



OPERATIONAL INSTRUCTION

Court Services and Offender Supervision Agency
Pretrial Services Agency
For the District of Columbia
Office of Human Resources
Office of Human Capital Management

Reasonable Accommodation

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Overview

Introduction

Policy Statement (PS) 0820 provides overall guidance to ensure that the Court Services and Offender Supervision Agency and the Pretrial Services Agency for the District of Columbia (collectively, the Agency), fully comply with the Rehabilitation Act of 1973, as amended, and provides equal employment opportunities for employees and applicants without regard to disability. This Operational Instruction (OI) provides all personnel who are employed by or apply for positions at CSOSA or PSA with procedures to operationalize PS 0820. Both the policy and operational instruction, including any forms, are provided to employees and applicants in written and accessible formats, upon request.

Requests for reasonable accommodation are processed promptly. A decision to approve or deny an accommodation is made no later than thirty (30) business days from the receipt of an oral or written request, absent extenuating circumstances.

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Reasonable Accommodation Requests

Introduction

The Agency accepts requests for reasonable accommodation from an employee, an applicant, or a representative acting on the employee's or applicant's behalf. Requests are accepted for both permanent disabilities and those that may be transient in nature (e.g., post-surgery mobility issues, severe medical conditions, etc.). The requestor does not have to mention the Rehabilitation Act, use the phrase "reasonable accommodation," or use any particular words when requesting a reasonable accommodation. Requests can be made orally or in writing.

The table below identifies the individuals authorized to receive requests. The employee or applicant may contact the Reasonable Accommodation Coordinator (RAC) to track the processing of open requests.

Employee makes request to (select one):	Applicant makes request to (select one):
His/her first-level supervisor	Human resources specialist identified in the vacancy announcement
RAC	RAC
A supervisor or manager in his/her immediate chain of command	Any Agency employee with whom the applicant has contact

Note: Any supervisor or manager receiving what appears to be a request for a reasonable accommodation must contact the RAC immediately.

- Requests for reasonable accommodation are processed promptly. A decision to approve or deny an accommodation is made no later than thirty (30) business days from the receipt of an oral or written request, absent extenuating circumstances. When a particular reasonable accommodation can be provided in less than thirty (30) business days, failure to do so may result in a violation of the Rehabilitation Act. Requestors are provided with a written notice at the time of the Agency's decision (approval or denial) and in an accessible format, when requested.
- The Agency requires the requestor to complete a Reasonable Accommodation/Acknowledgement Form (Request Form - Appendix A) for recordkeeping purposes. The lack of a Request Form will not delay the processing of the request.

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Reasonable Accommodation Requests, Continued

Introduction, continued

- The processing of a request for reasonable accommodation is expedited when the request is time-sensitive. Examples of time-sensitive requests include, but are not limited to:
 - Reasonable accommodation is needed to enable an individual to apply for a job; and
 - Reasonable accommodation is needed for a specific Agency activity that is scheduled to occur in less than thirty (30) business days.
 - The duty to provide reasonable accommodation is an on-going one. When an individual requests a type of accommodation that will be needed on a repeated basis (e.g. a sign language interpreter, readers, etc.), the Agency does not require the requestor to submit a request for each time the accommodation is needed. Once an accommodation is approved for the first time, the employee may obtain the accommodation by notifying the appropriate individual or office (e.g. first-level supervisor, OHR, OIT, etc.).
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Decision Maker

Introduction

As one of the first steps in the interactive process, the RAC identifies the Decision Maker (DM) responsible for handling the request for reasonable accommodation. The nature of the request determines the DM. The first-level supervisor is the DM for many requests for reasonable accommodation. When the DM is not the first-level supervisor, he/she is always engaged in the interactive process by the RAC.

The nature of the request also determines if and when the RAC engages leadership in the DM's chain of command and/or other Agency components in the interactive process. For example, the Office of Human Resources (OHR) is the DM when the request is for a sign language interpreter. OHR and the RAC consult and coordinate with the Office of Financial Management and the Office of Administration when considering the feasibility and the implementation of the request.

CSOSA Decision Maker

The table below specifies the CSOSA DM for the following specific requests.

Request	DM
Applicants	Deputy Associate Director of Human Resources (DAD OHR)
Accessible (handicapped) parking, Removal of Architectural Barriers, Office Furniture (e.g., standing desks, ergonomic furniture, etc.)	Office of Administration (OA)
Personnel Actions	Component Associate Director(s), Director, Office Head, or Manager
Adaptive Equipment (e.g., IT and communications equipment)	Office of Information Technology (OIT)
Readers, sign language interpreters, Alternative Format Material (e.g., Braille, large print)	Office of Human Resources (OHR)

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Decision Maker, Continued**PSA****Decision Maker**

The table below specifies the PSA DM for the following specific requests.

Request	DM
Applicants	Deputy Assistant Director, Office of Human Capital Management (DAD OHCM)
Accessible (handicapped) parking, Removal of Architectural Barriers, Office Furniture (e.g., standing desks, ergonomic furniture, etc.)	Office of Finance and Administration
Personnel Actions	Deputy Assistant Director(s)
Adaptive Equipment (e.g., IT and communications equipment)	Office of Information Technology
Readers, sign language interpreters, Alternative Format Material (e.g., Braille, large print)	Office of Human Capital Management

Interactive Process

Introduction

The interactive process is a collaborative, information-gathering approach used to evaluate a request for reasonable accommodation. It centers on communication between the DM, the requestor, and the RAC to gather information necessary to make an informed decision about:

- Whether the requestor is a qualified individual with a disability; and
- Which, if any, reasonable accommodation(s) will effectively eliminate the barrier(s) identified by the requestor.

The method of communication varies based on the circumstances and needs, and may be conducted via e-mail, phone, in-person, and meetings, etc.

The interactive process begins when the request for reasonable accommodation is made and continues throughout the processing of the request. It requires the active participation of the requestor, RAC, DM, and first-level supervisor (if not DM).

RAC's Role

Facilitates the interactive process by:

- Engaging the requestor, DM, first-level supervisor (if not DM), and other relevant Agency officials in the interactive process;
 - Clarifying the specific limitation, problem, or barrier, if unclear;
 - Identifying and exploring:
 - Effective reasonable accommodations; and
 - Temporary arrangements, as applicable;
 - Advising the DM on responding to the request;
 - Ensuring that the official who grants or denies requests for reasonable accommodation (DM) or who makes hiring decisions:
 - Knows how to arrange for the use of all resources available to the Agency as a whole to provide the reasonable accommodation, including any centralized funds the Agency may have for the purpose; and
 - Is aware that to deny an accommodation based on cost, the official must consider all resources available to the Agency as a whole excluding those designated by statute for a specific purpose that does not include reasonable accommodation.
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Interactive Process, Continued

Requestor's Role

Participates in the interactive process by communicating the following, if and when necessary:

- The nature, severity, and duration of the impairment;
 - The activity or activities that the impairment limits:
 - What functional limitations are being experienced (e.g., walking, lifting, sitting, standing, concentrating, etc.);
 - The extent to which the impairment limits the individual's ability to perform the activity or activities;
 - The reasons the individual requires a reasonable accommodation or a particular reasonable accommodation:
 - How these limitations affect the individual and the individual's job performance; and
 - What specific job tasks are problematic as a result of these limitations;
 - The ways the reasonable accommodation will assist the individual in:
 - Applying for the job;
 - Performing the essential functions of the job; or
 - Enjoying a benefit of the workplace;
 - Alternative accommodations that may be effective in meeting the individual's accommodation needs; and
 - Mitigating measures (e.g., medication, schedule adjustments, etc.).
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DM & First- Level Supervisor's (if not DM) Role

Participates in the interactive process by:

- Clarifying the specific limitation, problem, or barrier, if unclear; and
 - Identifying and exploring:
 - Effective reasonable accommodations; and
 - Temporary arrangements, as applicable.
-

Initiating the Interactive Process: Requesting a Reasonable Accommodation

Process for Requesting a Reasonable Accommodation

The table below identifies who is responsible and what happens during each stage of Initiating the Interactive Process: Requesting a Reasonable Accommodation.

Note: If the RAC is the Receiving Official (RO), he/she completes stages 2, 4, and 5. In stage 2, the RAC completes the entire Request Form, including the Acknowledgement and Next Step sections.

Stage	What Happens	
1	Requestor makes oral or written request for a reasonable accommodation.	
2	RO receives the request.	
	If the request is...	Then the RO...
	oral	<ul style="list-style-type: none"> • asks whether a reasonable accommodation is being requested, if the nature of the communication is unclear; • completes the following on the Request Form: <ul style="list-style-type: none"> – Sections 1, 2 and 5-8; and – Acknowledgement and Next Step sections; • provides a copy of the Request Form to the requestor; and • instructs the requestor to submit the completed Request Form to the RAC for recordkeeping purposes.
	written	<ul style="list-style-type: none"> • completes the Acknowledgement and Next Step sections of the Request Form; and • provides a copy of the Request Form to the requestor.
3	RO: <ul style="list-style-type: none"> • Communicates the request to the RAC within two (2) business days; and • Forwards the Request Form and any supporting information provided by the requestor to the RAC. <p>Note: The RO is prohibited from retaining any documents or copies of documents containing medical information. All such documents must be forwarded to the RAC.</p>	

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Initiating the Interactive Process: Requesting a Reasonable Accommodation, Continued

Process for
Requesting a
Reasonable
Accommodation,
continued

Stage	What Happens
4	<p>RAC:</p> <ul style="list-style-type: none">• Reviews the Request Form and any supporting information; and• Identifies the decision maker (DM) responsible for handling the request and the requestor's first-level supervisor (if not DM).
5	<p>RAC contacts the requestor to:</p> <ul style="list-style-type: none">• Review the Request Form and clarify information, as needed;• Determine if the request is time-sensitive;• Review the Agency's reasonable accommodation process and time-frames;• Identify him/herself as the point of contact to track the processing of open requests; and• Discuss if any additional information is needed, and/or identify next steps. <p>Note: The RAC completes the Request Form if the request was made orally and a completed Request Form is not available at the time of initial contact.</p>

Interactive Process: Medical Information

Introduction

The Agency is entitled to know that a requestor has a disability that requires a reasonable accommodation. When a disability and/or need for reasonable accommodation is not obvious or known, it is the responsibility of the requestor to provide appropriate medical information related to the functional impairment(s) at issue.

The Agency requests supplemental medical information when the information already submitted is insufficient to document the disability, the functional limitation(s) it causes, and/or the relationship to performing the essential functions of the job. The Agency only requests medical information that is reasonably necessary to establish that the requestor is an individual with a disability and needs a reasonable accommodation. When medical information is required to support a reasonable accommodation request, it must:

- Describe the nature of the individual's disability;
- His or her need for reasonable accommodation; and
- How the reasonable accommodation, if any, will assist the individual to:
 - Apply for a job;
 - Perform the essential functions of a job; or
 - Enjoy the benefits and privileges of the workplace.

All medical information is maintained in accordance with [5 C.F.R. Part 293, Subpart E - Employee Medical File System Records](#).

The Agency may deny a request for reasonable accommodation if the requestor fails to provide the necessary medical information.

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Interactive Process: Medical Information, Continued

Process for Obtaining Medical Information

The table below describes who is responsible and what happens during each stage of obtaining medical information.

Stage	What Happens
1	<p>RAC:</p> <ul style="list-style-type: none"> Communicates with the requestor: <ul style="list-style-type: none"> The reasons medical information is needed and/or available medical information is inadequate; and Identifies the information needed; Provides a copy of the Medical Form (Appendix B); and Provides a time frame for submitting the requested information.
2	<p>Requestor:</p> <ul style="list-style-type: none"> Submits a completed Medical Form from a health care professional (e.g., doctor, social worker, rehabilitation counselor, etc.) to the RAC; and/or Provides a limited medical release. <p>Note: Time-frame for processing a request for reasonable accommodation is suspended pending the RAC receiving the requested medical information.</p>
3	<p>RAC:</p> <ul style="list-style-type: none"> Reviews the completed Medical Form; May consult with Federal Occupational Health (FOH) or Agency's contract physician(s) and/or contact the health care professional (if there's a signed limited medical release); and Makes determination if the requestor is a qualified individual with a disability. <p>Note:</p> <ul style="list-style-type: none"> Supplemental medical information and/or examination by the Agency's contract physician(s) may be requested if medical information is insufficient. The Agency's right to have medical information reviewed and examinations conducted by a medical expert of the Agency's choosing will be at the Agency's expense.

Interactive Process: Determining an Effective Reasonable Accommodation

Introduction

Requests for reasonable accommodation are processed promptly. A decision to approve or deny an accommodation is made no later than thirty (30) business days from the receipt of an oral or written request, absent extenuating circumstances. The Agency has the discretion to choose among effective reasonable accommodations and may provide an alternative reasonable accommodation. Requestors are provided with a written notice of the approval at the time of the Agency's decision and in an accessible format, when requested. Absent extenuating circumstances, the approved reasonable accommodation is provided within ten (10) business days after the decision to grant the accommodation is made or no later than forty (40) business days, whichever occurs sooner.

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Interactive Process: Determining an Effective Reasonable Accommodation, Continued

Process for Determining an Effective Reasonable Accommodation

The table below identifies who is responsible and what happens during each stage of the *Interactive Process: Determining an Effective Reasonable Accommodation.*

Stage	What Happens
1	<p>RAC:</p> <ul style="list-style-type: none"> • Provides requestor's job related functional limitations to DM and first-level supervisor (if not DM), to assist in evaluating requestor's disability-related needs, as appropriate; • Identifies and engages other relevant Agency officials, only as appropriate, in the interactive process; • Researches and provides recommendations on potential reasonable accommodations to the DM, as appropriate; • Ensures that the official who grants or denies requests for reasonable accommodation (DM) or who makes hiring decisions: <ul style="list-style-type: none"> – Knows how to arrange for the use of all resources available to the Agency as a whole to provide the reasonable accommodation, including any centralized funds the Agency may have for the purpose; and – Is aware that to deny an accommodation based on cost, the official must consider all resources available to the Agency as a whole excluding those designated by statute for a specific purpose that does not include reasonable accommodation; • Continues to engage the Requestor, as appropriate, to clarify issues, discuss potential reasonable accommodations, etc.; • Ensures that the recommendations: <ul style="list-style-type: none"> – Meet the requestor's disability-related needs; – Do not eliminate essential functions of the position; – Are effective and reasonable; and – Do not pose an undue hardship.

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Interactive Process: Determining an Effective Reasonable Accommodation, Continued

Process for
Determining an
Effective
Reasonable
Accommodation,
continued

Stage	What Happens	
2	If the DM...	Then the ...
	grants the requested reasonable accommodation	DM: <ul style="list-style-type: none"> • provides a copy of the Approval Decision Form (Appendix C) to the requestor; and • forwards a copy of the Approval Decision Form to the RAC and first-level supervisor (if not DM).
	provides an alternative reasonable accommodation	DM & RAC document the following information on the Approval Decision Form: <ul style="list-style-type: none"> • the approved alternative reasonable accommodation; • the reason(s) for denial of requested reasonable accommodation; and • the reason(s) why the alternative reasonable accommodation will be effective. DM: <ul style="list-style-type: none"> • provides a copy of the Approval Decision Form (Appendix C) to the requestor; and • forwards a copy of the Approval Decision Form to the RAC and the first-level supervisor (if not DM). <p>Note: The requestor has option to decline the approved alternative reasonable accommodation (see Approval Decision Form).</p>
3	RAC assists the DM in providing the approved reasonable accommodation, as needed.	

Interactive Process: Reassignment

Introduction

A reassignment is a “last resort” reasonable accommodation and is considered only when:

- There are no effective accommodations that would enable the employee to perform the essential functions of his/her current job; and
- All other possible accommodations would impose undue hardship.

The Agency is not required to remove an essential job function, lower a performance or production standard, create a new position for the employee, or reassign or move another employee to create a vacancy.

A reassignment is subject to the needs of the Agency and is made only to a vacant, funded, same, or lower-graded position. If the employee is qualified for such a position, he/she will not have to compete for it.

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Interactive Process: Reassignment, Continued

Process for Considering Reassignment

The table below identifies who is responsible and what happens during each stage of the *Interactive Process: Reassignment*.

Stage	What Happens
1	DM, RAC, and first-level supervisor (if not DM) determine: <ul style="list-style-type: none"> • The requestor can no longer perform the essential functions of his/her current job without an accommodation; and • The accommodation needed for requestor to remain in his/her current job is not effective in that it would require: <ul style="list-style-type: none"> – Removal of an Essential Function; – Lowering of Performance Standard; – Lowering of Production Standard; and/or – Undue Hardship.
2	RAC engages the Agency official(s) who can determine whether reassignment is an option.
3	Human Resource Specialists and the Agency officials take the following actions sequentially: <ol style="list-style-type: none"> 1. Identify any vacant, funded, same-graded positions for which the requestor is qualified with or without a reasonable accommodation. <p><i><u>If no position is currently available, then...</u></i></p> <ol style="list-style-type: none"> 2. Identify any vacant, funded, lower-graded positions for which the requestor is qualified with or without a reasonable accommodation.
4	If a position is available, the DM and Agency officials offer reassignment as an alternative reasonable accommodation.

Interactive Process: Denial of a Reasonable Accommodation

Introduction

Requests for reasonable accommodation are processed promptly. A decision to approve or deny an accommodation is made no later than thirty (30) business days from the receipt of an oral or written request, absent extenuating circumstances. The Agency provides reasonable accommodations that are consistent with applicable laws and regulations. When denying a request for reasonable accommodation based on cost, the Agency considers the resources available to the Agency (CSOSA and PSA) as a whole, excluding those designated by statute for a specific purpose that does not include reasonable accommodation. Requestors are provided with a written notice of the denial at the time of the Agency's decision and in an accessible format, when requested. The written notice identifies the reason(s) for the denial. They include, but are not limited to:

- Requestor declined accommodation offered by the Agency;
- Accommodation is ineffective ;
- Medical documentation is inadequate ;
- Undue hardship; and
- Accommodation would require:
 - Removal of an essential function;
 - Lowering of Performance Standard; and/or
 - Lowering of Production Standard.

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Interactive Process: Denial of a Reasonable Accommodation, Continued

Process for Denying a Reasonable Accommodation

The table below identifies who is responsible and what happens during each stage of the Interactive Process: Denial of a Reasonable Accommodation.

Stage	What Happens
1	DM and RAC document the reason(s) for denial of the reasonable accommodation on the Denial Decision Form (Appendix D).
2	RAC forwards the Denial Decision Form to the Office of General Counsel (OGC) for legal sufficiency review.
3	OGC conducts a legal sufficiency review of the denial to ensure that the denial is consistent with applicable law, regulations, and PS 0820 Reasonable Accommodation.
4	<p>DM provides a copy of the Denial Decision Form to the requestor which includes the following information:</p> <ul style="list-style-type: none"> • The criteria for submitting a reconsideration request; and • The requestor's right to: <ul style="list-style-type: none"> – Alternative Dispute Resolution; and – Formal avenues of redress: <ul style="list-style-type: none"> ▪ Equal Employment Opportunity (EEO); ▪ Grievance Procedure; ▪ Merit System Protection Board (MSPB); and ▪ Office of Special Counsel. <p>DM forwards a copy of the Denial Decision Form to the RAC and the first-level supervisor (if not the DM).</p>

Interactive Process: Extenuating Circumstances

Introduction

Extenuating circumstances are defined as factors that could not reasonably have been anticipated or avoided in advance of the request for reasonable accommodation or limited situations in which unforeseen or unavoidable events prevent prompt processing and delivery of a reasonable accommodation.

Examples of extenuating circumstances include, but are not limited to:

- An employee is away from the duty station for an extended period and unable to determine whether the proposed reasonable accommodation meets the identified needs;
- Purchase of equipment or services takes longer than anticipated due to procurement requirements;
- Equipment is back-ordered (the vendor used by the Agency for goods or services cannot promptly supply the needed goods or services, and another vendor is not immediately available);
- The requestor needs to use the equipment on a trial basis to ensure that it is effective before the Agency purchases it;
- New staff needs to be hired or contracted;
- Accommodation involves the removal of architectural barriers;
- There is an outstanding initial or follow-up request for medical information; and
- Implementation of the accommodation requires union negotiations.

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Interactive Process: Extenuating Circumstances, Continued

Process for Extenuating Circumstances

The table below identifies who is responsible and what happens during each stage of the *Interactive Process: Extenuating Circumstances*.

Stage	What Happens
1	DM, RAC, and first-level supervisor (if not DM) determine that due to extenuating circumstances, there is a delay in: <ul style="list-style-type: none"> • Processing the request for reasonable accommodation; or • Providing an approved reasonable accommodation.
2	DM consults with the RAC to determine if a temporary arrangement is: <ul style="list-style-type: none"> • Warranted; and • Available. <p>Note: The provision of a temporary arrangement is not a finding that a request for reasonable accommodation will be approved.</p>
3	RAC communicates the delay in writing to the requestor: <ul style="list-style-type: none"> • Identifies the reason(s) for the delay; • Approximate duration of the delay; and • Any temporary arrangement available to the requestor. RAC forwards a copy of the communication to the DM and the first-level supervisor (if not DM).
4	RAC: <ul style="list-style-type: none"> • Tracks the delay; • Updates the requestor, as needed and upon request; and • Coordinates with DM and first-level supervisor (if not DM) to monitor the efficacy of any temporary arrangement.

Interactive Process: Reconsideration Request

Introduction

If the Agency denies a request for reasonable accommodation, the requestor may request a reconsideration of the Agency's decision **ONLY** if one or both of the following circumstances applies:

- Requestor has additional medical information; and/or
- Requestor experiences a change in range and severity of symptoms and has corroborating medical information.

A reconsideration request must be submitted to the RAC within ten (10) business days of receiving the Agency's decision to deny the request for reasonable accommodation. The Agency provides a final decision within fifteen (15) business days of receipt of a request for reconsideration. Requestors are provided with a written notice at the time of the Agency's decision (approval or denial) and in an accessible format, when requested.

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Interactive Process: Reconsideration Request, Continued

Process for Reconsideration Request

The table below identifies who is responsible and what happens during each stage of the *Interactive Process: Reconsideration Request*.

Stage	What Happens						
1	<p>Requestor submits to the RAC:</p> <ul style="list-style-type: none"> • Reconsideration request (Request Form); and • Completed Medical Form. <p>Note: The reconsideration request must include the grounds for the reconsideration and supporting documentation.</p>						
2	<p>RAC:</p> <ul style="list-style-type: none"> • Completes the Acknowledgement and Next Step sections of the Request Form; • Provides a copy of the Request Form to the requestor; and • Notifies the DM and first-level supervisor (if not DM) of the reconsideration request. 						
3	<p>RAC:</p> <ul style="list-style-type: none"> • Reviews the Request Form and completed Medical Form; • May consult with FOH or Agency's contract physician; and • Determines if the requestor is a qualified individual with a disability. <table border="1"> <tr> <th>If the requestor is...</th><th>Then the RAC...</th></tr> <tr> <td>a qualified individual with a disability</td><td>initiates <i>Interactive Process: Determining an Effective Reasonable Accommodation</i>.</td></tr> <tr> <td>not a qualified individual with a disability</td><td>initiates <i>Interactive Process: Denial of a Reasonable Accommodation</i>.</td></tr> </table>	If the requestor is...	Then the RAC...	a qualified individual with a disability	initiates <i>Interactive Process: Determining an Effective Reasonable Accommodation</i> .	not a qualified individual with a disability	initiates <i>Interactive Process: Denial of a Reasonable Accommodation</i> .
If the requestor is...	Then the RAC...						
a qualified individual with a disability	initiates <i>Interactive Process: Determining an Effective Reasonable Accommodation</i> .						
not a qualified individual with a disability	initiates <i>Interactive Process: Denial of a Reasonable Accommodation</i> .						

Other Processes Available to the Requestor

Introduction

If the requestor is dissatisfied with the provided reasonable accommodation or after a request for reasonable accommodation has been denied, he/she may elect to use other informal and/or formal avenues for redress.

Informal Remedy

Alternative Dispute Resolution (ADR) provides a non-adversarial, confidential method for resolving workplace disputes. As a general rule, the Agency participates in ADR if it is requested. Participating in ADR is voluntary and is in addition to the requestor's right to formal remedies, including statutory claims processes and applicable negotiated grievance procedures.

Note: Participating in ADR does not satisfy the requirements for, extend, or otherwise affect the time limits for initiating statutory claims or applicable negotiated grievance procedures.

Formal Remedies

Requestor may elect to pursue one of the following statutory claims or applicable negotiated grievance procedures for redress. ***Only one avenue of remedy may be pursued.*** If more than one avenue is pursued, the requestor will be deemed to have exercised his/her preference for whichever filing occurs first.

- EEO:
 - The requestor must initiate informal counseling within forty-five (45) calendar days of receiving the Agency's final decision.
 - Negotiated Grievance Procedures:
 - If applicable, the requestor must file a written grievance per the relevant provisions of the Collective Bargaining Agreement.
 - Merit Systems Protection Board:
 - The requestor must file within thirty (30) calendar days of an appealable adverse action as defined in [5 C.F.R. §1201.3](#).
 - Office of Special Counsel (OSC):
 - The requestor must file with OSC if a denial of reasonable accommodation is part of a prohibited personnel practice, as defined in [5 U.S.C. § 2302 \(b\)](#).
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Monitoring

Introduction

The Agency is committed to ensuring that the approved reasonable accommodation is effective in meeting the requestor's disability related needs. The Agency monitors reasonable accommodations to evaluate their effectiveness and ongoing need.

Monitoring

Open and ongoing communication between the requestor, DM, first-level supervisor (if not DM), and the RAC is encouraged.

The DM and first-level supervisor (if not DM) are encouraged to periodically evaluate the ongoing effectiveness of the reasonable accommodation, and follow-up with the RAC, as needed. Discussion may include, but are not limited to, questions like:

- Has the reasonable accommodation allowed the requestor to perform his/her essential job functions;
- Is anything additional or different needed to support the requestor to perform his/her essential job functions; and
- Is there any change in the requestor's need for reasonable accommodation?

Requestors are encouraged to communicate with the DM and first-level supervisor (if not DM) when there are:

- Problems with a reasonable accommodation; and/or
 - Changes in the:
 - Nature and severity of the impairment;
 - Job-related activity or activities that the impairment limits; and
 - The extent to which the impairment limits the individual's ability to perform the job-related activity or activities.
-

Information Tracking and Recordkeeping

Introduction

The Agency is required to keep records that may be used to determine whether it is complying with the non-discrimination and affirmative action requirements imposed under Section 501 of the Rehabilitation Act, and to make such records available to the Commission upon the Commission's request. The RAC maintains records on all requests for reasonable accommodation and relevant documentation consistent with Section 501 of the Rehabilitation Act and all other applicable laws and regulations.

Types of Records

- Individual Records: Documentation regarding the individual's disability or need for reasonable accommodation and disposition.
 - Cumulative Records: Aggregate data—information that does not, and cannot be used, to identify any particular individual.
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Retention Schedule

- Individual records are maintained for the duration of the individual's employment. They are destroyed three (3) years after the individual's separation from the Agency or all appeals are concluded, whichever is later.
 - Cumulative records are maintained for three (3) years.
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Individual Records

- The RAC:
- Tracks the processing of all requests for reasonable accommodation from initiation to closure;
 - Provides status updates on all open requests for reasonable accommodations:
 - Upon request by employee or applicant; and
 - Every two weeks to the Associate Director of OHR, CSOSA and Deputy Assistant Director of OHCM, PSA.
 - Maintains records on all requests for reasonable accommodation, supporting documentation, and disposition;
 - Ensures that reasonable accommodation records are kept separately from employees' personnel files; and
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Information Tracking and Recordkeeping, Continued

Individual Records, continued

- Ensures the confidentiality of medical records in accordance with the Rehabilitation Act. Medical records are disclosed only as needed to:
 - DM, first-level supervisor (if not DM), and other Agency officials who have a need to know to evaluate requestor's disability-related restrictions and needs;
 - First aid and safety personnel when the disability requires emergency treatment;
 - Government officials investigating the Agency's compliance with the Rehabilitation Act;
 - Workers' compensation offices or insurance carriers, in certain circumstances; and
 - Agency's EEO officials to maintain records and evaluate and report on the Agency's performance in processing requests for reasonable accommodation.
-

Cumulative Records

Aggregate data is used to evaluate the Agency's performance in responding to requests for reasonable accommodation. The RAC compiles the following aggregate data for tracking and reporting purposes:

- The number of reasonable accommodation requests made by applicants and employees and the specific reasonable accommodation requested, if any;
 - The jobs (occupational series, grade level, and agency component) sought by requesting applicants or held by requesting employees;
 - Whether the reasonable accommodations were needed to apply for a job, perform the essential functions of a job, or enjoy benefits or privileges of employment;
 - Whether the request was granted (which may include an accommodation different from the one requested) or denied;
 - The identity of the DM (deciding official) for each reasonable accommodation request;
 - The basis for any denial of requests for reasonable accommodation;
 - The number of days taken to process each request for reasonable accommodation; and
 - The sources of technical assistance that have been consulted in trying to identify possible reasonable accommodations.
-

Appendix A: Request Form



CSOSA



PSA

Reasonable Accommodation & Personal Assistance Services Request Form

To be completed by applicant, employee, or designee

If you are a management official who receives an oral request, please complete the blue shaded sections and the "Acknowledgement" on page 2.

This Request is for: <input type="checkbox"/> Reasonable Accommodation <input type="checkbox"/> Personal Assistance Services <input type="checkbox"/> Reconsideration			
1. Employee / Applicant name (Last, First, MI):		2. Org./Branch:	3. Occupational Series: 4. Grade:
5. Mailing Address (include city, state, zip)		6. Phone:	7. Email address:
8. Describe the requested accommodation or, if you are unsure of the specific accommodation you need, describe your suggestions, if any (please use page 2 if you need additional space):			
8(a): Is your accommodation request time sensitive? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, please explain:			
9. Briefly describe the disability/medical condition requiring accommodation:			
10. Identify the appropriate box below (may select more than one box) and explain how the reasonable accommodation will assist the applicant/employee in:			
a. Performing Essential Job Functions or Accessing the Work Environment <input type="checkbox"/>		b. Accessing a Benefit or Privilege of Employment (e.g., attending training program or social event) <input type="checkbox"/>	
		c. Application Process <input type="checkbox"/>	
Explanation:			
11. Give approximate date medical condition began to affect the performance of your duties, attendance or conduct and the expected duration (month/year to month/year): _____ to _____			
12. Have you ever requested a previous accommodation for this limitation? If so, when and what?			
NOTE: Medical documentation may be needed to substantiate the disability or reasonable accommodation. The medical documentation form can be found at "Medical Documentation Form".			
I affirm that all statement made above are true to the best of my knowledge and belief.			
Signature of Applicant / Employee / Designee:			Date:

Space Reserved for Agency Use

Email Form

OHR Form 701(a) - 2020

Continued on next page

Appendix A: Request Form, Continued**CSOSA****PSA**

Please use this space to provide any additional information/comments that might be useful in processing your accommodation request, or to add information that could not be contained within the boxes on page 1.

Acknowledgement of receipt of Reasonable Accommodation Request

I am the Receiving Official (RO) for this request.

My Name Is: _____ Date of Request: _____

My Phone Number Is: _____ My Email Is: _____

NEXT STEP

The Reasonable Accommodation Coordinator (RAC) will acknowledge your request and normally contact you within 5 business days. If you have any questions, please contact the RAC at the phone number or email address provided below.



Name of RAC: _____ RAC Phone Number: _____

Email Address of RAC: _____

Email Form

Space Reserved for Agency Use



Appendix B: Medical Form

	
<h3>MEDICAL DOCUMENTATION FORM</h3> <p><i>To be completed by a Health Care Professional.</i></p>	
Name of Applicant/Employee (<i>Last, First, MI</i>): 	
<p style="text-align: center;">Instructions</p> <p>We have received a request to consider a reasonable accommodation under the Americans with Disabilities Act (ADA), amended, for the individual named above. An accommodation is a logical adjustment made to a job and/or the work environment that enables a qualified employee/ applicant with a disability to successfully perform the essential duties or functions of the position. We request that you provide medical information which reflects:</p> <ul style="list-style-type: none"> That the individual has one or more physical or mental impairment(s) that substantially limits(s) one or more of his/her major life activities (e.g., walking, speaking, breathing, hearing, seeing, thinking, sitting, standing, reaching, interacting with others, learning, performing manual tasks, caring for oneself, concentrating, lifting, working, sleeping). There is a relationship between the substantially limiting medical conditions(s) and the requested accommodation. 	
IMPAIRMENT	Does the employee have a physical or mental impairment? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe the nature, severity, and duration of the physical or mental impairment. This information should be provided with enough detail to permit a reasonable analysis. <div style="background-color: #e6f2ff; height: 60px; width: 100%;"></div>
<p>NOTE: Answer the following questions based on what limitations the employee has when his or her condition is in an active state and what limitations the employee would have if no <i>mitigating measures</i> (see definition at bottom of page) were used.</p>	
IMPACT ON LIFE ACTIVITIES	Does the impairment substantially limit a major life activity as compared to most people in the general population? <input type="checkbox"/> Yes <input type="checkbox"/> No <p><i>Mitigating measures include things such as medication, medical supplies, equipment, hearing aids, mobility devices, the use of assistive technology, reasonable accommodations or auxiliary aids or services, prosthetics, learned behavioral or adaptive neurological modifications, psychotherapy, behavioral therapy, and physical therapy. Mitigating measures <u>do not include</u> ordinary eyeglasses or contact lenses.</i></p>

Appendix B: Medical Form, Continued

CSOSA PSA				
IMPACT ON LIFE ACTIVITIES (contd.)	<p><i>If you checked yes in both boxes on page 1, please check which major life activity(s) (includes major bodily functions) is/are affected below:</i></p> <p>Major Life Activity(s): (check all that apply)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Bending <input type="checkbox"/> Breathing <input type="checkbox"/> Caring for self <input type="checkbox"/> Concentrating <input type="checkbox"/> Eating <input type="checkbox"/> Hearing <input type="checkbox"/> Interacting With Others </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Learning <input type="checkbox"/> Lifting <input type="checkbox"/> Performing Manual Tasks <input type="checkbox"/> Reaching <input type="checkbox"/> Reading <input type="checkbox"/> Seeing <input type="checkbox"/> Sitting </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Sleeping <input type="checkbox"/> Speaking <input type="checkbox"/> Standing <input type="checkbox"/> Thinking <input type="checkbox"/> Walking <input type="checkbox"/> Working <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div> </td> </tr> </table>	<input type="checkbox"/> Bending <input type="checkbox"/> Breathing <input type="checkbox"/> Caring for self <input type="checkbox"/> Concentrating <input type="checkbox"/> Eating <input type="checkbox"/> Hearing <input type="checkbox"/> Interacting With Others	<input type="checkbox"/> Learning <input type="checkbox"/> Lifting <input type="checkbox"/> Performing Manual Tasks <input type="checkbox"/> Reaching <input type="checkbox"/> Reading <input type="checkbox"/> Seeing <input type="checkbox"/> Sitting	<input type="checkbox"/> Sleeping <input type="checkbox"/> Speaking <input type="checkbox"/> Standing <input type="checkbox"/> Thinking <input type="checkbox"/> Walking <input type="checkbox"/> Working <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div>
<input type="checkbox"/> Bending <input type="checkbox"/> Breathing <input type="checkbox"/> Caring for self <input type="checkbox"/> Concentrating <input type="checkbox"/> Eating <input type="checkbox"/> Hearing <input type="checkbox"/> Interacting With Others	<input type="checkbox"/> Learning <input type="checkbox"/> Lifting <input type="checkbox"/> Performing Manual Tasks <input type="checkbox"/> Reaching <input type="checkbox"/> Reading <input type="checkbox"/> Seeing <input type="checkbox"/> Sitting	<input type="checkbox"/> Sleeping <input type="checkbox"/> Speaking <input type="checkbox"/> Standing <input type="checkbox"/> Thinking <input type="checkbox"/> Walking <input type="checkbox"/> Working <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div>		
FUNCTIONS AFFECTED	<p>Major Bodily Function(s) affected: (check all that apply)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Bladder <input type="checkbox"/> Bowel <input type="checkbox"/> Brain <input type="checkbox"/> Cardiovascular <input type="checkbox"/> Circulatory <input type="checkbox"/> Digestive <input type="checkbox"/> Endocrine </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Genitourinary <input type="checkbox"/> Hemic <input type="checkbox"/> Immune <input type="checkbox"/> Lymphatic <input type="checkbox"/> Musculoskeletal <input type="checkbox"/> Neurological <input type="checkbox"/> Normal Cell Growth </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Operation of an Organ <input type="checkbox"/> Reproductive <input type="checkbox"/> Respiratory <input type="checkbox"/> Special Sense Organs & Skin <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div> </td> </tr> </table>	<input type="checkbox"/> Bladder <input type="checkbox"/> Bowel <input type="checkbox"/> Brain <input type="checkbox"/> Cardiovascular <input type="checkbox"/> Circulatory <input type="checkbox"/> Digestive <input type="checkbox"/> Endocrine	<input type="checkbox"/> Genitourinary <input type="checkbox"/> Hemic <input type="checkbox"/> Immune <input type="checkbox"/> Lymphatic <input type="checkbox"/> Musculoskeletal <input type="checkbox"/> Neurological <input type="checkbox"/> Normal Cell Growth	<input type="checkbox"/> Operation of an Organ <input type="checkbox"/> Reproductive <input type="checkbox"/> Respiratory <input type="checkbox"/> Special Sense Organs & Skin <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div>
<input type="checkbox"/> Bladder <input type="checkbox"/> Bowel <input type="checkbox"/> Brain <input type="checkbox"/> Cardiovascular <input type="checkbox"/> Circulatory <input type="checkbox"/> Digestive <input type="checkbox"/> Endocrine	<input type="checkbox"/> Genitourinary <input type="checkbox"/> Hemic <input type="checkbox"/> Immune <input type="checkbox"/> Lymphatic <input type="checkbox"/> Musculoskeletal <input type="checkbox"/> Neurological <input type="checkbox"/> Normal Cell Growth	<input type="checkbox"/> Operation of an Organ <input type="checkbox"/> Reproductive <input type="checkbox"/> Respiratory <input type="checkbox"/> Special Sense Organs & Skin <input type="checkbox"/> Other: (describe) <div style="background-color: #e0e0ff; height: 20px; width: 100%; margin-top: 5px;"></div>		
<p>NOTE: For the below questions, a copy of the appropriate job description is attached to assist in your analysis.</p>				
IMPACT ON JOB PERFORMANCE	<p>Describe the extent to which the impairment interferes with job performance AND/OR prohibits access to a benefit of employment. Please indicate which job function(s) or benefits of employment the employee is having trouble performing or accessing because of the limitations(s).</p> <div style="background-color: #e0e0ff; height: 150px; width: 100%; margin-top: 10px;"></div>			

Appendix B: Medical Form, Continued

 CSOSA  PSA	
REASONABLE ACCOMMODATION	What reasonable accommodation will assist the employee in performing the essential functions of their position? Explain why the employee requires the particular reasonable accommodation requested.
	If applicable: Do you have any suggestions regarding <i>other</i> possible accommodations or accommodations the employee has previously been provided for this impairment? If so, what are they, and why would they be effective?
Certification	
Health Care Professional (<i>Last, First, MI</i>)	
Office Address	Office Telephone Number
	Email address
Signature	Date
Revised CSOSA/PSA EEO Form 701 (2020)	

Privacy Act Statement

Collection of the requested information is authorized by Section 501 of the Rehabilitation Act, 29 U.S.C. § 791. The information you furnish will be used for the purpose of facilitating your request. Additionally, the information may be used to disclose information to: appropriate Federal, state or local agencies when relevant to civil, criminal or regulatory investigations or prosecutions when necessary to adjudicate a claim for benefits; a Federal agency in connection with a decision in hiring, retention or the granting of a security clearance. It may also be used in an administrative or judicial proceeding affecting an employee's personnel rights and in any criminal prosecutions for willfully making false or fraudulent statements in violation of U.S.C. § 1001. Failure to fully complete the form or refusal to provide the requested documentation may lead to a breakdown in the reasonable accommodation process and could result in a determination the employee is not entitled to reasonable accommodation.

Genetic Information Nondiscrimination Act Statement

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by GINA, includes an individual's family medical history, the results of 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.

Appendix C: Approval Decision Form



CSOSA



PSA

CSOSA/PSA REASONABLE ACCOMMODATION DECISION FORM - APPROVAL

Employee Name: <input type="text"/>		Date of Approval: <input type="text"/>	
Accommodation(s) Approved: <input type="text"/>			
If different from the accommodation requested, an explanation of the reasons the above accommodation was chosen and will be effective: <input type="text"/>			
STEPS NEEDED TO IMPLEMENT			
Does equipment need to be ordered?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, who will do it? <input type="text"/>			
Will training be required?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, who will do the training? <input type="text"/>			
Who needs to be notified of the accommodation? <input type="text"/>			
What other steps need to be taken? <input type="text"/>			
TIMEFRAMES			
What is the anticipated date for the accommodation to be fully implemented?		<input type="text"/>	
If maintenance is needed, when will it be done? <input type="text"/>			
Is the accommodation being provided on an interim basis?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, when will the interim period end? <input type="text"/>			
Comments: <input type="text"/>			
SIGNATURES			
Employer Representative: <input type="text"/>		Date: <input type="text"/>	
Employee: <input type="text"/>		Date: <input type="text"/>	
<input type="checkbox"/> I accept this accommodation. <input type="checkbox"/> I decline this accommodation.*			

*If declined, please provide an explanation to the RAC. Additionally, please see the next page for avenues of redress.

Email Form

Appendix C: Approval Decision Form, Continued

If the approved accommodation(s) is/are different than what was requested, you may: 1) be eligible to pursue reconsideration, 2) seek remedy through Alternative Dispute Resolution, or 3) be eligible to file a complaint/appeal. Information on the appropriate avenues is provided below:

RECONSIDERATION PROCESS:

The Agency will consider a reconsideration request ONLY under the following circumstances:

- Requestor has additional medical information;
- Requestor experiences increase in range and severity of symptoms and has corroborating medical information.

If an individual meets the above criteria and wishes to request reconsideration of this decision, s/he may:

- Submit a written reconsideration request directly to the Reasonable Accommodation Coordinator (RAC) within ten (10) business days of receiving this decision.
- Present additional information in support of the reconsideration request.
- If additional medical information (e.g., new or more detailed) is provided, the RAC will initiate an interactive process to discuss an effective accommodation.
- The Agency provides a final decision within fifteen (15) business days of receipt of a request for reconsideration.

ALTERNATIVE DISPUTE RESOLUTION:

Alternative Dispute Resolution (ADR) provides a non-adversarial, confidential method for resolving workplace disputes. If ADR is requested, the Agency, as a general rule, participates in the process. Participating in ADR is voluntary and is in addition to the requestor's right to formal remedies: statutory claims and any applicable negotiated grievance procedures. Please contact ADR to initiate this process.

Note: Participating in ADR does not satisfy the requirements for, extend, or otherwise affect the time limits for initiating statutory claims or any applicable negotiated grievance procedures.

COMPLAINT/GRIEVANCE/APPEAL PROCESS:

If a federal applicant or employee wishes to file an Equal Employment Opportunity (EEO) complaint, or pursue Merit System Protection Board (MSPB) and union grievance procedures, s/he must take the following steps:

- For an EEO complaint pursuant to 29 C.F.R. § 1614, contact the Office of Equal Employment Opportunity, Diversity, and Special Programs *within 45 days from the date of this notice*; or
- If applicable, for a collective bargaining claim, file a written grievance in accordance with the respective provisions of the collective bargaining agreement; or
- Initiate an appeal to the MSPB *within 30 days of an appealable adverse action as defined in 5 C.F.R. § 1201.3.*

Appendix D: Denial Decision Form



CSOSA



PSA

REASONABLE ACCOMMODATION DECISION FORM - DENIAL

Employee Name:		Date of Denial:	
Accommodation(s) Denied:			
REASON(S) FOR DENIAL (may check more than one box)			
<input type="checkbox"/> Accommodation Ineffective			
<input type="checkbox"/> Accommodation Would Cause Undue Hardship			
<input type="checkbox"/> Medical Documentation Inadequate			
<input type="checkbox"/> Accommodation Would Require Removal of an Essential Function			
<input type="checkbox"/> Accommodation Would Require Lowering of Performance or Production Standard			
<input type="checkbox"/> Declined alternative Reasonable Accommodation offered by the Agency			
<input type="checkbox"/> Other:			
NEXT STEPS			
<input type="checkbox"/> Provide Additional Medical Information		<input type="checkbox"/> Other:	
SIGNATURES			
Employer Representative:		Date:	
Employee:		Date:	
<i>Note: If you wish to clarify any information that may have led to this decision, please contact the RAC.</i>			

Appendix D: Denial Decision Form, Continued

Based on this decision, you may: 1) be eligible to pursue reconsideration, 2) seek remedy through Alternative Dispute Resolution, or 3) be eligible to file a complaint/appeal. Information on the appropriate avenues is provided below:

RECONSIDERATION:

The Agency will consider a reconsideration request *ONLY* under the following circumstances:

- Requestor has additional medical information;
- Requestor experiences increase in range and severity of symptoms and has corroborating medical information.

If an individual meets the above criteria and wishes to request reconsideration of this decision, s/he may:

- Submit a written reconsideration request directly to the Reasonable Accommodation Coordinator (RAC) within ten (10) business days of receiving this decision.
- Present additional information in support of the reconsideration request.
- If additional medical information (e.g., new or more detailed) is provided, the RAC will initiate an interactive process to discuss an effective accommodation.
- The Agency provides a final decision within fifteen (15) business days of receipt of a request for reconsideration.

ALTERNATIVE DISPUTE RESOLUTION:

- Alternative Dispute Resolution (ADR) provides a non-adversarial, confidential method for resolving workplace disputes. If ADR is requested, the Agency, as a general rule, participates in the process. Participating in ADR is voluntary and is in addition to the requestor's right to formal remedies: statutory claims and any applicable negotiated grievance procedures. Please contact ADR to initiate this process.
- *Note:* Participating in ADR does not satisfy the requirements for, extend, or otherwise affect the time limits for initiating statutory claims or any applicable negotiated grievance procedures.

COMPLAINT/GRIEVANCE/APEAL PROCESS:

If a federal applicant or employee wishes to file an EEO complaint, or pursue MSPB and union grievance procedures, s/he must take the following steps:

- For an EEO complaint pursuant to 29 C.F.R. § 1614, contact the Office of Equal Employment Opportunity, Diversity, and Special Programs *within 45 days from the date of this notice of denial of reasonable accommodation*; or
- If applicable, for a collective bargaining claim, file a written grievance in accordance with the respective provisions of the collective bargaining agreement; or
- Initiate an appeal to the Merit Systems Protection Board *within 30 days of an appealable adverse action* as defined in 5 C.F.R. § 1201.3.

Email Form

Appendix E: Reasonable Accommodation Resources

EEOC

U.S. Equal Employment Opportunity Commission (EEOC)

<https://www.eeoc.gov/>

1-800-669-3362 (Voice) 1-800-800-3302 (TT)

The EEOC's Publication Center has many free documents on the Title I employment provisions of the ADA, including both the statute, 42 U.S.C. § 12101 et seq., and the regulations, 29 C.F.R. § 1630. In addition, the EEOC has published a great deal of basic information about reasonable accommodation and undue hardship. The three (3) main sources of interpretive information are:

- 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;
- [Enforcement Guidance on Reasonable Accommodation and Undue Hardship Under the Americans with Disabilities Act](#), 8 FEP Manual 405:7601 (1999); and
- A Technical Assistance Manual on the Employment Provisions (Title I) of the Americans with Disabilities Act, 8 FEP Manual (BNA) 405:6981, 6998-7018 (1992) (Technical Assistance Manual). The Technical Assistance Manual includes a 200-page Resource Directory, including federal and state agencies, and disability organizations that can provide assistance in identifying and locating reasonable accommodations.

Continued on next page

Appendix E: Reasonable Accommodation Resources, Continued

- EEOC**, continued The EEOC also has discussed issues involving reasonable accommodation in the following guidances and documents:
- [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);
 - [Enforcement Guidance: Workers' Compensation and the ADA](#) at 15-20, 8 FEP Manual (BNA) 405:7391, 7398-7401 (1996);
 - [Enforcement Guidance: The Americans with Disabilities Act and Psychiatric Disabilities](#) at 19-28, 8 FEP Manual (BNA) 405:7461, 7470-76 (1997);
 - [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
 - [Enforcement Guidance: Disability-Related Inquiries and Medical Examinations of Employees Under the Americans with Disabilities Act](#) at 20, 22, 23, 24-5, 8 FEP Manual (BNA) 405:7701, 7711, 7712-14, 7715-16 (2000).
 - Finally, the EEOC has a poster that employers and labor unions may use to fulfill the ADA's posting requirement.

All of the above-listed documents, with the exception of the *Technical Assistance Manual* and the poster, are also available through the Internet at www.eeoc.gov. All of these documents provide guidance that applies to federal agencies through the Rehabilitation Act of 1973, 29 U.S.C. § 791.

Continued on next page

Appendix E: Reasonable Accommodation Resources, Continued

CAP

Computer Electronic Accommodation Program (CAP)
(703) 681-3976 (Voice) (703) 681-0081 (TTY)
<https://www.cap.mil>

CAP pays for a wide variety of assistive technology, devices and services for people with disabilities. Frequently requested accommodations solutions include:

- Blind/Low Vision: Magnification systems, speech and Braille output systems, scanner/reader systems Braille embossers, and Braille note takers;
- Deaf/Hard of Hearing: Teletypewriters (TTYs), PC-TTY modems, telephone amplifiers, assistive listening systems, and visual signaling devices;
- Dexterity Disabilities: Alternative keyboards, word prediction software, speech recognition systems, pointing devices, hands-free computer interface systems and key guards;
- Cognitive/Learning Disabilities: Talking dictionaries and scanner/reader systems; and
- Communication Disabilities: Electronic communication aids and speech output systems to augment communication.

The CAP Technology Evaluation Center (CAPTEC) is a facility dedicated to the evaluation and demonstration of assistive technology. It was established to assist supervisors and employees in choosing appropriate assistive technology to create work environments that are accessible to persons with disabilities. CAPTEC consists of computer workstations configured with a wide variety of assistive technology. People in the process of evaluating assistive equipment who have questions about compatibility or functionality, who need to compare several solutions, may visit CAPTEC to test and evaluate the equipment. Further, the CAP staff conducts needs assessments to identify the best equipment to meet individual requirements. CAPTEC is located at the Pentagon, Room 2A259, 703-693-5160 (V) or 703-693-6189 (TTY).

Continued on next page

Appendix E: Reasonable Accommodation Resources, Continued

JAN

Job Accommodation Network (JAN)

1-800-232-9675 (Voice/TT)

<http://janweb.icdi.wvu.edu/>

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.

DBTACs

ADA Disability and Business Technical Assistance Centers (DBTACs)

1-800-949-4232 (Voice/TT)

The DBTACs consist of ten (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.

RID

Registry of Interpreters for the Deaf (RID)

(301) 608-0050 (Voice/TT)

<http://www.rid.org/>

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

Continued on next page

Appendix E: Reasonable Accommodation Resources, Continued

RESNA

RESNA Technical Assistance Project (RESNA)

(703) 524-6686 (Voice) (703) 524-6639 (TT)

<http://www.resna.org/>

RESNA, the Rehabilitation Engineering and Assistive Technology Society of North America, can refer individuals to projects in all fifty (50) states and the six (6) territories offering technical assistance on technology-related services for individuals with disabilities. Services may include:

- Information and referral centers to help determine what devices may assist a person with a disability (including access to large databases containing information on thousands of commercially available assistive technology products);
 - Centers where individuals can try out devices and equipment;
 - Assistance in obtaining funding for and repairing devices; and
 - Equipment exchange and recycling programs.
-