations does UofL have when leasing or licensing space to food and other vendors within its facilities to ensure that they are accessible?

All of these issues could arise in university medical centers and all of them raise potential applicability of disability discrimination law. The year 2015 marks the 25th anniversary of the Americans with Disabilities Act (ADA), which prohibits discrimination on the basis of disability and requires reasonable accommodations. This anniversary provides a good opportunity to reflect on how the ADA (and its predecessor, the Rehabilitation Act of 1973) affect health science programs in a university setting. The ADA establishes a significant number of requirements for health care programs, such as the UofL Health Sciences Center. This article highlights some of the key provisions of the ADA and how they affect the range of issues in health care setting.

Many aspects of UofL’s Health Sciences Center (including its educational program and its provision of medical and health services) were subject to Section 504 of the Rehabilitation Act of 1973. The ADA, however, with its much broader application to the private sector increased the scope of legal rights and benefits for individuals with disabilities. The UofL Health Sciences Center, like similar programs at other institutions is affected not only in its provision of health services (through the UofL hospital and
dental training program), but its educational programs for medical school, dental school, public health, and nursing. In addition, as an employer, discrimination on the basis of disability is prohibited and reasonable accommodations are required to permit otherwise qualified individuals with disabilities to maintain employment.

An individual is protected by the ADA and Section 504 only if the individual has a substantial limitation to major life activities (such as seeing, walking, hearing), has a record of such an impairment (such as being in remission from cancer), or is regarded as having an impairment (such as believing an individual has a mental illness or HIV even if the individual does not). Covered entities must not only not discriminate, but they must provide reasonable accommodations, which can include auxiliary aids and services (such as an interpreter or closed captioning on video programming) or allow for modification of policies, practices, or procedures (such as allowing a service dog in an area where animals are ordinarily prohibited).

The ADA provisions cover most employers (those with 15 or more employees), state and local governmental programs (such as the University of Louisville), and private providers of public accommodations (such as a food vendor that operates out of leased space within the Health Sciences Center).

Health care educational programs are some of the most complex entities subject to the ADA. There is significant guidance about what the law requires. In addition to the statutes and regulations, agencies such as the Department of Justice and the Department of Health and Human Services have issued agency guidance for various programs, such as guidance on access to medical care for individuals with mobility impairments. Because these laws have been in effect for many years, there is also a substantial body of judicial interpretation of the requirements.

Unfortunately, the courts in various jurisdictions have not treated every issue consistently, leaving some areas unclear as to what is required.

One common principle that applies regardless of the situation is the expectation that decisions should be based on individualized assessment applying current accepted scientific knowledge rather than being based on unfounded fears, myths, and stereotypes. One Supreme Court case addressed this issue in the context of a refusal of a dentist to do a procedure in his office for a patient who was HIV positive. In situations involving student accommodations or employment accommodations, there is an expectation that discussions of these accommodations with a range of disabilities as they progress through the educational program. For health care educational programs, these often arise at the point in the program when the individual is required to learn and apply technical or other skills. It could include reading x-rays, hearing patients call or buzz for assistance, lifting, manipulating instruments, or moving quickly in an emergency. A number of cases have addressed medical students whose behaviors and interactions caused by Aspergers or mental health conditions affected their clinical performance. Courts are continuing to grapple with these cases. Many cases raise the connection between professional education and licensing. If an individual with a visual impairment could
not be licensed in a particular health profession, must the educational program provide accommodations to that condition while the individual is a student?

**Employment Issues**

Faculty and staff members must be otherwise qualified to carry out the essential functions of the program, but reasonable accommodations must be considered in making that assessment. Similar issues arise with respect to physicians who seek hospital privileges. Is it permissible to deny privileges to a doctor with alcohol addiction? What requirements are in place to ensure health care insurance for certain disabling conditions?

**Patient Services**

Health care programs (through their hospital and treatment programs and their clinical programs) also provide services to patients. These patients are protected under the ADA as well. Issues of providing sign language interpreters to patients with hearing impairments, permitting assistance animals, and ensuring architectural access fall under the ADA. Having special equipment for individuals with mobility impairments or obesity (such as wider wheelchairs) may be required.

Architectural barriers can sometimes be addressed through signage. Directing students or visitors to accessible entrances may be adequate rather than installing ramps at virtually every location where there are steps. Substantial design standard guidance exists on this, but it is wise to include individuals with disabilities in reviewing whether a facility is accessible in terms of its function.

**Sponsored and Licensed Programs**

Health care entities that sponsor conferences or other public events must consider access issues as well. Is the venue accessible? If an individual with a visual impairment requires materials in an accessible format, has that been anticipated and planned for? What about a sign language interpreter for such an event? If food is served, has consideration been given to individuals attending who might have food allergies? Are food allergies subject to consideration for private food vendors with a lease or license within the health care institution?

**Best Practices in Responding**

While answers to some of the above questions can be found within current court decisions, often the issues are so fact specific that easy across-the-board guidance is not possible. The best practice, however, for answering such questions to take a proactive approach to establishing policies, practices, and procedures for common types of issues arising (including those suggested above). Having a holistic approach to addressing disability access issues along with a positive attitude can go a long way to ensuring compliance and demonstrating good faith. It is also important to keep in mind that things change. Practices that may have been acceptable a decade ago, might no longer be. For example, technology can be both a positive and a negative issue for individuals with disabilities. Technology may make it easier to do certain procedures (such as a pace-maker check in a person’s home which would be beneficial to an individual with a mobility impairment). Someone with a visual impairment, however, might require “electronic curbcuts” on websites or accessible formats for other information provided through the internet.

Those responsible for various types of disability access – ranging from planning for accessible parking to purchasing of examination equipment to arranging student accommodations – can best prepare by ensuring that someone in each program is knowledgeable about disability discrimination issues. While knowledge of all of these issues is not feasible in every program, knowing when and whom to contact within the University Health Sciences Center should be part of an administrator responsibility within each program. The University of Louisville Disability Resource Center can aid in the facilitation of these plans and services.

Laura Rothstein is Professor of Law and Distinguished University Scholar at the University of Louisville. She has written and lectured extensively on issues of disability discrimination law, with particular focus on higher education, including health care issues. In 2012 she received an Outstanding Scholarship, Research & Creative Activity Award from UofL. On June 9, 2015 she published “Impaired Physicians and the ADA,” in JAMA Viewpoint.
During spring break of 2015, students and faculty had the opportunity to participate in a unique service-learning trip to Langue, Honduras. The group consisted of 16 ULSD D.M.D. and dental hygiene students, along with ULSD faculty and other practicing dentists. The group partnered with Christian Medical and Dental Association (CMDA) and Global Health Outreach (GHO), and was met by 23 other specialists from other universities and practices around the United States, including medical doctors, nurses, pharmacists and other volunteers.

Unlike other teams whose dental procedures may be limited to cleanings, relatively simple restorative procedures, or extractions, this group had the unique opportunity to replace missing teeth in the form of esthetic dentures or “flippers.” This form of treatment was made possible by ULSD faculty and other dentists who came equipped with materials required for impressions, models, and denture tray fabrication and tooth set-up. Contrary to routine service trips, where patients who undergo an extraction may be obligated to take advantage of other resources for tooth replacement, many of the patients treated by this dental team were able to immediately receive dentures following extractions.

One particular case involved performing “comprehensive” care for a young girl who required extractions of the upper central teeth and restoration of the adjacent ones due to decay. With a collaborative (and enthusiastic) effort, the dental students were able to successfully provide her with an esthetic denture in addition to restoring the adjacent teeth. The result was a complete, fully restored dentition – and a very grateful individual. Treatment outcomes like this made the trip a very rewarding experience for all members of the dental and medical teams. Having students and professionals with a heart for service opportunities like these, ULSD will continue its efforts in providing dental care to people across the globe.
Health Professionals Train in Transgender Care
by Betty Coffman, HSC Communications and Marketing

Physicians without formal training in transgender health can be unprepared when a transgender patient needs basic health care, or help with a transgender specific issue such as hormonal transition. If the physician is unfamiliar with the typical barriers faced by transgender people in the health care system or current standards of care, the patient’s health may suffer.

The University of Louisville hosted two events on June 11 at the School of Medicine to close this gap by providing physicians and other health care providers with a better understanding of treatment practices and standard of care for transgender patients.

First, a panel of clinicians and community members discussed best practices in transgender health care in a grand rounds presentation for approximately 120 physicians and other health professionals. Following the panel presentation, about 90 health-care providers and transgender community leaders met, identifying gaps in care and discussing steps needed to improve care for this population.

The events were part of a UofL initiative, known as the eQuality Project, established to ensure that individuals who are lesbian, gay, bisexual, transgender (LGBT), gender nonconforming or born with differences of sex development (DSD) receive the best possible health care in the community. “This is a topic that has been taboo for a long time. Physicians want to provide the best care for these patients, but they may not be aware of issues and how to address someone in a culturally responsive manner,” said Faye Jones, M.D., Ph.D., M.S.P.H., assistant vice president for health affairs -- diversity initiatives at UofL’s Health Sciences Center Office of Diversity and Inclusion. “This is a group that has many health disparities and this program will help alleviate these disparities.”

People who are LGBT, gender non-conforming or born with DSD often experience challenges when seeking care in doctors’ offices, community clinics, hospitals and emergency rooms. Research shows that these health disparities result in decreased access to care or willingness to seek care, resulting in increased medical morbidity and mortality for LGBT and DSD-affected patients.

“Ultimately, it is our goal to have an identified medical ‘home’ that provides all aspects of care for transgender patients in Louisville, as has been developed in other major clinical centers in the United States,” said Amy Holthouser, M.D., associate dean for medical education at the UofL School of Medicine.

Beginning in August, the UofL School of Medicine will serve as the nation’s pilot site for implementing the AAMC competencies for training future physicians on
the unique health-care concerns and issues encountered by LGBT individuals and those who are gender nonconforming or DSD-affected.

The Institute of Medicine, The Joint Commission, the U.S. Department of Health and Human Services, and the Association of American Medical Colleges (AAMC) have all recently highlighted the need for more in-depth provider education on LGBT health.

“At least forty hours of content in the UofL school of medicine curriculum have been targeted for revision to be more inclusive and affirming of LGBT and DSD patients,” Holthouser said. “This will reinforce the core stance that a competent physician is skilled in the care of all patients within their community and can approach each patient with sensitivity, compassion and the knowledge necessary to promote health and wellness.”

The eQuality Project at UofL is an interdisciplinary initiative that includes the School of Medicine’s Undergraduate Medical Education Office, the Health Sciences Center’s Office of Diversity and Inclusion, and the UofL LGBT Center. The purpose of the eQuality Project is to deliver equitable quality care for all people, regardless of identity, development or expression of gender/sex/sexuality.

For more information about the eQuality Project, or future LGBT training initiatives for health professionals, please contact Stacie Steinbock.
Whitney Ann Nash, Ph.D., M.S.N., A.N.P.-BC, associate dean of practice and service for the University of Louisville School of Nursing, has been elected to serve as the Kentucky representative for the American Association of Nurse Practitioners. She will begin a two-year term following the Annual Membership meeting of the AANP National Conference on June 13 in New Orleans.

“As both a clinician and academician, I have the pleasure of influencing practice initiatives at many different levels and I am excited to serve as the state representative for Kentucky. It is my goal to increase the organization’s numbers and expand our voice locally and nationally,” Nash said. In her role, Nash will serve as a liaison for AANP members and other nurse practitioners at state and local events.

“Whitney is an excellent choice to represent nurse practitioners both regionally and nationally,” said Marcia Hern, Ed. D., C.N.S., R.N., dean of the UofL School of Nursing. “She has contributed to the profession of nursing not only through her instruction and scholarly activities at UofL, but also by developing opportunities for nurse practitioners to deliver care independently to patients in Kentucky and abroad.”

In 2005, Nash helped establish the Kentucky Racing Health Services Center, an award-winning, nurse-practitioner directed clinic providing health care for racetrack workers. She has lead the center since its opening. Prior to her appointment as associate dean in 2014, Nash was the director of practice and international affairs at UofL and has attended more than 20 international programs and medical service trips.

Nash, a 2014-15 Duke-Johnson and Johnson Nurse Leadership Fellow, has been a member of the nursing faculty at UofL for more than 10 years and has been an adult nurse practitioner since 1997. She has numerous publications, presentations and research projects to her credit, including a grant from the Department of Health and Human Services, Health Resources Services Administration for a project to enhance interprofessional practice between nursing and dental students. In 2011, she developed a web-based career networking site to connect UofL nursing students and alumni to career opportunities.
As a current undergraduate student at the University of Louisville, I had the privilege of traveling to China for ten days this past May as a student representative of the University. In the company of several other undergraduate and graduate level students, as well as Dr. Robert Jacobs and Tammi Thomas, Director of Student Affairs for the School of Public Health and Information Sciences, I stayed at Jinan University in Guangzhou, China.

While there are many things that I was able to observe during my stay, the most apparent impact on public health I noticed was the dense population. The population of Guangzhou is somewhere around 13 million, a far cry from Louisville-Metro's population of roughly 1.3 million (according to a 2014 census). No matter where you go you will find hundreds of people all going about their day. This dense population contributes not only to the air, water, and noise pollution of the environment, but also to the food safety & security of the country's inhabitants. One of our cohort's first activities was a lecture in which we discussed the issue of sustainable agriculture in China as well as potential solutions to this issue, including the importation genetically engineered foods from the United States. When we visited Hong Kong’s Jade Market I was able to witness the concern over food safety firsthand when we walked through the open-air meat market. The warm air stank of raw meat, and flies and other animals were everywhere to be seen. The rainfall served as a potential cause of bacteria as it would splash on the meat as it fell from the sky. As a student with a vested interest in food safety and nutrition policy, this was of paramount interest to me.

When we visited the Guangdong Province water treatment plant and the Guangdong Provincial Center for Disease Control we were able to see and discuss the issues of water and air pollution firsthand with public health professionals. Hearing the perspectives of these professionals was a very informative and unique experience, and as a group we learned a lot from this opportunity. Despite all of the threats to public health that I saw, there were also many public health promotions in the country. During a normal walk through downtown, it was not uncommon to see posters or billboards promoting healthy sex practices, riding bikes for environmental sustainability, or anti-smoking campaigns.

While there were many other things that I experienced on this trip, it is hard to fit them all within the confines of this article. What I will say is that this trip to China was a very eye-opening experience for me in many ways, and I would highly recommend this program to public health undergraduate and graduate students alike. Special thanks to Dr. Robert Jacobs, Tammi Thomas, and several others for helping make this unique trip possible!
Office of Diversity and Inclusion Implements Unconscious Bias Training for Health Science Center Groups

by Katie Leslie, PhD, Program Director

In April of this year, the Association of American Medical Colleges (AAMC) along with Cook Ross Inc., a leading national diversity and inclusion consulting firm, offered the very first “Train the Trainer” program at Harvard University to prepare diversity and inclusion professionals to facilitate the Unconscious Bias in the Health Professions workshop. Ryan Simpson, Assistant Director HSC Office of Diversity and Inclusion, and I were privileged to be part of this inaugural group. For four long and intensive days, we trained alongside 30 other colleagues from health sciences centers across the country.

During the first day, we participated in an 8-hour unconscious bias workshop facilitated by Howard Ross, Founder and Chief Learning Officer of Cook Ross Inc. This allowed us to experience the Cook Ross content and delivery from the participant perspective. Over the next three days, we developed content expertise and facilitation skills to deliver a two-hour version of this workshop to members of our respective institutions. This required deep self-reflection into our own cultural lenses, experiences, and biases. As facilitators, these are the activities we ask our participants to engage in during our training. Thus, we must be willing to undertake this important work ourselves.

So what is unconscious bias? In the simplest of definitions, unconscious biases are mental associations without awareness, intention, or control. These often conflict with our conscious attitudes, behaviors, and intentions. We ALL have these biases, and possessing them does not mean you are a “bad person.” The first step to address and mitigate our own unconscious biases is to bring them to light.

This awareness is exactly what the workshop seeks to do. We walk groups through the science and research of unconscious bias, and identify how bias and the processes of the unconscious mind can impact critical healthcare decisions and outcomes. We then guide participants as they explore their own backgrounds in relation to how they perceive the world and others. Ultimately, we equip participants with strategies for practicing conscious awareness both at the individual and organizational level.

We are now offering and adapting this training to meet the needs of various faculty, staff, and student groups across the Health Sciences Center. For more information about this training and upcoming sessions please contact the Health Sciences Center Office of Diversity and Inclusion.

Leslie Honored with 2015 Presidential Exemplary Multicultural Engagement Staff Award

Congratulations to Dr. Katie Leslie, winner of the Presidential Exemplary Multicultural Engagement Staff Award. The award, given this year for the first time, recognizes a staff member who has made notable accomplishments in the area of multicultural engagement, demonstrated leadership and mentoring, and promoted the advancement of the university’s diversity goals.
Volunteers Needed to Provide Screenings and Health Education at Two Community Events

- **Redeemer Lutheran Church Community Street Festival and Health Fair**
  Dr. Karen Krigger, Director of Health Equity, is again partnering with Redeemer Lutheran Church for the annual street and health fair for the community.

  Date: Saturday, July 25, from 10:00am to 3:00pm
  Location: Redeemer Lutheran Church, 3640 River Park Drive, Louisville, KY 40211
  Contact: To volunteer please contact the Health Sciences Center Office of Diversity and Inclusion at hscodi@louisville.edu.

- **Park DuValle Community Health Center Health Fair**
  Physicians, nurse practitioners, dentists and respective students are needed to assist with school health and athletic physicals and dental screenings.

  Date: Saturday, August 15 from 11:00am to 3:00pm
  Location: Park DuValle Community Health Center, 3015 Wilson Ave., Louisville, KY 40211
  Contact: To volunteer, please contact Brenda Fitzpatrick at bfitzpatrick@fhclouisville.org.

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Louisville to Host 2015 National Association of Minority Medical Educators (NAMME) Annual Conference
September 16 - 20, 2015
Hyatt Regency Hotel

- Conference Information and Registration [website](#)
- Health Professions Student Recruitment Fair, Saturday, September 19
- Targeted to Multiple Health Profession Disciplines
  - Allied Health
  - Allopathic Medicine
  - Chiropractic
  - Dentistry
  - Nursing
  - Optometry
  - Osteopathic Medicine
  - Pharmacy
  - Physicians Assistant
  - Public Health
  - Veterinary Medicine