MENTAL HEALTH IN THE WORKPLACE

An investment in human capital
Open Minds

It is well known that many people who have, or have had, a mental illness make outstanding contributions to society. Notables such as Abraham Lincoln, Ludwig van Beethoven, Sir Isaac Newton, Winston Churchill, F. Scott Fitzgerald; and contemporaries such as Buzz Aldrin, Ted Turner, Carrie Fisher, Francis Ford Coppola and Mike Wallace. Nevertheless, professionals in the mental health system, employers and the public often cast a dispirited and pessimistic eye to those who, despite a severe mental illness, aspire to careers as professionals or managers.\(^1\)

In fact, it has been estimated that the unemployment rate among those with persistent mental illnesses is an astonishing 90% - far higher than the 50% unemployment rate among individuals with physical or sensorial disabilities. In other words, only 10% of individuals with persistent mental illnesses who want to work and have been judged able to work are working.\(^2\)

Work is a place where people with mental illnesses thrive. Recently, the Center for Psychiatric Rehabilitation at Boston University conducted a national survey with nearly 500 individuals who worked as lawyers, managers, engineers, physicians, nurses and in other high-level positions after experiencing psychiatric problems. Overall, participants reported considerable success in their work status.

- 73% of all participants reported full-time employment; another 6% were self-employed.
- 62% of all participants held their current position for more than two years; 29% of all participants kept the same job for more than five years.
- The yearly income of 79% of participants was above $20,000; 35% of respondents were making more than $40,000; and 22% were making more than $50,000 a year.
- The participants were well-educated - 83% had a college degree or higher level of education.

Open Doors

Securing and sustaining meaningful employment is obviously beneficial to the individual who has a mental illness. What may be less obvious is that including these individuals in the workforce can be tremendously beneficial to the companies employing them as well. The following sections contain valuable information on how your organization can profit by opening its doors to people who have mental illnesses.

“People are investments in intellectual capital and the time has come for us to pay attention to mental health in the workplace. Not just because we care about people, but because it makes good business sense.” - Don Tapscott, chairman of the Alliance for Converging Technologies

OpenMindsOpenDoors is a Pennsylvania initiative aimed at ending discrimination against people who have mental illnesses. The campaign seeks to educate people about mental illnesses; to foster tolerance among peers, employers, educators, communities, and families; and to advocate for the legal rights of people living with psychiatric disabilities. The campaign is supported by dozens of mental health organizations and businesses across the state.
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In a typical office of 20 people, chances are that four will suffer from a mental illness this year.

Mental illness can strike anyone! It knows no age limits, economic status, race, creed or color.

Several myths surrounding mental illness create barriers that make it difficult for people who have mental illnesses to fully participate in life - and in the workplace.

Myth #1:
Recovery from a mental illness is impossible.
The Facts: For decades, mental illnesses were thought to be permanent and untreatable. But the truth is that while these illnesses are persistent, research has shown that with treatment, the majority of people who have a mental illness achieve genuine improvement in their symptoms over time, and lead stable, productive lives. As the treatment of mental illness has advanced, the focus has shifted from simply minimizing symptoms to true recovery, to reintegration into mainstream society, including (and perhaps most importantly) the world of work.

Myth #2:
People who have a mental illness tend to be second-rate workers.
The Facts: Far from being inferior workers, individuals with mental illnesses may in fact be superior in many ways to their co-workers without a mental illness. Employers who have hired these individuals report that their attendance and punctuality exceed the norm, and that their motivation, work quality, and job tenure is as good as - or better than - that of other employees. Research has shown that there is no difference between the productivity of workers with and without mental illnesses.

Myth #3:
People with psychiatric disabilities cannot tolerate stress on the job.
The Facts: The response to job-related stress, and precisely which factors will be perceived as stressful, varies among individuals with psychiatric disabilities just as it does among people without such disabilities. For example, some people - ill or not - find an unstructured work schedule very stressful, while others feel stressed when they must conform to a strictly scheduled workflow. Some people find solitude very stressful, while others are able to focus on their work only in a quiet environment with minimal interaction. For all workers - with or without psychiatric disabilities - productivity is optimized when there is a close match between the employee’s needs and his or her working conditions.

Myth #4:
People who have a mental illness are unpredictable, potentially violent and dangerous.
The Facts: This myth is reinforced by media portrayals of people who have a mental illness as frequently and randomly violent. However, a research literature review conducted at Cornell University found absolutely no evidence to support such portrayals. The fact is that the vast majority of individuals with psychiatric disabilities are neither dangerous nor violent.
Experts increasingly acknowledge that work is a key factor in supporting mental wellness and warding off its reverse - mental illness. Lost productivity and absenteeism due to untreated mental health disorders cost American businesses $70 billion annually.

**benefits for your company**

Securing and sustaining meaningful employment is obviously beneficial to the individual who has a mental illness. What may be less obvious is that including these individuals in the workforce can be tremendously beneficial to the companies employing them as well.

**By employing a person who has a mental illness you and your company benefit by:**

- **Having access to the most qualified people.** Skills shortages are fast becoming a major hindrance for employers worldwide. By increasing your pool of qualified applicants, you can ensure that your organization hires the best and the brightest. The fact that people with mental disabilities have to manage in a hostile world means that they often have particular skills such as problem solving, tenacity, diplomacy and creativity.

- **Realizing tax benefits.** By allowing more people to become taxpaying citizens, you can help ensure that fewer tax dollars are spent on welfare and other similar programs. In addition, by hiring persons with disabilities, your company is eligible for tax credits and tax deductions. Contact the Job Accommodation Network, 800-526-7234, or the Pennsylvania Office of Vocational Rehabilitation, 717-975-2004, for information on how to obtain these benefits.

- **Reducing absenteeism.** Workplace stress is a major cause of absenteeism, and the links between mental illness and stress are clear. Constructive and sensitive stress and mental health management can have a significant effect on absenteeism - and on the bottom line.

- **Enhancing productivity and motivation.** Staff will feel valued and secure if their organization demonstrates a commitment to their well-being. Better workplace relations are clearly linked to increased efficiency, effectiveness and, in turn, improved morale.

- **Diversifying your workforce.** Diversity exists all around us and the reality is that we cannot escape it, nor should we want to. Our friends, families, children and co-workers will be surrounded by people different than they are whether at school, work or in social situations. By embracing diversity, you can promote education, tolerance and acceptance for people from all walks of life.

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*Majority of text, except where noted, paraphrased or quoted from mind out for mental health (www.mindout.net) campaign materials.*
open minds

Companies such as Marriott, Ford, IBM, Wells Fargo and Westinghouse spend millions of dollars each year to educate and provide assistance for their employees on mental health issues. These companies realize that creating awareness with their employees and educating them is the first step to providing a healthy, supportive and welcoming workplace. Even without a big budget there are several resources available to you (most of which are free) to educate you and your employees about mental health.

_____ Provide guidelines for business conduct. Each year, request that all employees read and sign a guidelines for business conduct, containing a section on fair and equitable treatment and a sub-section on discrimination applying to all business dealings. Also, post these guidelines in break areas and other areas where employees will see them frequently.

_____ Bring in an expert on mental health. Book a speaker to discuss mental health with your employees. See Section VIII for a list of mental health organizations that provide speakers free of charge.

_____ Talk to employees. Schedule your own session with employees to discuss discrimination. Show the OpenMindsOpenDoors CD-ROM during a breakfast meeting or lunch session. See the inside back cover for campaign materials.

_____ Commit to a “hurdle-free” work environment. Make space for a “quiet room” or a “stress-relief room” where all employees can go to gather thoughts or release stress.

_____ Provide access to Employee Assistance Programs (EAPs). EAPs can assist employees in dealing with stress-related, emotional and psychiatric pressures that may limit their effectiveness on the job. And, they may save your company money. Chevron Corp. realized a savings of seven dollars for every dollar it spent on its EAP; Campbell Soup Company had a 28% reduction in mental healthcare costs; and Virginia Power realized a 23% drop in medical claims over a four-year period for individuals who accessed the EAP compared with those who accessed behavioral health benefits on their own.xiv Contact the Employee Assistance Professionals Association, 703-522-6272, for more information. Or visit their Web site, www.eapassn.org, to locate the nearest EAP provider.

_____ Designate an “Equity Staff.” In each department, designate a group or individual to ensure ownership and accountability for employment equity initiatives at the business-unit level. The business unit will be responsible for clearly defined areas of accountability, including progress on both quantitative and qualitative employment equity measures. Measure progress on a regular basis.xii

_____ Provide training on stress and change management. Reducing stress not only supports good mental health, but can reduce the onset of physical disease and the medical costs associated with it.xiv Contact Marti Evans at the Pennsylvania Psychological Association, 717-232-3817, for more information on licensed psychologists that provide stress management services.

_____ Create and enforce a return-to-work policy. Create disability and return-to-work strategies for employees with mental illnesses and introduce formal protocols such as modified work programs.xiii Contact the Center for Reintegration, 201-869-2333, for examples of what you can do.

_____ Create a work-life balance strategy. Create and implement policies that protect work-life balance among employees, with the goal of reducing illness and absenteeism.xiii Contact the Center for Reintegration, 201-869-2333, for examples, including “free days,” flexible work schedules, etc.

_____ Be accommodating. Learn how to create an environment that works for people who have special needs. See Section VII for examples of accommodations or contact the Pennsylvania Office of Vocational Rehabilitation regarding Employer Representatives who can conduct work-site evaluations to determine the skills and abilities needed to perform a job and the most suitable technology or accessibility options. Also, ask about special tax credits and deductions for providing accommodations.

_____ Ask your insurance carrier about (adequate) mental health coverage. Most insurance companies provide more restrictions to accessing mental health services than they do to accessing care for a physical illness, despite the fact that in any given year more people will have a mental illness than a physical illness. Cutting dollars for mental healthcare can increase overall medical costs. A 30% cost reduction in mental health services at a large Connecticut corporation triggered a 37% increase in medical care use and sick leave by employees using mental health services, thus costing the corporation more money rather than less.xv Insurance companies say businesses aren’t asking for mental health coverage. Let them know you are.
As an employer, you can play a large part in counteracting discrimination and stigma associated with mental illness by doing any or all of the following:

_____ **Include language in recruitment advertisements** that clearly states that your company is an equal opportunity employer. Adding, for example, “people who use mental health services are encouraged to apply.”

_____ **Display the OpenMindsOpenDoors logo** to let interested candidates know that you don’t discriminate. See the inside back cover for logo materials.

_____ **Discuss mental healthcare insurance coverage with job candidates** the same way, and at the same time, that you discuss insurance coverage for physical healthcare.

_____ **Eliminate testing and selection criteria that are unrelated to job requirements.** This includes personality tests designed to assess an applicant’s mental status.

_____ **Gain access to highly qualified persons with mental illnesses** looking for employment through agencies that serve these people. See Section VII for information on the Business Leadership Network, Pennsylvania Office of Vocational Rehabilitation and the Job Accommodation Network, all of which can connect you with job candidates.

_____ **Partner with a local mental health organization** to sponsor an outreach initiative such as a job fair, an employee training program or a community service project. See Section VIII for a list of mental health organizations in your area.
companies making a difference

leading the pack

Bell Socialization Services
was established in 1966 exclusively as a provider of mental health services. Today, Bell continues to provide mental health services to adults through innovative community-based programs.

More than eight years ago, Bell Socialization Services began hiring consumers of mental health services to work in its drop-in center. “From the beginning, it was clear what an asset consumers, with all of their experience, could be on our staff,” says Kris Stroup, Bell’s director of Mental Health Services. The organization currently employs consumers in all areas of its operation: in the family shelter and the Mental Retardation Department as well as in Mental Health Services.

Consumers in Bell’s programs are given a first look at all employment postings, with some positions designed specifically for consumers. However, all employees must go through the same application process, regardless of their history. “Consumers are competing with people who maybe don’t have any history of mental illness, yet frequently we find that [consumers] are best for the position,” says Stroup.

Through the following programs (which serve consumers), Bell actively recruits consumers as employees:

- **Transitional Employment Program** - Enables individuals to prepare for employment by offering vocational counseling and classes in résumé writing, interviewing skills and business orientation.

- **Supported Employment Program (SEP)** - Conducted in partnership with the Arc of York County, Penn Employment provides consumers with intensive one-on-one job-coaching services, including evaluation of suitable jobs, learning the chosen job responsibilities and teaching the tasks step by step as needed, and ongoing support. (Consumers from the SEP have gone on to work at all levels of Bell Socialization Services.)

Bell management understands that hiring consumers is a win-win proposition, where management and staff both stand to gain by making a leap of faith. “I always felt as though Bell took a chance on me, until one day my supervisor told me that I took a chance on Bell,” says Christina Johnson, a consumer who is now working at Bell Socialization Services.

Contact: Bell Socialization Services, 160 South George Street, York, PA 17401, 717-848-5767, www.bellsocialization.com

The Mental Health Association of Southeastern Pennsylvania (MHASP) is a non-profit advocacy, service and education agency founded in 1951 to help improve the lives of people with mental illnesses. It has been actively involved in providing community-based support programs and services for people with mental illnesses since 1984, and today operates more than 30 such programs in Philadelphia and its surrounding counties.

MHASP's formal policy of hiring people who have been diagnosed with a mental illness began in the 1980s. In 1989-1990, MHASP received a federal grant to compare the work performance of two teams of intensive case managers: one a team of professionals and the other a team of consumers of mental health services. The study showed there was no difference in work ability or in their clients’ outcomes. “MHASP works like any other office does,” says Joseph Rogers, the agency’s president and chief executive officer. “We are hiring people, not labels. We are hiring people with abilities and disabilities. As an employer, if you are prepared to deal with both, you are setting yourself up for success.”

One of the benefits of hiring people who have psychiatric disabilities is their life experience, Rogers explains. “Our consumer employees have first hand knowledge of the system, having been on both sides,” he says. Today the organization includes the words “consumers of mental health services are encouraged to apply” in every job notice. At present, the organization employs more than 330 people, the majority of whom are consumers, people in recovery from substance abuse disorders and/or people who have been homeless.

Through the following programs, MHASP actively recruits consumers:

- **ACT NOW (Advocacy Consumer Training for New Opportunities to Work)**, in Philadelphia, assists people with mental illnesses who want to find a job. It provides a three-week training course followed by a 12-week internship designed to lead to full-time employment. The training includes information and instruction on how to search for a job, write a résumé, take and give directions, make decisions, communicate appropriately, listen effectively and prepare for an internship. The program also provides intensive support during the interviews and throughout the internship. (Consumers make up 75% of the staff.)

- **ACT NOW II**, in Delaware County, prepares consumers for competitive employment by teaching job-readiness skills and providing experience in the workplace. Participants receive three weeks of classroom training followed by 12 weeks of on-the-job training. (Consumers make up 40% of the staff.)

- **Unity House Clubhouse** is a psychosocial rehabilitation program based on the clubhouse model designed by Fountain House in New York City. The model is organized around the “work-ordered day,” in which clubhouse members (as consumer participants are called) choose to gain appropriate skills in clerical, horticultural, education or food service work. Members later have the opportunity to use their skills through a part-time internship at a local business. (Consumers make up 60% of the staff.)
MHASP also offers its employees a flexible work schedule if needed and access to an Employee Assistance Program (which includes a stress management program.) The agency believes each employee, whether or not they have a mental illness, should be treated in a way that is tailored to them, not to their diagnosis.

As for managing people with known mental illnesses, Rogers, who himself has a mental illness, comments, “We challenge people with independence. I do more by leaving alone.”

MHASP has received several honors from the city of Philadelphia and other mental health associations for its work to empower and educate consumers.

Contact: Mental Health Association of Southeastern Pennsylvania, 1211 Chestnut Street, 11th Floor, Philadelphia, PA 19107, 215-751-1800, 800-688-4226. www.mhasp.org

Stairways Behavioral Health, located in Erie, Pa., is a recognized leader in the behavioral health care field. With nearly 300 employees serving more than 2,000 children and adults with mental illnesses annually, Stairways brings more than 40 years of experience to those who seek professional, compassionate care for themselves or their loved ones.

The organization is committed to assisting persons with mental health care needs by enhancing their quality of life through education, rehabilitation and treatment services. This dedication is demonstrated in the agency’s eagerness to hire consumers of mental health services. “We have access to some of the potentially highest functioning and most helpful people: our consumers” says William McCarthy, chief executive officer of Stairways.

Stairways’ Manager of Family Education, Trisha Sherrell, was once a Stairways client and board member. She now advocates for other clients, ensures family members are informed about services administered to their loved ones, and provides input into creating and maintaining “client-friendly” systems within the agency. Stairways firmly believes that the best form of help for those diagnosed with mental illnesses comes from the aid of their peers: those who have had success in dealing with their own mental illness. Thus, once they are in recovery, many consumers are encouraged to become employees.

For the past several years, Stairways has taken part in the Personal Work Adjustment Training program (PWAT). The program is for individuals who have dealt with personal challenges, including mental illness, that have caused them to lessen their chances for sustained employment. Stairways hires those in the program, pays their wages (with OVR funding) and provides workers with on-the-job supervision and skills training to further their employability potential. Program participants frequently move on to permanent employment within Stairways.

Using radio advertisements the organization actively recruits consumers to fill jobs. “If this is what we do for a living, then we should be the most actively enthusiastic of employers, otherwise, it’s just hypocrisy for us to ask others to take a chance with our clients,” says McCarthy.

Once hired by Stairways, all employees are supported through the following programs:

- **Stress Management Program** - As part of the EAP program, Hamot Hospital provides employees with needed seminars on stress management and work balance.

- **Employee Recognition Program** - In July 1998, Stairways began a comprehensive employee recognition program. Employees of the Month (awarded for stellar job performance) and employees who have performed life-saving and other heroic acts are rewarded monthly. Additionally, each year staff nominate one employee member whom they feel best exemplifies the Stairways mission of assisting persons with mental illnesses. The selected person is then presented with the Distinguished Service Award at the organization’s community luncheon.

- **Remediation Program** - To ensure the success of each employee, supervisors keep track of performance and are encouraged to step in and assist employees when performance goals are not being met.

In 1999, Stairways was named Employer of the Year by the Erie Economic Development Corporation for its excellence in job retention and growth.

Contact: Stairways Behavioral Health, 138 East 26th Street, Erie, PA 16504, 814-453-5806. www.stairwaysbh.org
successful people speak out

leaders in the workplace

“Even in the mental health field, where there should be a better understanding of the potential of mental health consumers to make valuable contributions, blanket prohibitions against those with psychiatric histories are common.” - Otto F. Wahl, Ph.D., Mental Illness Stigma and Work, 7/20/00.

“I became a newspaper reporter and editor and didn’t disclose my history until later out of basic necessity. With the stigma that surrounds mental illness, I wouldn’t have been hired as a journalist.” - Laurie Ahern, co-director of the National Empowerment Center and vice president of the National Association for Rights Protection and Advocacy.

“Hiring consumer employees begins to counteract some of the stereotypes and stigma present in the workplace itself ... the end result will be a better system with more people achieving higher levels of recovery than ever before.” - Moe Armstrong, director of Consumer and Family Services for Vinfen Corporation. Armstrong is also a consumer of mental health services.

“... who knows better what can help or hurt people in recovery than people who have gone through the experience themselves?” - Daniel Fisher, M.D., Ph.D., co-director of the National Empowerment Center and staff psychiatrist at Eastern Middlesex Outpatient Center. Fisher is also a consumer of mental health services.

“We are hiring people, not labels. We are hiring people with abilities and disabilities. As an employer, if you are prepared to deal with both, you are setting yourself up for success.” - Joseph Rogers, president and chief executive officer of the Mental Health Association of Southeastern Pennsylvania. Rogers is also a consumer of mental health services.

“As someone with schizophrenia who ultimately became a psychology director in the same mental health system where I once was hospitalized, I know personally how critical employment is to one’s recovery and re-integration into society as a whole.” - Frederick J. Frese III, Ph.D., holds clinical faculty appointments in psychiatry at several Ohio universities. Frese is also a consumer of mental health services.

“It’s amazing that some providers still don’t get it: that consumers have the best possible training as well as the motivation to really make a difference in the mental health profession.” - Trisha Sherrell, manager of Family Education at Stairways Behavioral Health, where she began as a client.

In 1989-1990, the Mental Health Association of Southeastern Pennsylvania received a federal grant to compare the work performance of two teams of intensive case managers: one a team of professionals and the other a team of consumers of mental health services. The study showed there was no difference in work ability or in their clients’ outcomes.
The Americans with Disabilities Act (ADA), signed into law by President George Bush on July 26, 1990, prohibits discrimination against people with disabilities, including psychiatric disabilities in employment, state and local government activities, public accommodations, public transportation, telecommunications, and public services. The following is for informational purposes only and is not to be used as legal guidance.

Q: What kinds of employers have to comply with Title I of the ADA?
A: Private employers with at least 15 employees, state and local governments, employment agencies, labor organizations, and management committees must conform to the ADA. Although the ADA does not apply to the federal government as an employer, discrimination by the federal government or by federally assisted programs is prohibited under Title V of the Rehabilitation Act of 1973.

Q: What is a psychiatric disability under the ADA?
A: Under the ADA, the term "disability" means: "(1) a physical or mental impairment that substantially limits one or more of the major life activities of [an] individual; (2) a record of such an impairment; or (3) being regarded as having such an impairment." It's important to note that under this definition, not every impairment is a disability. To rise to the level of a disability, an impairment must substantially limit one or more major life activities.

Q: How does the ADA define "mental impairment"?
A: The ADA defines "mental impairment" as "any mental or psychological disorder, such as ... emotional or mental illness." As examples of emotional or mental illnesses, the ADA lists bipolar disorder, major depression, anxiety disorders (which include panic disorder, obsessive-compulsive disorder, and post-traumatic stress disorder), schizophrenia, and personality disorders.

Q: To be protected by the ADA, do applicants or employees have to disclose their disability?
A: Yes. Employers are obligated to make reasonable accommodation only if they are aware of an individual's disability. In general, it is the applicant's or employee's responsibility to inform the employer that an accommodation is needed. However, if an employee with a known disability is having difficulty performing his or her job, the employer may ask whether he or she is in need of a reasonable accommodation.

Q: May employers ask questions about psychiatric disabilities after an offer of employment has been extended?
A: Yes. After an offer of employment has been made, the employer may ask questions related to disability, including psychiatric disability, and may require a medical examination, including a psychiatric examination, as long as the employer subjects all new employees in the same job category to the same inquiries and examinations.

Q: The ADA requires employers to provide "reasonable accommodations" for qualified individuals with disabilities. What are considered reasonable accommodations?
A: Because workplaces, jobs, and people with disabilities vary, reasonable accommodations for employees with disabilities must be determined on a case-by-case basis. Accommodations for individuals with psychiatric disabilities may involve changes to workplace policies, procedures, or practices, or they may involve physical changes to the workplace.

The following are examples of reasonable accommodations for individuals with psychiatric disabilities:

- **Time off from work** - Permitting the use of accrued paid leave or providing additional unpaid leave for treatment or recovery related to a disability is a reasonable accommodation, as long as the employee's absence does not impose undue hardship on the operation of the business.

- **A modified work schedule** - Allowing an individual with a disability to change his or her regularly scheduled working hours, working from 10 AM to 6 PM instead of from 9 AM to 5 PM, for example is considered a reasonable accommodation and might be helpful to an employee who takes medication that makes him or her tired or groggy in the morning.

- **Simple physical changes to the workplace** - For example, for those who have disability-related concentration difficulties, the use of room dividers, partitions, or other visual barriers may be helpful.

- **Modification of workplace policy** - As long as it does not create undue hardship, modifying a workplace policy is considered a reasonable accommodation. For example, for an employee who has disability-related concentration difficulties, it might be helpful to allow him or her to tape-record staff meetings, even if tape-recording is not usually allowed.

- **Adjustment of supervisory methods** - The ADA states that supervisors play a central role in achieving effective "reasonable accommodations" for their employees. Therefore, adjustment of supervisory methods is among the accommodations that are considered reasonable. For example, a supervisor who usually meets with employees on a weekly basis might offer to meet with an employee with a psychiatric disability on a daily basis for the purpose of providing more regular feedback.
legal issues and employee accommodations

- Providing a job coach - An employer may be required to provide a temporary job coach to assist in the training of a qualified employee with a disability. Allowing an employee to be accompanied by a job coach who is paid by a public or private social service agency is also considered a reasonable accommodation.

Q: Are there any exceptions to the "reasonable accommodations" requirements of the ADA?
A: Yes, there are two circumstances under which employers would not be required to provide reasonable accommodations: First, an employer is not required to provide an accommodation that would impose "undue hardship" on its business. Employers do not, for example, have to provide accommodations that are excessively costly, substantial, or disruptive to the normal operation of the enterprise.

Second, employers are not required to employ or to provide accommodations for an individual who poses a "direct threat" to the health or safety of the workplace. The determination that the individual poses a direct threat cannot be made based simply on stereotypes or generalizations about people with mental illness. Instead, it must be based on objective evidence obtained from a healthcare professional or some other credible source.

Q: Do requests for reasonable accommodation need to be made in writing?
A: No. Employees may request accommodations verbally or by any other method of communication.

Q: Do individuals with disabilities have to request reasonable accommodations at the beginning of their employment?
A: No. Requests for reasonable accommodations can be made at any time during employment.

Q: Are employers permitted to request that an employee provide documentation of need for reasonable accommodation from a healthcare professional?
A: Yes. An employer is entitled to know that an employee has a covered disability for which a reasonable accommodation is needed. Therefore, when the need for reasonable accommodation is not obvious, an employer may ask an employee to provide reasonable documentation about his or her disability and the functional limitations that result from it.

Take, for example, an employee who requests a time-off accommodation because he or she is "stressed out." The employee's statement is sufficient to put the employer on notice that he or she is requesting an accommodation, but because the need for an accommodation is not obvious based on this statement alone, the employer may require a healthcare provider's documentation that the employee has a disability that is within the meaning of the ADA and that the functional limitations associated with the disability require the employee to take time off. A variety of healthcare professionals may provide such documentation.

Q: What kinds of confidentiality requirements are specified by the ADA?
A: Employers are required by the ADA to keep in confidence all information concerning their applicants' or employees' medical histories or conditions, including psychiatric disabilities. Employers must maintain such information on separate forms and in separate medical files, apart from normal personnel files.

Q: Are there any exceptions to the ADA's confidentiality requirements?
A: Yes, there are limited exceptions to these requirements: Supervisors and managers may be told about necessary restrictions on the work or duties of an employee with a disability and about necessary accommodations. First aid and safety personnel may be told about the disability if it is possible that the employee might require emergency treatment. Government officials investigating compliance with the ADA must be given relevant information upon their request.

Q: How should an employer respond when employees ask questions about a co-worker who has a disability?
A: ADA confidentiality provisions prohibit any disclosure of medical information in responding to questions about an employee with a disability. Furthermore, an employer is not permitted to tell employees when it is providing a reasonable accommodation for a particular individual, since such disclosure implies that the individual probably has a disability (given that only individuals with disabilities are entitled to reasonable accommodations under the ADA). In responding to co-workers' questions, an employer is permitted to explain that it is acting for legitimate business reasons or in compliance with federal law.

For more information on employee accommodations contact the Job Accommodation Network at 800-526-7234.
resources

Center for Reintegration
www.reintegration.com
The Center for Reintegration’s activities are aimed at furthering the concept of reintegration through competitive employment. Reintegration.com is an online resource for those persons dealing with schizophrenia and related disorders. This site provides hope and help in returning to a meaningful life that includes finding work, independent living, and relationships with family and friends. Contact: 201-869-2333.

Employee Assistance Professionals Association (EAPA)
www.eapassn.org
Employee Assistance Programs have long been a mainstay at large corporations, where they’re run by the human resources department. For a small company, though, they were not affordable until outsourcing created new alternatives. Now, you have several options, including insurers, big mental-health chains, and local independent providers, whose monthly fees typically range from $2 to $6 per employee. As a result, 27% of companies with fewer than 25 employees were offering plans in 1997 - nearly double the 1994 rate, says the federal Substance Abuse and Mental Health Services Administration. You can search the EAPA Web site for providers in your area. Contact: 703-522-6272.

Job Accommodation Network (JAN)
janweb.icdi.wvu.edu
The Job Accommodation Network is a free service of the Office of Disability Employment Policy (ODEP) of the U.S. Department of Labor. JAN’s mission is to facilitate the employment and retention of workers with disabilities by providing employers, employment providers, people with disabilities, their family members and other interested parties with information on job accommodations, self-employment, small business opportunities and related subjects. JAN represents the most comprehensive resource for job accommodations available. Contact: 800-526-7234, jan@janicdi.wvu.edu.

Pennsylvania Business Leadership Network
www.blnofpa.org
The Pennsylvania Business Leadership Network is a statewide, employer driven organization that encourages businesses to promote the employment of people with a disability to their peers . . . other businesses. This network not only provides employers with access to a network of their peers, it also provides opportunities for training, positive public relations, an increased number of applicants with a disability, and a centralized source of information. Contact: Stacy M. Liddick, 717-763-0968, stacy.liddick@blnofpa.org.

Pennsylvania Office of Vocational Rehabilitation (OVR)
www.dli.state.pa.us (link to ‘Disability Services’). OVR is a state agency that provides a wide range of services just for employers. They match prescreened, qualified candidates to your business requirements, and provide follow-up and support to make sure both the employee and the employer are satisfied. OVR can also hire a job coach who does the actual skill training rather than the employer. For more information contact the nearest OVR office from the list below:

- Allentown: 610-821-6441, 800-922-9536
- Altoona: 814-946-7240, 800-442-6343
- DuBois: 814-765-0545, 800-922-4017
- Erie: 814-871-4551, 800-541-0721
- Johnstown: 814-255-6771, 800-762-4223
- New Castle: 724-656-3070
- Philadelphia: 215-560-1900, 800-442-6381
- Pittsburgh: 412-392-4950
- Reading: 610-378-4370, 800-442-0949
- Rosemont: 610-525-1810, 800-221-1042
- Washington: 724-223-4430, 800-442-6367
- Wilkes-Barre: 570-826-2011, 800-634-2060
- Williamsport: 570-327-3600, 800-442-6359
- York: 717-771-4407

The following organizations support the OpenMindsOpenDoors campaign and can provide information and advocacy on mental health issues. Those with an * have a formal Speakers Bureau, or staff, that can speak to your organization on a multitude of mental health issues.

*The Advocacy Alliance
846 Jefferson Ave., P.O. Box 1368, Scranton, PA 18501
Contact: Kathy Wallace, 570-342-7762, kw@theadvocacyalliance.org.

Consumer Action & Response Team of Allegheny County
938 Penn Ave., Suite 501, Pittsburgh, PA 15222
Contact: Paul Freund, 412-281-7333, pfreund@cartallegheny.org.

*Mental Health Association of Adams County
331-C Main St., P.O. Box 117, McSherrystown, PA 17344
Contact: Catherine R. Mentzer, 717-637-9321, cmentzer@netrax.net.
resources

*Mental Health Association of Allegheny County
1945 Fifth Ave., Pittsburgh, PA 15219
Contact: Brenda Lee, 412-391-3820, belee@mhaac.net.

*Mental Health Association in Beaver County
3582 Brodhead Rd., Suite 107, Monaca, PA 15061
Contact: 724-775-4165, mha@timesnet.net.

*Mental Health Association of the Central Susquehanna Valley
37 West Main St., Suite 204, Bloomsburg, PA 17815
Contact: Nancy Hazlinsky, 570-784-9583, mhacsv@jlink.net.

*Mental Health Association in Fayette County
31 Connellsville St., Uniontown, PA 15401
Contact: Pam Bailor, 724-438-6738, pbailor@mhafofduco.org.

*Mental Health Association of Franklin & Fulton Counties
127 South Second St., Chambersburg, PA 17201
Contact: Kenneth Wuerenberg, 717-264-4301, mha@innernet.net.

*Mental Health Association in Lancaster County
630 Janet Ave., Lancaster, PA 17601
Contact: Mary Steffy, 717-397-7461, mhalc@redrose.net.

*Mental Health Association of Northwest Pennsylvania
1101 Peach St., Erie, PA 16501
Contact: Bill Grove, 814-452-4462, bgrove1@hotmail.com.

*Mental Health Association in Pennsylvania
1414 N. Cameron Street, 2nd Floor, Harrisburg, PA 17101
Contact: Sue Walther, 717-346-0549, 866-578-3659, info@mhap.org.

*Mental Health Association of Reading & Berks County
122 West Lancaster Ave., Suite 207, Shillington, PA 19607-1874
Contact: Joe Conway, 610-775-3000, mharb@ptd.net.

*Mental Health Association of Southeastern Pennsylvania
1211 Chestnut St., Suite 1100, Philadelphia, PA 19107
Contact: Nancy Salazar, 215-751-1800, ext. 228.

*Mental Health Association of Washington County
15 S. College, Washington, PA 15301
Contact: Lynne Loesch, 724-225-2061.

*Mental Health Association in Westmoreland County
409 Coulter Ave., Suite 4, Greensburg, PA 15601-1034
Contact: Laura Hawkins, 724-834-6351, mhaoc@westol.com.

*Mental Health Association in York County
303 East Market St., York, PA 17403
Contact: Samiah Slusser, 717-843-6973, mentalhealth@mhay.org

Mental Health/Mental Retardation Program Administrators Association of Pennsylvania
17 North Front St., Harrisburg, PA 17101
Contact: Mike Chambers, 717-232-7554, mchamber@pacounties.org.

*NAMI Pennsylvania
2149 North Second St., Harrisburg, PA 17110
Contact: 717-238-1514, 800-223-0500, nami-pa@nami.org.

*NAMI Southwestern Pennsylvania
4721 McKnight Rd., Suite 216 South, Pittsburgh, PA 15237
Contact: 412-366-3788, 888-264-7972, info@namiswpa.org.

Parents Involved Network of Pennsylvania
1211 Chestnut St., Philadelphia, PA 19107
Contact: 215-751-1800, 800-688-4226, pin@pinofpa.org.

Pennsylvania Academy of Family Physicians
2704 Commerce Dr., Suite A, Harrisburg, PA 17110
Contact: 717-564-5365, 800-648-5623.

Pennsylvania Association of Rehabilitation Facilities
2400 Park Dr., Harrisburg, PA 17110
Contact: 717-657-7608, cyancisin@parf.org.

Pennsylvania Community Providers Association
2400 Park Dr., Harrisburg, PA 17110
Contact: 717-657-7078, mail@paproviders.org.

*Pennsylvania Department of Public Welfare
Office of Mental Health and Substance Abuse Services,
P.O. Box 2675, Harrisburg, PA 17105
Contact: Linda Flores, 717-787-6443, liflores@state.pa.us.

*Pennsylvania Mental Health Consumers’ Association
4105 Derry St., Harrisburg, PA 17111
Contact: Shelley Bishop, 717-564-4930, pmhca@pmhca.org.

*Pennsylvania Psychological Association
416 Forster St., Harrisburg, PA 17102
Contact: Marti Evans, 717-232-3817

Pennsylvania Psychiatric Society
P.O. Box 8820, 777 East Park Dr., Harrisburg, PA 17105-8820
Contact: 717-558-7750

*Philadelphia Psychiatric Society
8001 Roosevelt Blvd., Suite 210, Philadelphia, PA 19152
Contact: Shirley Meade, 215-543-0500; Carla Rodgers, MD, 215-330-8246.


