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The guideline contains a compilation of current practices relating to how to proceed, these may evolve over time as the institution and its internal and external environments change. For these reasons, the University reserves the right to revise these guidelines or any of its policies or benefits or to institute new guidelines, policies and benefits provided these changes are not inconsistent with state and federal law, or to act apart from these guidelines at any time. Any such modification applies upon adoption by the University, regardless of previous provisions that may have been in effect. The most current version of this guideline is available on the HRS web site.

The laws of the state of Washington and appropriate Washington Administrative Code provisions also apply to all employees, as does the University's Business Policies and Procedures Manual. All University guidelines and policies are subject to federal and state laws, as now existing or as hereafter amended; where there is deemed to be a conflict, the provisions of law apply.

WASHINGTON STATE UNIVERSITY

REASONABLE ACCOMMODATION GUIDE FOR EMPLOYEES WITH DISABILITIES

HUMAN RESOURCE SERVICES
July 2005

These policies/procedures are in accordance with Washington Administrative Code 357-26 and supplement relevant personnel policies and collective bargaining agreements and should be read in conjunction with those provisions.

This guide is based on the "State Policy Guidelines on Reasonable Accommodation of Persons with Disabilities Related to State Employment" issued November 1, 1994 by the Washington State Office of Financial Management, which exists under the authority of Executive Order 96-04 and with reference to: Americans with Disabilities Act of 1990 (P.L. 101-336), 29 CFR Part 1630 and 28 CFR Part 35; Rehabilitation Act of 1973 (PL 93-11) and 45 CFR Part 84; Chapter 49.60 RCW; Chapter 162-22 WAC; and Chapter 357-26. This guide sets forth broad guidelines for meeting reasonable accommodation requirements of state and federal law.

This guide shall not be construed as providing rights or obligations not required under applicable laws.

PURPOSE

The Washington State University's reasonable accommodation process is designed to help employees with disabling conditions remain in their jobs, with or without accommodation.

This guide affects all employees, appointees and candidates for employment with the University. Persons with disabilities have the right to request and receive reasonable accommodation in all aspects of employment procedures with the University, including but not limited to: application, recruitment, selection/hiring, promotion, testing, medical examinations, layoff/recall, assignments, termination, evaluation, compensation, disciplinary actions, leave, training, employee benefits including insurance, and employer supported activities.

DEFINITIONS

Appointees

Fellows, residents, and graduate student assistants

Employees

Faculty, administrative professional, Civil Service and collective bargaining unit staff, temporary employees, and hourly student employees

Essential Functions

Essential functions means the fundamental job duties of the position that the individual with the disability holds or has applied for. The term "essential functions" does not include the marginal functions of the position.

Equal Employment Opportunity

Equal employment opportunity means an opportunity for a qualified individual with a disability to perform the essential job functions or to enjoy equal benefits and privileges of employment as are available to a similarly-situated applicant or employee without a disability.

Health Care Professional or Health Care Provider

Health care professional means a person who has completed a course of study and is licensed to practice in a field of health care which includes the diagnoses and assessment of the particular disability or disabilities in question.

Major Life Activity

Means impairments that substantially limit major life activities such as seeing, hearing, speaking, walking, breathing, performing manual tasks, learning, caring for oneself and working. An individual with a minor non-chronic condition of short duration, such as a sprain, broken limb or the flu, generally would not meet this definition.

Person with a Disability

Person with a disability means:

- Under 42 U.S.C. 12102, a person with a physical or mental impairment that substantially limits one or more major life activities; or

- Under Chapters [49.60 RCW](#) and [162–22-020 WAC](#), a person who has an abnormal condition that is medically cognizable or diagnosable; exists as a record or history; or is perceived to exist whether or not it exists in fact.

Qualified Individual with a Disability

Qualified individual with a disability means an individual with a disability who meets the skill, experience, education, and other job-related requirements of the position held or desired, and who, with or without reasonable accommodation, can perform the essential functions of the job.

Reasonable Accommodation

Reasonable accommodation means modification or adjustment to a job, work environment, policies, practices, or procedures that enables a qualified individual with a disability to enjoy equal employment opportunity and that does not impose an undue hardship on the employer.

Undue Hardship

Undue hardship means an excessively costly, extensive, substantial, or disruptive modification, or one that would fundamentally alter the nature or operation of the institution or program.

Obligations and Rights of the Employer, Employee, and Applicant

- Washington State University will provide reasonable accommodation to the known physical, mental, or sensory limitations of an otherwise qualified individual with a disability.
- The obligation to provide a reasonable accommodation applies to all aspects of employment. This duty is ongoing and may arise any time that a person's disability or job changes.
- The need for reasonable accommodation shall not adversely affect the consideration of an individual with a disability for employment, training, promotion, or opportunity to enjoy equal terms, benefits, privileges, or conditions of employment.
- Generally, it is the obligation of an individual with a disability to request a reasonable accommodation.
- A qualified individual with a disability has the right to refuse an accommodation. However, if the individual cannot perform the essential functions of the job without the accommodation, he or she will not be considered to be an otherwise qualified individual with a disability after refusing the accommodation.
- All information regarding the presence or nature of an employee's or applicant's disability is treated as a confidential medical record and is maintained in a secure manner, apart from personnel files and with access restricted to designated personnel on a need to know basis.

- The University has developed an internal review procedure for addressing disputes related to requests for reasonable accommodations and other concerns. Information regarding the *Workplace Concern Resolution Process* can be found at [HRS](#). *Bargaining Unit Covered* employees should follow the procedures outlined in their applicable contract located at [HRS](#).
- Information on reasonable accommodation, this guide, University internal procedures, and the internal mechanisms and remedies available is disseminated to employees in other appropriate methods.
- When an applicant or employee requests an accommodation and the disability is not readily apparent, the disability has not been previously documented, and/or the reasonableness of the request is not obvious, the University may request that the applicant or employee provide verification from a health care professional that he or she has the disability as claimed and that it has the effect of necessitating reasonable accommodation. The request for verification may ask the opinion of the health care professional as to whether the employee or applicant can perform the essential functions of the job and whether the requested accommodation is appropriate to the disability. The University may obtain a second opinion at its own expense from a health care professional of its own choice. Such inquiries are limited to verification of the employee's claims, except that the employer may also request that the health care professional comment on the appropriateness of the requested accommodation or suggest possible effective alternative accommodations.
- The University may require a medical examination and/or health care professional's certificate where a question arises concerning the fitness of a current employee to perform the duties of his or her position. The University will bear the cost of the medical examination and/or certificate.

Recruitment and Selection

- Reasonable accommodation is provided in every stage of the recruitment, application, and selection process to enable a qualified applicant with a disability to have an equal opportunity to be considered for a job.
- Notification of the right to make an accommodation request and information on how to initiate such a request is included with all job announcements, employment bulletins, and other recruitment efforts.
- Timely response to an accommodation request is essential in providing equal opportunity. Failure to provide reasonable accommodation in a timely manner shall be justification for extension of application or other deadlines.
- Qualification standards, employment tests, or other selection criteria do not screen out or tend to screen out an individual with a disability unless they are job-related and consistent with business necessity.
- Employment tests are used in the most effective manner to measure actual abilities. Tests accurately reflect the skills, aptitude, or other factors being measured, and not the impaired sensory, manual, or speaking skills

of an employee or applicant with a disability (unless those are the skills the test is designed to measure).

- Staff at designated contact points for information about job openings and the application process are given the training and authority necessary to initiate the University's process for the provision of reasonable accommodations.

Performing Essential Functions of the Job

- Each position should be examined to determine its purpose and essential functions. Appropriate times to examine a position include when the position is established, when it becomes vacant, when the duties are changed, or when a request for a reasonable accommodation is made.

The following criteria are considered in identifying the essential functions of a job:

- Are employees in the position actually required to perform the function;
- Would removing that function fundamentally change the job;
- Was the position established to perform the function;
- Are there a limited number of other employees available to perform the function, or among whom the function can be distributed; and
- Is the function highly specialized and is the person in the position hired for special expertise or ability to perform it?
- Upon receiving a reasonable accommodation request, the University will consult with the individual with a disability to find out his or her specific physical or mental abilities and limitations as they relate to the essential job functions, identify the disability-related barriers to job performance, and assess how the accommodation can overcome these barriers.
- The University will consult with the employee, and may consult with other knowledgeable sources, to identify potential accommodations and assess how effective each would be in enabling the individual to perform the essential job functions.
- If there are two or more effective accommodations that would allow the individual with a disability to perform the essential job functions, after considering the preference of the individual with a disability, the University may select the accommodation to be provided.
- When, because of a documented disability, an employee can no longer perform the essential functions of his or her position with or without accommodation or when accommodation in the present position would cause an undue hardship, the University will attempt to identify and place the employee in an equivalent or lower status vacant position for which the employee qualifies. Generally, placement under this guide is without competition; however, employees covered by this guide may compete with other similarly-situated candidates for the same nonpromotional position. The employee must meet the minimum qualifications and specific position requirements for any vacant position

offered as a reasonable accommodation. If no such position is available and after the employee has exhausted leave entitlement under the Family and Medical Leave Act (FMLA), the employee will be separated from the University and accorded reemployment assistance for a period of two years. The University is not required under this guide to create a position, displace another employee, offer a promotion, or move an employee into a position for which the employee is not qualified. The employee is responsible for providing current information showing medical condition, skills, abilities, training, and experience. Refusal by the employee to cooperate in placement efforts or to provide adequate medical documentation may result in separation. The University is responsible for informing the employee of his or her responsibilities.

Equal Terms, Benefits, Privileges, and Conditions of Employment

- Reasonable accommodations are provided to enable an employee with a disability to enjoy terms, benefits, privileges, and conditions of employment equal to those enjoyed by similarly situated non-disabled employees.
- The need to provide a reasonable accommodation is not a factor in the selection of an employee for promotion, training, travel, participation in projects, committees, or any opportunity which may have an impact on an employee's career development.
- Reasonable accommodations are provided to enable an employee with a disability the opportunity to enjoy all employer-supported social or recreational activities.
- Timelines for all activities and opportunities covered under this section shall allow adequate opportunity for arranging reasonable accommodations.
- Information contained in communications regarding activities or opportunities covered under this section is provided to an employee with a disability in a manner or format which is readily accessible to that employee. Employees are notified about the University's obligation to provide reasonable accommodations and are instructed as to how to initiate such a request.

The Undue Hardship Limitation

The University is responsible for making reasonable accommodation unless doing so would impose an undue hardship on the operation of the institution or a particular program. However, before concluding that a particular accommodation would impose an undue hardship, the University will consider whether there are alternative accommodations that would not impose such a hardship.

The following criteria are considered in determining undue hardship:

- The nature and net cost of the accommodation needed, taking into consideration the availability of outside funding;
- The overall financial resources of the program involved in the provision of the reasonable accommodation, the number of employees, and the effect on expenses and resources;
- The overall financial resources of the University with respect to the number of employees and the number, type, and location of its facilities;
- The type of operations of the University including the composition, structure, and functions of its workforce; the geographic separateness; and administrative or fiscal relationship of the program in question to the University; and
- The impact of the accommodation on the operation of the program, including the impact on the ability of other employees to perform their duties and the impact on the University's ability to conduct business.

If the cost of a reasonable accommodation would impose an undue hardship and there are no other financial resources available, the individual with a disability will be given the option of providing the accommodation, or paying that portion of the cost which would constitute an undue hardship.

Written justification, signed by the appropriate dean or vice president of the University, will be provided for any decision not to provide a reasonable accommodation because of undue hardship.

REASONABLE ACCOMMODATION REQUEST PROCESS

To make an accommodation request, the employee completes and submits the Reasonable Accommodation Request form according to the form's instructions. The form(s) are available at the end of this document. The completed form should be sent to HRS.

HRS will contact the department and employee once the completed request is received. HRS may request additional information. The employee may also schedule an appointment on his or her own initiative.

Note: While completion of an accommodation request form may not always be necessary, it is recommended to help maintain an accurate record of the request and what action was taken. If you fail to complete a reasonable accommodation request form, you may be requested to do so.

I. Steps:

- A. Unless the disability or need for accommodation is obvious, it is the responsibility of the employee to inform the supervisor or HRS that a reasonable accommodation is needed to perform the essential job functions or to receive equal benefits and privileges of employment. When the disability or the need for reasonable accommodation is

obvious, the supervisor should inquire whether the employee perceives a need for accommodation. This must be done carefully to avoid an improper inquiry about the employee's possible disability and to protect the employee's right to privacy. *It is strongly recommended that HRS is contacted to assist with this process.*

- Employee completes and submits RA request form to HRS.
 - HRS reviews current job description, functions of job and qualification for the position held.
- B. HRS will consult with the employee to find out his or her specific physical or mental abilities and limitations as they relate to the essential job functions and to discuss the employee's preferences with regard to reasonable accommodations. HRS may request that the employee provide written documentation from a licensed health care provider (HCP), including a statement of the employee's functional limitations. This documentation may also include the HCP's recommendations about potential reasonable accommodations.
- C. HRS in consultation with the department may consider a reasonable accommodation for essential functions or elimination of non-essential functions.
- D. If there is any question concerning the nature of the limitation or a reasonable accommodation being considered, the employee and/or the supervisor should consult with HRS.
- E. If the disability precludes the employee from performing essential job functions, HRS, in consultation with the supervisor, the employee, and if applicable a vocational professional, will determine if there is an accommodation that can be made that will enable the employee to perform the essential functions. During this process, they will undertake the following actions as appropriate:
1. Evaluate the employee's functional abilities and limitations;
 2. Analyze the job requirements;
 3. Explore options available for a reasonable accommodation, including but not limited to:
 - a. making existing facilities used by employees readily accessible to be usable by the disabled employee;
 - b. restructuring the job in a manner consistent with reasonable accommodation;
 - c. granting a leave of absence in a manner consistent with law;
 - d. modify work schedules;
 - e. acquiring or modifying equipment or devices;
 - f. providing qualified readers and interpreters;
 - g. reviewing current vacancies within the department; and/or
 - h. providing the opportunity for reassignment to an active vacant position

4. Determine the most effective reasonable accommodations;
 5. Evaluate whether the employee can perform the job in a manner safe to others and the employee.
- F. HRS and the department will evaluate the reasonableness of the suggested accommodation(s) by assessing effectiveness in enabling the employee to perform the essential functions of the job. This review of reasonableness should include an assessment of cost and the operational needs of the department. The items listed below provide guidelines for this review and should be considered as appropriate:
1. The number of persons employed in the department;
 2. The number, type, and locations of the units within the department;
 3. The type of operation, including the composition, structure, and functions of its workforce, its geographic separateness, and the administrative or fiscal relationship of the department to the campus;
 4. The impact of the accommodation on the operation of the department, including the impact on the ability of other employees to perform their duties and the impact on the department's ability to conduct business ;
 5. The nature and cost of the accommodation;
 6. The overall financial resources of the campus; an
 7. The effect on expenses and resources or other impact of the accommodation on business operations.
- G. HRS will discuss the alternative accommodations with the department and the employee. If determined that the accommodation is reasonable, the accommodation will be implemented; if not, refer to Section II below.
- H. Any reasonable accommodation adopted should be reviewed as necessary with the employee by the supervisor and HRS.

II. Declination of Accommodation by a Department

- A. The department should discuss suggested accommodations that appear unreasonable with HRS. This determination will include an evaluation of undue hardship.
- B. An accommodation adopted by the parties as reasonable may not be rejected or ceased by a department without involving HRS.

III. Declination of a Reasonable Accommodation by the Employee

If the employee declines a reasonable accommodation offer made by the department or WSU, the employee may be disability separated, if she or he is unable to perform the essential function(s) of the position in accordance with

Washington law and applicable University policies and state regulations (*e.g.*, Washington Administrative Code [357-26-025](#); [HRS](#)).

IV. Reemployment Assistance for Employees Who Are Separated

If you cannot be accommodated in your current position and placement in an alternative vacant position is not possible, you will be separated from University employment. Employees who are separated from WSU employment are eligible for re-employment assistance for up to 2 years following separation. Former employees who are able to work at least 50% time and are interested in seeking re-employment assistance should contact Human Resource Services, at 509-335-4521, Text/TTY 509-335-0155 or hrrs@wsu.edu.

Re-employment rights of appointees depend on the terms of their appointment.

CONFIDENTIALITY OF MEDICAL INFORMATION

By law, medical information must be maintained confidentially (subject to certain limited exceptions) and separate from the employee's regular medical records. Reasonable Accommodation medical records for all WSU employees are retained in the HRS office or Benefit Services, in files separate from their personnel or benefits records unrelated to reasonable accommodation.

Individuals are not required to reveal their diagnoses or the details of their medical treatments to their immediate supervisor or to coworkers. However, some persons voluntarily choose to share this kind of information with others. While someone may voluntarily choose to share some information about his/her condition, supervisors must understand that:

1. The information should still be considered confidential; and
2. A person who has shared some information at a particular time may later decide that she/he no longer wishes to discuss the condition or treatment. Such decisions must be respected.

If an employee gives to his/her supervisor written information or requests from his/her health care provider, the documents(s) should be forwarded immediately to HRS.

While employees are not required to disclose medical facts to their supervisor or coworkers, they may be expected to provide such information to other WSU representatives who have responsibility for assisting with the accommodation process.

Additional Information

Questions regarding the application of these procedures may be directed to Human Resource Services 509-335-4521; Text TTY 509-335-0155 or [HRS](#). You may also contact [WSU Accessibility](#). To request this information in an alternate format, contact the Disability Resource Center at 509-335-1566.

WSU Reasonable Accommodation Request Forms

Washington State University
Employee Reasonable Accommodation Request Form

The purpose of this form is to assist WSU in evaluating reasonable accommodation requests. Return the completed form to Human Resource Services.

_____/_____/_____/_____/_____
WSU ID # Employee Name:(Last) (First) (M.I.) Department

_____/_____/_____/_____
Employee's Job Title: College/Department Work Schedule Phone Number

_____/_____/_____/_____
Immediate Supervisor Name of Health Care Provider HCP Phone Number Date of Request

THE FOLLOWING IS TO BE COMPLETED BY THE REQUESTING EMPLOYEE

When responding to these questions, refer to definitions provided in the RA guide.

1. Identify and describe the physical, sensory or mental condition, which is the basis for your request for reasonable accommodation.

2. What major life activity is substantially limited by this disability?

3. Attach a copy of your position description and identify and describe the essential function(s) of your job which you are unable to perform due to the limitations from your condition.

4. Identify and describe the reasonable accommodation(s) you believe are needed to enable you to perform the essential functions of your job properly and safely, including special equipment, changes in the physical layout of the job or other changes/accommodations.

5. Identify the names, addresses and telephone numbers of physicians, therapists, psychologists or other health care providers who have information or documentation concerning your condition or your need for reasonable accommodation. Attach any medical documentation to this request.

Employee Signature: _____ Date: _____

MEDICAL RELEASE STATEMENT

I hereby authorize the above named health care provider(s) to complete this form and disclose to Washington State University and its authorized representatives the following information related to my health care: diagnosis of relevant conditions, treatment plan, my ability to perform my work, recommendations, history, reports and correspondence. I understand that it may be necessary for WSU representatives to share this information for purposes related to accommodation of a disability. I authorize WSU to share this information among appropriate staff and authorized representatives to the extent necessary to determine whether accommodation is necessary and to administer the accommodation process. I understand that information obtained under this release is a confidential medical record and is maintained separate from my personal file. This authorization is valid for 90 days after the date of my signature below. I understand that I may revoke this consent at any time.

CHECK ONE: I do authorize my health care provider to discuss directly with WSU representatives any medical information relevant to my request.
 I do not authorize my health care provider to discuss directly with WSU representatives any medical information relevant to my request.

Employee Signature _____ Date _____

NOTICE TO WASHINGTON STATE UNIVERSITY

This information may have been disclosed to you from records whose confidentiality is protected by RCW 70.02. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. Information concerning a client in alcohol/drug treatment has been disclosed to you from records protected by federal confidentiality rules (42 CFR Part2). The federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The federal rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

HEALTH CARE PROVIDER STATEMENT

Employee/Patient Name: _____

FOR COMPLETION BY HEALTH CARE PROVIDER

Your patient is requesting an accommodation. The information you provide will assist us in determining appropriate services and/or accommodations for this employee. We encourage you to be thorough in your evaluation as you complete the attached sections.

Health Care Provider: Please fill out this section and return as shown below.

Does the patient have a serious health condition yes no (If yes, please check reason):

- 1. Hospital Stay
- 2. Incapacity plus Treatment – condition that causes 3 days of incapacity and
 - two or more treatments by a health care provider; or
 - one treatment plus a continuing regimen under supervision of a health care provider
Please request employee's job description if needed to determine "incapacity"
- 3. Chronic serious health condition
- 4. Permanent or Long Term Condition – requiring medical supervision
- 5. Multiple Treatments for Non-Chronic Condition

When did the serious health condition begin? _____

When is the anticipated return to work date? _____

What are the employee's functional limitations? _____

Will the employee require reasonable accommodation? yes no (If yes please explain)

Name of Health Care Provider: _____

Specialty: _____

Health Care Provider Signature: _____ Date: _____

Address: _____

Please Return form to: Employee/Patient Human Resource Service
139 French Administration
Washington State University
Pullman, WA 99163-1024

HRS REPRESENTATIVE ONLY

Case Id _____

RTW _____ RA _____

**ATTENDING HEALTH CARE PROVIDER'S
WORK ASSESSMENT FORM (FOR NON-WORK RELATED CONDITIONS)**

**HUMAN RESOURCE SERVICES
WASHINGTON STATE UNIVERSITY
PULLMAN WA, 99164-1014**

**Side
2 of 2**

Patient Name (Last)

(First)

Middle Initial

**COGNITIVE/PSYCHOLOGICAL CAPACITIES - AS RELATED TO CONDITION LISTED ON SIDE 1
TO BE COMPLETED BY ATTENDING HEALTH CARE PROVIDER**

Statement of psychological/cognitive diagnosis(es).

Health Care Provider: Please identify functional limitations of diagnosis(es):

Patient has the ability to meet the cognitive demands of the job as described in the job description, or the job as described by employee. (select one) Job Description Job as described by employee Yes No

Patient has the ability to meet the psychological demands of the job as described in the job description, or the job as described by employee. (select one) Job Description Job as described by employee Yes No

Patient has the ability to multitask without loss of efficiency or accuracy. This includes the ability to perform multiply duties from multiple sources. Yes No

Patient has ability to work and sustain attention with distractions and/or interruptions. Yes No

Patient is able to interact appropriately with a variety of individuals including customers/clients. Yes No

Patient is able to deal with people under adverse circumstances. Yes No

Patient has the ability to work as an integral part of a team. Includes ability to maintain workplace relationships. Yes No

Patient is able to maintain regular attendance and be punctual. Yes No

Patient is able to understand, remember and follow verbal and written instructions. Yes No
Simple instructions Yes No
Detailed instructions Yes No

Patient is able to complete assigned tasks without direct supervision. Yes No

Patient is able to exercise independent judgment and make decisions. Yes No

Patient is able to perform under stress and/or in emergencies. Yes No

Patient is able to perform in situations requiring speed, deadlines, or productivity quotas. Yes No

Clarify any "No" responses marked above or add applicable information here (Please attached additional documentation if needed):

If there are other restrictions you have not described elsewhere, please describe here:

Anticipated duration of these restrictions?

Is patient currently prescribed medication that would impair ability to operate machinery, be punctual, or maintain regular attendance? Yes No

If yes, please explain: