1.0 PURPOSE AND SCOPE
The purpose of this circular is to establish the policy and procedures for recognizing and processing requests for Reasonable Accommodations. This circular applies to all Bureau of Engraving and Printing (BEP/Bureau) employees.

2.0 POLICY
The Bureau shall provide reasonable accommodations to qualified employees and applicants with disabilities, unless BEP can demonstrate that a particular accommodation would impose an undue hardship on the operation of its programs.

3.0 SUPERSESSION

4.0 BACKGROUND AND REFERENCES
4.1 On July 26, 2000, Executive Order (EO) 13164 required that Federal agencies establish effective written procedures for processing requests for reasonable accommodations.

4.2 The Rehabilitation Act of 1973 (29 USC 701), as amended, required that an employer provide reasonable accommodations to qualified individuals with disabilities who are employees or applicants for employment, except when such accommodations would cause undue hardship.

4.3 On October 17, 2000, the Equal Employment Opportunity Commission (EEOC) issued policy guidance that clarifies the rights and responsibilities of employers and individuals with disabilities regarding reasonable accommodations and undue hardship.

4.4 On January 3, 2017, EEOC issued 29 CFR 1614.203(d)(3), requiring agencies to adopt reasonable accommodation procedures that meet the 20 minimum requirements within one year of the issuance date.

5.0 DEFINITIONS
5.1 Alternative Dispute Resolution (ADR). A voluntary mechanism through which an individual can request reconsideration of denial of a reasonable accommodation request, regardless of whether the individual has started the Equal Employment Opportunity (EEO) complaint process.

5.2 Deciding Official (DO). An individual who has authority to determine whether a requested accommodation will be provided.
5.3 Disability. Physical or mental impairment that substantially limits one or more of the major life activities.

5.4 Disability Program Manager (DPM). The individual(s) designated to receive requests for reasonable accommodations, and provide assistance to employees and Deciding Officials in processing requests for accommodations for current BEP employees.

5.5 Essential Function. Job duties that are so fundamental to the position that an individual cannot do the job without performing them. A function can be "essential" if, among other things:

5.5.1 The position exists specifically to perform that function.

5.5.2 There are a limited number of other employees who could perform the function.

5.5.3 The function is specialized and the individual is hired based on their ability to perform it.

Determination of the essential functions of a position must be done on a case-by-case basis to ensure it’s based on the job that is actually performed, and not just the components of the position description.

5.6 Extenuating Circumstances. Unforeseen, unanticipated, and/or unavoidable factors that could prevent prompt processing and delivery of an accommodation.

5.7 Genetic Information. As defined by the Genetic Information Nondiscrimination Act (GINA) of 2008, includes information concerning the manifestation of disease/disorder in family members (family medical history), information about an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

5.8 Individual with a Disability. A person who has a physical or mental impairment that substantially limits one or more of that person’s major life activities, or has a record of such an impairment, or is regarded as having such an impairment.

5.9 Interactive Process. The process by which the individual requesting an accommodation, the DPM, and the DO discuss the request for accommodation, determine whether an accommodation will be provided, examine potential alternative accommodations, and obtain relevant information as it pertains to a request for accommodation.

5.10 Major Life Activity. Basic activities that the average person in the general population can perform with little or no difficulty, such as, caring for oneself, performing manual tasks, walking, seeing, standing, hearing, speaking, breathing, reading, eating, sleeping, communicating, bending, lifting, concentrating, learning, working, and the operation of major bodily functions.
5.11 Qualified Individual. An individual who satisfies the requisite skill, experience, education, and other job-related requirements of the employment position, and who, with or without reasonable accommodation, can perform the essential functions of the position.

5.12 Reasonable Accommodation. An adjustment or alteration of the job or work environment that enables a qualified individual with a substantially limiting impairment, record of an impairment, or regarded as having an impairment to perform job functions, or benefits and privileges of employment. There are three categories of reasonable accommodations:

5.12.1 Accommodations that are required to ensure equal opportunity in the application process to permit a qualified individual with a disability to be considered for a job (such as providing application forms in alternative formats like large print or Braille);

5.12.2 Accommodations that enable employees with disabilities to perform the essential function of the position held or desired (such as providing sign language interpreters); and

5.12.3 Accommodations that enable employees with disabilities to enjoy equal benefit and privileges of employment as enjoyed by employees without disabilities (such as removing physical barriers to an entrance to the workplace).

5.13 Reassignment. Reasonable accommodation of the last resort, absent undue hardship, is provided to employees (not applicants) who, because of a disability, can no longer perform the essential functions of their job, with or without reasonable accommodation.

5.14 Receiving Official (RO). BEP personnel designated to officially receive a request for reasonable accommodation from an employee or applicant (or an individual acting on their behalf), determine who will handle the request, and monitor the request until it is closed.

5.15 Requester. An employee or applicant with a disability, or an individual acting on their behalf, who requests reasonable accommodations.

5.16 Undue Hardship. An action requiring significant difficulty or expense when considered in light of factors such as the Bureau’s size, financial resources, and the nature and structure of the position. Determination of undue hardship is always made on a case-by-case basis, considering factors such as the nature and cost to provide the accommodation and the impact of the accommodation on the operations of the Bureau. An undue hardship based on cost should rarely be an issue.
6.0 RESPONSIBILITIES

6.1 The OEODM Disability Program Manager (DPM) shall:

6.1.1 Coordinate all reasonable accommodation requests with the appropriate DO.

6.1.2 Provide assistance and recommendations to the individual responsible for making the decision on a request for reasonable accommodation.

6.1.3 Ensure that the supervisor/manager engages in on-going, interactive discussion(s) with the individual seeking an accommodation.

6.1.4 Ensure that all reasonable accommodation requests are processed and implemented in a timely manner and in accordance with the provisions of this circular.

6.1.5 Update the appropriate tracking and monitoring of reasonable accommodation requests.

6.1.6 Maintain all reasonable accommodation case files in a secure manner.

6.1.7 Safeguard the confidentiality of medical information.

6.1.8 Process all reasonable accommodation requests in accordance with the provisions of this circular.

6.1.9 Encourage OHR, managers, supervisors, and office/division chiefs to contact the Office of Chief Counsel (OCC) for legal advice and guidance throughout the process, when needed.

6.2 The Office of Human Resources (OHR) and/or their shared services provider shall:

6.2.1 Coordinate all reasonable accommodation requests made by applicants with the appropriate DO and the DPM.

6.2.2 Conduct the designated job search, determine the best-fit job placement, and document efforts for all reassignments as a reasonable accommodation.

6.2.3 Process all reasonable accommodation requests in accordance with the provisions of this circular.

6.2.4 Encourage managers, supervisors, and office/division chiefs to contact OCC for legal advice and guidance, when needed.

6.3 Managers, supervisors, office/division chiefs shall:

6.3.1 Immediately contact the DPM upon receipt of a request for reasonable accommodation.

6.3.2 Maintain an open line of communication with the individual seeking an accommodation and engage in on-going, informal discussion(s) with the individual during the reasonable accommodation process.
6.3.3 Consider the use of ADR techniques at any stage in the reasonable accommodation process to resolve any conflict at the lowest level.

6.3.4 Process all reasonable accommodation requests in accordance with the timeframes of these procedures, in a manner that imposes the fewest burdens on individuals with disabilities and permits the most expeditious consideration and delivery of the reasonable accommodation.

6.3.5 Contact the OCC for legal advice and guidance throughout the RA process, when needed.

6.4 The Office of Chief Counsel (OCC) shall:

6.4.1 Provide legal advice and guidance to OEODM, OHR, managers, supervisors, and office/division chiefs on reasonable accommodations throughout the process, when needed.

7.0 RECEIVING OFFICIALS

7.1 A request made by or on the behalf of a current BEP employee may be made to: (1) a supervisor or manager in the individual’s chain of command; or (2) OEODM’s DPM.

7.1.1 The contact information for the DPM at the Washington, DC Facility (DCF) and Western Currency Facility (WCF) is:

DCF: (202)874-3460
WCF: (817)847-3950

Email for both facilities: OEODM@bep.gov

7.2 A request made by or on the behalf of an applicant may be made to: (1) the OHR representative with whom they’ve had contact; or (2) OEODM’s DPM.

7.3 Requests are made to the Office Chief or their designee of the employee or applicant making the request when the appropriate RO’s are unavailable.

8.0 REASONABLE ACCOMMODATION REQUEST

8.1 The reasonable accommodation process begins as soon as the request for accommodation is made either orally or in writing to the RO. Oral requests must be followed up with a written request for record-keeping purposes. All written requests must be submitted using the request form provided in Attachment A. (If assistance is needed to complete the written request form, please contact the DPM.) The interactive process should not be held in abeyance until the receipt of the written request form.

8.1.1 A family member, friend, health care professional, or other representative may request a reasonable accommodation on behalf of an employee or applicant.
8.2 The requestor may request a reasonable accommodation in “plain English.” In other words, the individual does not have to reference the Americans with Disabilities Act, Rehabilitation Act, use the phrase “reasonable accommodation,” or have a particular accommodation in mind in order for a request to be considered a request for reasonable accommodation. The following are examples on how to recognize requests for reasonable accommodation:

8.2.1 Example 1: An employee tells their supervisor, “I’m having trouble getting to work at my scheduled starting time because of medical treatment I’m undergoing.” This is treated as a request for reasonable accommodation.

8.2.2 Example 2: An employee tells their supervisor, “I need six weeks off to get treatment for a back problem.” This is treated as a request for reasonable accommodation.

8.3 An individual with a disability may request a reasonable accommodation at any time, even if they have not previously disclosed the existence of a disability.

8.4 A reasonable accommodation request that is likely to be needed on a repeated basis (e.g., the assistance of sign language interpreters or readers) does not require that the individual submit a written request each time the accommodation is needed. However, appropriate notice to obtain the accommodation is required.

9.0 WRITTEN CONFIRMATIONS

9.1 The RO will confirm in writing the receipt of a request for reasonable accommodation within five business days of receipt of the request, using the form provided in Attachment B.

9.2 While the written confirmation should be made within five business days of receipt of the request, processing the request will begin as soon as it is received, whether or not the confirmation has been provided.

9.3 A written confirmation form will not be provided each time an individual requests the same accommodation on a recurring basis (e.g., the assistance of sign language interpreters or readers). However, appropriate notice may be required.

9.4 The written confirmation form is only required for the first request or a new request.

9.5 The written confirmation only verifies receipt of the request, not the decision on the accommodation request.

10.0 INTERACTIVE PROCESS

10.1 The supervisor and requestor should immediately commence interactive dialogue upon receipt of the request for accommodation to clarify the employee’s needs, specific limitations, and to identify the appropriate reasonable accommodation.
10.2 Interactive discussion may also be useful in determining if additional medical documentation is necessary, and obtain information about the essential functions of the position and how they can be performed. Guidance for determining the essential functions of a position is provided in Attachment I.

10.3 Interactive discussion should continue throughout the reasonable accommodation process as a means of obtaining critical information necessary to make a decision, and keep the requestor advised of the status of their request for accommodation. Guidance for the interactive process between the supervisor and employee is provided in Attachment J.

11.0 DECIDING OFFICIALS

11.1 Dos have been delegated principal responsibility for identifying possible accommodations and determining whether an accommodation will be provided. When necessary, the DO may delegate their authority to a different supervisor, manager, or office/division chief.

11.2 The DO may be different depending on whether the request is initiated by an employee or applicant, or the type of accommodation being requested. Dos will be as follows:

11.2.1 The Bureau’s Human Resources Officer (HRO) is responsible for the recruitment and selection process, if the request for accommodation is from an applicant.

11.2.1.1 Contact information for the HRO is:
Bureau of Engraving and Printing
Attention: Human Resources Officer
14th and C Sts., SW
Washington, DC 20228

Telephone: (202) 874-3573

Email: BEPHR@bep.gov

11.2.2 The Bureau’s DPM, if the accommodation requested is for adaptive equipment, a reader or sign language interpreter, removal of an architectural barrier, accessible parking, or materials in alternative format.

11.2.2.1 The contact information for the DPM at the Washington, DC Facility (DCF) and Western Currency Facility (WCF) is:
DCF: (202) 874-3460
WCF: (817) 847-3950
Email for both facilities: OEODM@bep.gov

11.2.3 The Office Chief or their designee of the employee where the accommodation requested involves personnel actions.

11.2.4 The manager or supervisor of the employee if the accommodation requested is within the scope of their authority, such as granting an
alternate work schedule, purchasing an ergonomic chair, or granting extended breaks.

11.2.5 The Associate Director of the employee or applicant making the request when the appropriate Dos are unavailable.

11.3 The timeframes discussed in section 17.0 may not be suspended or extended because of the unavailability of the DO.

12.0 REQUESTS FOR MEDICAL INFORMATION

12.1 In those instances where the need for the accommodation and the appropriate type of accommodation is not obvious or otherwise known, a request for medical documentation may be required. Guidance for requesting medical documentation is provided in Attachment F.

12.2 The request for medical documentation should be in writing and issued to the employee as soon as it has been determined this step is required.

12.2.1 The DO will contact the DPM to request the necessary medical information needed to make an accommodation decision.

12.2.2 The DPM will issue the request for medical documentation. A signed and dated copy of the medical request memorandum must be included in the reasonable accommodation case file. Attachment G may be used as a sample memorandum for requesting medical information.

12.2.3 The written request for medical documentation should include a copy of a waiver for the employee to sign giving permission for any official, with a need to know, to review the medical documents. Attachment H includes a sample consent to release medical information form. A copy of the consent to release must be included in the reasonable accommodation case file.

12.3 Medical documentation must be provided by an appropriate medical professional. The medical documentation must explain the nature of the disability and the need for reasonable accommodation, or clarify how the requested accommodation will assist the employee to perform the essential functions of the job, or enjoy the benefits and privileges of the workplace.

12.4 Once the medical documentation is received, the DPM will evaluate the documentation to determine sufficiency. The DPM may also choose to have the medical information reviewed by the Bureau’s Medical Doctor or another physician chosen by BEP, at the Bureau’s choosing and expense.

12.4.1 In those instances where the individual requesting the accommodation submits medical information directly to the DO without being asked, the DO will forward all documents in a sealed envelope to the DPM.

12.5 The DPM is the Bureau official responsible for determining whether to request supplemental information. However, when necessary, medical information may be reviewed by the Bureau’s Medical Doctor and/or another physician chosen by
12.5.1 Section 12.3 explains the standard used to determine if supplemental medical information is needed.

12.5.2 The DPM will explain in writing to the individual seeking the accommodation, in specific terms, why the information provided is insufficient, what additional information is needed, and the reason the information is necessary to determine an accommodation request. The request for supplemental medical information may include, if appropriate and with the employee’s consent, an examination by a medical specialist of the Bureau’s choosing and expense.

12.6 If the individual requesting accommodation does not provide appropriate documentation or does not cooperate in the Bureau’s efforts to obtain such documentation, the Bureau may deny the requested accommodation.

13.0 CONFIDENTIALITY AND DISCLOSURE

13.1 All medical information, including information about functional limitations and reasonable accommodation needs obtained in connection with a request for reasonable accommodation, must be kept confidential. The information shall be kept in files separate from the individual’s official personnel file and shall be stored in a separate locked cabinet or other password-protected file. Employees who obtain or receive such information are strictly bound by these confidentiality requirements. In addition, whenever medical information is disclosed, the individual disclosing the information must inform the recipients of the information about the confidentiality requirements that apply. The information may be disclosed in the following circumstances:

13.1.1 Deciding Officials, supervisors and managers who need to know details regarding restrictions on the work or duties, and the necessary accommodation(s), but medical information should only be disclosed if absolutely necessary.

13.1.2 First aid and safety personnel, when appropriate, if the disability might require emergency treatment or special arrangements in emergency situations, such as building evacuations.

13.1.3 Government official when the information is necessary to investigate compliance with the Rehabilitation Act.

13.1.4 In certain circumstances, to workers’ compensation offices or insurance carriers.

13.1.5 Treasury and Bureau legal counsel in connection with providing legal advice to Bureau officials.
14.0 REASSIGNMENT AS AN ACCOMMODATION

14.1 Reassignment is an accommodation of last resort. Reassignment will only be considered if a determination is made that no other reasonable accommodations are available to enable the individual to perform the essential functions of their current job, or if the only effective accommodation would cause undue hardship. BEP is not obligated to create a position for the purpose of reassignment.

14.2 If it is determined that an employee cannot perform the essential functions of their position with or without a reasonable accommodation, the DO will inform the employee in writing the option of reassignment as an accommodation, why the employee cannot be accommodated in their current position, the criteria for reassignment into a vacant position, and where to search for vacant positions. The DO will also notify the DPM, who will then send a request to OHR to begin the process of conducting a search for 30 business days for internal positions that are vacant, or positions that will become vacant over the next 30 business days.

14.2.1 OHR and/or their shared services provider will search for available vacancies using the Position Recruitment Approval Spreadsheet.

14.2.2 Employees can search for available vacant positions on USAjobs.gov.

14.2.3 When searching for available vacancies when considering reassignment, BEP will first focus on positions that are equivalent to the employee’s current job in terms of pay, and other relevant factors. If there are no vacant equivalent positions for which the individual is qualified, BEP will consider vacant lower level positions for which the individual is qualified. The employee will not be considered for pay retention if the reassignment to a lower level position is permanent.

14.2.4 BEP is not required to consider positions at a higher grade or positions with known promotional potential greater than the employee’s current position. The employee is entitled to apply for such a position under any competitive process.

14.2.5 Employees must notify the DO or the DPM of any vacancies that they wish to be considered for.

14.3 If no positions have been identified by OHR and/or their shared services provider, the DPM must provide a signed statement to the employee indicating the following:

14.3.1 That a search for all funded and authorized vacant positions for which the employee is qualified, with or without a reasonable accommodation, was conducted for a period of 30 business days;

14.3.2 That no equivalent or lower grade position was identified or if a lower-graded position was identified, that position will be held until a Treasury-
wide search is conducted for positions closer to the employee’s grade level; and

14.3.3 That there are no equivalent vacant positions that OHR and/or their shared services provider has reason to believe will become vacant over the next 30 business days for which the employee may be qualified.

14.4 The information will be forwarded to the Department of the Treasury’s, Office of Civil Rights and Diversity Management’s (OCRD) Disability Program Manager, who will coordinate a Treasury-wide search for vacant positions for an additional 30 business days.

14.5 To assist in conducting a search, the DPM will provide the employee an opportunity to submit an updated resume or a brief description of their current skills and accomplishments. The DPM must explain to the employee that their failure to provide such information could result in the Bureau’s inability to identify positions for which they may qualify.

14.6 Reassignment may be made to a vacant position outside of the employee’s commuting area if the employee is willing to relocate. The Bureau is not required to pay for the employee’s relocation expenses.

14.7 If a reassignment offer is made, the employee has up to 14 business days to accept or decline the offer.

14.8 If after the Treasury-wide search is conducted and no vacant positions for which the employee is qualified are available, the DO will issue the employee a final decision letter explaining why reassignment as a reasonable accommodation could not be provided within 30 business days of being notified by the DPM.

14.9 Reassignment is available only to employees, not to applicants for employment.

14.10 OHR (or their shared services provider), DPM, and OCRD’s DPM should maintain a record of the search conducted.

15.0 GRANTING A REASONABLE ACCOMMODATION REQUEST

15.1 A written decision must be provided to the individual requesting the accommodation, the Office Chief of the employee or applicant, and the DPM as soon as it is determined. The DO should not delay the issuance of the approval memorandum. The DO may use the format provided in Attachment C to issue the written decision.

15.2 If the accommodation cannot be provided immediately, the DO will inform the individual and the DPM of the projected time frame for providing the accommodation, and why it cannot be provided immediately. The DO may take temporary or permanent measures such as providing assistive technology or altering the physical layout of the office. The projected time frames and temporary, or permanent, measures should be specified in the written decision.
16.0 DENYING A REASONABLE ACCOMMODATION REQUEST

16.1 Before denying a reasonable accommodation request, the DO must have the decision reviewed by the OCC.

16.2 A written denial memorandum must be provided to the individual requesting the accommodation as soon as the DO determines that a reasonable accommodation will be denied. The DO should not delay the issuance of the denial memorandum. The DO may use the format provided in Attachment D.

16.3 Where the DO has denied an accommodation request but offered to make a different one in its place, the denial notice should explain both the reasons for the denial of the accommodation request and the reasons that the DO believes the chosen accommodation will be effective. The DO may use the format provided in Attachment E.

16.4 Reasons for the denial of a request for reasonable accommodation must include specific reasons for the denial and may include the following:

16.4.1 Why the requested accommodation would not be effective.

16.4.2 Why medical documentation was deemed inadequate or not specific enough, or because the documentation is not from a qualified medical provider.

16.4.3 How the requested accommodation would require the lowering of a performance or production standard.

16.4.4 The requested accommodation would require the removal of an essential function.

16.4.5 Why providing the requested accommodation would result in undue hardship. Before reaching this determination, the DO must have explored whether other effective accommodations exist that would not impose undue hardship and therefore can be provided.

16.5 The written notice of denial must also inform the individual of their appeal rights, that they have the right to file an EEO complaint, and may have the right to pursue Merit Systems Protection Board (MSPB) and/or union grievance procedures. The notice must also explain the Bureau’s procedures available for ADR. Guidance for interactive discussions with the employee on options available after a non-accommodation determination is made is provided in Attachment K.

17.0 TIME FRAMES FOR PROCESSING REQUESTS AND PROVIDING REASONABLE ACCOMMODATIONS

17.1 Request not involving extenuating circumstances.

17.1.1 If additional supporting medical information is not necessary, the DO will make every reasonable effort to process the requested accommodation immediately,
and provide the accommodation immediately but not more than 20 business days of receiving the request.

17.1.2 The DO should not routinely take the full length of time allowed to provide the accommodation. When a particular accommodation can be provided in less than the maximum amount of time permitted, the DO must do so. Failure to provide the accommodation in a prompt manner may result in a violation of the Rehabilitation Act.

17.1.3 If additional supporting medical information is necessary, the process will be held in abeyance until the relevant information is received. Once the relevant information is received, the time frame for processing the request will begin at the same point at which the process was stopped.

17.1.3.1 Example 1: On day three of the interactive process, supporting medical documentation is requested. The individual returned the supporting medical documentation two weeks later. The process is held in abeyance on day three of the process, and begins on the day the documentation is received, which for the purpose of this example will be day four of the process.

17.2 Request involving extenuating circumstances.

17.2.1 When extenuating circumstances are present, the time for processing a request for reasonable accommodation and providing the accommodation will be extended as reasonably necessary. However, such extensions should be rare. All Bureau officials are expected to act as quickly as possible in processing requests and providing accommodations.

17.2.1.1 Example 1: The purchase of equipment may take longer than 20 business days because of purchase requirements.

17.2.2 Where extenuating circumstances are present, the DO must notify the DPM and the individual the reason for the delay, and the approximate date on which a decision, or provision of the reasonable accommodation is expected. Any further developments or changes should also be communicated promptly to the individual.

17.2.3 If there is a delay in providing an accommodation that has been approved, the DO will determine whether temporary measures can be taken to assist the employee. This could include providing the requested accommodation on a temporary basis or providing a less effective form of accommodation.

17.2.3.1 Example 1: There may be a delay in receiving adaptive equipment for an employee with vision impairment. During the delay, the supervisor might arrange for other employees to act as readers. This temporary measure may not be as effective as the adaptive equipment, but it will allow the employee to perform as much of the job as possible until the equipment arrives.
17.2.4 In addition, the DO may provide measures that are not reasonable accommodations within the meaning of the law (e.g., temporary removal of an essential function) if:

17.2.4.1 They do not unreasonably interfere with BEP operations; and

17.2.4.2 The employee is clearly informed that they are being provided only on a temporary, interim basis with a beginning and end date specified.

17.2.5 If a delay is attributable to the need to obtain or evaluate medical documentation and it has not yet been determined that the individual is entitled to an accommodation, the DO may also provide an accommodation on a temporary basis. In such case, the DO will notify the individual that the accommodation is being provided on a temporary basis pending a decision on the accommodation request.

17.2.6 Dos who approve such temporary measures are responsible for assuring that they do not take the place of a permanent accommodation and that all necessary steps to secure the permanent accommodation are being taken.

18.0 EXPEDITED PROCESSING

18.1 In certain circumstances, a request for reasonable accommodation requires an expedited review and decision in a time frame that is shorter than the 20 business days discussed in Section 17.1.1.

18.1.1 Example 1: An applicant applying for a job. Depending on the timetable for receiving applications, conducting interviews, taking tests, and making hiring decisions, there may be a need to expedite a request for reasonable accommodation to ensure an applicant with a disability has an equal opportunity to apply for the job.

18.1.2 Example 2: An employee attending a meeting scheduled to occur shortly. An employee may need a sign language interpreter for a meeting scheduled to take place in five business days.

19.0 AVENUES FOR REDRESS

19.1 ALTERNATIVE DISPUTE RESOLUTION (ADR)

19.1.1 Employees are encouraged to consider the use of ADR at any stage of the reasonable accommodation process to resolve any conflicts and issues at the lowest possible level.

19.1.2 An employee whose request for reasonable accommodation has been denied will be offered the opportunity to use ADR as an avenue of redress. The employee has 14 business days of receiving the written denial to submit an ADR request to an EEO Counselor.

19.1.3 If the employee elects another avenue for redress, the employee is not precluded from utilizing ADR in that forum.
19.2 REQUEST FOR RECONSIDERATION

19.2.1 An employee whose request for reasonable accommodation has been denied will be offered the opportunity to request reconsideration of the decision.

19.2.2 The employee has 14 business days of receiving the written denial, or if the issue is not resolved in the ADR process within 14 business days of the conclusion of the ADR process, to submit a request for reconsideration to the DO. The individual may present additional information in support of their reconsideration request. The DO will make every reasonable effort to respond to the request for reconsideration within seven business days of receiving the written or verbal request. Any request for reconsideration received after 14 business days of the denial will be treated as a new request.

19.3 APPEAL

19.3.1 If the DO does not reverse the decision, the individual may appeal the decision within 10 business days of receiving the DO’s denial of the request for reconsideration. The appeal must be submitted in writing. The appeal should be decided by the next level manager of the DO. A response to the appeal will be issued to the individual within five business days of receiving the written request.

19.4 NEGOTIATED GRIEVANCE

19.4.1 A bargaining unit employee whose request for reasonable accommodation has been denied may have a right to file a negotiated grievance in accordance with the provisions of the controlling collective bargaining agreement.

19.5 DISCRIMINATION COMPLAINTS

19.5.1 An individual whose request for reasonable accommodation has been denied will be advised of their right to file an informal EEO complaint. The individual must initiate contact with an EEO Counselor within 45 calendar days of the date the request was denied.

19.6 MERIT SYSTEMS PROTECTION BOARD (MSPB)

19.6.1 An employee or applicant can initiate an appeal within 30 calendar days of an appealable adverse action. Pursuing dispute resolution procedures, including seeking reconsideration or filing an appeal, does not prevent the individual from filing an EEO complaint, MSPB claim, or union grievance. An individual’s participation in the informal process does not satisfy the requirements for bringing a claim under the EEO, MSPB, or union grievance procedures. If they wish to pursue the EEO complaint process, they must do so within 45 days of the denial, even if they are also participating in the agency’s informal dispute resolution process.

20.0 INFORMATION TRACKING AND REPORTING

20.1 The DPM will annually evaluate the Bureau’s Reasonable Accommodation Program to determine whether it’s properly established and in compliance with
the elements of a Model EEO Program within the EEO MD-715 standards. The Executive Summary of the Bureau’s MD-715 Report should include a discussion on the following:

20.1.1 Accessibility of the reasonable accommodation policy to employees with or without a disability, e.g., posted on the intranet, disseminated in employee handbooks, or available in alternative formats, such as Braille;

20.1.2 The number and types of reasonable accommodations that have been requested in the application process and whether those requests have been granted or denied;

20.1.3 The jobs (occupational series, grade level, and Bureau component) sought by the applicant or held by the employee, and the types of reasonable accommodations that have been requested for each of those jobs;

20.1.4 The number of reasonable accommodations for each job that have been approved and denied;

20.1.5 The number and types of requests for reasonable accommodations that were needed to apply for a job, perform the essential functions of a job, or enjoy the benefits and privileges of employment, and whether those requests have been granted or denied;

20.1.6 The reasons for the denial of requests for reasonable accommodations;

20.1.7 The amount of time taken to process each request for reasonable accommodation; and

20.1.8 The sources of technical assistance that have been consulted in trying to identify possible reasonable accommodations.

20.2 Employees and applicants will receive frequent updates from the DO and/or the DPM during the processing of reasonable accommodation requests. Employees may also track their request by contacting the DO or the DPM. Applicants may track their request by contacting the OHR Specialist with whom they’ve had contact or the DPM.

21.0 COST AND RESOURCES

21.1 Resources that are available to help the DPM, DO, and the requestor identify possible accommodations are listed in Attachment L.

21.2 OEODM has centralized funding for the Bureau’s Reasonable Accommodation Program. All questions in regards to reasonable accommodation requests that require the use of Bureau resources and funding should be referred to the DPM in OEODM.

21.2.1 A determination of undue hardship means the Bureau finds that a specific accommodation would result in significant difficulty or expense, or would alter the nature of the Bureau’s operations. When evaluating budgetary and administrative concerns to determine undue hardship
exists, the Bureau will consider all resources available to the Bureau as a whole and follow the standards outlined in the regulations, “Enforcement Guidance on Reasonable Accommodation; Undue Hardship Under the Americans with Disabilities Act; and EEOC Final Rule: Affirmative Action for Individuals with Disabilities in Federal Employment.”

22.0 OFFICE OF PRIMARY RESPONSIBILITY
Office of Equal Opportunity and Diversity Management

<electronically approved>
Leonard R. Olijar
Director
ATTACHMENT A

REASONABLE ACCOMMODATION REQUEST FORM

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<thead>
<tr>
<th>Employee/Applicant Name:</th>
<th>Job Title:</th>
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Describe the medical condition requiring accommodation.

Describe the specific accommodation being requested. (If additional space is needed, attach a separate sheet.)

Explain how the requested accommodation would assist you in: (1) performing the essential duties of your position, (2) using the job application process, or (3) taking advantage of a benefit or privilege offered by the Bureau.

Signature: ____________________ Date: ______________

In reviewing your request, it may be determined that medical documentation is needed to support your accommodation request. If that is the case, you will be requested to provide sufficient medical information to support your request.

Reviewed By: __________________ Date: ______________
ATTACHMENT B
CONFIRMATION OF REASONABLE ACCOMMODATION REQUEST
FOR MANAGEMENT USE ONLY

<table>
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<th>Employee/Applicant Name:</th>
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Briefly describe the accommodation being requested. (Be as specific as possible, e.g., adaptive equipment, reader, interpreter.)

Identify the essential duties of the position or explain the application requirements that the employee/applicant is unable to perform or satisfy because of the condition.

Medical Documentation needed: If yes, explain why:

Signature: ___________________ Date: ___________________

Please attach all supporting documentation obtained with this request.

Reviewed By: ___________________ Date: ___________________
ATTACHMENT C
SAMPLE MEMORANDUM APPROVING REQUEST FOR ACCOMMODATION

MEMORANDUM
From:
To:

Subject: APPROVAL OF REQUEST FOR ACCOMMODATION

1. On (date), you made an oral or written request for accommodation. You identified your disability as _____________, your limitation(s) as _____________, and requested the following accommodation(s) _________________.

2. This is to notify you that after assessing all of the information you provided, as well as using the resources available to me, your request for accommodation has been approved. The following is a list of the equipment that will be provided to you and the date of expected receipt.

a. 
b. 
c. 

OR

2. This is to notify you that after assessing all of the information you provided, as well as using the resources available to me, your request for accommodation has been approved. You are advised that it has been determined that an alternative form of accommodation will allow you to effectively perform the essential functions of your position. Therefore, the following is a list of the equipment that will be provided to you and the date of expected receipt.

a. 
b. 
c. 

3. If you have any questions or concerns regarding this please do not hesitate to contact me at _____________________________.

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ATTACHMENT D
SAMPLE MEMORANDUM DENYING REQUEST FOR ACCOMMODATION

MEMORANDUM

From:  
To:  

Subject: DENIAL OF REQUEST FOR ACCOMMODATION

1. On ___(date)____, you submitted a request for reasonable accommodation. You identified your disability as _____________, your limitation(s) as _____________, and requested the following as an accommodation(s) _________________.

2. This is to notify you that after assessing all of the information you have provided, as well as using the resources available to me, your request for reasonable accommodation is denied. The basis for this decision is that (select one of the following):

   • You do not meet the definition of an individual with a disability.
   • You did not provide the requested medical documentation necessary to make an informed determination.
   • There is no accommodation we can provide that will enable you to perform the essential functions of your job or any other available position.
   • You declined the offer of a reassignment as a form of accommodation.

   This decision is based on the following information. Be specific and provide as much detail as necessary to justify the decision, e.g., why the accommodation would not be effective or why it would result in undue hardship.

3. You may have the right to:

   • Invoke the Alternative Dispute Resolution (ADR) process;
   • Submit a request for reconsideration;
   • File an appeal;
   • File a grievance under the negotiated procedure; or
File a discrimination complaint.

To invoke the ADR process, you must submit a written request to (provide point of contact information) within 14 calendar days of your receipt of this initial denial.

a. If the ADR process is used but resolution is not reached, you may request reconsideration of this initial denial. If you elect to request reconsideration, you must submit a written request for reconsideration to (provide name and contact information for Deciding Official) within 14 calendar days of your receipt of this initial decision or if the issues are not resolved in the ADR processes, within 14 calendar days of the conclusion of the ADR process. You are not required to participate in the ADR process in order to request reconsideration. NOTE: ADR may also be appropriately considered as an option in the negotiated grievance and/or discrimination complaint procedures.

b. You may appeal the decision within 10 business days of receiving the DO’s denial of the request for reconsideration.

c. (For bargaining unit members) You may have the right to file a negotiated grievance in accordance with (reference appropriate provisions of the collective bargaining agreement).

d. You also have the right to initiate a discrimination complaint pursuant to 29 CFR 1614. To initiate an EEO complaint, you must contact (provide contact information for EEO Counselor) within 45 calendar days from your receipt of this notification of the initial denial. You may submit a request for reconsideration as set forth above and initiate an EEO complaint so long as the individual identified above receives your request for reconsideration within 14 calendar days of your receipt of the initial decision.

Unless noted as an exception above, you must file a request for ADR, reconsideration, appeal, negotiated grievance or a discrimination complaint within the applicable timeframes for it to be considered a timely filing.

4. If you are eligible, you also have the option of applying for disability retirement. For further information regarding this option, please contact __________________. You are further advised that if you are unable to perform the essential functions of your position, appropriate administrative action up to and including your removal may be taken.

5. If you have any questions on the above, please contact (provide contact information).
DENIAL OF REASONABLE ACCOMMODATION REQUEST, WITH OFFER OF OTHER ASSISTANCE

MEMORANDUM
From:  
To:  

Subject: DENIAL OF REASONABLE ACCOMMODATION REQUEST WITH OFFER TO PROVIDE AN ALTERNATE FORM OF ASSISTANCE

1. On (date), you submitted a request for accommodation. You identified your disability as _____________, your limitation(s) as _____________, and requested the following accommodation(s) ________________.

2. This is to notify you that after assessing all of the information that you have provided, as well as using the resources available to me, I have made the determination that we are unable to accommodate you in your current position due to the following reasons: (Be specific and provide as much detail as necessary to justify the decision, e.g., why the accommodation would not be effective or why it would result in undue hardship.)

Select one of the following:

- You do not meet the definition of a qualified individual with a disability.
- You did not provide the requested medical documentation to make an informed determination.

3. Although your request for reasonable accommodation has been denied, the Bureau, in its desire to be a good employer, not out of legal or regulatory necessity, is offering to provide the following assistance to you. The intent of this offer of assistance is to alleviate some of the difficulty you are experiencing in accomplishing the essential functions of your position.

(Describe in detail the assistance the command is willing to provide.)

4. If you are interested in any of the above forms of assistance, please contact your Reasonable Accommodation (RA) POC within 14 calendar days of the date of your receipt of this correspondence. If you fail to contact the RA POC within this timeframe, it will be assumed you are not interested in the assistance offered and your case will be closed.
5. Please be advised that because you (insert reason from paragraph 2), and the determination has been made that there is no obligation to accommodate you in your current position, you may have the right to:

- Invoke the Alternative Dispute Resolution (ADR) process.
- Submit a request for reconsideration.
- File an appeal.
- File a grievance under the negotiated grievance procedure.
- File a discrimination complaint.

To invoke the ADR process, you must submit a written request and it must be received by __________ within 14 calendar days of your receipt of this initial denial. (Provide point of contact information for ADR process.)

a. If the ADR process is used but resolution is not reached, you may request reconsideration of this initial denial. If you choose to request reconsideration you must submit a written request for reconsideration to (identify contact information for reconsideration official) within 14 calendar days of your receipt of this initial decision or if the issues are not resolved in the ADR processes, within 14 calendar days of the conclusion of the ADR process. You are not required to participate in the ADR process in order to request reconsideration.

b. You may appeal the decision within 10 business days of receiving the DO’s denial of the request for reconsideration.

c. (For bargaining unit members) You may elect to file a negotiated grievance in accordance with (provide applicable collective bargaining agreement information to include appropriate timeframes).

d. You also have the right to initiate an Equal Employment Opportunity (EEO) complaint pursuant to 29 CFR 1614. To initiate an EEO complaint, you must contact (provide EEO Counselor contact information) within 45 calendar days from your receipt of this notification.

Unless noted as an exception above, you must file a request for ADR, reconsideration, appeal, negotiated grievance or a discrimination complaint within the applicable timeframes for it to be considered a timely filing.

4. If you are eligible, you also have the option of applying for disability retirement. For further information regarding this option, please contact (provide contact information).
5. If you are unable to perform the essential functions of your position, even with the offer of assistance described in paragraph 3 above, appropriate administrative action up to and including your removal may be taken.
ATTACHMENT F
GUIDANCE FOR REQUESTING MEDICAL DOCUMENTATION

When a disability and/or need for accommodation is not obvious or otherwise already known, reasonable documentation may be required to support the existence of a disability and the need for the accommodation requested. This documentation must come from an appropriate medical professional to explain the nature of the disability and the need for reasonable accommodation, or to clarify how the requested accommodation will assist the employee to perform the essential functions of the job.

The Disability Program Manager must consider medical information that the employee’s physician(s) may provide to determine job-related limitations and how they could be overcome.

Other important sources of information that will assist in determining the employee’s abilities and limitations include: past medical records, current medical examinations, and work history.

The following information must be provided, in writing, by the employee’s first-level supervisor to the employee’s health professional to assist them in providing the required medical documentation:

- Description of the nature of the job.
- Description of the essential functions of the job.
- Any other information that is relevant to evaluating the request for accommodation.

If the information provided by the employee’s health professional is not sufficient to substantiate that the individual has a disability and/or needs the reasonable accommodation requested, supplemental medical information may be required including if appropriate, examination by a medical specialist of the Bureau’s choosing and expense.

Medical information obtained in connection with the reasonable accommodation process must be kept confidential. Mishandling of information relating to an individual’s disability or medical condition may constitute a violation of the Privacy Act and/or the Rehabilitation Act for which the Bureau may be liable for damages. Supervisors and managers who have a need to know the information to perform their responsibilities may be told about the necessary medical restrictions or the need for accommodations, but medical information should be disclosed only when necessary.
MEMORANDUM

From: (Supervisor)
To: (Employee)

Subject: REQUEST FOR CURRENT MEDICAL DOCUMENTATION

Reference: (a) Rehabilitation Act of 1973
(b) Americans with Disabilities Act (ADA) of 1990
(c) DON CHRM Subchapter 1606

Enclosure: (1) Position Description
(2) Permission to Release Medical Documentation

1. The purpose of this memorandum is to request information regarding your current medical condition and its impact on your ability to perform the duties of your position as a Job Title, Pay Plan-Series-Grade, in the organizational title. This information will assist me in determining the Bureau’s obligation to provide you reasonable accommodation in accordance with references (a) through (c) and to assist me in making informed decisions regarding your employment status.

2. Paragraph 2 should contain a narrative summary of events leading to the request for additional medical documentation. For example: On (date), you provided me a copy of a return to work certificate, which placed the following temporary restrictions on your work: “no heavy lifting of more than 30 lbs., no climbing up ladders or general ship board work for 2 weeks.” On (date) you submitted a letter from your doctor, Dr. ________ dated ________. In their letter, Dr. ________ states that you are suffering from high blood pressure and degenerative joint disease. They recommend that “the following action be taken to minimize further exacerbation of these conditions: (a) Prolonged standing or walking should be avoided; (b) Undue stress to knee such as but not limited to, working aboard boats or ships, step or ladder climbing and walking or climbing in sand or uneven surfaces should absolutely be avoided; (c) Carrying of heavy equipment should be limited or avoided.” Dr. ________ further recommended that you “not be assigned to projects that would result in any of the above-related conditions, as this would contribute to further exacerbation and deterioration of his knees.”

3. “Reasonable Accommodation” refers to changes in the work environment or in the way that things are customarily done that would enable an individual with a disability to perform the essential functions of their position and remain productively
employed. Accommodations may include, but are not limited to: making facilities readily accessible or usable by individuals with a disability, job restructuring, modification of work schedules, acquisition or modification of equipment or other similar actions.

4. Federal agencies are required to provide reasonable accommodation to employees and applicants that meet the criteria of a qualified disabled employee as outlined in references (a) through (c) unless the Bureau can show that the accommodation that has been requested would be overly burdensome to the Bureau. It should be noted that an entitlement to accommodation requires more than a documented medical condition or diagnosed disability.

5. Entitlement to accommodation is dependent on an employee meeting the criteria of a "qualified individual with a disability" under the ADA. The ADA defines a "qualified individual with a disability" as a person having a physical or mental impairment that substantially limits one or more major life activities (i.e., activities an average person would be able to perform, such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, or working). Furthermore, the accommodation that is requested must be of a nature that would enable an applicant or employee to perform the essential functions of the position and remain productively employed. To meet the criteria of a "qualified individual with a disability" the employee must be able to perform the essential duties of the position either with or without accommodation. Employees who do not meet the definition of a "qualified individual with a disability" under the ADA do not have a specific entitlement to accommodation.

6. In order for me to make an informed decision regarding your employment status, I am requesting that you provide your physician's medical opinion on the following. I am also providing a copy of this letter to Dr. ________ so they will be aware of the information that is needed.

a. The nature, severity, and duration of your medical condition and physical impairment;
b. Explanation of the impact of your medical condition on your activities both on and off the job;
c. The extent to which your impairment(s) limits your ability to perform an activity or activities;
d. Explanation whether the impairment is or can be controlled by medication or other medical intervention;
e. Estimate of expected date of full or partial recovery;
f. On the basis of their medical expertise and knowledge of your position from the information provided, an assessment of your ability to successfully perform the essential functions (see below) of your position, with or without accommodation;
ATTACHMENT G (CONTINUED)

g. If an accommodation is required, the particular accommodation requested, with explanations as to how the accommodation will assist you in performing the essential functions of your position.

7. The Health Insurance Portability and Accountability Act of 1996 (HIPAA), which became effective on April 14, 2003, imposes new requirements on medical providers, employers, health plans and plan administrators to ensure that your individual medical and health information is kept confidential. In adhering to this regulation, your health provider will not release medical documentation without your permission. In order for this office to obtain the required medical documentation, it is requested you complete the enclosed form and return it to me.

8. The following information regarding the essential functions and physical requirements of your position as Title, Pay Plan-Series-Grade is provided to assist your physician in responding to these questions. The organizational title is responsible for insert mission of employee’s department, division, or section. As a job title in the department, division branch or section, the essential functions of your position require you to insert physical requirements of the position, i.e., travel, climbing, lifting etc. A summary of the essential functions of your position is as follows:

   a. Insert essential functions
   b. 
   c. 
   d. 
   e. 
   f. 
   g. 

The physical demands of your position are summarized in your position description, enclosure (1). In the position description it indicates that the work requires (insert actual physical tasks required of the position, i.e., considerable and strenuous physical exertion, requires long periods of standing, recurring bending, crouching, stooping, or recurring lifting of moderately heavy items (50 pounds), transport to and from ships by helicopter, etc.).

9. It is imperative that the Bureau receive a response to this request for information to assess and address your entitlement to reasonable accommodation. Please forward this information to (identify POC) by (date) at the following address:

   Disability Program Manager
   Bureau of Engraving and Printing
   13th C Street SW, Rm. 639-12A
   Washington, DC 20228
10. If you have any questions or concerns, please contact ___________________, Office of Equal Opportunity and Diversity Management, at ________.

Disability Program Manager’s signature

Copy to:
Dr. ____________
ATTACHMENT H
SAMPLE CONSENT TO RELEASE MEDICAL INFORMATION

By my signature on this document, I give permission to (name of personal physician) to release medical information to the following authorized Bureau officials, (identify the specific officials who will have access to the medical information), in order to respond to my request for reasonable accommodation.

Signature: ____________________________ Date: ________________
ATTACHMENT I

GUIDANCE FOR DETERMINING THE ESSENTIAL FUNCTIONS OF A POSITION

The essential functions of a job are those functions that define the job. In other words, the job exists to perform those tasks. The essential functions of a job are not the marginal or infrequently performed tasks that could be eliminated without altering the fundamental nature of the job.

A job function may be considered essential for several reasons, including but not limited to, the following:

- The function may be essential because the position exists to perform that function.
- The function may be essential because of the limited number of employees available to whom the performance of the job function can be distributed.
- The function may be highly specialized so that the incumbent in the position is hired for their expertise or ability to perform the particular function.

Some examples of essential functions:

1. An electronics technician whose primary duty is servicing radar. An essential function would be the requirement to climb radar equipment.

2. A photographer whose primary duty is to photograph test events. Essential functions might include the requirement to travel, to climb ladders aboard ship and to transport equipment weighing up to 50 pounds each.

Evidence of whether a particular function is essential includes, but is not limited to, the following:

- The employer’s judgment regarding a determination as to which functions are essential.
- Written job descriptions.
- The amount of time spent performing the function.
- The consequences of not requiring the incumbent to perform the function.
- The terms of a collective bargaining agreement.
• The work experience of past incumbents in the job.

• The current work experience of incumbents in a similar job.

• Actual duties performed by a person holding the job.

The essential functions of the job are determined on a case-by-case basis. Do not presume that any two jobs are necessarily alike. For example, the actual responsibilities of an electrician may vary depending on the tour, operation, size, age and configuration of the facility.

Job descriptions and job announcements can assist you in determining the essential functions of the job. However, these may only generically describe the requirements of the job. It may be necessary to interact with others to ascertain beyond written descriptions the actual essential functions of the particular job at your facility.

Involvement of the employee by asking questions such as:

1. At the present time, the essential functions are performed in this manner. Can you tell us how you could achieve the same results using a different method?
2. This equipment is used on a regular basis in this manner. Can you describe how you would use it in a different manner to complete required tasks?
3. Historically, this job has been done using this sequence and method. Do you feel you could accomplish the same results in this or in another way within your limitations?
4. This is the normal arrangement of the work area. Do you have any suggestions regarding changes or modifications that may be necessary to enable you to perform the job?

Sometimes an accommodation involves a job restructuring or altering the non-essential requirements of a particular job. The law, however, does not require change or alteration of the essential functions of a job.
ATTACHMENT J

GUIDANCE FOR THE INTERACTIVE PROCESS BETWEEN THE SUPERVISOR AND EMPLOYEE

Information obtained during interactive discussions will assist in making the determination whether the employee is a qualified individual with a disability. Interactive discussions may also be useful in determining if additional medical documentation is necessary, obtaining information about the essential functions of the position and how they can be performed, the appropriate accommodation if the employee is found to be a qualified individual with a disability, the parameters of a job search (if applicable), etc.

Interactive discussions between the supervisor and the employee should be used to obtain the following information in order to assess the disability claim: (NOTE: The interactive process is usually between the supervisor and the employee. However, under certain circumstances, the assistance of the Disability Program Manager may be needed to engage in the interactive process with the employee.)

1. Does the person claim that they have a present physical or mental impairment? If so, what is the impairment?

The employee should be asked to describe the impairment in some detail, if it is not otherwise obvious (i.e., the individual is blind or deaf or uses a wheelchair, etc.).

2. Does the impairment substantially limit a major life activity?

The employee should be asked to describe the limitation(s) in detail.

An impairment substantially limits a major life activity if that impairment renders the individual either unable to perform a major life activity or significantly restricts their performance of that activity as compared to the average person’s performance of the activity. Not all medical conditions are substantially limiting. A person with broken bones or a sprained ankle does not have a permanent or long-term impairment because the condition will heal within a reasonable time. In addition, if an individual employs measures to mitigate their impairment (e.g., medication, eyeglasses), the effect of those measures should be considered in determining whether an impairment is substantially limiting as to that individual. Furthermore, some permanent impairments may not substantially limit a major life activity.

The employee should be asked if they employ any measures that may mitigate their impairment.

Major life activities include such obvious characteristics as hearing, seeing, walking, speaking, breathing, caring for oneself, performing manual tasks, and working.
Generally, a major life activity is something of fundamental significance within the meaning of the Rehabilitation Act and not simply an activity important to a particular individual. Major life activities do not include activities such as swimming, shopping, or enduring physical stress. It is important to note that where individuals claim that they are limited in the major life activity of working, they must show that they are significantly restricted in their ability to perform either a class of jobs, or a broad range of jobs in various classes, as compared to the average person of comparable training, skills, and abilities. Generally this requirement could not be met simply by asserting inability to work in any particular job for a particular employer.

If the individual’s impairment substantially limits a major life activity, the person should be asked to describe the limitation(s) in some detail.

If the individual establishes they have a present physical or mental impairment that substantially limits a major life activity, they establish that they have a disability as that term is defined under the Rehabilitation Act. If they are unable to establish that they have a disability, there is no obligation under the Rehabilitation Act to provide an accommodation.

ATTACHMENT J (CONTINUED)

3. Is the person “qualified?”

If the individual establishes that they have a disability, it must then be determined whether they:

(1) Satisfy the requisite skill, experience, education and other job-related requirements of the job, and

(2) Can perform the “essential functions of the job,” with a reasonable accommodation or without a reasonable accommodation. Involve the employee by asking questions such as:

(a) At the present time, the essential functions are performed in this manner. Can you tell us how you can achieve the same results using a different method?

(b) This equipment is used on a regular basis in this manner. Can you describe how you would use it in a different manner to complete required tasks?

(c) Historically, this job has been done using this sequence and method. Do you feel you could accomplish the same results in this or in another way within your limitations?
(d) This is the normal arrangement of the work area. Do you have any suggestions regarding changes or modifications that may be necessary to enable you to perform the job?

Remember that in making a determination as to whether or not the individual is "qualified," they must meet these two criteria as they relate to either their present job or the job they are seeking (either as an applicant or through the accommodation of last resort; reassignment).

4. What accommodation has the employee requested?

Determine from the employee or applicant what they think is needed to enable them to perform the job. You will need to consult with Human Resources, safety and/or medical personnel, as appropriate, to determine whether the employee's proposed accommodation is feasible and whether other accommodations can be made. Consider the individual's preferences and the effectiveness of each accommodation and its cost. Select the most appropriate for both management and the individual. The chosen accommodation need not be the best or most expensive or even the one preferred by the individual. The accommodation must, however, be reasonable and enable the individual to perform the essential functions of their position. The employer makes the ultimate decision as to what accommodations, if any, will be adopted.
When the employee is issued the letter notifying them that they cannot be accommodated in their current position, an interactive dialogue must take place between the employee and supervisor to document the employee’s understanding of the following information. The results of the dialogue must be documented in writing and should be signed/acknowledged by the employee.

• Advise the employee of their options for:
  ➢ Reassignment,
  ➢ Disability retirement, or
  ➢ Removal for inability to perform.

The employee must be asked the following questions with respect to the option of reassignment:

• If no positions within the Bureau are found, are they willing to accept a reassignment at another Bureau within Treasury and/or geographic area in the commuting area? Yes _____ No _____

The employee must be advised that if the option of reassignment is selected:

• Relocation costs may be at their expense.
• An up-to-date resume is critical for this process.
• They are responsible for submitting an up-to-date resume.
• Qualifications for vacant positions will be determined based on their current series and grade if an up-to-date resume is not submitted.
• May result in a voluntary change-to-lower grade.
• They understand that they will be referred only to those geographical areas for which they have indicated a preference.
• They may provide their job preferences, if any.
  (NOTE: The employee should be advised that identification of job preferences does not guarantee their availability for placement purposes.)
ATTACHMENT L

RESOURCES

US Equal Employment Opportunity Commission
1-800-669-3362 (Voice); 1-800-800-3302 (TT)

The EEOC Publication Center has many free documents on the Title I employment provisions of the ADA, including both the statute, 42 USC 12101 et seq. (1994), and the regulations, 29 C.F.R. 1630 (1997). In addition, the EEOC has published a great deal of basic information about reasonable accommodation and undue hardship. The two main sources of interpretive information are:

(1) The Interpretive Guidance accompanying the Title I regulations (also known as the "Appendix" to the regulations), 29 C.F.R. pt. 1630 app. 1630.2(o), (p), 1630.9 (1997), and


EEOC also has discussed issues involving reasonable accommodation in the following guidance and documents:

(1) Enforcement Guidance: Pre-employment Disability-Related Questions and Medical Examinations at 5, 6-8, 20, 21-22, 8 FEP Manual (BNA) 405:7191, 7192-94, 7201 (1995);

(2) Enforcement Guidance: Workers' Compensation and the ADA at 15-20, 8 FEP Manual (BNA) 405:7391, 7398-7401 (1996);


(4) Fact Sheet on the Family and Medical Leave Act, the Americans with Disabilities Act, and Title VII of the Civil Rights Act of 1964 at 6-9, 8 FEP Manual (BNA) 405:7371, 7374-76 (1996); and

Policy Guidance on Executive Order 13164: Establishing Procedures to Facilitate the Provision of Reasonable Accommodation

Enforcement Guidance: Reasonable Accommodation and Undue Hardship Under the ADA (as revised, 10/17/02)

Enforcement Guidance: Disability-Related Inquiries & Medical Examinations of Employees Under the ADA

Policy Guidance on Executive Order 13145: To Prohibit Discrimination in Federal Employment Based on Genetic Information

Enforcement Guidance on the ADA and Psychiatric Disabilities

Enforcement Guidance: Workers' Compensation & the ADA

Enforcement Guidance: Pre-employment Disability-Related Questions & Medical Examinations

Compliance Manual Section 902: Definition of the Term Disability

FMLA, ADA, and Title VII

Q&A: Intellectual Disabilities in the Workplace & the ADA

Q&A: Epilepsy in the Workplace & the ADA

Q&A: Diabetes in the Workplace & the ADA

Job Applicants and the ADA

Telework as a Reasonable Accommodation

The ADA: A Primer for Small Business
ATTACHMENT L (CONTINUED)

Obtaining and Using Employee Medical Information as Part of Emergency Evacuation Procedures

Evacuation

All of the above-listed documents, with the exception of the ADA Technical Assistance Manual and Resource Directory, are also available through the Internet at EEOC

Job Accommodation Network (JAN)
1-800-526-7234 (Voice/TT)
JAN.

A service of the President's Committee on Employment of People with Disabilities. JAN can provide information, free-of-charge, about many types of reasonable accommodations.

ADA & IT Technical Assistance Centers (DBTACs)
1-800-949-4232 (Voice/TT)
ADA TA

The DBTACs consist of 10 federally funded regional centers that provide information, training, and technical assistance on the ADA. Each center works with local business, disability, governmental, rehabilitation, and other professional networks to provide current ADA information and assistance, and places special emphasis on meeting the needs of small businesses. The DBTACs can make referrals to local sources of expertise in reasonable accommodations.

Registry of Interpreters for the Deaf
703-838-0030 (Voice)
703-838-0459 (TTY)
RID

The Registry offers information on locating and using interpreters and transliteration services.

RESNA Technical Assistance Project
703-524-6686 (Voice) (703) 524-6639 (TTY)
RESNA TA Project

RESNA, the Rehabilitation Engineering and Assistive Technology Society of North America, can refer individuals to projects in all 50 states and the six (6) territories offering technical assistance on technology-related services for individuals with disabilities. Services may include:
(1) Information and referral centers to help determine what devices may assist a person with a disability (including access to large data bases containing information on thousands of commercially available assistive technology products);

(2) Centers where individuals can try out devices and equipment;

(3) Assistance in obtaining funding for and repairing devices; and

(4) Equipment exchange and recycling programs.

Department of Defense Computer/Electronic Accommodation Program (CAP)
703-681-3976 (Voice)
703-681-8814 (T)
703-681-0881 (TTY)

CAP provides assistive technology devices and services for employees with disabilities.