



Appendix 3.5

Accommodations Barriers and Strategies

Chapter 3: Providing Accommodations

Below is a list of potential barriers that may be encountered when implementing a plan for providing accommodations. The far-right column lists implementation strategies to address the barriers. You could use one or a combination of the implementation strategies listed for each barrier.

Refer to the [Expert Recommendations for Implementing Change \(ERIC\) Discrete Implementation Strategies Table](#) for descriptions of each strategy.

Category of Barrier	Barriers to Providing Accommodations	Possible Implementation Strategies
Leadership, staff, and provider attitudes	Not seen as priority Not viewed as required Not viewed as valuable	<ul style="list-style-type: none"> Identify and prepare champions who can emphasize the necessity of providing accommodations with their colleagues Promote adaptability: Identify ways the process of providing accommodations can be tailored to meet individual clinic or unit needs Provide ongoing consultation and check-ins via Disability Coordinator, legal team, or other champion Educate/train on legal requirements, implications for patient satisfaction, patient and workforce safety, etc. Use reminders (electronic health record alerts, tents, signs) Audit and provide feedback Kudos to high performing staff/clinicians/sites
	Insufficient buy-in or being “voluntold”	<ul style="list-style-type: none"> Identify and prepare champions Promote adaptability Educate/train on legal requirements, implications for patient satisfaction, patient and workforce safety, etc. Use reminders (electronic health record alerts, tents, signs) Audit and provide feedback Kudos to high performing staff/clinicians/sites
Staff and provider knowledge and comfort	Discomfort asking about disability status	<ul style="list-style-type: none"> Identify and prepare champions Provide ongoing consultation and check-ins Provide training on use of accommodations Provide staff and providers with tools (scripts, cheat sheets, quick guides) Use reminders (electronic health record alerts, tents, signs) Collect data (via patient experience surveys) related to provision of accommodations and relay to responsible individuals/roles Kudos to high performing staff/clinicians/sites Identify and celebrate early adopters
	Lack of knowledge about disability competency, language, preferences	<ul style="list-style-type: none"> Identify and prepare champions Provide ongoing consultation and check-ins Provide training Provide staff and providers with tools (scripts, cheat sheets, quick guides)

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	<p>Hesitance to ask because do not know to provide</p> <p>Or</p> <p>System/clinic might not have the needed accommodation</p>	<ul style="list-style-type: none"> • Assess staff readiness for providing accommodations and identify local barriers/factors contributing to hesitancy • Workflow mapping • Identify and prepare champions • Provide ongoing consultation and check-ins • Establish centralized technical assistance (i.e., how to use an accommodation) • Educate staff on available accommodations and processes for requesting one in their unit • Provide staff and providers with tools (e.g., scripts, cheat sheets, quick guides) • Use reminders (electronic health record alerts, tents, signs) • Audit and provide feedback • Kudos to high performing staff/clinicians/sites • Patient-facing educational materials listing which accommodations are available • Identify early adopters
	<p>Lack of awareness that patients need accommodations or that the team is required to provide accommodations</p>	<ul style="list-style-type: none"> • Workflow mapping • Identify and prepare champions • Provide ongoing consultation and check-ins • Provide training on use of accommodations • Educate staff on legal requirements, implications for patient satisfaction, patient and workforce safety, etc. • Use reminders (EHR alerts, tents, signs)
	<p>Lack of knowledge about how to use the accommodation, including how to keep staff and clinicians up to date with knowledge about accommodations</p>	<ul style="list-style-type: none"> • Establish centralized technical assistance • Provide training on use of accommodations • Use train-the-trainer strategies • Provide ongoing consultation and check-ins • Identify and prepare champions • Identify early adopters • Audit and provide feedback • Provide staff and providers with tools (scripts, cheat sheets, quick guides) • Use reminders (EHR alerts, tents, signs)
<p>Workflow and logistics</p>	<p>Challenges coordinating across departments and roles</p>	<ul style="list-style-type: none"> • Change record systems/EHR • Designate a formal implementation team • Conduct a needs assessment • Develop a formal implementation blueprint • Workflow mapping • Identify and prepare champions • Promote adaptability • Provide ongoing consultation and check-ins • Establish centralized technical assistance • Provide training • Relay clinical data to responsible individuals/roles • Review staff performance data (i.e., how often disability status questions were asked during registration) to inform changes • Promote network weaving by strengthening relationships and collaboration within and outside of the organization, departments, or units

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	<p>Limited time, budget and resources available</p>	<ul style="list-style-type: none"> • Conduct needs assessment • Reexamine the implementation plan • Identify early adopters • Workflow mapping • Identify and prepare champions • Promote adaptability • Provide ongoing consultation and check-ins • Establish centralized technical assistance • Provide resources • Use reminders (EHR alerts, tents, signs) • Provide staff and providers with tools (scripts, cheat sheets, quick guides) • Relay clinical data to responsible individuals/roles • Review staff performance data to inform changes • Audit and provide feedback • Kudos to high performing staff/clinicians/sites
	<p>Competing demands and can put additional burden on the organization</p>	<ul style="list-style-type: none"> • Change record systems/EHR • Designate a formal implementation team • Conduct a needs assessment • Develop a formal implementation blueprint • Workflow mapping • Identify and prepare champions • Promote adaptability • Provide ongoing consultation and check-ins • Establish centralized technical assistance • Relay clinical data to responsible individuals/roles • Review performance data to inform changes • Audit and provide feedback
	<p>Not assigned responsibility for tasks</p>	<ul style="list-style-type: none"> • Change record systems/EHR • Designate a formal implementation team • Conduct a needs assessment • Develop a formal implementation blueprint • Workflow mapping • Identify and prepare champions • Promote adaptability • Provide ongoing consultation and check-ins • Establish centralized technical assistance • Relay clinical data to responsible individuals/roles • Review performance data to inform changes • Audit and provide feedback



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Patient-level challenges	Patients are unaware that they have the right to accommodations	<ul style="list-style-type: none">• Workflow mapping• Use reminders (EHR alerts, tents, signs)• Promote adaptability• Establish centralized technical assistance• Provide training to staff on what accommodations are available in the organization and how to share with patients• Provide staff and providers with tools (scripts, cheat sheets, quick guides)• Relay clinical data to responsible individuals/roles• Patient-facing educational materials• Prepare patients/consumers to be active participants• Obtain and use patients/consumers and family feedback
	Patients are unsure of what accommodations are available	
	Patients are unsure of what accommodations they would benefit from	
	Patients don't know how to request accommodations	