

## **SUBJECT: Reasonable Accommodation (Policy Directive 830-06)**

- 1. <u>PURPOSE</u>. This Directive provides procedures for processing reasonable accommodation requests to ensure individuals are provided equal employment opportunity, except in situations where doing so would result in significant difficulty or expense, or would fundamentally alter the operations of the Office of the Inspector General.
- 2. **EFFECTIVE DATE**. April 18, 2012
- 3. **SCOPE**. This policy is based on Title 1 and Title V of the Americans with Disabilities Act, Sections 501 and 505 of the Rehabilitation Act of 1973, Executive Order 13164, and 29 CFR Part 1630, Regulations to Implement the Equal Employment Provisions of the Americans with Disability Act of 2008 (Public Law 110-325).
- 4. **POLICY**. An employee or an employee's representative may request, in writing or orally, that he or she be provided reasonable accommodation so he or she can perform his or her job duties. For record keeping purposes, requests in writing are preferred. The process for making the request, reviewing the request and other procedures follows.

### 5. **DEFINITIONS**.

- a. Request for Reasonable Accommodation. A statement that an individual needs an adjustment or change at work, in the application process, or in a benefit or privilege of employment for a reason related to a medical condition.
- b. Reasonable Accommodation. An adjustment or alteration that enables a qualified person with a disability to apply for a job, perform job duties or enjoy equal benefits and privileges of employment. There are three categories of reasonable accommodation:
  --modifications or adjustments to a job application process to permit an individual with a disability to be considered for a job,
  - --modifications or adjustments to enable a qualified individual with a disability to perform the essential functions of the job; and
  - -- modifications or adjustments that enable employees with disabilities to enjoy equal benefits and privileges of employment.
- c. Reassignment. Reasonable accommodation of last resort, that, 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. Reassignments are made only to funded vacant positions that the employee is qualified for at the same or lower grade for which the employee can perform with or without reasonable accommodation. The OIG will search for vacancies for 30 business days before expanding the search to other bureaus.

- d. 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, has a record of such impairment, or is regarded as having such impairment as defined by law.
- e. Qualified Individual with a Disability. An individual with a disability who satisfies the requisite skill, experience, education and other job-related requirements of the employment position such individual holds or desires, and who, with or without reasonable accommodation, can perform the essential functions of the job.
- f. **Major Life Activities**. Basic activities that the average person can perform with little or no difficulty such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, eating, working, sitting, standing, lifting, and mental and emotional processes such as thinking, concentrating, and interacting with others
- g. **Essential Function.** Those job duties that are so fundamental to the position the individual holds or desires he/she cannot do the job without performing them.
- h. **Extenuating Circumstances.** Factors that could not reasonably have been anticipated or avoided in advance of the request for accommodation or limited situations in which unforeseen or unavoidable events prevent prompt processing and delivery of an accommodation.
- i. **Interactive process.** The process by which the individual requesting an accommodation and the supervisor/manager discuss the request for accommodation, have it determined by the AIGM whether it will be recommended for approval, and examine potential alternative options.
- j. Undue Hardship. An action requiring significant difficulty or expense when considered in light of factors such as the agency'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 of the reasonable accommodation needed and the impact of the reasonable accommodation on the agency.
- k. **Dispute Resolution Process**. Any voluntary mechanism through which an individual can request reconsideration of denial of reasonable accommodation, regardless of whether the person has started the EEO complaint process.

#### 6. **RESPONSIBILITIES**.

- a. Requester (employee). A statement in writing or orally, that an individual needs an adjustment or change at work, in the application process, or in a benefit or privilege of employment for a reason related to a medical condition shall be provided to each requesters supervisor or manager.
- b. **Supervisor/Manager**. The supervisor/manager will forward the employee's request for reasonable accommodation to the AIG for Management.
- b. AIG for Management. This official will respond to the employee's request. [While the supervisor/manager will accept oral reasonable accommodation requests, the AIG Management prefers written requests to prevent confusion and simplify record keeping.]

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c. Appeals. If an employee receives a letter of denial from the AIGM and wishes for reconsideration, that employee should, within 10 business days of receiving the written denial ask the AIGM to reconsider the decision. An employee can present additional information in support of his or her request. The AIGM should respond to the request for reconsideration within 5 business days.

If the AIGM does not reverse the decision, an employee may appeal the decision to the Senior Advisor to the IG. The Senior Advisor to the IG should respond to the request for reconsideration as soon as feasibly possible but no later than 10 business days.

#### 7. Procedures.

a. Request for Medical Documentation. If the disability or need for accommodation is not obvious or already known, the AIG for Management may request the submission of medical documentation from a certified professional, such as a doctor, social worker, or rehabilitation expert, in order to better evaluate a request. Examples of documentation include, but are not limited to, the past, present and future nature, severity, and duration of the impairment, activities the impairment limits, and the extent of the limitations. Medical documentation must be in writing and needs to substantiate that an employee has a disability/limitation.

If the employee/applicant does not provide or cooperate in the effort to obtain adequate medical documentation, the request will be denied.

- b. Confidentiality and Disclosure. 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/and or other password protected file. In addition, employees who obtain or receive such information are strictly bound by these confidentiality requirements. This information may be disclosed only to the following individuals:
- --AIGM, along with supervisors and managers who need to know about necessary restrictions on the work or duties of the employee and the necessary accommodation(s), but medical information should only be disclosed if absolutely necessary.
- --First aid and safety personnel, when appropriate, if the disability might require emergency treatment or special arrangements in emergency situations such as building evacuations.
- --Government officials when the information is necessary to investigate compliance with the Rehabilitation Act.

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- -- In certain circumstances, to workers' compensation offices or insurance carriers.
- --OIG Counsel in connection with providing legal advice to government officials.
- d. **Appeals.** In the event a request is denied employees have the right to appeal the decision. They may do so by providing documentation to the Senior Advisor to the IG. The Senior Advisor to the IG will provide the employee and his or her supervisor or manager with a response to the request for reconsideration within 10 business days.
- 7. <u>TIMELINE</u>. If a request does not require supporting medical documentation, the request shall be processed as soon as possible, but not more than 20 business days from the receipt of the request for reasonable accommodation. If a request does require medical documentation, the request for the medical documentation shall be made before the expiration of the 20 business day period.
- 8. **EXPEDITED PROCESS.** In certain circumstances, a request for reasonable accommodation requires an expedited review and decision time frame that is shorter than the 20 business days discussed above.

19Apr/2 Date

10. **CANCELLATION**. This policy replaces existing draft policy dated 2/17/2012.

Eric M. Thorson

Inspector General

# Treasury Office of Inspector General Reasonable Accommodation Form

| A. Questions to clarify accommodation requested.   |       |      |
|--|-------|------|
| What specific accommodation are you requesting?  |       |      |
|  |       |      |
| If you are not sure what accommodation is needed, do you have any suggestions about what options we can explore? | Yes □ | No □ |
| If <i>yes</i> , please explain.  |       |      |
| Is your accommodation request time sensitive?  | Yes □ | No □ |
| If <i>yes</i> , please explain.  |       |      |
| B. Questions to document the reason for accommodation request.   |       |      |
| What, if any, job function are you having difficulty performing?   |       |      |
| What, if any, employment benefit are you having difficulty accessing?  |       |      |
| What limitation is interfering with your ability to perform your job or access an employment benefit?            |       |      |
| Have you had any accommodations in the past for this same limitation?  | Yes □ | No □ |
| If yes, what were they and how effective were they?  |       |      |
| If you are requesting a specific accommodation, how will that accommodation assist you?                          |       |      |
| C. Other.  |       |      |
| Please provide any additional information that might be useful in processing your accommodation request:         |       |      |
|  |       |      |
| Signature Date   |       |      |
| Return this form to your supervisor who will provide it to the AIG for Management                                |       |      |
|  |       | -9   |
|  |       |      |