

# Transitions of Care for Patients with Intellectual and Developmental Disabilities



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# Background

- Patients with intellectual and developmental disabilities (IDD) are at increased risk for poorer health outcomes across their life compared to patients without IDD<sup>1</sup>
- Poorer health outcomes for patients with IDD are due to a multitude of factors including a higher prevalence of associated health conditions, inadequate treatment given to patients by providers, inadequate access to healthcare resources, and more<sup>1</sup>
- The largest modifiable risk factor of these three causes is the lack of physician training for patients with IDD<sup>1</sup>

#### Introduction

- Currently, no accreditation requirements exist under the Accreditation Council for Graduate Medical Education (ACGME) requiring training or education of health care providers in specific care needs for patients with intellectual and developmental disabilities (IDD)<sup>2</sup>
- Section IV.B.1.a).(1).(f) of ACGME Residency Guidelines note that 'respect and responsiveness to diverse patient populations, including but not limited to diversity in gender...disabilities, national origin, SES, and sexual orientation' are mandatory<sup>2</sup>
- However, respect and responsiveness are not congruent with clinical competence
- Resultantly, most medical residencies do not have specific curriculum implemented to train residents on how to care for patients with IDD
- While many pediatric residency programs inherently treat patients with IDD as they are part of their patient population, adult programs have much less exposure to this patient population and are less comfortable treating patients with IDD
- Therefore, when pediatric patients with IDD transition to adult care, they face significant health disparities secondary to the lack of patient centered appropriate care they receive

### Clinical Aim

To improve transitions of care for patients with intellectual and developmental disabilities (IDD) as they transition from pediatric to adult health care by training medical residents in specific care needs of the IDD population

# Methodology

- The American Academy of Developmental Medicine and Dentistry (AADMD) created a curriculum titled the National Inclusive Curriculum for Health Education Medical (NICHE-MED) to target gaps in health professional training for patients with IDD<sup>1</sup>
- This program has three goals at the medical school training level, including addressing:

Attitudes and/or knowledge to address underlying ableism and thoughts of disability

Health equity and intersectionality, centering individuals with

Community engaged scholarship within medical education

- Students that participated in these interventions reported that their confidence working with individuals with IDD significantly increased<sup>1</sup>
- Currently, this program exists in 27% of medical schools, meaning 73% of residents entering training have not been trained in caring for patients with IDD<sup>1</sup>
- Creating and implementing a similar curriculum in residency programs throughout the country could address this disparity
- Curriculum adapted to residencies would focus on:

Lectures followed by discussions

Panel discussions featuring patients with IDD

Simulated cases based on clinical scenarios

#### Results

 While this program has not yet been formally implemented at the residency level, based on prior outcomes at the medical school level, we expect our outcomes to show:

Increased confidence and comfort interacting with and treating patients with IDD as they transition into adult care

Improved connectedness with the health system for patients with IDD as they transition to adult care

Improved health outcomes for patients with IDD as they transition to adult care

#### Conclusion

- Appropriate training about clinical care for patients with IDD should be a mandated ACGME requirement of residency training
- When medical students are exposed to small group sessions, lectures, and simulated case experiences for how to care for patients with IDD, this objectively increased their comfort and care for this population
- This can be adapted at the residency level to improve healthcare outcomes for patients with IDD by equipping physicians with the skills to provide tailored and comprehensive care to this population

## Acknowledgements and References

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#### Work Cite

- 2. Acgme.org, https://www.acgme.org/globalassets/pdfs/guide-to-the-common-program-requirements-residency.pdf. Accessed 21 May 2025.