A Quality Implementation of Title I of the Americans With Disabilities Act of 1990

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Key Words: employment • occupational therapy (treatment)

The Americans with Disabilities Act (ADA) of 1990 (Public Law 101–336) will have a major effect on private sector employers. Employers with 25 or more employees must provide qualified persons with disabilities equal access to employment with or without reasonable accommodations by July 1992. Employers with 15 to 24 employees must comply with the law by July 1994. Occupational therapy managers must understand the employment provisions of the law and develop strategies for implementation in order to comply with its regulations. This paper suggests the use of a total quality management approach, as espoused by W. E. Deming (1986), as a framework for an implementation plan. This approach focuses on quality improvement in the organization, respect for all workers for their abilities, replacement of fear of persons with disabilities with respect, and the building of partnerships between employers and employees with disabilities. A summary of the provisions of Title I as well as a checklist of measures and a sample job description that adheres to the regulations of Title I is presented to prepare an organization to become compliant. Occupational therapists are seen as uniquely skilled professionals who can contribute greatly in their own organizations as well as act as consultants to other managers in implementing Title I of the ADA using a total quality approach.

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The Americans with Disabilities Act (ADA) of 1990 (Public Law 101–336), signed into law July 26, 1990, guarantees the 43 million persons with one or more disabilities their basic civil rights. Justin Dart, chair of the President's Committee on Employment of People With Disabilities, saw this landmark legislation as providing a sound legal framework for the practical implementation of the inalienable right of all persons with disabilities to participate equally in the mainstream of society (Dart, 1990).

The threefold agenda of the ADA is (a) to provide a clear and comprehensive national mandate to end discrimination against persons with disabilities, (b) to provide enforceable standards, and (c) to ensure that the federal government plays a central role in enforcing the standards.

This legislation is seen by disabilities rights advocates as well as some in the legislative community as the most important piece of civil rights legislation since the Civil Rights Act of 1964 (Wodatch, 1990). It is hoped that the ADA, fashioned after the Civil Rights Act of 1964 in procedural framework and the Rehabilitation Act of 1973 (Public Law 93–121) in substantive framework (American Hospital Association, 1991), creates the comprehensive legislative necessary to ensure equal opportunities for all persons with disabilities.

The ADA is defined in five titles, each addressing a different provision: Title I, Employment; Title II, Public Services and Transportation; Title III, Public Accommodations; Title IV, Telecommunications; and Title V, Miscellaneous Provisions. Protection under these five titles encompasses almost the entire spectrum of activities within our society. It allows persons with disabilities the right of access to many employment and recreational opportunities previously inaccessible to them.

Many proponents of the law believe that Title I may be the most important provision. A 1986 Harris poll of 1,000 persons with disabilities suggested that two thirds of all disabled Americans between the ages of 16 and 64 years are unemployed (Louis Harris & Associates, 1986). Many of them want to work but have not been given a chance. Allowing these persons to work reduces government subsidies and increases a community's tax base. The federal government estimates that an employed person generates $65,000 in taxes, saved costs of social services, and business generated by consumer spending (Noel, 1990). Gainful employment promotes independence and mastery and is essential to a person's self-respect and quality of life. Independent, confident persons become contributing members of their communities. Adding persons with disabilities to the labor force is a benefit to the economic market. It increases the pool of job applicants. These are but a few of the benefits employers may recognize as reasons to employ persons with disabilities. Now there is an additional reason: It is the law.
Faced with regulatory guidelines, managers must develop implementation strategies. How-to methodologies have been suggested in numerous publications (Noel, 1990; Pati & Stubblefield, 1990). However, most lack a framework to establish a truly successful implementation plan. An alternative approach is to develop a plan to implement Title I with lessons learned from a successful management model known as the total quality management approach, or the continuous quality improvement approach.

The purpose of the present article is to provide occupational therapy managers with a greater understanding of the employment provisions of the ADA and to describe the role and function of a manager implementing the ADA using a total quality approach. To accomplish this, the continuous quality improvement management approach and Title I guidelines regarding employment are summarized. Terms essential to understanding the law are defined, and a checklist of measures to prepare an organization to achieve compliance is provided. Contributions that occupational therapists can make to an organization’s successful implementation of Title I are suggested.

Quality in American Business

In the past decade, quality has come to be recognized by many American business executives as the key to economic viability. Faced with increasing competition from the Japanese, a decreasing market share, and increasingly dissatisfied workers, manufacturing executives turned to quality experts in the beginning of the 1980s for assistance in reversing the downward spiral toward insolvency (Casalou, 1991).

One of these quality experts was W. Edwards Deming, a statistician by training who became a management consultant. His philosophy of statistical quality control as a basis for quality products was developed in the 1930s and 1940s; however, it was not incorporated into the management of American manufacturing industries because they were more interested in production than in quality (Walton, 1986). Deming’s philosophy was introduced to the Japanese in the 1950s, when the Japanese were struggling with their postwar industrial recovery effort. Deming agreed to assist them, and the leaders of Japan’s top 20 manufacturing companies incorporated his principles into their businesses. Quality became a guiding value. Many persons credit this change with the present-day success of the Japanese economy. The Japanese were so appreciative of Deming’s work that they established the Deming Prize to be awarded to individuals and companies exemplifying his teachings. It was not, however, until 30 years later that Deming was discovered in the United States through an NBC documentary in 1980 entitled, “If Japan Can... Why Can’t We?” (Crawford-Mason, & Lockhart, 1980). Since then, Deming’s principles have become a cornerstone of the quality movement in American business.

The basic tenets of the quality paradigm are not new or revolutionary: They are common sense and basic to the understanding of human behavior. Individually, they are recognized as elements of other management approaches. It is their combination that establishes them as the components of a quality improvement management paradigm. Some of the key elements are described below.

One element is that the quality of an output, the product or service, is driven by the continuous improvement in the processes that produce that output. This improvement is not a one-time occurrence, but rather, a process that is continually being revised in a positive direction. This characteristic is central to the quality paradigm because it creates a constancy of purpose for the organization, which feeds long-term investment and growth. Continuous improvement strategies are based on sound statistical techniques, simplified sufficiently to be used by workers closest to the production systems and not just by quality-control experts. Those continuous quality improvement efforts are not end-product inspections or retroactive audits, but ongoing evaluations to improve the systems. They are methods for gathering facts and data from which improvement decisions can be made and allow for innovation in the workplace. Research and education into ways of doing things right the first time is essential.

Another element is that the individual worker is the company’s most important asset. Respect for individuals is paramount. Human beings are seen as essentially good and wanting to work hard. Deming believed that employees wanted to do the best job they can and that it is critical to let them participate in improving the systems in which they are involved. In a bottom-up approach, the persons doing a job see the need for change before management sees it; they have creative ideas for change; and they become more invested when their ideas are implemented and they can improve the outcome. To support employees in that endeavor, employers must invest in employee training. If properly trained, the individual worker will avidly assist the company in the pursuit of quality. Workers will take pride in their work, thus the quality of their work will improve.

A third element is that fear must be driven out of the workplace, and management must institute leadership. The disciplinary approach to management frequently enforces barriers to quality rather than focusing on identifying and eliminating barriers. Employees fear being blamed for a problem, not getting raises, or being fired. When management changes its approach and institutes leadership to help persons do their jobs better, fear disappears. When open lines of communication are encouraged between management and workers, suggestions to improve quality are discovered. Policies that encourage reporting system failures and advocating no layoffs in
slow periods have been methods to eliminate fear in successful quality-driven companies.

A fourth element is that barriers to teamwork must be eliminated. Customers must become team members. Their satisfaction ultimately brings return business to the organization. To provide the customer with a quality product, the company must involve the customer in the project from the beginning. To receive high-quality resources to produce high-quality products, the company must involve the supplier. To produce a high-quality product, the different departments of a company must work together. Denning suggested involving the customer at the beginning of the design phase of a product or service, developing a relationship with a single vendor and awarding contracts on quality of supplies rather than on price, and developing project teams that incorporate members from all departments to produce a final high-quality product (Walton, 1986). In many companies, teamwork is seen as less efficient than a line approach, because it is perceived that an excessive amount of discussion is necessary to reach a decision. However, as organizations using a total management approach have found, much discussion on the front end saves repeated work and errors that need correction, which takes as much time if not more on the back end.

In essence, an organization that wants to improve the quality of its products and, thus, its financial bottom line must embark on a cultural transformation that begins with top management. Institution of a total quality approach to doing business requires a change in cultural values and a major investment of resources. This investment has produced successful results in postwar Japanese companies and, during the past decade, in such American companies as Ford and AT&T (Walton, 1986). It has produced a high return on investment.

It is suggested that the elements of a total quality management approach be incorporated into an organization’s plan to implement Title I of the ADA. A quality implementation of Title I will employ qualified persons with disabilities, focus on quality improvement in the organization, respect all workers for their abilities, replace fear of persons with disabilities with respect for persons with disabilities, and build partnerships between employers and employees with disabilities.

To develop a plan for a quality implementation of Title I, an understanding of the title’s terminology and provisions is necessary.

**Title I: Employment**

The purpose of Title I of the ADA is to protect persons with disabilities from discrimination in employment. An “individual with a disability” who can perform the “essential functions” of the job with or without “reasonable accommodations” cannot be discriminated against. An employer must provide reasonable accommodations to a qualified person with a disability unless it will cause “undue hardship.” These statements of rights in the ADA are fashioned after Section 504 of the Rehabilitation Act of 1973, which outlaws discrimination against “persons with handicaps” by employers receiving federal funds (Federal Programs Advisory Service, 1990). Occupational therapy managers in hospitals and schools, among others, have been operating under the principles of Section 504. The term *individual with a disability* in the ADA is synonymous with *person with a handicap* in Section 504 of the Rehabilitation Act of 1973.

The ADA broadens the scope of Section 504 to include employers in the private sector. Private employers with 25 or more employees must comply with the ADA by July 26, 1992; employers with 15 to 24 employees must comply by July 1994. Small business owners, such as occupational therapists in private practice as well as all managers, must prepare now to be knowledgeable in measures necessary to enforce the ADA in their organizations.

Guidelines to help employers comply with the law have been written by the Equal Employment Opportunity Commission. Proposed guidelines published in February 1991 in the Federal Register were commented on by employers, persons with disabilities, and advocacy groups representing both constituencies. The final rule with interpretative guidelines was published in the Federal Register on July 26, 1991 (Office of the Federal Register, 1991). The Equal Employment Opportunity Commission and the Department of Justice are responsible for enforcing the regulations of Title I of the ADA.

**Terminology**

The ADA borrowed most of its terms from Section 504 of the Rehabilitation Act of 1973. Managers working in organizations receiving federal funds are familiar with its terms and may have already implemented Section 504 regulations in the workplace.

*Disability* The term *disability* is synonymous with *handicap*, as defined in the Rehabilitation Act of 1973. A person with a disability is a person who (a) has a physical or mental impairment that substantially limits one or more of the major life activities, (b) has a record of such an impairment, or (c) is regarded as having such an impairment.

Particular groups protected under the law include persons infected with HIV and AIDS. In contrast, the condition of pregnancy is not considered a disability and is therefore excluded. A major life activity may include activities of daily living, walking, seeing, hearing, speaking, breathing, learning, working, performing manual tasks, sitting, standing, lifting, and reaching.

The second part of the definition protects persons who have a record of a disability, such as a person who has been cured of cancer or who has successfully completed a drug rehabilitation program. The third part of
the definition ensures that a person with a disfigurement, such as from a burn, may not be discriminated against due to some bias or attitude of others toward the impairment.

**Qualified individual with a disability.** This second term is a critical element of the law (Verville, 1990). A qualified individual with a disability is one who satisfies the requisite skill, experience, educational, and other job-related requirements of the position and who, with or without reasonable accommodations, can perform the essential functions of the job.

**Essential functions.** The essential functions of a job are the fundamental job duties of a position. They are the job duties a person must be able to perform unaided or with reasonable accommodations. The essential functions are not marginal functions. A function may be essential due to the limited number of employees available to perform it, because the position exists to perform the function, or because the function is highly specialized. Determination of whether a job duty is essential is based on the employer’s judgment as to whether it is a matter of business necessity, whether it is written in the job description, the frequency with which it is performed, the consequences of not performing the duty, the terms of a collective bargaining agreement, the work experience of past incumbents, and the work experience of incumbents in similar jobs. It is imperative that a job description be written before employer begins advertising or interviewing for the position, although this is not required by the law. The job description will be considered evidence of the essential functions of the job if an employee or prospective employee files a complaint.

A job analysis must be completed to determine the essential functions of a job. Once the essential functions of a job are determined, they can be transferred to the job description. The position/job description form in the Handicapped Requirements Handbook (Federal Programs Advisory Service, 1982) outlines all the components that should be included in a job description. This form can assist the employer in determining whether an applicant is qualified for a position. It describes as necessary components the title, job objectives (purpose of the position), essential job functions, job standards (i.e., minimum qualifications, such as degree, license, credential, physical requirements, lifting, bending, reaching), job location, and equipment used in job performance. An example of a job description developed with the use of the Handicapped Requirements Handbook job description form, which includes essential functions, is shown in Appendix A.

**Reasonable accommodations.** Reasonable accommodations are modifications or adjustments that enable persons with disabilities to perform a job they are otherwise qualified to perform. Reasonable accommodations in the law include (a) the restructing of existing facilities to make them accessible to and usable by persons with disabilities; (b) the restructuring of a job through redistribution of the marginal functions of the job to another position or redefinition of when and how the essential functions of the position are done; (c) the creation of part-time or modified work schedules; (d) reassignment to a vacant position; (e) the acquisition or modification of equipment or a device; (f) the appropriate adjustment or modification of examinations, training materials, or policies; (g) the provision of qualified readers or interpreters; and (h) other similar accommodations.

Most reasonable accommodations can be made quite inexpensively. In a 1987 Harris poll of 920 employers, 74% of top managers considered the cost of accommodations to be not too expensive or not expensive at all (Louis Harris & Associates, 1987). Examples of reasonable accommodations for physically disabled persons are the building of ramps, the adding of handrails, the designation of parking spaces, work site accessibility, the use of writing and hearing aids, and the availability of personal care attendants in some instances. Examples of reasonable accommodations for mentally disabled persons are the breaking down of jobs into simpler components, provision of written instructions, daily planning sessions, room dividers, and extension of hours to add additional breaks (Mancuso, 1990). Resources that suggest modifications or adjustments are available free of charge from the Job Accommodation Network.1

**Undue hardship.** A reasonable accommodation that causes great difficulty or expense to the employer, to the financial resources of the employer, to the facility to be accommodated, or on the operation of the facility is considered an undue hardship (Hyde, 1990). An employer’s entire resources will be considered when determining if a reasonable accommodation is an undue hardship on an organization. A person with a disability may share the cost of a reasonable accommodation with the employer if the employer alone cannot afford or is not eligible for funds to assist in providing the reasonable accommodation (Office of the Federal Register, 1991).

**Prohibited Discrimination**

In addition to understanding key terminology, an employer needs to know what is permissible under the law. A review of actions that are prohibited and actions that are permissible under the law may assist occupational therapy managers in implementing Title I. The employment process, from advertising and hiring to employee training, must be scrutinized carefully by organizations to avoid discriminatory actions. Discrimination is unlawful in the following areas:

- Recruitment, advertising, and job application procedures

1Phone number: 800-526-7234.
which include the following:

- Pay rate or any other form of compensation and changes in compensation
- Job assignments, job classifications, organizational structure, position descriptions, lines of progression, and seniority lists
- Leave of absence, sick leave, or any other leave
- Selection and financial support for training, including apprenticeships, professional meetings, conferences, and other related activities, and selection for leaves of absence to pursue training
- Activities sponsored by an employer, including social and recreational programs
- Any other terms, conditions, or privileges of employment. (Office of the Federal Register, 1991)

Title I also describes other prohibited activities, which include the following:

- Limiting, segregating, or classifying a job applicant or employee in a way that adversely affects his or her employment opportunities
- Having a relationship or contract with another agency that discriminates against the applicant or employee
- Excluding or denying equal jobs or benefits to a qualified person because of his or her relationship with a person with a disability (this is a new provision of the ADA that was not included in the Rehabilitation Act of 1973)
- Administering tests and selection criteria that screen out persons with disabilities on the basis of disability rather than job relatedness, and administering tests that reflect persons' impairments rather than the skills the test purports to measure
- Requiring a medical examination as a part of the application process; inquiring whether a person has a disability. (Office of the Federal Register, 1991)

In contrast, there are specific activities permitted under the law. Medical examinations that are required after an employment offer is given are permitted under the conditions that the examination is required for all persons in the same job category and that the results of the examination are kept confidential and are not used to discriminate against a person. An organization may also offer voluntary health examinations as part of a health and wellness program.

As part of the application or promotion process, an employer may ask if the person can perform the essential functions of a position or demonstrate how a job duty would be performed, but, as stated above, an employer may not require if an applicant has a disability. For example, if an employer is interviewing an applicant for a position as a receiver in the loading dock, where it is essential to lift heavy boxes, the employer may not ask the applicant if he or she has a back injury, but may ask the applicant if he or she can lift a box weighing 50 pounds waist high as many as five times an hour.

Another permissible provision of the law is the exemption of persons seeking jobs who are a threat to the safety and health of self or others with the provision of reasonable accommodations or are a threat due to the existence of a contagious disease. Valid, objective evidence must be used to determine the probability of the threat in the former instance, and the list of infectious and communicable diseases generated by the Secretary of Health and Human Services should be referred to in order to determine the latter.

Persons currently engaged in illegal drug use are not protected under the law. Employers may prohibit drugs and alcohol in the workplace or may require drug testing as an assurance that a person is drug-free.

Religious organizations may give preference in employment to persons who follow their religious tenets and thus may choose persons who follow their beliefs over qualified applicants with disabilities who do not follow their religious beliefs.

Because many of these provisions have been part of the Rehabilitation Act of 1973, case law has defined their parameters. However, some legal experts, such as Nancy Fulco (1990), an attorney for the U.S. Chamber of Commerce and an advocate of the concept of the ADA, anticipate that further litigation will be required to clarify and interpret some of the terminology when the ADA is applied in the private sector. Writers of the ADA, however, feel that proper preparation and attitude changes through public awareness programs and other marketing strategies will help to avoid litigation (Douglas, 1991). In addition, proponents of the ADA encourage conciliation and arbitration rather than litigation in enforcement of the law (Romer, 1990).

**Manager's Checklist**

To aid organizations in reaching compliance, the American Hospital Association (1991) has prepared a checklist of measures to be implemented prior to the effective dates of the ADA. An adapted version of this checklist is presented in Appendix B to clarify activities that are necessary for managers to complete prior to effective dates.

**Summary**

The technical information necessary to prepare an organization to implement Title I has been presented above. Integration of that information into a quality improvement approach will enable managers to implement a successful employment plan, thus bringing persons with disabilities into their organization.
Quality Implementation of Title I

Successful implementation of Title I in an organization will not be achieved by just the necessity to comply with regulatory guidelines. It will be achieved only through actions that reflect a value system that incorporates persons with disabilities into the workplace, returns persons disabled on the job to their positions, capitalizes on a proven work force, and brings about economic benefits to an organization. These actions are grounded in a management model emphasizing a systematic and humanistic approach to implementing Title I of the ADA, in essence, a total quality management strategy. Although the federal mandate to eliminate discrimination in employment may spur managers to institute a system to recruit and retain persons with disabilities, it does not provide sufficient incentive to implement successful plans.

Advocates of quality improvement programs in service industries such as health care point to the failure of regulatory guidelines, such as those from the Health Care Finance Administration and the Joint Commission on Accreditation of Healthcare Organizations, on improving quality. Such imposed regulations do not improve the internal systems in an organization, which must be addressed to improve quality (Berwick, 1989; Milakovich, 1991). Implementation of Title I of the ADA with a total quality management approach can prepare an organization to incorporate persons with disabilities into their business.

Some of the key elements of a quality improvement or total quality management approach were discussed earlier. These elements can be applied to an implementation process of Title I. In addition, the unique body of knowledge focusing on adaptation and occupational role function possessed by occupational therapists can be applied to further enhance a successful implementation of Title I.

Doing something right the first time is a critical message in developing a system for continuous improvement of a product or service, which is the first element. The opportunity to develop a system incorporating total quality principles from inception is particularly advantageous. It allows an organization to set quality principles at the establishment of a mission or statement of purpose for nondiscrimination of persons with disabilities in employment is a good place to begin developing the system. Next, a set of guiding quality principles specifically applicable to employment of persons with disabilities can be developed. This document should be developed with input from many levels of the organization. Sharing this document within the organization allows for education for all staff. Ideally, this is accomplished in small group meetings where discussion of benefits and concerns of employing persons with disabilities can be openly addressed. Endorsement from upper management is necessary and creates the credible environment in which Title I can be implemented.

A credible environment for quality implementation of Title I can be enhanced further by support of innovation and education at the inception and in continuous improvement of the system. Innovation in researching job matches between an organization and a person with a disability delivers the message that the organization is committed to employing persons with disabilities. Occupational therapists trained in task analysis and assessment of role performance are particularly skilled in matching a qualified person with a disability with a position. Occupational therapists can assist their organizations in training other managers in this implementation activity. Organizations interested in taking a proactive approach to hiring persons with disabilities can turn to various associations that actually assist in the matching of persons with jobs. These include the Multiple Sclerosis Society's Operation Job Match and the American Cancer Society's Reentering the Workplace (Kantor, 1991). Innovation in creating reasonable accommodations is another aspect whereby a quality system for implementation will be developed. It is recommended that an organization have a Reasonable Accommodations Committee to review and monitor provisions of reasonable accommodations for employees or applicants. In addition, a reasonable accommodation policy is recommended for any large organization.

A quality improvement system is one that is continuously upgrading the processes or systems to improve the product or service. This is done through simple statistical procedures, such as flowcharts and other graphic methods. Once an employment plan for persons with disabilities is established, those strategies can be applied. A survey of all positions held by persons with disabilities within the organization could be completed, and results could suggest how other positions might be adapted. An evaluation of reasonable accommodations implemented throughout the organization could indicate the use and success of each one and how these accommodations might be applied in other areas. On the basis of their knowledge of adaptation of a task or the environment, occupational therapists can take leadership roles in suggesting and implementing reasonable accommodations for qualified persons with disabilities. Occupational therapists acting as consultants can assist organizations in establishing reasonable accommodation policies and committees.

The second element of a total quality management approach, respect for persons as assets of the company, is simply transformed to respect for persons with disabilities as assets of the company. How can this philosophy be integrated throughout the entire organization? One
way is to establish it in the mission statement. An environment in which persons with disabilities are recognized for what they contribute, not for what they cost, demonstrates respect for these employees. This is a change for some managers. In a 1987 Harris poll of 920 employers, 75% believed that persons with disabilities are often discriminated against in employment practices (Louis Harris & Associates, 1987). Changing ways of looking at how the organization does business is a value Deming (1982) insisted must be embraced if an organization wants to achieve a successful quality improvement program. Managers must look at persons with disabilities as persons with abilities and some job limitations. Job descriptions that describe essential functions focus on abilities.

Respect for persons with disabilities can happen in many ways once an organization sees those persons as assets of the company rather than as persons they must hire in order to comply with Title I. The incorporation of persons with disabilities in the planning of employment systems and processes, such as serving on Reasonable Accommodation Committees and Benefit and Performance Review Committees, is a measure demonstrating respect.

The third element, the need to institute leadership and drive out fear, can be achieved when a Title I implementation plan is initiated by top management and not just by the personnel officer of an organization. Establishment of a work environment where persons with disabilities are not in fear of inspection standards, where they are treated equally with other members of the work group, and where a disciplinary approach is exchanged for an interaction approach with the purpose of producing a quality product will enhance the Title I implementation system as well as the product or service outcome. A 1987 Harris survey of organizations that employed persons with disabilities reported that a sizable majority had good or excellent ratings on work performance (Louis Harris & Associates, 1987). Just 5% of managers said that their performance was fair, and no one said performance of persons with disabilities was poor. For the most part, persons with disabilities are seen as hard working. Managers who act like leaders and find ways to assist their employees with disabilities do their jobs better will drive out fear of rigid standards of performance and thus facilitate dedication and commitment.

In the same 1987 Harris survey (Louis Harris & Associates, 1987), the two reasons given by employers for not hiring persons with disabilities are an absence of jobs and a lack of qualified applicants. It may not be so much that there is an absence of jobs as it is the type of jobs the employers were identifying. By carefully looking at their positions through job analysis and by identifying and separating the essential functions of a position from the marginal functions, employers will demonstrate leadership roles in identifying qualified applicants with disabilities. This process may also assist in job restructuring and modifications to accommodate persons with disabilities. Occupational therapists can assist employers to determine essential functions versus marginal functions of a position, evaluate jobs and make recommendations for modifications and restructuring, evaluate functional strength and cognitive and social requirements for job standards, and match jobs with qualified applicants or employees with disabilities.

The fourth element, breaking down barriers between work groups, is applied in the employment implementation system by breaking down the barriers between employers and qualified persons with disabilities and between employees and qualified persons with disabilities. Project teams, rather than isolated workstations, facilitate breaking down barriers between employees with disabilities and those without. These teams should address production or service systems as well as personnel systems. Facilitators skilled in group dynamics, such as occupational therapists, can enhance working relationships among the project team members. Creation of a work environment where communication and dialogue is fostered will break down barriers and ultimately result in continuous improvement of the product.

In health care institutions, the employee with a disability can play a dual role in the incorporation of the customer into the development of the service plan. Such employees have the unique perspective of being the recipient of service provision and can provide important insight into the continuous improvement of an organization's quality health care product.

Conclusion

The ADA will affect most employers. Employers must comply with the law. However, executives using implementation of the law as an opportunity for innovative change in their organizations will be industry leaders. One such method is a total quality approach based on the lessons from the continuous quality improvement movement, as espoused by W. Edwards Deming (1982). Those organizations implementing Title I in a total quality approach will benefit in numerous ways. They will be ready to benefit from the skills of persons with disabilities eager to join the ranks of employed Americans. Organizations in the forefront of implementation of the ADA will be perceived by the increasingly diminishing labor market as strong and visionary, because they take pride in their employees and quality products or services. Those organizations will attract exemplary applicants and perhaps will become even more profitable enterprises. They will be perceived by their communities as leaders through the public awareness that they are providing savings to the taxpayer in the employment of a person with disabilities. They will be able to avoid costly litigation that others may not as a result of noncompliance.

Although execution of the ADA in organizations
must start at the executive management level, occupational therapy managers can assume leadership roles in their organizations in the implementation of Title I of the ADA. Occupational therapists are trained in such skills as assessing occupational role performance; analyzing tasks; understanding group dynamics; and adapting activities, environments, and equipment to support autonomy and independence for persons with disabilities. Occupational therapists can assist organizations in developing reasonable accommodations for qualified persons with disabilities, developing job descriptions that focus on capabilities of persons through the identification of essential job functions, matching persons with disabilities with appropriate jobs, restructuring or modifying jobs, and facilitating project teams focusing on the contributions all members make to the successful completion of the task. In their dual role as rehabilitation professional and manager, occupational therapy managers can see the implementation process of Title I from both the employer's and the disabled employee's perspective. This allows occupational therapy managers to incorporate their professional understanding of the goal of self-reliance and competence for persons with disabilities into the implementation of a personnel system that successfully employs persons with disabilities.

In addition, occupational therapy managers who understand the theory of continuous quality improvement can use the total quality management approach to assist their organizations in successful implementation of the law. In the competitive health care market, investment in a total quality approach to develop strategies to employ qualified persons with disabilities can provide the competitive edge that an organization needs to stay in business.

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Appendix A
A Job Description Developed With the Use of the Handicapped Requirements Handbook* Job Description Form

Job Title: Secretary II
Reports to: Office Manager
Job Objectives: Performs diversified secretarial and clerical duties while reporting to a division office manager.

<table>
<thead>
<tr>
<th>% of Time</th>
<th>Essential Job Functions</th>
</tr>
</thead>
<tbody>
<tr>
<td>30%</td>
<td>1. Types and proofs a variety of materials (e.g., correspondence, memos, reports, charts, grants); edits; makes copies; collates and assembles reports, documents, and grants.</td>
</tr>
<tr>
<td>20%</td>
<td>2. Reviews, sorts, and files a variety of materials; sets up filing systems as needed; prepares file folders and categories for new files.</td>
</tr>
<tr>
<td>15%</td>
<td>3. Answers the telephone, screens calls, and takes messages or relays information within scope of authority; greets visitors and patients to the office, ascertains their needs, and provides information or requests completion of forms or information as required; informs staff of visitor's arrival.</td>
</tr>
<tr>
<td>5%</td>
<td>4. Coordinates schedules and supervisor's appointments; schedules meetings and conferences with hospital staff or other providers; implements changes in schedules with parties concerned.</td>
</tr>
<tr>
<td>5%</td>
<td>5. Maintains established hospital and division policies, procedures, objectives, quality assurance, safety, environmental and infection control.</td>
</tr>
<tr>
<td>5%</td>
<td>6. Assists other clerical classifications as necessary.</td>
</tr>
<tr>
<td>5%</td>
<td>7. Opens, reviews and distributes interoffice and external mail; brings priority items to supervisor's attention.</td>
</tr>
<tr>
<td>5%</td>
<td>8. Assists in care and maintenance of division equipment and supplies.</td>
</tr>
<tr>
<td>5%</td>
<td>9. Maintains division records, files, and compiles required statistics.</td>
</tr>
<tr>
<td>5%</td>
<td>10. Performs other secretarial and clerical duties as assigned.</td>
</tr>
</tbody>
</table>

Machines/Equipment:
- Electronic typewriter
- Memorywriter
- Word Processor
- Personal computer and printer
- Copier
- Dictating machine

Job Location:
- Division office
- Copy center
- Mail room

Minimum Job Standards
(Education/Knowledge/Licenses/Experience)
High school graduate or equivalent education. Training in secretarial science, medical and scientific terminology, word processing, transcribing from dictating equipment, and manuscript and grant typing depending on the needs of the division. Typing skills of 60 wpm. Basic filing and organizing skills. Minimum 2 years secretarial experience. Physical standards: Bending to floor level; lifting 10-20 lb boxes 100 yards.

Appendix B
Manager’s Checklist in Preparation for Implementation of Title I of the Americans With Disabilities Act of 1990 (ADA)

<table>
<thead>
<tr>
<th>Task</th>
<th>Needs</th>
<th>Revision</th>
<th>Complete</th>
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</thead>
<tbody>
<tr>
<td>1. Job Description and Performance Plans</td>
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<tr>
<td>a. Ensure that the job description incorporates all essential functions of the position.</td>
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<td>b. Verify essential functions with managers of work areas.</td>
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<tr>
<td>c. Ascertain whether essential functions vary for positions existing within several different work areas of departments and determine whether a different job description should be prepared for that position in each work area.</td>
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<tr>
<td>d. Determine physical, mental, and emotional attributes required to perform the essential functions of the job.</td>
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<tr>
<td>e. Verify physical, mental, and emotional attributes with managers of work areas, industrial engineers, and employee health experts.</td>
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<tr>
<td>f. Ensure that essential functions identified in the job description are written into performance plans and are evaluated on a regular basis.</td>
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<td>2. Interview Procedures</td>
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<tr>
<td>a. Verify that no manager inquires if an applicant has a disability.</td>
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<td>b. Restrict inquiries to if and how an applicant would perform a job function.</td>
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<td>3. Recruitment Plans</td>
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<td>Revise ad campaigns to address qualified individuals with disabilities.</td>
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<td>4. Preemployment Health Exam Procedures</td>
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<tr>
<td>Verify that the preemployment physical only occurs after a job offer has been made; the physical exam is conducted prior to starting the job, and all employees are examined.</td>
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<td>5. Postemployment Health Exam Procedures</td>
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<tr>
<td>a. Verify that the exams are job related.</td>
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<td>b. Restrict inquiries to those concerning the performance of job-related functions.</td>
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<td>6. Preemployment and Postemployment Procedures</td>
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<td>a. Determine that the physicals are related to the essential functions of the position.</td>
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<td>b. Determine when it may be necessary for an applicant to have a second exam.</td>
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<td>c. Maintain a separate confidential medical record.</td>
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<tr>
<td>d. Establish procedures for communicating restrictions on job functions to supervisory staff.</td>
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<tr>
<td>e. Evaluate all reasonable accommodations that will allow individuals to perform the essential functions of the position. This may be done with the applicant, supervisor, and other appropriate staff.</td>
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<td>7. Determining Individuals Covered Under ADA</td>
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<td>a. Determine if individuals have successfully completed a drug rehabilitation program.</td>
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<td>b. Determine if individuals are currently participating in a drug rehabilitation program.</td>
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<td>8. Inform Staff</td>
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<td>a. Inform management staff of changes required by the law.</td>
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<tr>
<td>b. Inform medical staff of changes required by the law.</td>
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<td>9. Monitor Procedures for Changes in Job Requirements</td>
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<tr>
<td>Review job-restructuring and part-time or modified work schedules.</td>
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References


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**Cordelia Myers Writer’s Award**

The American Occupational Therapy Association is pleased to announce that Nancy Kari has been chosen as the recipient of the Cordelia Myers Writer’s Award for the 1991 *AJOT* volume year. Her paper, “The Lazarus Project: The Politics of Empowerment,” coauthored with Peg Michels and published in the August issue, was considered by the *AJOT* Editorial Board members to be a strong piece of professional writing by a first-time contributor to the *AJOT* during a 12-month period.

The *AJOT* Editorial Board and staff extend their congratulations to Nancy Kari.