



**JOB ACCOMMODATION NETWORK**

## Accommodation and Compliance Series

# Employees with Multiple Sclerosis

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## Preface

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# JAN'S ACCOMMODATION AND COMPLIANCE SERIES

## Introduction

JAN's Accommodation and Compliance Series is designed to help employers determine effective accommodations and comply with Title I of the Americans with Disabilities Act (ADA). Each publication in the series addresses a specific medical condition and provides information about the condition, ADA information, accommodation ideas, and resources for additional information.

The Accommodation and Compliance Series is a starting point in the accommodation process and may not address every situation. Accommodations should be made on a case by case basis, considering each employee's individual limitations and accommodation needs. Employers are encouraged to contact JAN to discuss specific situations in more detail.

For information on assistive technology and other accommodation ideas, visit JAN's Searchable Online Accommodation Resource (SOAR) at <http://www.jan.wvu.edu/soar>.

## Information about Multiple Sclerosis (MS)

### How prevalent is MS?

According to the National Multiple Sclerosis Society, approximately 400,000 Americans acknowledge having MS, and every week about 200 people are diagnosed. Worldwide, MS occurs with much greater frequency in higher latitudes (above 40° latitude) away from the equator, than in lower latitudes, closer to the equator (National Multiple Sclerosis Society, 2003).

MS is more common among Caucasians (particularly those of northern European ancestry) than other races, and is almost unheard of in some populations, such as Eskimos. Certain outbreaks or clusters of MS have been identified, but their significance is not known. In certain populations, a genetic marker has been linked to MS. A particular genetic trait occurs more frequently in people with MS than in those who do not have the disease (National Multiple Sclerosis Society, 2003).

The average age of onset is usually between 20 and 40, although it also can occur in older individuals. MS is twice as common in women compared to men (National Multiple Sclerosis Society, 2003).

### What is MS?

MS is a chronic autoimmune disease of the central nervous system. It causes destruction of myelin (a protein that forms a protective coating around nerve cells) in the central nervous system. When myelin is destroyed signals traveling through the nerve cells are interrupted or delayed, resulting in various neurologic symptoms occurring at different locations throughout the body. The progress, severity, and specific symptoms

of MS in any one person cannot yet be predicted, but advances in research and treatment are giving hope to those affected by the disease (National Multiple Sclerosis Society, 2003).

### **What are the symptoms of MS?**

MS is often characterized by a pattern of exacerbation and remission. Symptoms may be mild, such as numbness in the limbs, or severe, such as paralysis or loss of vision. Possible symptoms include fatigue, loss of coordination, muscle weakness, spasticity, numbness, slurred speech, visual difficulties, paralysis, muscle cramps, bladder or bowel problems, and sexual dysfunction (National Multiple Sclerosis Society).

The initial symptoms of MS are most often difficulty walking; abnormal sensations such as numbness or "pins and needles"; and pain and loss of vision due to optic neuritis, an inflammation of the optic nerve. Less common initial symptoms may include tremor; lack of coordination; slurred speech; sudden onset of paralysis, similar to a stroke; and decline in cognitive function (National Multiple Sclerosis Society, 2003).

### **What causes MS?**

Studies show that MS is the result of a number of factors rather than a single factor. Most likely, genetics plays a role in determining a person's susceptibility to MS. The disease is not entirely genetically controlled, although first-degree relatives of individuals with MS have a 20- to 40-fold increased risk of developing the disease. Exposure to environmental factors, such as a virus or bacteria, also plays a role, although the specific factors have not yet been identified. Another likely factor is a defective regulation of the normal immune response that leads to unwarranted attacks by the body's defense mechanisms (an auto-immune process) (National Multiple Sclerosis Society, 2003).

### **How is MS treated?**

According to the National Multiple Sclerosis Society, there are currently 5 federally approved medications that treat MS. Four of them: Avonex, Betaseron, Rebif, and Copaxone have been shown to be effective in modifying the natural course of relapsing MS. Clinical experience suggests they are most effective if taken early in the disease. The fifth drug, Novantrone, is effective in slowing down MS that is rapidly worsening or becoming progressive. Steroids may be used to shorten acute attacks. Many other therapies are being clinically tested, and researchers feel hopeful that more treatments for MS will be available in the near future. In addition to medications, there are also many therapies to moderate or relieve MS symptoms, including physical therapy, exercise, vocational and cognitive rehabilitation, attention to diet, adequate rest, and counseling (National Multiple Sclerosis Society, 2003).

## **MS and the Americans with Disabilities Act**

### **Is MS a disability under the ADA?**

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet (EEOC, 1992). Therefore, some people with MS will have a disability under the ADA and some will not.

A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having such an impairment (EEOC, 1992). For more information about how to determine whether a person has a disability under the ADA, visit <http://www.jan.wvu.edu/corner/vol02iss04.htm>.

### **When requesting an accommodation, do employees with MS have to tell their employers that they have MS?**

Under the ADA, when an employee requests an accommodation, an employer can require sufficient medical documentation to determine whether the employee has a disability and needs the requested accommodation. According to the Equal Employment Opportunity Commission, sufficient medical documentation can include the name of the medical condition (EEOC, 2000). However, the employee may want to begin by giving a more general description of the condition, such as saying "I have a neurological impairment," and see if that suffices. However, such a limited description does not tell the employer that the individual has an impairment that substantially limits a major life activity because it is vague.

To increase the chance that the employer will settle for the use of a vague term, the employee may want to provide a letter from his/her doctor that confirms the existence of a "neurological impairment," but then goes on to give concrete information about how the condition substantially limits a major life activity. The inclusion of concrete information may satisfy the employer. However, if the employer insists on knowing the diagnosis and the individual refuses to divulge it, the employer probably has a valid reason to refuse to provide the requested accommodation.

## **Accommodating Employees with MS**

(Note: People with MS may develop some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with MS will need accommodations to perform their jobs and many others may only need a few accommodations. The following is only a sample of the possibilities available. Numerous other accommodation solutions may exist.)

### **Questions to Consider:**

1. What limitations is the employee with MS experiencing?
2. How do these limitations affect the employee and the employee's job performance?
3. What specific job tasks are problematic as a result of these limitations?
4. What accommodations are available to reduce or eliminate these problems? Are all possible resources being used to determine possible accommodations?
5. Has the employee with MS been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee with MS to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training regarding MS?

### **Accommodation Ideas:**

#### Activities of Daily Living:

- Allow use of a personal attendant at work
- Allow use of a service animal at work
- Make sure the facility is accessible
- Move workstation closer to the restroom
- Allow longer breaks
- Refer to appropriate community services

#### Cognitive Impairment:

- Provide written job instructions when possible
- Prioritize job assignments
- Allow flexible work hours
- Allow periodic rest breaks to reorient
- Provide memory aids, such as schedulers or organizers
- Minimize distractions

- Allow a self-paced workload
- Reduce job stress
- Provide more structure

#### Fatigue/Weakness:

- Reduce or eliminate physical exertion and workplace stress
- Schedule periodic rest breaks away from the workstation
- Allow a flexible work schedule and flexible use of leave time
- Allow work from home
- Implement ergonomic workstation design
- Provide a scooter or other mobility aid if walking cannot be reduced

#### Fine Motor Impairment:

- Implement ergonomic workstation design
- Provide alternative computer access
- Provide alternative telephone access
- Provide arm supports
- Provide writing and grip aids
- Provide a page turner and a book holder
- Provide a note taker

#### Gross Motor Impairment:

- Modify the work-site to make it accessible
- Provide parking close to the work-site
- Provide an accessible entrance
- Install automatic door openers
- Provide an accessible restroom and break room
- Provide an accessible route of travel to other work areas used by the employee
- Modify the workstation to make it accessible
- Adjust desk height if wheelchair or scooter is used
- Make sure materials and equipment are within reach range
- Move workstation close to other work areas, office equipment, and break rooms

#### Heat Sensitivity:

- Reduce work-site temperature
- Use cool vest or other cooling clothing
- Use fan/air-conditioner at the workstation
- Allow flexible scheduling and flexible use of leave time
- Allow work from home during hot weather

### Speech Impairment:

- Provide speech amplification, speech enhancement, or other communication device
- Use written communication, such as email or fax
- Transfer to a position that does not require a lot of communication
- Allow periodic rest breaks

### Vision Impairment:

- Magnify written material using hand/stand/optical magnifiers
- Provide large print material or screen reading software
- Control glare by adding a glare screen to the computer
- Install proper office lighting
- Allow frequent rest breaks

### Situations and Solutions:

A claims representative for a government agency was having difficulty reading files due to vision impairment caused by MS. His employer purchased a stand magnifier and added task lighting to his workstation.

A manager with MS working for a publishing company was having difficulty transferring from her wheelchair to the toilet in the employee restroom. Her employer installed additional grab bars.

An attorney with MS was having difficulty carrying documents to meetings at various locations due to upper extremity weakness. His employer purchased a portable cart that was easy to get in and out of his car.

An operations clerk for a large distribution center was having difficulty working at full production due to fatigue caused by MS. Her employer moved her to a shift that was not as busy so caused less stress and made less physical demands of the clerk. The clerk was also able to take more frequent breaks on the new shift.

An engineer with MS was experiencing heat sensitivity. She was provided a private office where the temperature could be lower than in the rest of the facility. She was also encouraged to communicate with coworkers by telephone or email when possible to reduce the amount of walking she had to do.

A resource nurse with MS was having difficulty accessing her workstation. Her employer widened the floor space in her workstation to allow her easier access from her wheelchair and added an adjustable keyboard tray, monitor holder, and telephone tray. In addition, the employee was provided a flexible schedule so she could continue her medical treatment.

A clerical worker was having difficulty concentrating and remembering job tasks due to cognitive impairment caused by MS. Her employer added sound-baffle panels to reduce distractions in her work area. In addition, her employer gave her written job duties at the beginning of each day and provided a notebook that contained outlines of what each job duty entailed.

A teacher with MS was having difficulty communicating with students because his speech became soft and slurred when he was fatigued. He was given a personal speech amplifier so he would not have to strain to project his voice, and he was allowed to schedule his classes so he could take periodic breaks.

### **Products:**

There are numerous products that can be used to accommodate people with limitations. JAN's Searchable Online Accommodation Resource at <http://www.jan.wvu.edu/soar> is designed to let users explore various accommodation options. Many product vendor lists are accessible through this system; however, JAN provides these lists and many more that are not available on the Web site upon request. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

## Resources

### **Job Accommodation Network**

West Virginia University  
PO Box 6080  
Morgantown, WV 26506-6080  
Toll Free: (800)526-7234  
TTY: (877)781-9403  
Fax: (304)293-5407  
jan@jan.wvu.edu  
<http://www.jan.wvu.edu>

The Job Accommodation Network (JAN) is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act (ADA), and the employability of people with disabilities.

### **Office of Disability Employment Policy**

200 Constitution Avenue, NW, Room S-1303  
Washington, DC 20210  
Direct: (202)693-7880  
TTY: (202)693-7881  
Fax: (202)693-7888  
infoODEP@dol.gov  
<http://www.dol.gov/odep>

The Office of Disability Employment Policy (ODEP) is an agency within the U. S. Department of Labor. ODEP provides national leadership to increase employment opportunities for adults and youth with disabilities while striving to eliminate barriers to employment.

### **Independent Living Research Utilization Program**

2323 S Shepherd, Suite 1000  
Houston, TX 77019  
Direct: (713)520-0232  
TTY: (713)520-5136  
Fax: (713)520-5785  
<http://www.bcm.tmc.edu/ilru>

ILRU is a national center for information, training, research, and technical assistance in independent living, which operates the IL NETWORK with the National Council on Independent Living (NCIL), organizations, and individuals involved in independent living nationwide.

**International Multiple Sclerosis Support Foundation**

9420 E. Golf Links Rd. #291  
Tucson, AZ 85720-1340  
<http://www.msnews.org>

The International Multiple Sclerosis Foundation (IMSSF) is a non-profit IRS 501(c)3 Charitable Organization that was founded to improve the understanding of multiple sclerosis through education, and to promote the reduction of isolation by providing a support network for patients, their families, friends, and physicians.

**Multiple Sclerosis Foundation, Inc.**

6350 North Andrews Avenue  
Fort Lauderdale, FL 33309-2130  
Toll Free: (800)225-6495  
Direct: (954)776-6805  
Fax: (954)938-8708  
[support@msfocus.org](mailto:support@msfocus.org)  
<http://www.msfocus.org>

The MS Foundation is a contemporary national, nonprofit organization that provides free support services and public education for persons with Multiple Sclerosis, newsletters, toll-free phone support, grants for research, information, and referrals.

**Multiple Sclerosis Society of Canada**

250 Floor Street East  
Suite 1000  
Toronto, ON M4W 3-P9  
Toll Free: (800)268-7582  
Direct: (416)922-6065  
Fax: (416)922-7538  
<http://www.mssociety.ca>

The Multiple Sclerosis Society of Canada's mission is to be a leader in finding a cure for multiple sclerosis and enabling people affected by MS to enhance their quality of life.

**National Multiple Sclerosis Society**

733 Third Avenue  
New York, NY 10017  
Toll Free: (800)344-4867  
[info@nmss.org](mailto:info@nmss.org)  
<http://www.nationalmssociety.org>

The National Multiple Sclerosis Society is dedicated to ending the devastating effects of multiple sclerosis.

## References

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