

Manual for Disability Accommodation for Faculty

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Table of Contents

<i>Disability Accommodation Process for Faculty</i>	<i>2</i>
<i>Request for Reasonable Accommodation for Faculty</i>	<i>5</i>
<i>Medical Information Request and Verification Form for Requests for Reasonable Accommodations</i>	<i>7</i>
<i>Reasonable Accommodation Reporting Form</i>	<i>9</i>
<i>Denial of Reasonable Accommodation Request</i>	<i>10</i>
<i>Definition of Key Terms</i>	<i>11</i>
<i>Selected Reasonable Accommodation Resources</i>	<i>12</i>

Disability Accommodation Process for Faculty

Lehigh University is committed to diversity and nondiscrimination, and supports the full employment of qualified individuals with disabilities in its workforce in accordance with state and federal laws and regulations, including Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1992 (ADA), as amended by the Americans with Disabilities Act Amendments Act of 2008 (ADAAA).

To ensure equality of access for individuals with disabilities, the University will provide reasonable accommodations, including auxiliary aids, to enable faculty members to perform the essential functions of their jobs and to participate in all University programs and activities. Individuals applying for faculty positions can request reasonable accommodation in connection with the application process.

Faculty members are responsible for initiating requests for any desired disability-related workplace accommodation by contacting the Provost's Office, either orally or in writing. In accordance with ADA, the University will take such requests seriously. The faculty member shall direct his/her request for accommodation to Patricia Mann, Administrative Director of the Provost's Office (primary contact) or, if Patricia Mann is unavailable, to Jean Soderlund, Deputy Provost for Faculty Affairs (secondary contact). Faculty members may refer to the list of *Selected Reasonable Accommodation Resources* beginning on page 12 of this Manual for additional information.

Department chairs and Deans are responsible for immediately notifying the Provost's Office of any faculty accommodation request brought to their attention. Department chairs and Deans are also responsible for implementing reasonable accommodations recommended by the Provost's Office; for keeping the disability request confidential; and for monitoring any interactions with the requesting individual to ensure that actions are not legitimately construed as retaliatory.

The Provost's Office is responsible for informing faculty members of the disability accommodation request process, working with faculty members to evaluate their requests, and referring faculty members to appropriate offices for assistance in evaluating their requests, if necessary. The Provost's Office will consult with other appropriate offices and other resources as needed throughout the process.

The Faculty/ Staff Assistance Program (FSAP) is responsible for providing confidential counseling to faculty members who seek assistance in resolving concerns, including work-related concerns. The FSAP will refer faculty members with disability accommodation request concerns to the Provost's Office.

Procedures:

1. **Request:** The faculty member is responsible for requesting an ADA workplace accommodation for his or her disability by completing the *Request for Reasonable Accommodation for Faculty* form and submitting it to Patricia Mann, Administrative Director of the Provost's Office (primary contact) or, if Patricia Mann is unavailable, to Jean Soderlund, Deputy Provost for Faculty Affairs (secondary contact).
2. **Discussion:** Following the receipt of the *Request for Reasonable Accommodation for Faculty*, the Provost Office contact and a Human Resources staff member, if appropriate,

will meet with the faculty member to acknowledge the request and explain the disability accommodation process. The faculty member will be asked to provide a *Medical Information Request and Verification Form* as appropriate, to be completed by the faculty member and his or her licensed medical practitioner. (See statement below regarding Confidentiality and Record.)

3. **Documenting the Disability:** It is the faculty member's responsibility to provide the requested documentation regarding his or her disability to the Provost's Office. The Provost's Office will conduct an analysis of the impairment eligibility to determine what type of documentation is necessary to verify the disability. This may vary depending upon the nature and extent of the disability and the accommodation requested. In some cases, it may be necessary to discuss the nature of the disability with the faculty member's physician to evaluate the request. If deemed necessary, the Provost's Office can request an independent medical evaluation of the faculty member's disability. If the University deems it necessary to obtain a second medical opinion, the Provost's Office will bear the cost of obtaining the second opinion.
4. **Analysis of Job/Position or Performance of Job Responsibilities:** The Provost's Office will consider the following in determining whether a reasonable accommodation is possible:
 - What are the essential functions of the faculty member's position?
 - How does the disability affect the performance of the essential functions?
 - What are the problems posed by the workplace barrier?
 - Is there a record of any disciplinary actions that may be related to the disability or the request for an accommodation?
5. **Analysis of Accommodation Request:** The Provost's Office will determine appropriate accommodations following an individualized assessment of each request. The Provost's Office will consult with Human Resources and any other appropriate offices in considering the needs or requests for reasonable accommodations.

The Provost's Office will consider the following factors in determining reasonable accommodations for faculty members:

- What accommodation has been requested and what is the duration of the requested accommodation?
 - How will the accommodation affect the faculty member's performance of duties?
 - How will the accommodation affect the academic department's effective operation, including the effect on responsibilities of other faculty members, and university policies and practices?
 - What is the cost of the accommodation?
 - Are there safety and security issues that need to be considered?
 - What are other options for accommodations?
6. **Notification and Implementation of Accommodation under ADA:**

The Provost's Office will provide the faculty member with written notification of its determination within 15 business days after the faculty member submits all required documentation, including the requested medical documentation, absent extenuating circumstances.

If the determination includes an accommodation, the notice will include the expected implementation date. If a situation should arise whereby the Provost's Office requires additional time to review and assess a request or to provide accommodation, the Provost's Office shall provide the faculty member with a written notification of the status of the request and the proposed date of determination. Once the reasonable accommodation is determined, the Provost's Office will send written notification to the faculty member and the department chair indicating the recommended accommodation. Once the faculty member and the department chair have been notified of the determined accommodation, the Provost's Office will hold a meeting with the faculty member and the department chair to discuss the details of the implementation.

Responsibility for Funding:

The Provost's Office bears the responsibility for funding an accommodation that it deems appropriate and reasonable.

Resolving Disagreements:

If the faculty member disagrees with the determination and/or proposed accommodation, then he/she may contact the Provost's Office.

Formal Problem Resolution:

If the faculty member contacts the Provost's Office in accordance with "Resolving Disagreements" above and is still dissatisfied with the Provost's Office determination, then he/she may appeal the determination to the Faculty Personnel Committee in accordance with the Rules and Procedures of the Faculty.

Confidentiality and Record:

All University offices and supervisors have a responsibility not to share information regarding the faculty member's disability-related information with others unnecessarily. To that end, materials related to a faculty member's disability, including the Request for Accommodation, will not be placed in the faculty member's personnel files. Neither will information regarding the request for accommodation be discussed, except as needed to accommodate the disability.

REQUEST FOR REASONABLE ACCOMMODATION FOR FACULTY
SUBMIT DIRECTLY TO THE PROVOST'S OFFICE
FOR WORD VERSION OF FORM PLEASE CLICK ON

http://www.lehigh.edu/~inprv/pdfs/request_for_reasonable_acc_for_faculty.doc

This request for accommodation of a disability will not be placed in your personnel file. Contents of this request will not be shared with anyone except as needed to consider and to implement, as appropriate, an accommodation for the disability.

Today's Date:

Date of Request:

Applicant's or Employee's Name:

Banner ID Number:

Title of your Position:

Department:

Daytime Telephone Number:

Faculty Member's Campus Address:

What are your employment responsibilities? (*Describe briefly.*)

What job duties and responsibilities are impacted by your disability?

What is the disability for which you are requesting an accommodation?

What specific disability accommodation are you requesting? (*Be as specific as possible, e.g. adaptive equipment, reader, interpreter*)

What alternative accommodation(s) would be responsive to your request?

Is the accommodation time sensitive? Please explain:

Do you have medical documentation to support the need for a disability? Yes No

Note: In most cases, we will need to obtain medical documentation regarding your disability. In some cases it will be necessary to discuss the nature of the disability with your physician to address your request for an accommodation. If deemed necessary, the Provost's Office can request an independent medical evaluation of your disability.

Have you previously requested a disability accommodation through the University? If yes, was it for the same disability that you are currently requesting an accommodation?

Important Information about Your Accommodation Request

Documentation regarding your accommodation request and communications related to the accommodation will be shared with individuals who need to be involved to accommodate the disability.

Important Information about Family and Medical Leave

Lehigh University provides Family and Medical Leave (FML) to assist faculty members with balancing the demands of the workplace, their personal needs, and the needs of their family in a manner that accommodates the legitimate interests of the University. Our policy is intended to complement whatever leave rights faculty members may have under applicable federal or state law. In order to qualify for FMLA leave, the faculty member must be taking leave for one of the following reasons:

1. The birth of the faculty member's child and in order to care for that child within 12 months of birth;
2. The placement in the faculty member's home of a child for adoption or foster care within 12 months of placement;
3. The care of the faculty member's spouse or domestic partner, child, or own parent who has a serious health condition;
4. A serious health condition of the faculty member that renders him or her unable to perform the functions of his or her position;
5. A qualifying exigency arising out of the fact that the faculty member's spouse or domestic partner, son, daughter, or own parent is on active military duty or has been notified of an impending call or order to active duty in the Armed Forces in support of a contingency operation; or
6. The care of the faculty member's spouse or domestic partner, child, own parent, or next of kin (*i.e.*, nearest blood relative) who is a covered member of the Armed Forces.

For information on the FML policy, please refer to HR policy No. 129 – Faculty, which can be accessed at: <http://cf2.cc.lehigh.edu/FApolicies/index.cfm?event=printPolicy&polIID=202> .

Acknowledgement of Request for Accommodation

I am requesting an accommodation under the Americans with Disabilities Act. I agree to fully cooperate with the Provost's Office in responding to my request. I understand that, in most cases, I may need to provide medical documentation regarding my disability to assist in determining a reasonable accommodation. I agree that I will provide the requested medical documentation in a timely manner. I also understand that, in some cases, discussion(s) of my disability with my physician may be necessary to address my request for an accommodation. In addition, if deemed necessary, the Provost's Office can request an independent medical evaluation of my disability to arrange for a reasonable disability accommodation.

Signature of Requestor:

Date:

Return Form to the Provost's Office

For Provost's Office Use:

Log No:

Date received:

Date medical documentation received:

Summary of accommodation provided:

Follow-up:

30 days:

3 months:

6 months:

**MEDICAL INFORMATION REQUEST AND VERIFICATION FORM
FOR REQUESTS FOR REASONABLE ACCOMMODATIONS FOR FACULTY
SUBMIT TO PROVOST'S OFFICE**

FOR WORD VERSION OF FORM PLEASE CLICK ON:

http://www.lehigh.edu/~inprv/pdfs/request_for_reasonable_acc_for_faculty_medical.doc

Part I:

Name:

Banner ID#:

Address:

Department:

Phone Number:

I authorize the release of the information requested on this Medical Information Request Form to Lehigh University, Provost's Office.

Signature:

Today's Date:

Part II:

***TO BE COMPLETED BY PHYSICIAN OR OTHER APPROPRIATE
MEDICAL PROFESSIONAL***

Diagnosis:

Prognosis:

This disability is (check one): Permanent:

Temporary:

If temporary, disabling condition is expected to last:

_____ Days Weeks Months (Circle one)

Name of certifying professional:

Title:

Certification or License #:

Phone Number:
Address:

I verify that the above information is complete and accurate to the best of my knowledge.

Signature:

Date:

Important Information about Your Accommodation Request

Documentation regarding your accommodation request and communications related to the accommodation will be shared only with individuals who need to be involved to accommodate the disability.

Confidential medical information will be kept separate from your personnel file.

**REASONABLE ACCOMMODATION FOR FACULTY REPORTING FORM
(TO BE COMPLETED BY PROVOST'S OFFICE)**

Name of individual requesting reasonable accommodation:

Today's Date:

1. Reasonable accommodation: (check one)

_____ Approved

_____ Denied (If denied, attach copy of the written denial letter/memo.)

2. Date accommodation requested:

Who received request:

3. Date final documentation received:

Who received final documentation:

4. Date referred to decision-maker:

Name of decision-maker:

5. Date reasonable accommodation approved/denied:

6. Date reasonable accommodation provided (if different from date approved):

7. If time frames outlined in procedures were not met, explain why:

8. Job held by individual requesting reasonable accommodation:

9. Reasonable accommodation needed for:

_____ Application Process

_____ Performing job functions or accessing the work environment

_____ Accessing a benefit or privilege of employment

10. Type of reasonable accommodation requested:

11. Type of reasonable accommodation provided (if different than was requested):

12. Was medical information required to process this request? If yes, why?

13. Sources of technical assistance consulted, if any:

Comments:

Submitted by: _____

Date: _____

DENIAL OF REASONABLE ACCOMMODATION REQUEST FOR FACULTY

(Must complete numbers 1-4; complete number 5, if applicable)

To be completed by Provost's Office personnel

1. Name of individual requesting reasonable accommodation:
2. Type(s) of reasonable accommodation requested:
3. Request for reasonable accommodation denied because: (may check more than one box)
 - Accommodation ineffective
 - Accommodation would cause undue hardship
 - Medical documentation inadequate
 - Accommodation would require removal of an essential function
 - Accommodation would require lowering of performance or production standard
 - Other (please identify)
4. Detailed reason(s) for the denial of reasonable accommodation (must be specific, e.g., why accommodation is ineffective or causes undue hardship):
5. If the individual proposed one type of reasonable accommodation that is being denied, but rejected an offer of a different reasonable accommodation, explain both the reasons for denial of the requested accommodation and why you believe the chosen accommodation would be effective.

Name of Deciding Official

Signature of Deciding Official

Date reasonable accommodation denied

- If an individual wishes to request reconsideration of this decision, s/he may ask the decision-maker to reconsider his/her denial. Additional information may be presented to support this request.

DEFINITION OF KEY TERMS

Reasonable Accommodation - Any change in the work environment or in the way things are customarily done that would enable a qualified individual with a disability to enjoy equal employment opportunities.

Qualified Individual with a Disability - An individual with a disability is qualified if (1) s/he satisfies the requisite skill, experience, education, and other job-related requirements of the position; and (2) s/he can perform the essential functions of the position, with or without reasonable accommodation.

Essential Functions - Those job duties that are so fundamental to the position that the individual holds or desires that s/he cannot do the job without performing them. A function can be "essential" if, among other things: the position exists specifically to perform that function; there are a limited number of other employees who could perform the function; or the function is specialized and the individual is hired based on his/her ability to perform it. Determination of the essential functions of a position must be done on a case-by-case basis so that it reflects the job as actually performed, and not simply the components of a generic position description.

Undue Hardship - If a specific type of reasonable accommodation *causes significant difficulty or expense*, then the University does not have to provide that particular accommodation. Determination of undue hardship is always made on a case-by-case basis, considering factors that include the nature and cost of the accommodation needed and the impact of the accommodation on the operations and resources of the University.

SELECTED REASONABLE ACCOMMODATION RESOURCES

U.S. Equal Employment Opportunity Commission

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. (1994), and the regulations, 29 C.F.R. 1630 (1997). In addition, the EEOC has published a great deal of basic information about reasonable accommodation and undue hardship. The two main sources of interpretive information are: (1) the Interpretive Guidance accompanying the Title I regulations (also known as the "Appendix" to the regulations), 29 C.F.R. pt. 1630 app. 1630.2(o), (p), 1630.9 (1997), and (2) A Technical Assistance Manual on the Employment Provisions (Title I) of the Americans with Disabilities Act III, 8 FEP Manual (BNA) 405:6981, 6998-7018 (1992). The 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.

The EEOC also has discussed issues involving reasonable accommodation in the following guidance and documents: (1) Enforcement Guidance: Preemployment Disability-Related Questions and Medical Examinations at 5, 6-8, 20, 21-22, 8 FEP Manual (BNA) 405:7191, 7192-94, 7201 (1995); (2) Enforcement Guidance: Workers' Compensation and the ADA at 15-20, 8 FEP Manual (BNA) 405:7391, 7398-7401 (1996); (3) Enforcement Guidance: The Americans with Disabilities Act and Psychiatric Disabilities at 19-28, 8 FEP Manual (BNA) 405:7461, 7470-76 (1997); (4) Fact Sheet on the Family and Medical Leave Act, the Americans with Disabilities Act, and Title VII of the Civil Rights Act of 1964 at 6-9, 8 FEP Manual (BNA) 405:7371, 7374-76 (1996); and (5) Enforcement Guidance: Disability-Related Inquiries and Medical Examinations of Employees Under the Americans with Disabilities Act at 20, 22, 23, 24-25, 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 ADA Technical Assistance Manual and Resource Directory and the poster, are also available through the Internet at <http://www.eeoc.gov>.

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.

ADA Disability and Business Technical Assistance Centers (DBTACs)

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

The DBTACs consist of 10 federally funded regional centers that provide information, training, and technical assistance on the ADA. Each center works with local business, disability, governmental, rehabilitation, and other professional networks to provide current ADA

information and assistance, and places special emphasis on meeting the needs of small businesses. The DBTACs can make referrals to local sources of expertise in reasonable accommodations.

Registry of Interpreters for the Deaf
(301) 608-0050 (Voice/TT)

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

RESNA Technical Assistance Project
(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 50 states and the six 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 try out devices and equipment,
- assistance in obtaining funding for and repairing devices, and
- equipment exchange and recycling programs